

PREA Facility Audit Report: Final

Name of Facility: Harris County Residential Treatment Center

Facility Type: Community Confinement

Date Interim Report Submitted: NA

Date Final Report Submitted: 02/28/2025

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Lynni O'Haver	Date of Signature: 02/28/2025

AUDITOR INFORMATION	
Auditor name:	O'Haver, Lynni
Email:	katmai910@icloud.com
Start Date of On-Site Audit:	01/08/2025
End Date of On-Site Audit:	01/09/2025

FACILITY INFORMATION	
Facility name:	Harris County Residential Treatment Center
Facility physical address:	2310 1/2 Atascocita Road , Humble, Texas - 77396
Facility mailing address:	

Primary Contact

Name:	Kelly Doyal
Email Address:	kelly.doyal@csc.hctx.net
Telephone Number:	346-286-6322

Facility Director	
Name:	Kelly
Email Address:	Doyal
Telephone Number:	346-286-6322

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Health Service Administrator On-Site	
Name:	Lawrence Granger
Email Address:	lawrence.granger@csc.hctx.net
Telephone Number:	346-286-6323

Facility Characteristics	
Designed facility capacity:	402
Current population of facility:	340
Average daily population for the past 12 months:	367
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both womens/girls and mens/boys

In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	18 - 71
Facility security levels/resident custody levels:	Community
Number of staff currently employed at the facility who may have contact with residents:	172
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	103
Number of volunteers who have contact with residents, currently authorized to enter the facility:	18

AGENCY INFORMATION	
Name of agency:	Harris County Community Supervision and Corrections Department
Governing authority or parent agency (if applicable):	Criminal Justice Assistance Division
Physical Address:	209 West 14th Street, Suite 400, Austin, Texas - 78701
Mailing Address:	
Telephone number:	832-927-8500

Agency Chief Executive Officer Information:	
Name:	Teresa May

Email Address:	teresa.may@csc.hctx.net
Telephone Number:	832-927-8500

Agency-Wide PREA Coordinator Information			
Name:	Kelly Doyal	Email Address:	kelly.doyal@csc.hctx.net

Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

2	<ul style="list-style-type: none"> • 115.241 - Screening for risk of victimization and abusiveness • 115.254 - Third party reporting
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Number of standards met:

39

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-01-08
2. End date of the onsite portion of the audit:	2025-01-09

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Houston Area Women's Center Just Detention International

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	402
15. Average daily population for the past 12 months:	367
16. Number of inmate/resident/detainee housing units:	8
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	340
19. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	15
20. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	9
21. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	25
22. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	8
23. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	4
24. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	24

<p>25. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>1</p>
<p>26. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>1</p>
<p>27. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>30</p>
<p>28. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>29. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>30. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>172</p>
<p>31. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>18</p>

32. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	102
33. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	16
35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None

<p>36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>The Auditor was provided with the facility resident roster for selection of a random representation of residents. The facility roster includes the resident's age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, and housing assignment. This allowed the Auditor to accurately select a random representation of residents for the random interview process.</p>
<p>37. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>38. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>During the facility tour, the Auditor conducted thirty-one informal interviews with residents and inquired to each -</p> <p><i>Length of time at facility</i> <i>Received PREA Education</i> <i>How would you report an incident of PREA?</i> <i>Do you feel safe at this facility?</i></p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>14</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	

40. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
41. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1
42. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	2
43. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	1
44. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
45. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	4

<p>46. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>1</p>
<p>47. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>1</p>
<p>48. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>3</p>
<p>49. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>49. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility reported no residents were placed in segregated housing/isolation for risk of sexual victimization or who alleged to have suffered sexual abuse. The Auditor was able to confirm this information during the Auditor's review of investigative files, resident files, and through interviews conducted with staff.</p>
<p>50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>51. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</p>
<p>52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>53. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>54. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>

Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	18
56. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
58. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
59. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

60. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff
- Intake staff

	<input type="checkbox"/> Other
61. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
62. Enter the total number of CONTRACTORS who were interviewed:	2
62. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input checked="" type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
63. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

64. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
65. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
66. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
67. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
68. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

<p>69. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>No text provided.</p>
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Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

<p>70. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p>71. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>Documents from resident files (30): Resident receipt of Resident Handbook Resident receipt of PREA Education Initial Risk Assessment and the Reassessment - verifying initial risk screening assessments and reassessments were completed within the required timeframe.</p> <p>8 - Investigative files of SA & SH.</p>
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

72. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	4	2	4	2
Staff-on-inmate sexual abuse	1	1	1	1
Total	5	3	5	3

73. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	3	0	3	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	3	0	3	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

74. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

75. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	1	3	0
Staff-on-inmate sexual abuse	0	0	1	0
Total	0	1	4	0

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

76. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

77. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	2	0	1
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	2	0	1

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

78. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	8
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<p>79. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>80. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>4</p>
<p>81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>82. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>1</p>
<p>84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>3</p>
<p>87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>88. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>3</p>
<p>89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

Staff-on-inmate sexual harassment investigation files	
91. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
92. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
93. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
94. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
95. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

96. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

- Yes
- No

AUDITING ARRANGEMENTS AND COMPENSATION

97. Who paid you to conduct this audit?

- The audited facility or its parent agency
- My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- A third-party auditing entity (e.g., accreditation body, consulting firm)
- Other

Identify the name of the third-party auditing entity

Corrections Consulting Services

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>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.</p>	

115.211	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County Residential Treatment Center Organizational Chart</p> <p>Interviews conducted with:</p> <p>PREA Coordinator</p> <p>Facility Director</p>

Site Review Observations:

During the tour of the facility, the Auditor witnessed standardized bulletin boards throughout the facility, in multiple locations, consisting of the PREA Zero-Tolerance policy and internal and external reporting information for residents. The Audit Notices were printed on brightly colored paper.

Findings (By Provision):

115.211 (a) - Harris County Residential Treatment Center, *PREA Policy* states the facility has a zero-tolerance policy toward all forms of sexual abuse and sexual harassment within their facilities and program activities, including consensual sexual contact within its facility. It is the policy of the Harris County Residential Treatment Center, (HCRTC) to provide a safe, humane, and secure environment free from threat of sexual abuse for all residents by maintaining a program of prevention, detection, response, investigation, and tracking of all alleged sexual abuse.

115.211 (b) - Harris County Residential Treatment Center, *PREA Policy* states the facility PREA Coordinator has been designated to develop, implement, and oversee the facility's efforts to comply with PREA standards and PREA investigations in HCRTC facilities. The HCRTC PAQ states the Gateway Foundation has designated an upper-level, agency-wide PREA Coordinator. The position of the PREA Coordinator in the Gateway Foundation organizational structure is the HCRTC Director of Operations. The agency's organizational chart reflects the PREA Coordinator position is the Director of Operations, an upper-level position, and he reports to the Facility Administrator.

The Harris County Residential Treatment Center, *PREA Policy* outlines the role and responsibilities of the PREA Coordinator to include being provided with the time and authority to develop, implement, and oversee the efforts to comply with the PREA standards within the facility. The PREA Coordinator is responsible for coordinating and monitoring PREA related activities, to include:

- Procedures to identify, monitor, and track sexual misconduct incidents occurring in HCRTC programs.
- Oversee the process of reporting incidents and complaints, monitoring the incident response process, and guiding the process of evaluation and program correction related to PREA.
- Maintain statistics and reports regarding incidents, complaints and events related to PREA.

- Serve as the primary authority for ensuring proper staff response to incidents and complaints related to PREA.
- Ensure all PREA related incidents and complaints are reported to the PREA Coordinator and to members of leadership.
- Ensure the facility resources and program activities conform to agency and PREA standards.
- In coordination with the Community Corrections Facility (CCF) Administrator and the PREA Coordinator oversee and implement staff, volunteer, and resident training and communication to reduce and prevent PREA violations.

The Auditor conducted an interview with the PREA Coordinator who verified he has sufficient time and authority in his position to accomplish PREA responsibilities for the facility. The PREA Coordinator reports directly to the Facility Administrator. A review of the HCRTC organizational chart provided evidence that the facility has designated an upper-level position as the PREA Coordinator.

The Auditor interviewed the Facility Director and confirmed the responsibilities of the PREA Coordinator assigned to HCRTC. The Facility Director verified that the PREA Coordinator is provided with sufficient time and authority in his position to accomplish these responsibilities.

Upon review of the policy, the agency organizational chart, and upon completion of interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.212	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Findings (By Provision):</p>

	<p>115.212 (a-b) – Harris County Residential Treatment Center, <i>PREA Policy</i> states the agency (Harris County Community Supervision and Corrections Department) and the Gateway Foundation have entered a contract to operate the Harris County Residential Treatment Center, (HCRTC), which includes compliance with the Prison Rape Elimination Act (PREA) Community Confinement Standards.</p> <p>Harris County Residential Treatment Center does not contract for the confinement of its residents with private agencies or other entities, including other government agencies. The Auditor conducted separate interviews with the Facility Director and the Agency Head Designee and confirmed the information previously provided by the facility.</p> <p>Upon review of the policy and upon completion of the interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.213	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County Residential Treatment Center Staffing Plan Reports (2022, 2023, 2024)</p> <p>Interviews conducted with:</p> <p>Facility Director or Designee</p> <p>PREA Coordinator</p> <p>Site Review Observations:</p> <p>Daily operational functions</p>

Findings (By Provision):

115.213 (a) – Harris County Residential Treatment Center, *PREA Policy* states the facility shall develop a staffing plan that provides for expected levels of program supervision and monitoring, to ensure that the facility is safe and secure. The plan addresses these factors:

- The physical layout of the facility
- The composition of the resident population
- The prevalence of substantiated and unsubstantiated incidents of sexual abuse
- Any other relevant factors.

115.213 (b) – Harris County Residential Treatment Center, *PREA Policy* states if a published schedule or emergent issue results in a deviation from the facility staffing plan, the Operations supervisor on duty must document the reason for the deviation and the response. Documentation is sent to PREA Coordinator for review and filing.

According to the information contained in the PAQ, HCRTC reported no deviations from the staffing plan during the auditing period. The Auditor conducted an interview with the Facility Director and the PREA Coordinator (Director of Operations) and each confirmed there were no deviations from the staffing plan in the 12 months prior to the audit. The average daily number of residents on which the facility-staffing plan was predicted was 402.

115.213 (c) – Harris County Residential Treatment Center, *PREA Policy* states on at least an annual basis, at a minimum during the budget preparation period, the staffing plan will be reviewed by the HCRTC Administration and the PREA Coordinator to assess for any necessary adjustments to the plan to ensure compliance with contracts, regulations, ordinances, and accreditation (including PREA). The review will consider these factors:

- The current staffing plan
- Prevailing staffing patterns
- The facility’s deployment of video monitoring systems and any need for other monitoring technologies
- The resources the facility has available to commit to ensure adequate staffing levels

- HCRTC Administration shall maintain documentation of this review and send any recommendations in memo form to the Gateway President of Corrections Division during the budget preparation process.

During the pre-on-site phase of the audit, the Auditor reviewed three years of the *Harris County Residential Treatment Center Annual Staffing Plans (2022, 2023, & 2024)*. The *HCRTC Annual Staffing Plan* provided a detailed review of the facility's roster (Personnel Staffing Pattern) as well as addressing the required considerations outlined in the agency policy and provision (a) of this standard.

The Auditor conducted an interview with the Facility Director regarding the HCRTC Staffing Plan. The Facility Director discussed how the facility develops the staffing levels based on the facility's design, mission, resident population, and custody level. The Facility Director confirmed the Operations Director provides HCRTC facility with shift reports of all positions identified in the staffing plans. The Facility Director confirmed when developing a staffing plan, several items are taken into consideration such as internal reviews, components of the physical plant, composition of the resident population, and the prevalence of substantiated and unsubstantiated allegations of sexual abuse. To ensure compliance with the staffing plan, Facility Director and Supervisory Staff conduct rounds throughout the facility for visual verification of staff assignments.

The Auditor conducted an interview with the PREA Coordinator and confirmed the process of developing a staffing plan previously described by the Facility Director. The PREA Coordinator also confirmed that an assessment of the facility-staffing plan is conducted annually, and each are consulted regarding any adjustments to the staffing plan.

The Auditor reviewed the average daily number of residents' report, staff rosters, facility blueprint, and daily resident activity schedules to verify adequate staff coverage in comparison to resident population, resident movement, and facility size and layout. The Auditor toured the facility and observed the daily operational functions, staff interacting with residents, and general resident movement. These observations provided additional verification of policy and of standard compliance.

Upon review of the policies and documentation provided and upon completion of interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.215	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County Residential Treatment Center Training Curriculum & Attendance Log</p> <p>Interviews conducted with:</p> <p>Random sample of Residents</p> <p>Random sample of Staff</p> <p>Site Review Observations:</p> <p>Daily operational functions Staff interaction with Residents</p> <p>Resident movement</p> <p>Findings (By Provision):</p> <p>115.215 (a) – Harris County Residential Treatment Center, <i>PREA Policy</i> states cross gender strip searches or cross gender visual body cavity searches, and physical body cavity searches are strictly prohibited.</p> <p>115.215 (b) – Harris County Residential Treatment Center, <i>PREA Policy</i> states an authorized staff person of the same gender as the resident shall perform pat searches and full body safety searches. A Direct Care Member (DCM) staff must have completed training prior to conducting any searches.</p> <p>115.215 (c) – Harris County Residential Treatment Center, <i>PREA Policy</i> prohibits all cross-gender strip searches and cross-gender visual body cavity searches.</p>

The Auditor conducted an interview with the Facility Director and the PREA Coordinator and confirmed that no cross-gender strip searches or cross-gender visual body cavity searches were conducted during the twelve-month auditing period.

The Auditor reviewed the documentation provided to include shift rosters, shift assignments, and daily resident activity schedule. The Auditor observed the facility operations throughout the day, to include continuous resident movement throughout the facility, continuous physical interactions between staff and residents, residents participating in-group activities, and residents performing job assignments throughout the facility. The Auditor also observed opposite gender announcements being conducted throughout the facility tour.

115.215 (d) - Harris County Residential Treatment Center, *PREA Policy* states residents are able to shower, perform bodily functions, and change clothing without staff viewing their breasts, buttocks, or genitalia, except in exigent circumstances, such as in order to perform program functions (drug testing) or when such viewing is incidental to routine monitoring of housing units. Staff of the opposite gender must announce their presence when entering an residents' housing unit, especially sleeping rooms, restrooms, or shower areas.

The Auditor requested an up-to-date facility resident roster. The facility resident roster provides a list of all residents currently at the facility and is organized by housing unit, provides resident characteristics such as age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, gang affiliation, and housing assignment. This allowed the Auditor to accurately select a random representation of residents for the interview process. All residents selected for interviews were selected under the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Residents*.

The Auditor conducted sixteen resident interviews, and all sixteen residents interviewed confirmed they have privacy while showering, changing clothes, or using the bathroom facilities. Additionally, all sixteen residents interviewed confirmed staff of the opposite gender announce their presence prior to entering the housing unit. The Auditor inquired to each female resident interviewed if she has ever been unable to participate in activities outside the housing area due to female staff being unavailable to conduct pat-down searches. All eight female residents denied being refused the opportunity to participate in activities with all eight responded that a female staff member is always present and available.

115.215 (e) – Harris County Residential Treatment Center, *PREA Policy* states staff are prohibited from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident’s genital status. A resident’s gender is determined by information from the referral source and by the resident’s report. Any further need for determining a resident’s gender must be referred to the Manager of Residential Services for review and consultation with a qualified medical practitioner.

The Auditor reviewed documentation provided by the facility showed the facility has had zero searches of a transgender or intersex resident for the sole purpose of determining the resident’s genital status.

The Auditor conducted an interview with a transgender resident and inquired if there was any reason to believe the transgender resident was strip-searched for the sole purpose of determining genital status; the transgender resident responded no, and each indicated staff members communicated extremely well during the intake process. Additionally, the transgender resident confirmed to the Auditor that staff at the facility meet with them regularly and are available to discuss any issues that may arise. In addition, the transgender resident commented to the Auditor, that all facility staff demonstrate a genuine commitment to the safety of all residents and that HCRTC is a safe facility.

115.215 (f) – Harris County Residential Treatment Center, *PREA Policy* states staff performing any search of a resident’s person must have completed training on techniques and the preservation of safety and resident dignity before conducting searches. This training will include how to conduct searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. The Unit Manager(s) or Direct Care Member (DCM) staff supervisor must ensure that Training Coordinator has documentation that the staff member has demonstrated proficiency in this area before the staff member conducts a search of the resident’s person.

The Auditor reviewed the training records and training curriculum provided to staff members that included how to perform cross-gender pat-down searches and searches of transgender and intersex residents. Training records indicated staff members receive training on the facility’s PREA policies and how to perform cross-gender pat-down searches annually. The training curriculum outlined the facility’s policy on cross-gender pat-down searches and searches of transgender and intersex residents, policy prohibiting search of residents for the sole purpose of determining

	<p>the resident’s genital status, defining exigent circumstances, and conducting searches in a professional and respectful manner.</p> <p>The Auditor interviewed twelve random staff members and inquired to each if they have received training on how to conduct cross-gender pat-down searches and searches of transgender and intersex residents in a professional manner, consistent with security needs. Each staff member confirmed receiving training on cross-gender searches and searches of transgender and intersex residents annually during Annual Training. Additionally, staff confirmed receiving refresher training throughout the year.</p> <p>Upon review of staff training records and training curriculum, observations during the on-site visit, and information obtained during interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and with the requirements that complies with the PREA standard.</p>
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115.216	Residents with disabilities and residents who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County MOU w/Globo Language Solutions, LLC</p> <p>Interviews conducted with:</p> <p>Facility Director</p> <p>Targeted Residents (Limited English Proficient, Hearing, Vision, Physical or Cognitive Impaired)</p> <p>Random sample of Staff</p> <p>Site Review Observation:</p>

Standardized PREA bulletin boards were observed throughout the facility (English & Spanish)

Findings (By Provision):

115.216 (a) – Harris County Residential Treatment Center, *PREA Policy* states staff shall ensure that every effort is made to provide every client, especially those with disabilities, with equal opportunities to participate in programming and benefit from all aspects of HCRTC. Residents with disabilities and/or limited language proficiency include those residents with hearing or visual impairment, residents with intellectual, psychiatric, or speech disabilities, residents with limited English proficiency residents with limited reading or writing skills, or those who are otherwise physically disabled or those with cognitive impairment. All residents will have an equal opportunity to participate in or benefit from all aspect of HCRTC efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

115.216 (b) – Harris County Residential Treatment Center, *PREA Policy* states any individual who indicates they require accommodation as a result of a special need or impairment will be provided individual support by a staff person to ensure they have a clear understanding of their rights and ways to report. Facility staff shall provide access to qualified interpreters, when necessary, to ensure effective communication with residents who are deaf or hard of hearing. Written materials shall be provided in accordance with policies and procedures, to ensure effective communication with residents with limited English proficiency, disabilities, limited reading skills, or who are blind or have low vision.

115.216 (c) – Harris County Residential Treatment Center, *PREA Policy* states the use of resident interpreters, resident readers, or other types of resident assistants will not be used, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident’s safety, or the performance of first-response duties. If a resident interpreter is used, the staff member using this expedient must verbalize this incident immediately to the Program Director and Director of Operations and document the incident immediately in writing. In the last 12 months the facility has had zero instances where residents were used for interpreters.

The Auditor conducted interviews with twelve random staff members. Each staff member confirmed the agency policy prohibiting the use of a resident to provide translation services except in limited circumstances where an extended delay in obtaining an interpreter could compromise the resident’s safety; all staff members

	<p>acknowledged the use of either the language line (interpreter services) or contacting another staff member to translate.</p> <p>The Auditor interviewed five targeted residents with either a physical, hearing, vision, or cognitive impairment or who were Limited English Proficient. Each resident acknowledged receiving PREA information during the intake process. Each resident described receiving the comprehensive PREA orientation within the first few days after arriving at the facility. Additionally, each resident acknowledged the information was provided to him in an accessible format specific to his individual needs.</p> <p>The Auditor conducted an interview with the PREA Coordinator regarding how the facility takes appropriate steps to ensure that all residents have an equal opportunity to participate in the facility’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The PREA Coordinator detailed the efforts made by the facility to ensure impaired residents are provided opportunities and benefits equal to those of unimpaired residents. Residents with either impairments or LEP residents are provided with alternatives to accommodate participation in the PREA program such as videos and brochures tailored to their primary language. Additionally, every effort is made to provide all training in a format that will be easily understood by residents who have a physical or developmental impairment or who have limited English proficiency.</p> <p>Upon review of the policies, resident intake procedures, and upon completion of interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.217	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Interviews conducted with:</p>

Administrative / Human Resources Staff

Site Review Observation:

Personnel files were reviewed, and each demonstrated completed background checks upon hire and every five years thereafter. Administrative questions are asked during the application process.

Findings (By Provision):

115.217 (a) - Harris County Residential Treatment Center, *PREA Policy* prohibits hiring or promoting anyone who may have contact with residents, and prohibits enlisting the services of any contractor who may have contact with residents, who:

- Has engaged in sexual misconduct in any custodial or residential setting, any human service profession, or in any other capacity that would constitute a violation of professional ethics.
- Has been convicted of any sexual offense 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.
- Has been civilly or administratively adjudicated to have engaged in any sexual misconduct in any professional capacity.

115.217 (b) - Harris County Residential Treatment Center, *PREA Policy* states HCCSCD and Gateway also consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents.

115.217 (c) - Harris County Residential Treatment Center, *PREA Policy* requires before any new employee is hired a criminal background record check is conducted and best efforts are made to contact all prior and attempt to contact all employers for information on substantiated allegations of sexual misconduct or any resignation during a pending investigation of an allegation of sexual misconduct (consistent with Federal, State, and local law). HCRTC reported, in the twelve months prior to the audit, fifty-nine criminal background checks were performed of persons hired or promoted who may have contact with residents.

115.217 (d) - Harris County Residential Treatment Center, *PREA Policy* states a

public criminal records check through the Texas Department of Public Safety. HCRTC reported, in the twelve months prior to the audit, five criminal background checks were performed on all staff covered in the contract who may have contact with residents.

115.217 (e) - Harris County Residential Treatment Center, *PREA Policy* requires criminal background record checks be conducted at least every year for current employees, volunteers, and contractors who may have contact with residents, or a system shall be in place to otherwise attain the information for current employees and contractors.

115.217 (f) - Harris County Residential Treatment Center, *PREA Policy* states the agency shall impose upon employees a continuing affirmative duty to disclose any such misconduct.

115.217 (g) - Harris County Residential Treatment Center, *PREA Policy* states any material omissions regarding past misconduct or the provision of materially false information, shall be grounds for termination or denial of employment.

115.217 (h) - Harris County Residential Treatment Center, *PREA Policy* states unless prohibited by law, information shall be provided on substantiated allegations of sexual abuse or sexual harassment involving a former employee after receiving a request from an institutional employer for whom the employee has applied to work.

The Auditor conducted an interview with the agency's Administrative/ Human Resources personnel who confirmed the agency conducts the required criminal background checks prior to hiring a new employee, employees who are considered for promotions, or enlisting the services of a contractor or volunteer and at least once every five years. The HR Staff Member confirmed the agency's requirement imposed upon all employees to disclose any previous misconduct and the agency's requirement to provide information regarding a former employee upon request of another institution or agency. In addition to using the National Crime Information Center (NCIC) and the Texas Crime Information Center (TCIC), the HR Staff Member also confirmed the agency utilizes the FBI Rap Back Program. An individual's fingerprints are collected during the hiring process and entered into the database, which is continuously monitored. The FBI Rap Back Program sends an electronic notification if the individual engages in any criminal activity where fingerprints are taken and submitted into the Criminal Justice Information System (CJIS).

	<p>Upon review of the policies and review of personnel files and upon completion of the interview conducted with the Human Resources Staff, the HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.218	Upgrades to facilities and technology
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Interviews conducted with:</p> <p>Agency Head Designee</p> <p>Facility Director</p> <p>115.218 (a) - Harris County Residential Treatment Center, <i>PREA Policy</i> states whenever facilities are acquired or undergo major renovation, HCRTC shall evaluate features related to safety and security, including:</p> <ul style="list-style-type: none"> • Means of entry and exit and ability to control/monitor these. • Separation of sleeping areas and restroom/shower facilities from common or public areas. • Ability of staff to access and monitor all areas of the facility. • Ability to restrict access to areas not readily accessible for monitoring or areas that could facilitate illicit activity or building access. <p>The HCRTC PAQ states the facility has not acquired a new facility or made substantial expansions or modifications to existing facilities since the last PREA audit.</p> <p>115.218 (b) - The HCRTC PAQ states the facility has installed additional cameras and updated the video monitoring system since the last PREA audit.</p>

The Auditor conducted an interview with the Agency Head Designee and discussed if the agency considers how modifications or expansions to a facility affects the ability to protect residents from sexual abuse. The Agency Head Designee explained how facility modification has always been focused on providing safety to both staff and residents. Modifications or expansions that are not in the best interest of the facility are not given consideration.

The Auditor conducted an interview with the Facility Director who confirmed that prior to designing or acquiring any new facility or when planning any substantial expansion or modification, of existing facilities, the facility shall consider the effect of the design, acquisition, expansion, or modification might have upon the facility's ability to protect residents from sexual abuse.

The Facility Director also confirmed that prior to the installation of cameras the facility shall consider how the addition of such technology would enhance the agency's ability to protect residents from sexual abuse. The Facility Director confirmed to the Auditor that HCRTC has not undergone modifications or expansions to the facility since the last audit.

Upon review of the policy and upon completion of the interviews conducted with the Agency Head Designee and the Facility Director, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.221	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: HCRTC PAQ Harris County Residential Treatment Center, <i>PREA Policy</i> Harris County Residential Treatment Center, Houston Area Women’s Center (HAWC) SANEs / SAFEs Uniform Evidence Protocol

Interviews conducted with:

Medical Staff

Random sample of Staff

Residents who reported sexual abuse

Victim Advocate

Findings (By Provision):

115.221 (a) - Harris County Residential Treatment Center, *PREA Policy* states the agency will rely on the Harris County Sheriff's Office (HCSO) to conduct criminal investigations of sexual assault. Upon receiving a resident report of sexual assault, staff must explain the importance of preserving evidence and request that the resident not take any action that could destroy such physical evidence.

115.221 (b) - Harris County Residential Treatment Center, *PREA Policy* states the PREA Coordinator or designee will ensure any victim of sexual assault receives forensic medical examinations through the Memorial Herman Northeast Hospital and with a Houston Area Women's Center (HAWC) victim advocate contacted / offered.

The Auditor interviewed twelve random staff members regarding his/her role as a First Responder to an allegation of sexual abuse. The staff members provided specific details of their responsibilities as a First Responder. These responsibilities include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify Medical and Mental Health. In addition, each staff member acknowledged the importance of the agency's response protocol to a sexual abuse allegation as well as his or her role as a First Responder.

115.221 (c) - Harris County Residential Treatment Center, *PREA Policy* states forensic exams will be offered without financial cost to all victims. The Memorial Herman Northeast Hospital Sexual Assault Response Team consists of Sexual Assault Nurse Examiner (SANE) qualified personnel.

The Auditor reviewed the Texas Senate Bill (SB-1191) which requires health care facilities to be equipped to conduct medical forensic exams for sexual abuse victims. Senate Bill 1191 also requires hospitals not designated a forensic exam facility are required to train personnel in the basic sexual assault forensic evidence collection.

According to the information previously reported in the PAQ, there were no forensic exams completed during the twelve months prior to the audit. The Auditor conducted an interview with contract Medical Staff responsible for the coordination of forensic examinations. The Medical Staff provided the Auditor with an overview of the procedures if a forensic exam was needed, such services are provided at the nearest local hospital with the forensic exam being completed by a certified SANE Nurse. The Medical Staff also confirmed there were no forensic examinations completed within the past twelve months for the HCRTC.

115.221 (d, e, h) - Harris County Residential Treatment Center, *PREA Policy* states the Houston Area Women's Center (HAWC) will provide any victim of sexual abuse or assault a qualified and trained victim advocate upon request. When a victim of sexual misconduct makes a report, HCRTC will contact HAWC to ensure a trained victim advocate is available to accompany and support the victim. This includes:

- Accompanying the victim through the medical examination process and investigatory interviews, as requested by the victim, and prompt referral of victims of non-criminal sexual abuse to the HAWC for evaluation and support.
- Provide emotional support, crisis intervention, information, and referrals for follow-up medical care and mental health services.

The Auditor reviewed the existing MOU between Harris County Community Supervision and Corrections Department (HCCSCD) and the Houston Area Women's Center (HAWC). The contract uses clear and concise language, provides the agency's responsibilities, the advocacy's responsibilities, and the reporting and documentation requirements for each.

The Houston Area Women's Center (HAWC) is a domestic and sexual violence advocacy center located in Houston Texas. HAWC provides support services for survivors of domestic violence, sexual assault and sex trafficking. HAWC provides immediate access to 24/7 crisis intervention services, ongoing trauma-informed support programs, safety planning, emergency shelter, rape crisis support, and hospital advocacy and support.

	<p>The Auditor conducted an interview with an advocate from HAWC and she confirmed the existing agreement and responsibilities within the agreement and provided an overview of services provided to resident victims of sexual abuse. The services include emotional support services, crisis counseling, victim advocate upon request for advocacy accompaniment during forensic exams or investigatory interviews, a mailing address and phone number for communication with the advocacy services.</p> <p>The Auditor conducted a targeted interview with a resident who reported an incident of sexual abuse and inquired the resident, after reporting, did the facility allow them to contact anyone. The resident denied reporting an incident of sexual abuse or sexual harassment and refused to discuss specifics or answer further questions.</p> <p>115.221 (f) - Harris County Residential Treatment Center, <i>PREA Policy</i> requires that all allegations of sexual assault be referred for investigation to law enforcement, the Harris County Sheriff's Office (HCSO). Any allegation involving threats or use of force, or sexual activity without consent or the ability to consent must be referred to HCSO immediately for criminal investigation.</p> <p>115.221 (g) - This provision does not apply.</p> <p>Upon review of the policies, documentation, and observations made during the facility tour, and upon completion of interviews conducted prior to and during the on-site visit, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.222	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County Residential Treatment Center Website (https://cscd.harriscountytexas.gov/More-Information/Prison-Rape-Elimination-Act)</p>

Interviews conducted with:

Agency Head Designee

Investigative Staff

Site Review Observation:

SA/SH Investigation files (8)

Findings (By Provision):

115.222 (a) - Harris County Residential Treatment Center, *PREA Policy* states the PREA Coordinator shall ensure that an administrative or criminal investigation is completed for all allegations of sexual misconduct, sexual abuse and sexual harassment.

115.222 (b, c) - Harris County Residential Treatment Center, *PREA Policy* requires that all allegations of sexual assault be referred for investigation to law enforcement, the Harris County Sheriff's Office (HCSO). Any allegation involving threats or use of force, or sexual activity without consent or the ability to consent must be referred to HCSO immediately for criminal investigation. This policy is documented on the HCCSCD website <https://cscd.harriscountytexas.gov/More-Information/Prison-Rape-Elimination-Act>

Harris County Residential Treatment Center, *PREA Policy* states if an incident of sexual misconduct does not appear to involve any criminal act, then the HCCSCD Manager of Residential Services, CCF Administrator, Director of Operations, or designee may direct that the matter be handled administratively by initiating a PREA investigation within 24 hours.

The Auditor conducted an interview with the Agency Head Designee regarding how the agency ensures that an administrative or criminal investigation is completed for allegations of sexual abuse or sexual harassment. The Agency Head Designee explained that allegations of sexual abuse or sexual harassment are investigated either by designated facility investigators for administrative investigations, or by the Harris County Sheriff's Office for criminal investigations.

115.222 (d) - The Office of Sheriff is established by Article 5, Section 23, of the Texas Constitution. The powers, duties, and responsibilities of the Sheriff are set out under various provisions of Vernon's Annotated Texas Statutes. The Sheriff shall service all of Harris County, and deputies shall take necessary action to enforce the laws of the State of Texas within their jurisdiction. The Harris County Sheriff's Office is the primary investigative and law enforcement entity in Harris County, with the legal authority to conduct criminal investigations

115.222 (e) - This provision does not apply.

The Auditor conducted an interview with a Facility Investigator and requested an overview of the investigative process and the documentation required in a case when an allegation of sexual abuse or sexual harassment incident occurs within the facility.

The Facility Investigator explained upon receiving notification of a sexual assault incident, the investigation is initiated promptly and is completed thoroughly and objectively by a qualified investigator who has received training and education and has the authority to conduct such investigations.

The Facility Investigator confirmed that allegations are investigated, initially by a facility investigator, and if during the initial fact-finding process there is an indication that a criminal act was committed, the allegation would be immediately referred to the Harris County Sheriff's Office for investigation.

The Facility Investigator explained that if an allegation is referred to HCSO for criminal investigation, the HCRTC administrative investigation would continue with a focus on determining if policies and staff actions were appropriate and effective. The administrative investigation is considered a fact-finding exercise in order to make appropriate operational and housing changes to maintain a safe and secure environment.

The Facility Investigator provided the Auditor with an overview to include that the initial process includes notifying and consulting with the PREA Coordinator, gathering information from the initial reports, ensuring the resident victim receives victim advocacy support services, collecting evidence, photographs, interview staff, witnesses, review unit documentation pertaining to the investigation, and

	<p>interviewing the victim – depending on emotional and physical state.</p> <p>The Facility Investigator also provided an overview of the various documents contained in each case file to include but not limited to the initial incident reports, notifications, medical and mental health forms, resident rosters, advocacy information, witness statements, victim and alleged aggressor statements, investigative report, and notification of case disposition to resident (resident acknowledgement).</p> <p>The Auditor reviewed eight investigation files from the twelve-month auditing period. The Auditor reviewed each investigation thoroughly and systematically to ensure each case contained all the correct procedures, completed documentation, and that all processes were completed as required.</p> <p>Each file reviewed by the Auditor contained all the appropriate documentation, and each incident was investigated promptly, thoroughly, and objectively by a qualified investigator who has the training and the authority to conduct such investigations. Each file contained documentation to include but not limited to the initial incident reports – summary of the allegation, demographics of involved staff or resident(s) to include relevant history and current sentence, medical documentation and notes, photos of resident victim and alleged aggressor, advocacy acceptance or refusal, victim, witness, and alleged aggressor statements, review of communications – emails and phone calls, review of video surveillance, investigative summary, investigative findings, notification of case disposition to resident, sexual abuse incident reviews, and monitoring for retaliation forms.</p> <p>Upon review of the policies, documentation, and upon completion of the interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.231	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: HCRTC PAQ

Harris County Residential Treatment Center, *PREA Policy*

Harris County Residential Treatment Center HCRTC Training Roster / Staff Signatures

Interviews conducted with:

Random sample of Staff

Site Review Observations:

PREA Awareness Training

Findings (By Provision):

115.231 (a) – Harris County Residential Treatment Center, *PREA Policy* outlines the responsibilities of the PREA Coordinator as it relates to the training program for all facility staff. Within the first year of employment, and then annually thereafter, staff will complete PREA Basic Training, which will cover the following topics:

- Agency’s zero tolerance for sexual abuse and sexual harassment
- How to fulfill responsibilities under the agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures
- The right of residents to be free from sexual abuse and sexual harassment
- The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment
- The dynamics of sexual abuse and sexual harassment in confinement
- The common reactions of sexual abuse and sexual harassment victims
- How to detect and respond to signs of threatened & actual sexual abuse
- How to avoid inappropriate relationships with residents
- How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents
- How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

115.231 (b) – Harris County Residential Treatment Center, *PREA Policy* states training sessions are offered to staff that are tailored to the gender specific issues of residents in the facility. This will include gender-specific training on searches.

115.231 (c) – Harris County Residential Treatment Center, *PREA Policy* states in addition to annual training requirements, if deemed necessary, employees involved in an incident requiring PREA reporting will participate in an incident review and refresher training after all investigation and administrative investigation finding has been completed. This training will be coordinated and documented by the Program Director, PREA Coordinator, and Training Department.

115.231 (d) – Harris County Residential Treatment Center, *PREA Policy* states documentation of all HCRTC employee training is collected by and maintained by the PREA Coordinator. All employees will be required to acknowledge understanding of the training and officially record their attendance via Attendance Roster(s). The training status of all staff will be reported in the PREA Annual Report and upon request.

The Auditor reviewed training curriculum and documentation of staff signatures verifying training comprehension and attendance. The training curriculum outlined the staff member’s responsibilities in preventing, detecting, and response to resident sexual abuse and sexual harassment. The curriculum also provided staff with communicating effectively and professionally with residents, understanding that residents have the right to be free from sexual abuse and sexual harassment.

The Harris County Residential Treatment Center, PREA training curriculum provided to the Auditor, titled PREA Basic Training includes a resident’s right to be free from sexual abuse and sexual harassment, including the right to dress, shower, and use toilet facilities out of view of staff of the opposite sex. The training also included the appropriate method to introduce/announce “opposite gender” staff and into an all-male or all-female housing unit and how to conduct cross-gender pat-down searches and searches of transgender and intersex residents in a professional and respectful manner consistent with security correctional environments. The training curriculum was extremely detailed with discussions of the required PREA standards, instruction videos, and group discussion scenarios.

The Auditor conducted twelve random staff interviews, and each staff member articulated the agency's zero tolerance policy on sexual abuse and sexual harassment, their role and responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with residents, and a resident right to be free from sexual abuse and sexual harassment. All staff members acknowledged receiving the training every year during his/her In-service training.

	<p>Upon review of the policies and training documentation listed above and previously discussed, and after completion of interviews, in addition to the files reviewed during the on-site visit, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.232	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County Residential Treatment Center, Volunteer & Contractor Training Curriculum, Training Roster w/Signatures</p> <p>Interviews conducted with:</p> <p>Volunteer or Contractor who have contact with Residents</p> <p>Findings (By Provision):</p> <p>115.232 (a) - Harris County Residential Treatment Center, <i>PREA Policy</i> states HCRTC will ensure all volunteers and contractors who have contact with residents complete a training on their responsibilities under the HCRTC abuse and sexual harassment prevention, detection, and response policies and procedures.</p> <p>115.232 (b) - Harris County Residential Treatment Center, <i>PREA Policy</i> states HCRTC Management Staff has identified levels of training and orientation required for individuals entering the facility. These levels are based on degrees of access to the facility and resident contact and are documented. All individuals will acknowledge receiving and understanding the training.</p> <p>115.232 (c) - Harris County Residential Treatment Center, <i>PREA Policy</i> states the</p>

	<p>Program Director shall coordinate orientation and clearances (where required) with volunteer and contractor personnel. The PREA Coordinator will keep record of individuals who have been oriented and cleared in this process. Documentation of the volunteers and contractors who have received this orientation are maintained by HR.</p> <p>The Auditor reviewed training documentation to include training curriculum and attendance roster for contract and volunteer staff. Additional documentation included signatures from each contract staff and volunteer staff confirming understanding of policies and training received. The volunteer and contractor training were tailored based on the services they provide and the level of contact they have with residents and included the agency's zero-tolerance policy regarding sexual abuse and sexual harassment along with how to report such incidents.</p> <p>The Auditor conducted interviews with contract staff members and each staff member confirmed and acknowledged their understanding of the agency's zero tolerance policy and PREA standards and reporting responsibilities.</p> <p>Upon review of the policy and documentation and after completion of interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.233	Resident education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County Residential Treatment Center Resident Handbook (multiple languages)</p> <p>Harris County Residential Treatment Center Acknowledgement of Receipt of PREA Education</p> <p>PREA / Sexual Awareness Handout (multiple languages)</p>

Interviews conducted with:

PREA Coordinator

Intake Staff

Random Sample of Residents

Targeted Residents (Limited English Proficient, Hearing, Vision, Physical or Cognitive Impaired)

Site Review Observations:

Resident files - Comprehensive PREA Education

PREA Informational Signage posted throughout facility

Findings (By Provision):

115.233 (a) - Harris County Residential Treatment Center, *PREA Policy* outline the procedures requiring all residents receive orientation and education regarding sexual abuse and sexual harassment during the intake process. Orientation and education will emphasize HCRTC's zero tolerance policy, the rights of all residents to be free from sexual misconduct and any form of retaliation, methods of reporting misconduct, and HCRTC's policy to investigate all complaints and provide a response to complainants.

115.233 (b) - Harris County Residential Treatment Center, *PREA Policy* states all residents will receive PREA education at intake. Operations Staff will facilitate the training and shall ensure all residents at HCRTC are provided with PREA education to include the zero-tolerance policy, methods of reporting, and rights to be free from sexual misconduct and retaliation for reporting.

The Auditor reviewed the comprehensive PREA educational video transcript, provided in multiple languages, which is given to all residents upon intake into the facility. The facility utilizes the Just Detention International PREA educational video titled *PREA: What You Need To Know*. During the pre-on-site phase of the audit, the Auditor reviewed documentation of eighty residents that were received into the facility during the auditing period, and verification each resident was provided with comprehensive PREA education. The comprehensive documentation included *PREA - Residents Rights Notification* which included resident signatures and

acknowledgment of understanding.

During the on-site, the Auditor reviewed thirty additional documents (*PREA – Residents Rights Notification*) from the files of residents which were selected for the targeted and random interviews. All forms included the residents' signature and acknowledgment of understanding. This review provided additional verification that the facility maintains documentation of resident participation in PREA education.

The Auditor requested an up-to-date facility resident roster. The facility resident roster provides a list of all residents currently at the facility and is organized by housing unit, provides resident characteristics such as age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, and housing assignments. This allowed the Auditor to accurately select a random representation of residents for the interview process. All residents selected for interviews were selected under the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Residents*.

The Auditor conducted sixteen resident interviews and inquired if each resident had received PREA education upon arrival at the facility. All sixteen residents interviewed recalled receiving both the initial PREA orientation and the comprehensive (video) orientation. All residents interviewed acknowledged the zero-tolerance policy on sexual abuse sexual harassment and the various ways to report such incidents.

Residents referred to utilizing the multiple PREA informational bulletins, pamphlets, and brochures, which are posted throughout the facility, as a source of information. All sixteen residents interviewed referred to notifying a staff member, counselor, or family member as the most direct method to report or inquire about PREA information. All residents interviewed also referred to calling the PREA Ombudsman or a family member as their source outside the facility and all sixteen residents interviewed confirmed knowledge of third-party reporting. Fourteen of the sixteen residents interviewed were aware of the availability of submitting an anonymous PREA report.

115.233 (c) – Harris County Residential Treatment Center, *PREA Policy* states residents with disabilities including language needs, literacy, hearing or vision impairment will be identified during the intake and assessment process. Staff will consult with the Operations Director, PREA Coordinator or HCCSCD Manager to ensure appropriate materials or supports are provided.

Harris County Residential Treatment Center, *PREA Policy* outline the resources available for residents with hearing impairment (closed captioning), vision impairment (large print material or reading of material to resident by staff), or Limited English Proficiency (LEP) (translation services or language line services).

The Auditor interviewed five targeted residents with either a physical, hearing, vision, or cognitive impairment or who were Limited English Proficient. Each resident acknowledged receiving PREA information during the intake process. Each resident described receiving the comprehensive PREA orientation within the first few days after arriving at the facility. Additionally, each resident acknowledged the information was provided to him in an accessible format specific to his individual needs.

115.233 (d) – Harris County Residential Treatment Center, *PREA Policy* outlines the responsibility of the PREA Coordinator to ensure all residents at HCRTC are provided education on sexual abuse and sexual harassment. The PREA Coordinator shall maintain documentation of resident participation on file and in accordance with HCRTC policy.

115.233 (e) – Harris County Residential Treatment Center, *PREA Policy* outline the resources available for residents about the agency’s PREA policies is continuously and readily available or visible through posters, resident handbooks, or other written formats.

The Auditor conducted a tour of the facility and observed PREA informational bulletins. These PREA bulletins are posted in multiple languages, located inside every dormitory, as well as several informational bulletins were posted in common areas (educational and vocational buildings) throughout the facility. The bulletins display phone numbers and addresses, advocacy services and are displayed in multiple languages.

The Auditor conducted an interview with the PREA Coordinator and discussed the resident comprehensive PREA orientation and documentation process. The PREA Coordinator provided specific details on the process of educating residents including the initial orientation upon intake into the facility, the comprehensive orientation video, and the continued educational process through PREA informational pamphlets, sexual assault prevention brochures, and the signage posted throughout the facility.

	<p>Upon review of the policy and documentation listed above and previously discussed, and after completion of staff and resident interviews, in addition to the observations made throughout the on-site tour, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.234	Specialized training: Investigations
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	Auditor Overall Determination: Meets Standard
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	Auditor Discussion
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	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County Residential Treatment Center, PREA Specialized Training Curriculum & Training Certificates</p> <p>Interviews conducted with:</p> <p>Investigative Staff</p> <p>Site Review Observations:</p> <p>Training documentation / file review</p> <p>Findings (By Provision):</p> <p>115.234 (a, b) – Harris County Residential Treatment Center, <i>PREA Policy</i> states HCRTC staff assigned to conduct administrative investigations will receive specialized training to include topics related to the dynamics of sexual trauma, crisis intervention, advocacy and SANE protocols, investigative protocols related to Miranda and Garrity, evidentiary standards, and investigative techniques. Allegations with a criminal element are referred to the Harris County Sheriff’s Office for investigation.</p>
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115.234 (c) – Harris County Residential Treatment Center, *PREA Policy* states the Training Coordinator will maintain documentation of training for designated investigators and such training shall also be documented in the training records at HR.

The Auditor reviewed six training records, which included the specialized training curriculum from the National Institute of Corrections, *Specialized Training: Investigating Sexual Abuse in Confinement Settings* and training certificates of completion verifying investigative staff that conduct sexual abuse investigations attended and completed the required specialized training. The specialized training curriculum is extensive and included, but not limited to, the following topics:

- History of the Prison Rape Elimination Act
- Define key terms
- Identify the PREA standards related to sexual abuse and sexual harassment
- Discuss the effects of sexual abuse in custody
- Discuss how investigations in confinement are different from other types of investigations
- Understand the goals of an investigation
- Identify the criteria for administrative action and criminal prosecution
- Understand the requirements for administrative and criminal investigations
- Discuss interviewing techniques for victims and special populations
- Understand the role of a victim advocate / resident victim representative
- Discuss the forensic medical exam and timeline for obtaining forensic medical evidence
- Understand the use of Miranda & Garrity Warnings

The Auditor interviewed an Investigator who confirmed attending and successful completion of the required specialized training. The Investigator clearly articulated the comprehensive training received which included investigating sexual harassment allegations, investigating sexual abuse allegations, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of Miranda and Garrity and the importance of each, and criteria required for administrative action and prosecution referrals. The Investigator provided the Auditor with a complete overview of the investigative process as it relates to sexual abuse and sexual harassment. An allegation of sexual abuse that is deemed possibly criminal in nature, is immediately referred to the Harris County Sheriff's Office (HCSO) for investigation and all other allegations are investigated by designated facility investigators.

Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews, in addition to the observations made throughout

	the on-site visit, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.235	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County Residential Treatment Center, Medical & Mental Health Training Curriculum & Training Certificates</p> <p>Interviews conducted with:</p> <p>Medical / Mental Health Staff</p> <p>Site Observation:</p> <p>Medical Staff Training Records</p> <p>Findings (By Provision):</p> <p>115.235 (a) – Harris County Residential Treatment Center, <i>PREA Policy</i> states in addition to standard training requirements, medical and clinical staff will receive specialized training for assessment, intervention, and support of clients with regard to sexual misconduct. These topics will include:</p> <ul style="list-style-type: none"> • How to detect and assess signs of sexual abuse and sexual harassment • How to preserve physical evidence of sexual abuse • How to respond effectively and professionally to victims of sexual abuse and sexual harassment • How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

	<p>115.235 (b) – HCRTC medical staff do not conduct forensic medical exams; forensic examinations are conducted at the local hospital. This provision of the standard is not applicable.</p> <p>115.235 (c) – Harris County Residential Treatment Center, <i>PREA Policy</i> states medical and clinical staff will receive specialized training, coordinated by the Training Department Staff and delivered by qualified trainers, and such training shall be documented in training records at HR.</p> <p>The Auditor reviewed the training records of medical and clinical staff currently assigned to the facility; training records included the training curriculum and certificates of completion (with signatures). The training curriculum included the required elements of the agency policy and of the PREA standard.</p> <p>The Auditor conducted interviews with Medical & Mental Health staff members and confirmed receipt of specialized training on how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how to report allegations of sexual abuse and sexual harassment. Medical and Mental Health staff members also confirmed receiving the agency’s general PREA training, which included the zero tolerance to sexual abuse and sexual harassment.</p> <p>Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews, in addition to the observations made during the on-site visit file review, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.241	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Document Review:
	HCRTC PAQ
	Harris County Residential Treatment Center, <i>PREA Policy</i>
	Harris County Residential Treatment Center, Resident Risk Assessment

Interviews conducted with:

Residents who disclosed prior SV at Intake

Random sample of Residents

Staff Responsible for Risk Screening

PREA Coordinator

Site Review Observations:

Risk Assessment

Findings (By Provision):

115.241 (a) - Harris County Residential Treatment Center, *PREA Policy* states that all residents admitted to the HCRTC program shall be assessed for their risk of being sexually abused by other residents or sexually abusive toward other residents. This process begins at the point of referral and continues through intake, orientation and on an ongoing basis during the individual program planning process.

115.241 (b) - Harris County Residential Treatment Center, *PREA Policy* states the initial PREA assessment shall be completed within 72 hours of arrival at the facility.

According to information provided in the PAQ, the number of residents entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other residents with 72 hours of their entry into the facility was 1048, 100% of residents.

The Auditor requested an up-to-date resident roster, which provides a list of all residents currently at the facility and is organized by housing unit, provides resident characteristics such as age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, gang affiliation, and housing assignment. This allowed the Auditor to accurately select a random representation of residents for the interview process. All residents selected for interviews were selected under the guidance of the National *PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide for Residents*.

The Auditor interviewed sixteen residents, and all sixteen residents recalled the initial risk assessment interview, and ten of the sixteen residents confirmed receiving the second risk assessment interview occurring within a few weeks after the initial assessment.

115.241 (c, d) - Harris County Residential Treatment Center, *PREA Policy* states the assessment will be based on objective criteria and other evidence-based or contract driven methods. The screening process shall consider, at a minimum, the following criteria to assess a resident's risk of sexual victimization or predation:

- Whether the resident has a mental, physical, or developmental disability;
- The age of resident;
- The physical build of the resident;
- Whether the resident has previously been incarcerated;
- Whether the resident's criminal history is exclusively nonviolent;
- Whether the resident has prior convictions for sex offenses against an adult or child;
- Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- Whether the resident has previously experienced sexual victimization; and
- The residents own perception of vulnerability.

115.241 (e) - Harris County Residential Treatment Center, *PREA Policy* states the intake screening will consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing residents for risk of being sexually abusive.

115.241 (f) - Harris County Residential Treatment Center, *PREA Policy* states within 30 days from the resident's arrival at the program and/or when warranted, the HCRTC counselor will conduct another PREA assessment / screening to determine the resident's risk of victimization or abusiveness.

The Auditor conducted an interview with the PREA Coordinator regarding the responsibility of conducting screenings for risk of victimization and abusiveness. The PREA Coordinator provided the Auditor with a complete overview of the resident classification process and the resident risk screening process to include how all residents are screened within 72 hours (or less) of their arrival at the facility. The PREA Coordinator also confirmed that all interviews are conducted privately, and the interviews include the classification and risk assessment process, program

opportunities, qualifications for job assignments, and educational opportunities.

During the pre-on-site, the Auditor reviewed one hundred fifty-five PREA Screening Checklist forms completed during the auditing period. The Auditor reviewed an additional thirty PREA Screening Checklist forms of residents from the random and targeted interviews and residents that risk assessment warranted a referral or reassessment. All forms were filled out accurately and completely and in accordance with agency policy.

The Auditor conducted interviews with three residents who disclosed prior sexual victimization during intake. All three residents confirmed to the Auditor that each were offered the opportunity to meet with a medical or mental health care practitioner during the risk screening process. All three residents declined the meeting with mental health.

115.241 (g) – Harris County Residential Treatment Center, *PREA Policy* states a resident's risk level shall be reassessed following a referral, request, and incident of sexual abuse or receipt of any additional information that may affect the resident's risk of sexual victimization or abusiveness. This assessment will include any additional, relevant information received by the program, staff observations or reports from the Resident since intake. This assessment is reviewed and updated if needed or if new information is identified.

115.241 (h) – Harris County Residential Treatment Center, *PREA Policy* states residents may not be disciplined for refusing to answer, or for not disclosing complete information in response to the questions asked pursuant to the assessment process. When a resident is unable or unwilling to answer a question in an assessment the staff member will record this as either refused or unknown. This especially pertains to these questions:

- Whether the resident has a mental, physical, or developmental disability;
- Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming;
- Whether the resident has previously experienced sexual victimization;
- The resident's own perception of vulnerability.

The Auditor inquired to the PREA Coordinator what actions are taken against residents who refuse to cooperate or answer the questions in the risk screening process. The PREA Coordinator responded that residents are not required to provide

answers, if a resident refuses to answer, another staff member will conduct a follow-up interview. The PREA Coordinator confirmed that residents are not disciplined for refusing to cooperate or answer the questions in the risk screening process.

115.241 (i) – Harris County Residential Treatment Center, *PREA Policy* states resident files are confidential and access to the information contained within the file is only provided to authorized individuals who require access in order to complete their scope of work. All staff must ensure that residents’ information, especially related to risks and needs, is not exploited to the residents’ detriment by staff or other residents. Staff members are expressly prohibited from disseminating any information about one resident to any other resident.

The Auditor inquired to the PREA Coordinator how the facility protects such sensitive information. The PREA Coordinator confirmed access to such information is strictly limited and any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to assist with making treatment plans and informed management decisions (housing, work, education, and program assignments).

The Auditor inquired with the PREA Coordinator about how the facility protects sensitive information, in particular a resident’s risk assessment. The PREA Coordinator explained how risk assessments are maintained and stored securely, and access is limited to authorized staff.

Upon review of the policies, on-site file, and documentation review, and upon completion of the interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

115.242	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: HCRTC PAQ

Harris County Residential Treatment Center, *PREA Policy*

Harris County Residential Treatment Center Resident Risk Assessment

Interviews conducted with:

PREA Coordinator

Staff Responsible for Risk Screening

Transgender & non-heterosexual residents

Site Observation:

Resident initial risk assessment & reassessment

Findings (By Provision):

115.242 (a) - Harris County Residential Treatment Center, *PREA Policy* states the results of the screening process will be used to inform housing, bed, work, program/ education assignments or restrictions with the goal of keeping separate residents at risk of being victimized from residents at high risk of being sexually abusive.

115.242 (b) - Harris County Residential Treatment Center, *PREA Policy* states decisions will be made on an individualized basis to ensure the safety of each resident.

115.242 (c) - Harris County Residential Treatment Center, *PREA Policy* states dorm, bed, and program assignments for transgender or intersex residents will be made on a case-by-case basis. The Auditor conducted an interview with PREA Coordinator regarding the responsibility to conduct screenings for risk of victimization and abusiveness. The PREA Coordinator provided the Auditor with a complete overview of the resident classification process and the resident risk screening process to include how all residents are screened within 72 hours (or less) of their arrival at the facility.

The PREA Coordinator explained how the facility uses the information obtained from the risk screening assessment interviews to determine housing assignment for each

resident, which is done strictly on a case-by- case basis. The PREA Coordinator further explained a transgender or intersex resident's own views on safety is given consideration during this process and if placed in protective custody, such placement is done at the request of the resident or solely based on the resident's classification level.

The Auditor requested an up-to-date resident roster for gay, bisexual, transgender, and intersex residents to conducted targeted resident interviews. All other resident interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Residents*.

The Auditor conducted five interviews with residents who identified as gay, bisexual, transgender, or intersex residents. The residents were questioned whether they were placed in a housing area only for gay, bisexual, transgender, or intersex residents. Each resident acknowledged being housed in a general population housing area for all residents of the same level of classification. Additionally, the Auditor inquired to the resident who identified as transgender if the transgender resident is allowed to shower alone, without other residents and the transgender resident confirmed to the Auditor the facility does provide the opportunity to shower alone. The Auditor also inquired to the transgender resident if staff met with them individually, to discussed housing and program decisions and to discuss safety within the facility. The transgender resident acknowledged meeting with staff and confirmed these concerns were discussed privately.

115.242 (d) – Harris County Residential Treatment Center, *PREA Policy* states a transgender or intersex resident’s views with respect to his or her own safety will be given serious consideration.

115.242 (e) –Harris County Residential Treatment Center, *PREA Policy* states transgender and intersex residents shall be afforded the opportunity to shower and manage personal care needs in privacy, separate from other residents when so desired.

115.242 (f) – Harris County Residential Treatment Center, *PREA Policy* states HCRTC does not maintain facilities dedicated to LGBTQI residents.

The Auditor conducted an interview with the PREA Coordinator and inquired how the agency ensures against placing lesbian, gay, bisexual, transgender, or intersex

	<p>residents in dedicated facilities or wings. The PREA Coordinator informed the Auditor that agency policy prohibits such placement unless the placement is in a dedicated unit wing established in connection with a consent decree, legal settlement, or legal judgment. The PREA Coordinator confirmed HCRTC is not under such legal judgment.</p> <p>Upon review of the policies and upon completion of the interviews, HCRTC demonstrated facility- wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.251	Resident reporting
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County Residential Treatment Center Resident Orientation Handbook (English/ Spanish)</p> <p>Harris County Residential Treatment Center, PREA Zero Tolerance Poster (English/ Spanish)</p> <p>Interviews conducted with:</p> <p>Random sample of Residents</p> <p>PREA Coordinator</p> <p>Random sample of Staff</p> <p>Site Observations:</p> <p>PREA informational signage</p> <p>PREA / Sexual Awareness Handout (multiple languages)</p>

Findings (By Provision):

115.251 (a) – Harris County Residential Treatment Center, *PREA Policy* states HCRTC will provide multiple ways for residents to privately report sexual misconduct, sexual harassment, or retaliation by other residents or staff, and staff neglect or violation of responsibilities.

Harris County Residential Treatment Center, *PREA Policy* states the PREA Coordinator / Direct Care Member will ensure reporting options are posted in the facility. These options include:

- Written or verbal reports to any staff member
- HAWC Hotline (713.528.7273)
- HCRTC formal grievance process
- Through third party advocates (family, friends, legal counsel)
- Through the PREA, CJAD, and HCCSCD Ombudsman
- Securus Tablet

Harris County Residential Treatment Center, Resident Orientation Handbook and the *PREA No Means No* poster state HCRTC has a “zero tolerance” toward all forms of sexual misconduct, abuse, or harassment with residents and shall make every effort to maintain a safe environment for staff and residents. Reporting methods include:

- Call the Gateway Foundation at 832.927.PREA (7732)
- Report to any staff, volunteer, contractor, or medical or mental health staff
- Submit a grievance or sick call slip.
- Report to the PREA Coordinator or PREA Compliance Manager
- Tell a family member, friend, legal counsel, or anyone else outside the facility. They can report on your behalf by calling 832.927.PREA (7732).
- Report directly to the TDCJ PREA Ombudsman Office, which is an outside entity separate and apart from the Gateway Foundation/HCRTC by writing to: P.O. Box 99, Huntsville, TX 77342 or by calling 936.437.5570
- You also can submit a report on someone’s behalf, or someone at the facility can report for you using the ways listed here.

During the facility tour, the Auditor observed PREA Zero-tolerance informational signage and PREA Sexual Awareness handout posted in all housing dormitories, resident educational and program buildings, in the religious programs / services

building, and resident work areas. The PREA informational signage was posted in multiple languages.

The Auditor conducted informal interviews with residents in the housing dormitories, various work assignments, and while touring the programs, educational, and vocational buildings. The Auditor inquired to each resident on the various PREA reporting methods available, and each resident confirmed reporting to any staff member, submitting a grievance, or utilizing an outside reporting method - writing the PREA Ombudsman or calling a family member or friend and request a report be submitted on their behalf.

During the informal interviews with residents, the Auditor inquired about the use of the phones or tablet to contact a family member or friend; all residents confirmed calls can be made on the designated dormitory phones or on their issued Securus tablet. Throughout the facility tour, multiple residents utilized their tablets to demonstrate to the Auditor the step-by-step process to report a PREA incident either by sending an email to a Staff Member, or family member or utilizing the tablet to contact a family member and request a report be filed on their behalf.

The Auditor requested an up-to-date facility resident roster, organized by housing unit, and provides resident characteristics such as age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, gang affiliation, and housing assignment. This allowed the Auditor to accurately select a random representation of residents for the interview process. All residents selected for interviews were selected under the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Residents*.

The Auditor conducted sixteen resident interviews and inquired to each resident on the PREA reporting methods. All sixteen residents interviewed referred to notifying a staff member, counselor, or family member as the most direct method to report or inquire about PREA information. All residents interviewed also referred to contacting a family member as their source outside the facility and all sixteen residents interviewed confirmed knowledge of third-party reporting. Twelve of the sixteen residents interviewed were aware of the availability of submitting an anonymous PREA report.

115.251 (b) - Harris County Residential Treatment Center, *PREA Policy* states all residents, third party, or staff may use the Houston Area Women's Center (HAWC) hotline number (713.528.7273) to make reports. HAWC will immediately notify the

PREA Coordinator, HCRTC Management, or law enforcement of complaints related to sexual misconduct received via the hotline. This means of reporting allows the residents to remain anonymous upon request.

115.251 (c) - The Harris County Residential Treatment Center, *PREA Policy* states staff members will accept and act on a report of sexual misconduct, this includes reports made verbally, in any written form, electronically, from a resident, anonymously, or from third parties.

115.251 (d) - The Harris County Residential Treatment Center, *PREA Policy* states a method shall be provided for staff to privately report sexual abuse and sexual harassment of residents. Staff can report privately to the Houston Area Women's Center (HAWC) or the TDCJ PREA Ombudsman.

The Auditor-conducted interviews with twelve random staff members and asked each staff member how an resident can privately report sexual abuse and sexual harassment or retaliation by other residents or staff for previously reporting sexual abuse and sexual harassment.

Each staff member interviewed was able to articulate the various methods a resident may privately report an allegation of sexual abuse or sexual harassment (family member, third party reporting, PREA Ombudsman). Staff members also explained that reports concerning sexual abuse or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

The Auditor conducted an interview with the PREA Coordinator to verify reporting methods for sexual abuse or sexual harassment allegations that are available for residents and staff. The PREA Coordinator confirmed the multiple methods of reporting available for residents and staff, and these reports can be made either verbally, in writing, by a third party and may be done so in private or anonymously and all reports, no matter the method used to report, are confidential and handled promptly and professionally.

Upon review of the policies, contracts, employee handbook, HCRTC resident handbook, and viewing of the PREA informational brochures and signs and upon completion of interviews conducted, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.252	Exhaustion of administrative remedies
	<p data-bbox="280 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 266 564 300">Auditor Discussion</p> <hr/> <p data-bbox="280 344 544 378">Document Review:</p> <p data-bbox="280 412 440 445">HCRTC PAQ</p> <p data-bbox="280 479 1078 512">Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p data-bbox="280 546 1358 580">Harris County Residential Treatment Center, Resident Orientation Handbook</p> <p data-bbox="280 703 663 736">Interviews conducted with:</p> <p data-bbox="280 770 810 804">Residents who reported sexual abuse</p> <p data-bbox="280 994 608 1028">Findings (By Provision):</p> <p data-bbox="280 1128 1481 1285">115.252 (a) – Harris County Residential Treatment Center, <i>PREA Policy</i> states HCRTC’s formal grievance process may be used by residents to report sexual misconduct, however, staff will not attempt to resolve sexual misconduct complaints informally beyond ensuring resident safety.</p> <p data-bbox="280 1397 1461 1554">115.252 (b) – Harris County Residential Treatment Center, <i>PREA Policy</i> states there is no time limit on when a resident may submit a grievance regarding an allegation of sexual misconduct. The agency may apply otherwise-applicable time limits on any portion of a grievance that does not allege an incident of sexual abuse.</p> <p data-bbox="280 1666 1461 1823">115.252 (c) – Harris County Residential Treatment Center, <i>PREA Policy</i> states a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint and a grievance of this nature shall not be referred to a staff member who is the subject of the complaint.</p> <p data-bbox="280 1935 1461 2047">115.252 (d) – Harris County Residential Treatment Center, <i>PREA Policy</i> states HCRTC’s formal grievance process requires an initial response to a grievance within seven working days and a response to an appeal within five working days.</p>

The Auditor conducted a targeted interview with a resident who reported an incident of sexual abuse and inquired the resident, after reporting, did the facility allow them to contact anyone. The resident denied reporting an incident of sexual abuse or sexual harassment and refused to discuss specifics or answer further questions.

115.252 (e) - Harris County Residential Treatment Center, *PREA Policy* states a resident may receive help in filing a grievance related to sexual misconduct. This help may be from another resident, a staff member, a family member, attorney, or an outside advocate.

115.252 (f) - Harris County Residential Treatment Center, *PREA Policy* states a grievance alleging or indicating a resident is at imminent risk of sexual abuse or assault require prompt response, and includes an immediate notice to the Supervisor, DCM Manager and Program Director / Director of Operations. In all cases alleging imminent risk, the initial response to the Resident from the shift supervisor or above must be documented within 48 hours, with a final decision rendered within five days documenting a determination whether the resident is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

115.252 (g) - Harris County Residential Treatment Center, *PREA Policy* states if an investigation or administrative investigation establishes that a resident filed a grievance related to sexual misconduct in bad faith, the resident may be subject to normal disciplinary action for lying or filing false reports.

During the pre-on-site phase of the audit, the Auditor reviewed the Harris County Residential Treatment Center, Resident Handbook and confirmed the handbook contains information about the grievance process to include explanation of the two types of grievance, informal and formal. The handbook informs residents that additional and more detailed grievance information is covered during orientation.

Upon review of policies, documentation, case files, and of the HCRTC Resident Handbook, and upon completion of interviews conducted during the on-site visit, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

Harris County Residential Treatment Center, *PREA Policy*

Harris County Residential Treatment Center, Houston Area Women’s Center (HAWC)

Harris County Residential Treatment Center, Resident Orientation Handbook (English/Spanish)

Harris County Residential Treatment Center, PREA Zero Tolerance Poster (English/ Spanish)

Interviews conducted with:

Random sample of Residents

Residents who reported sexual abuse

Site Review Observations:

PREA informational signage

PREA / Sexual Awareness Handout (multiple languages)

Findings (By Provision):

115.253 (a) - Harris County Residential Treatment Center, *PREA Policy* states residents shall be provided access to supportive counseling and emotional support services related to sexual abuse through Houston Area Women’s Center (HAWC). These services may be initiated as part of victim advocacy, in the form of requests for supportive services made by the victim independently, or with HCRTC staff support directly to HWAC.

115.253 (b) - Harris County Residential Treatment Center, *PREA Policy* states residents shall be informed, prior to giving them access, of the extent to which these communications will be monitored and the extent of which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

The Auditor requested an up-to-date resident roster, organized by housing unit, which provides characteristics such as age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, gang affiliation, and housing assignment. This allowed the Auditor to accurately select a random representation of residents for the interview process. All residents selected for interviews were selected under the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Residents*.

The Auditor inquired to each resident interviewed, if needed, are there services available outside of the facility for dealing with sexual abuse. Fifteen of the sixteen residents interviewed confirmed being provided such information during the comprehensive PREA orientation as well as informational posters being displayed throughout the housing units.

During the tour of the facility, the Auditor conducted informal interviews with residents in the housing dormitories and in various work assignments, and while touring the programs and educational buildings. Throughout the tour, the Auditor noted PREA informational posters and Sexual Abuse Awareness Handouts displayed in all the above areas and buildings.

115.253 (c) - Harris County Residential Treatment Center, *PREA Policy* outlines the requirements of obtaining a memorandum of understanding or other agreement with community service providers to provide residents with confidential emotional support services related to sexual abuse.

The Auditor reviewed the existing MOU between Harris County Community Supervision and Corrections Department (HCCSCD) and the Houston Area Women's Center (HAWC). The contract uses clear and concise language, provides the agency's responsibilities, the advocacy's responsibilities, and the reporting and documentation requirements for each.

The Houston Area Women's Center (HAWC) is a domestic and sexual violence advocacy center located in Houston Texas. HAWC provides support services for survivors of domestic violence, sexual assault and sex trafficking. HAWC provides immediate access to 24/7 crisis intervention services, ongoing trauma-informed support programs, safety planning, emergency shelter, rape crisis support, and hospital advocacy and support.

	<p>The Auditor conducted an interview with an advocate from HAWC and she confirmed the existing agreement and responsibilities within the agreement and provided an overview of services provided to resident victims of sexual abuse. The services include emotional support services, crisis counseling, victim advocate upon request for advocacy accompaniment during forensic exams or investigatory interviews, a mailing address and phone number for communication with the advocacy services.</p> <p>The Auditor conducted a targeted interview with a resident who reported an incident of sexual abuse and inquired the resident, after reporting, did the facility allow them to contact anyone. The resident denied reporting an incident of sexual abuse or sexual harassment and refused to discuss specifics or answer further questions.</p> <p>Upon review of the policies and upon completion of the interviews, HCRTC demonstrated facility- wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.254	Third party reporting
	<p>Auditor Overall Determination: Exceeds Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County Residential Treatment Center, Resident Orientation Handbook (multiple languages)</p> <p>Harris County Residential Treatment Center Website (https://cscd.harriscountytexas.gov/More-Information/Prison-Rape-Elimination-Act)</p> <p>Harris County Residential Treatment Center, PREA Zero Tolerance Poster (English / Spanish)</p> <p>Interviews conducted with:</p> <p>Random sample of Residents</p>

Site Review Observation:

PREA informational signage

Findings (By Provision):

115.254 (a) – Harris County Residential Treatment Center, *PREA Policy* states HCRTC allows for third parties to report sexual abuse or sexual harassment for any resident. Third parties include other residents, family members, and other advocates are permitted to assist residents in filing complaints or reports relating to allegations of sexual abuse and sexual harassment and shall also be permitted to file such requests on behalf of residents.

Harris County Residential Treatment Center, publishes agency policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation on the agency website <https://cscd.harriscountytexas.gov/More-Information/Prison-Rape-Elimination-Act>

The Auditor requested an updated resident roster, organized by housing unit, provides resident characteristics such as age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, gang affiliation, and housing assignment. This allowed the Auditor to accurately select a random representation of residents for the interview process. All residents selected for interviews were selected under the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Residents*.

The Auditor conducted sixteen resident interviews and inquired if each resident had received PREA education upon arrival at the facility. All sixteen residents interviewed recalled receiving both the initial PREA orientation and the comprehensive (video) orientation. All sixteen residents interviewed acknowledged the zero-tolerance policy on sexual abuse sexual harassment and the various ways to report such incidents.

When questioned about third party reporting, all sixteen residents interviewed acknowledged how to submit a third-party report (ask a family member or friend to submit a report or contact the PREA Ombudsman). In addition, several of the residents referred to the informational bulletin posters throughout the facility, which contains directions on how to submit a third-party report.

	<p>During the pre-on-site phase of the audit, the Auditor visited the agency’s website and confirmed the availability for the public to submit a report of sexual abuse or sexual harassment on behalf of a resident. The report may also be submitted anonymously.</p> <p>Upon review of the policies and upon completion of the interviews, HCRTC demonstrated facility- wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.</p>
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115.261	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Interviews conducted with:</p> <p>Random sample of Staff</p> <p>Medical / Mental Health Staff</p> <p>Facility Director</p> <p>Site Observations:</p> <p>Staff reporting documentation of resident information, incident reports and investigations being completed and the review of reports demonstrated allegations are addressed timely.</p> <p>Findings (By Provision):</p>

115.261 (a) – Harris County Residential Treatment Center, *PREA Policy* states any staff members who encounters, has knowledge or suspicion of, or receives information regarding an incident of consensual sexual activity, sexual abuse, sexual misconduct, sexual harassment, retaliation, or staff neglect, or violations of their responsibilities must report this information to the PREA Coordinator, Supervisor, Manager, or HCRTC Administration immediately.

The Auditor conducted interviews with a random sample of staff members. Each staff member interviewed articulated the agency's zero tolerance policy on sexual abuse and sexual harassment, their role and responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with residents, and an resident right to be free from sexual abuse and sexual harassment. Staff members also acknowledged that reports concerning sexual abuse or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

115.261 (b) – Harris County Residential Treatment Center, *PREA Policy* states staff shall not reveal any information related to the sexual abuse report to anyone other than the extent necessary, as designated in this policy, to make treatment, investigation, and other safety decisions.

115.261 (c) – Harris County Residential Treatment Center, *PREA Policy* states unless otherwise precluded by federal, state, or local law, and at the initiation of services, medical and mental health practitioners shall be required to report sexual abuse, and to inform residents of the practitioner's duty to report, as well as the limitations of confidentiality.

The Auditor conducted interviews with Medical and Mental Health Staff regarding responsibilities to disclose to residents the confidentiality limitations and reporting incidents of sexual abuse or sexual harassment. Each Medical and Mental Health Staff member articulated in detail step-by- step process when reporting incidents of sexual abuse or sexual harassment as well as expressed the requirement to report such incidents immediately. Each Medical and Mental Health Staff member acknowledged disclosing the confidentiality limitation prior to the initiation of services with any resident. The Auditor inquired if any residents had reported an incident of sexual abuse or harassment during the past twelve months and both Medical and Mental Health staff member confirmed they had not received such reports.

	<p>115.261 (d) – HCRTC does not house residents under the age of 18 nor residents who are considered vulnerable adults.</p> <p>115.261 (e) – Harris County Residential Treatment Center, <i>PREA Policy</i> states all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility’s designated investigators.</p> <p>The Auditor inquired to the Facility Director are allegations of sexual abuse and sexual harassment, to include third party and anonymous sources, reported to designated facility investigators. The Facility Director indicated all allegations of sexual abuse and sexual harassment, no matter the origin of reporting, are reported directly to the designated facility investigators for administrative investigations, or to the Harris County Sheriff’s Office for criminal investigations.</p> <p>Upon review of the policies and upon completion of the interviews, HCRTC demonstrated facility- wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.262	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Interviews conducted with:</p> <p>Agency Head Designee</p> <p>Facility Director</p> <p>Random sample of Staff</p> <p>Findings (By Provision):</p>

115.262 (a) – Harris County Residential Treatment Center, *PREA Policy* states all staff members shall immediately report, any knowledge suspicion, or information regarding an incident of sexual abuse or sexual harassment, retaliation against residents or staff who reported an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

During the twelve months prior to the audit, the facility reported in the PAQ there were no residents at risk of imminent sexual abuse. During the on-site phase of the audit, the Auditor interviewed facility staff, PREA Coordinator, and the Facility Director and each confirmed the information previously reported in the PAQ.

The Auditor conducted interviews with twelve random staff members and inquired about his/her actions if they received information that a resident was at imminent risk of sexual abuse. Each staff member articulated the agency's response protocol to receiving such information and all staff members interviewed confirmed their priority is ensuring the safety of the residents. Staff indicated they would safeguard the residents and immediately notify their supervisor to investigate the threat to the residents and to find safe housing for the residents.

The Auditor conducted an interview with the Facility Director and inquired as to what action is taken upon learning a resident is subject to a substantial risk of imminent sexual abuse. The Facility Director informed the Auditor that once a staff member receives information that a resident may be at risk for sexual abuse, that resident is immediately removed from the area. The resident victim's housing preference is considered, however the decision on his/her ultimate placement is driven by the need for protection from possible abuse and/or retaliation.

The Auditor conducted an interview with the Agency Head Designee regarding what action is taken upon learning a resident is subject to a substantial risk of imminent sexual abuse. The Agency Head Designee stated if a resident is at risk of imminent sexual abuse the first thing staff will be responsible for separating the victim from the potential abuser. The potential victims will be given the opportunity to speak with a staff member regarding the situation as well as Medical and Mental Health. If necessary, the resident would be placed in a housing unit which ensures his safety.

Upon review of the policy, observations made during the on-site facility tour, and upon completion of the interviews with staff, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.263	Reporting to other confinement facilities
	<p data-bbox="280 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 564 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <p data-bbox="280 412 440 448">HCRTC PAQ</p> <p data-bbox="280 483 1078 519">Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p data-bbox="280 627 663 663">Interviews conducted with:</p> <p data-bbox="280 698 612 734">Agency Head Designee</p> <p data-bbox="280 770 504 806">Facility Director</p> <p data-bbox="280 913 612 949">Findings (By Provision):</p> <p data-bbox="280 1057 1461 1218">115.263 (a) – Harris County Residential Treatment Center, <i>PREA Policy</i> states upon receiving an allegation that an resident was sexually abused or sexually harassed while confined at another facility, the staff member who received the allegation shall notify the PREA Coordinator.</p> <p data-bbox="280 1326 1430 1487">115.263 (b) – Harris County Residential Treatment Center, <i>PREA Policy</i> states the PREA Coordinator will notify the HCCSCD Manager of Residential Services will provide notice to the PREA Coordinator of the facility where the alleged abuse occurred.</p> <p data-bbox="280 1594 1461 1756">115.263 (c) – Harris County Residential Treatment Center, <i>PREA Policy</i> states such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The HCCSCD Manager of Residential Services will document this notification and provide the documentation to the PREA Coordinator.</p> <p data-bbox="280 1863 1461 1944">In the twelve months prior to the audit, HCRTC reported receiving no allegations of sexual abuse from another facility.</p> <p data-bbox="280 2051 1430 2087">115.263 (d) – Harris County Residential Treatment Center, <i>PREA Policy</i> states if a</p>

report is received from another agency or institution that an incident of sexual misconduct is alleged to have occurred at HCRTC, the PREA Coordinator shall ensure that the allegation is investigated in accordance to these standards.

In the twelve months prior to the audit, no allegations were received from a HCRTC resident alleging sexual abuse while confined at another facility.

The Auditor conducted an interview with the Facility Director and asked what the process is when your facility receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred at the facility. The Facility Director explained that the designated facility investigators would initiate an investigation immediately.

The Auditor conducted an interview with the Agency Head Designee and inquired if another agency or facility refers allegations of sexual abuse that occurred within one of your facilities if there a designated point of contact. The Agency Head Designee explained that the point of contact for all sexual abuse related incidents is the PREA Coordinator / Operations Director and the designated facility investigator.

Upon review of the policy, documentation, and investigative files, and upon completion of the interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.264	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: HCRTC PAQ Harris County Residential Treatment Center, <i>PREA Policy</i> Interviews conducted with: Security Staff / Non-Security Staff First Responders

Random sample of Staff

Residents who reported sexual abuse

Findings (By Provision):

115.264 (a) – Harris County Residential Treatment Center, *PREA Policy* states upon learning of an allegation that a resident was sexually abused, the first staff members to responding to the report shall:

- Separate the alleged victim and perpetrator
- Request assistance from other facility staff immediately
- Secure the scene and prevent others from entering the area or tampering with evidence
- Direct both the alleged victim and perpetrator to refrain from any actions that could destroy physical evidence, including washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence
- The First Responder must document his/her actions, observations, etc. prior to end of shift.

The Auditor conducted twelve random staff interviews and three specialized staff interviews regarding his/her role as a First Responder to an allegation of sexual abuse. The Staff Members interviewed provided specific details of his/her responsibilities as a First Responder to include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify Medical and Mental Health and an immediate Supervisor.

In addition, each Staff Member acknowledged the importance of the agency's response protocol to a sexual abuse allegation as well as his or her role as a First Responder. Each Staff Member interviewed articulated in detail the responsibilities of a First Responder and the importance of his/her responsibility when responding to an incident of sexual abuse or sexual harassment as well as the importance of ensuring the victim is safe.

115.264 (b) – Harris County Residential Treatment Center, *PREA Policy* states If the

	<p>first staff responder is not a security officer, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and shall immediately notify security staff.</p> <p>The Auditor conducted a targeted interview with a resident who reported an incident of sexual abuse and inquired the resident, after reporting, did the facility allow them to contact anyone. The resident denied reporting an incident of sexual abuse or sexual harassment and refused to discuss specifics or answer further questions.</p> <p>Upon review of the policy, documentation, and upon completion of the interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.265	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Interviews conducted with:</p> <p>Facility Director</p> <p>Findings (By Provision):</p> <p>115.265 (a) – Harris County Residential Treatment Center, <i>PREA Policy</i> states the PREA Coordinator or Manager on duty will have immediate responsibility to coordinate staff actions taken in response to an incident of sexual assault or sexual abuse, including communication with among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i> states upon learning of an</p>

allegation that a resident was sexually abused, the first staff members to responding to the report shall:

- Separate the alleged victim and perpetrator
- Request assistance from other facility staff immediately
- Secure the scene and prevent others from entering the area or tampering with evidence
- Direct both the alleged victim and perpetrator to refrain from any actions that could destroy physical evidence, including washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence
- The First Responder must document his/her actions, observations, etc. prior to end of shift.

Harris County Residential Treatment Center, *PREA Policy* states resident victims of sexual abuse shall receive timely, unimpeded access to emergency treatment and crisis intervention services. The PREA Investigator will offer the resident victim advocacy services through the Houston Area Women’s Center (HAWC). HAWC will provide emotional support and crisis intervention services, accompany resident through forensic medical exam and investigatory interviews upon request by the resident.

The Auditor conducted an interview with the Facility Director and inquired to the facility’s institutional plan to coordinate actions taken in response to an incident of sexual abuse. The Facility Director provided an overview of the response plan and each staff member’s responsibility when responding to an allegation of sexual abuse.

Upon review of the policies and upon completion of the on-site interview with the Facility Director, the HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.266	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Interviews conducted with:</p> <p>Agency Head Designee</p> <p>Findings (By Provision):</p> <p>115.266 (a) - Harris County Residential Treatment Center does not have a collective bargaining agreement.</p> <p>The Auditor verified that the facility does not engage in collective bargaining during interviews with the Facility Director, the PREA Coordinator, and Agency Head Designee.</p> <p>Upon review of the policies and upon completion of the interviews, HCRTC demonstrated facility- wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.267	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Interviews conducted with:</p> <p>Designated Member Charged with Monitoring Retaliation</p> <p>Residents who reported sexual abuse</p>

Agency Head Designee

On Site Observation:

Investigation file review

Findings (By Provision):

115.267 (a) – Harris County Residential Treatment Center, *PREA Policy* states HCRTC will not tolerate any form of retaliation against a resident or employee who reports an incident of sexual abuse or sexual harassment or cooperates with an investigation of an incident.

Harris County Residential Treatment Center, *PREA Policy* states residents and staff who report sexual abuse or sexual harassment or who cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliations by other residents or staff. The PREA Coordinator, Campus Safety Manager, and/or Clinical Director will have primary responsibility to address any retaliation or fear of retaliation.

115.267 (b) – Harris County Residential Treatment Center, *PREA Policy* states HCRTC will employ multiple protective measures in response to reports of actual or potential retaliation or fear of such behavior. These protective measures include such as housing changes for the victim or the alleged perpetrator, if the alleged retaliatory behavior involves a staff member, the staff may be transferred to a different facility or placed on investigatory suspension, and the Clinical Director shall ensure supportive counseling is made available for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

115.267 (c) – Harris County Residential Treatment Center, *PREA Policy* states the PREA Coordinator or designee will monitor for at least 90 days, the conduct and treatment of residents or staff identified as a victim to see if any changes occurred that might suggest possible retaliation by residents or staff. If the initial monitoring indicates a continuing need, the administrator will continue such monitoring beyond 90 days.

During the twelve months prior to the audit, the agency reported no allegations of retaliation were reported nor were there any residents placed in segregated housing due to risk of sexual victimization. Therefore, residents in these targeted categories were not interviewed.

115.267 (d) - Harris County Residential Treatment Center, *PREA Policy* states the monitoring shall also include periodic status checks of residents. This monitoring will include periodic review of program plan updates, consulting with the case manager and/or clinical program staff.

The Auditor conducted a targeted interview with a resident who reported an incident of sexual abuse and inquired the resident, after reporting, did the facility allow them to contact anyone. The resident denied reporting an incident of sexual abuse or sexual harassment and refused to discuss specifics or answer further questions.

115.267 (e) - Harris County Residential Treatment Center, *PREA Policy* states if any other individual who cooperates with an investigation expresses a fear of retaliation, the facility shall take appropriate measures to protect that individual against retaliation.

The Auditor conducted an interview with the Facility Staff Member designated with monitoring retaliation. The Staff Member articulated that to prevent retaliation against residents and staff who report sexual abuse or harassment or those who cooperate with an investigation, the Staff Member would monitor those individuals for at least 90 days. The Staff Member reviews disciplinary reports, resident housing or transfers, and negative performance reviews of staff members. If a concern that potential retaliation might occur beyond the 90 days, the Staff Member would continue to monitor conduct and treatment until the issue or threat is resolved.

The Auditor conducted an interview with the Facility Director and inquired on the different measures taken to protect residents and staff from retaliation for reporting allegations of sexual abuse or sexual harassment. The Facility Director confirmed the facility would take all necessary steps to protect any person who reports a sexual abuse / harassment incident from retaliation. The Facility Director explained that housing changes or transfers of residents, disciplinary action against staff members - including possible dismissal - or other means of removal of those who retaliate against someone who reports an allegation.

	<p>The Auditor conducted an interview with the Agency Head Designee and inquired how the agency protects residents or staff from retaliation for sexual abuse or sexual harassment allegations. The Agency Head Designee explained that facilities deploy numerous measures including housing, program, and work assignments changes. All residents who report sexual abuse are monitored for retaliation for at least 90 days. Staff members are required to monitor the residents with periodic status checks every 30 days to ensure they are not experiencing any additional problems.</p> <p>The Agency Head Designee also explained that staff members might be afforded the ability to change assignments to protect them from retaliation. They are also monitored for retaliation for at least 90 days following a report of sexual abuse or sexual harassment.</p> <p>The Auditor inquired to the Agency Head Designee if an individual cooperates with an investigation expresses a fear of retaliation, what measures does the agency take to protect that individual against retaliation. The Agency Head Designee explained the same process previously described is utilized. The resident will also be subject to 90-day monitoring.</p> <p>Upon review of the policy, investigative files, and upon completion of the interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.271	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Interviews conducted with:</p> <p>Investigative Staff</p> <p>Residents who reported sexual abuse</p>

Site Review Observations:

Investigative files (8)

Findings (By Provision):

115.271 (a, h) – Harris County Residential Treatment Center, *PREA Policy* states that allegations of sexual misconduct that suggest criminal behavior will be referred to Harris County Sheriff’s Office (HCSO) for investigation HCRTC staff will not conduct criminal investigations. The Harris County Sheriff’s Office is the primary investigative and law enforcement entity in Harris County, with the legal authority to conduct criminal investigations. Any allegation involving threats or use of force, or sexual activity without consent or the ability to consent must be referred to HCSO immediately for criminal investigation.

Harris County Residential Treatment Center, *PREA Policy* states the PREA Coordinator or designee shall ensure that a prompt, thorough and objective Administrative Investigation is completed for all allegations of sexual misconduct in any form. This includes reports from anonymous and third-party sources, incidents that occurred prior to admission and incidents that occurred off premises. This requirement will be carried out regardless of whether the matter is also referred for a criminal investigation.

115.271 (b) – Harris County Residential Treatment Center, *PREA Policy* states administrative investigations will be completed by a PREA Investigator who is not a participant or witness to the matter under investigation. HCRTC staff assigned to conduct administrative investigation will receive specialized training to include topics related to:

- Dynamics of sexual trauma
- Crisis Intervention (Houston Area Women’s Center)
- SANE Protocols
- Techniques for interviewing sexual abuse victims;
- Proper use of Miranda and Garrity warnings;
- Sexual abuse evidence collection and handling; and
- Criteria and evidence required to substantiate a case for administrative action or prosecution referral.

115.271 (c) – Harris County Residential Treatment Center, *PREA Policy* states investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data, and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. Investigations will include collecting and preserving evidence, evaluating staff witness statements, documentation, and/or electronic records, video, or other surveillance recordings. Investigations will include interviews with the alleged victim and perpetrator to determine credibility and culpability, however these interviews must not interfere in or attempt to supplant criminal investigations being conducted by law enforcement.

The Auditor interviewed an Investigator who confirmed attending and successful completion of the required specialized training. The Investigator clearly articulated the comprehensive training received which included investigating sexual harassment allegations, investigating sexual abuse allegations, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of Miranda and Garrity and the importance of each, and criteria required for administrative action and prosecution referrals. The Investigator provided the Auditor with a complete overview of the investigative process as it relates to sexual abuse and sexual harassment. An allegation of sexual abuse that is deemed possibly criminal in nature, is immediately referred to the Harris County Sheriff's Office (HCSO) for investigation and all other allegations are investigated by designated facility investigators.

115.271 (d) – Harris County Residential Treatment Center, *PREA Policy* states HCRTC investigators will not compel statements from residents.

115.271 (e) – Harris County Residential Treatment Center, *PREA Policy* states issues of credibility must not be based on an individual's status as a resident, employee, seniority. Investigators will not utilize any polygraph or other truth-telling device in the investigative process.

The Auditor conducted a targeted interview with a resident who reported an incident of sexual abuse and inquired the resident, after reporting, did the facility allow them to contact anyone. The resident denied reporting an incident of sexual abuse or sexual harassment and refused to discuss specifics or answer further questions.

115.271 (f) – Harris County Residential Treatment Center, *PREA Policy* states administrative investigations shall include a review of staff actions before and

during the reported incident to determine if all protocols were followed and whether any staff actions, inactions, or negligence contributed to the incident. Administrative investigations shall be documented in written reports and include all activities, findings, and actions taken. The summary report, including copies of statements, documentation of interviews, video recordings, or photographs shall be forwarded to the PREA Coordinator.

115.271 (g) - Harris County Residential Treatment Center, *PREA Policy* states for criminal investigations, the PREA Coordinator or designee will document requests for pertinent information from Harris County Sheriff's Office (HCSO) or other investigative entity to include this information in the investigation record.

115.271 (i) - Harris County Residential Treatment Center, *PREA Policy* states upon completion of all investigations and reporting, the PREA Coordinator will secure all records of sexual misconduct incident in archival storage for five years following the residents' discharge or staff members' termination.

115.271 (j) - Harris County Residential Treatment Center, *PREA Policy* states the departure or removal from the facility or employment of any alleged victim or perpetrator will not be grounds to stop or curtail the investigation process.

115.271 (k) - The Auditor is not required to audit this provision.

115.271 (l) - Harris County Residential Treatment Center, *PREA Policy* states for criminal investigations, the PREA Coordinator or designee will request pertinent information from the investigative entity to inform the resident of the outcome of the investigation.

The facility reported three allegations of sexual harassment, and five allegations of sexual abuse were received during the twelve-month reporting period. The Auditor reviewed all eight allegations which included three resident-on-resident sexual harassment allegations with one investigation closed as substantiated and two investigations closed as unfounded. The sexual abuse allegations included four resident-on-resident allegations, with three investigations being closed as unsubstantiated and one investigation closed as unfounded. The remaining sexual abuse allegations was a staff-on-resident investigation that was closed as unsubstantiated. At the time of the Auditor's review, there were no investigations referred to prosecution.

	<p>All investigations were selected and reviewed based upon the initial reporting method, the outcome or investigation status (closed or open), and the Auditor’s requirement to review all the required steps and processes to verify compliance with multiple PREA Standards. Each investigation contained all documented reports for that specific incident, summary of the allegation, demographics of involved parties to include relevant criminal history and current sentence, video footage (when applicable), medical documentation and notes, victim, witness, and aggressor statements, review of correspondence, documentation of victim advocacy – acceptance or refusal, a description of the physical and testimonial evidence, the reasoning behind credibility assessments and the investigative facts, findings, and investigative conclusion.</p> <p>Additionally, each completed report included an assessment as to whether staff actions or a failure to act on the part of staff contributed to the abuse. The Auditor reviewed each case thoroughly and systematically to ensure each investigation followed procedures, contained all required and completed documentation, and that all processes were followed in accordance with policy and the PREA standards.</p> <p>Upon review of the policies and documentation listed above, and upon completion of the interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.272	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Interviews conducted with:</p> <p>Investigative Staff</p> <p>Findings (By Provision):</p>

	<p>115.272 (a) – Harris County Residential Treatment Center, <i>PREA Policy</i> states no standard higher than the preponderance of evidence shall be imposed in determining if allegations of sexual misconduct are substantiated.</p> <p>The Auditor conducted an interview with an Investigator who provided the Auditor with a complete overview of the investigative process to include verifying specialized training credentials. The Auditor inquired to the Investigator what standard of evidence is required to substantiate allegations of sexual abuse or sexual harassment. The Investigator explained that the agency should impose no standard higher than a preponderance of the evidence.</p> <p>Upon review of the policy and upon completion of the interviews, HCRTC demonstrated facility- wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.273	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Interviews conducted with:</p> <p>Residents who reported sexual abuse</p> <p>Investigative Staff</p> <p>Facility Director</p> <p>Site Review Observations:</p> <p>Investigative Case Final Notifications</p>

Findings (By Provision):

115.273 (a) – Harris County Residential Treatment Center, *PREA Policy* states investigative investigations will produce a result showing whether the incident was substantiated, unsubstantiated, or unfounded. The PREA Coordinator will complete a PREA Status Notification form and inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

Harris County Residential Treatment Center, *PREA Policy* states unless the allegation is unfounded, following a resident’s allegation that a staff member has committed sexual abuse against him/her, the Director Designee shall inform the resident whenever the staff member is no longer assigned to the facility or no longer employed.

115.273 (b) – Harris County Residential Treatment Center, *PREA Policy* states for criminal investigations, the PREA Coordinator or designee will request pertinent information from the investigative entity to inform the resident of the outcome of the investigation.

115.273 (c) – Harris County Residential Treatment Center, *PREA Policy* states if the allegation involved a staff member’s substantiated sexual misconduct, the report will inform the resident whenever:

- The staff member is no longer posted within the residents’ unit.
- The staff member is no longer employed at the Facility.
- HCCSCD or Gateway learns that the staff member has been indicted on any charge related to sexual abuse.
- HCCSCD or Gateway learns that the staff member has been convicted on a charge related to sexual abuse.

115.273 (d) – Harris County Residential Treatment Center, *PREA Policy* states if an allegation involved sexual assault by another resident, the facility will inform the victim it is learned that the alleged abuser has been indicated on or convicted of any charge related to sexual abuse.

115.273 (e) – Harris County Residential Treatment Center, *PREA Policy* states the PREA Coordinator or designee will be responsible for documenting and communicating this information to the resident. The PREA Coordinator or designee

	<p>will document delivery of the response to the resident.</p> <p>115.273 (f) – Harris County Residential Treatment Center, <i>PREA Policy</i> states if the alleged victim is no longer a resident (or an employee) the notification will document as such and filed with the rest of the documentation regarding this incident.</p> <p>The Auditor conducted a targeted interview with a resident who reported an incident of sexual abuse and inquired the resident, after reporting, did the facility allow them to contact anyone. The resident denied reporting an incident of sexual abuse or sexual harassment and refused to discuss specifics or answer further questions.</p> <p>The Auditor inquired the Investigator about the agency’s notification procedures, to an alleged victim of sexual abuse, when the case is closed and whether the allegation has a final determination of substantiated, unsubstantiated, or unfounded. The Investigator confirmed such notifications were completed by the PREA Coordinator and is documented upon completion.</p> <p>The Auditor conducted an interview with the Facility Director and inquired regarding how the facility notifies a resident who makes an allegation of sexual abuse when the case is closed and a determination as to either substantiated, unsubstantiated, or unfounded. The Facility Director confirmed that the PREA Coordinator completes the resident notification process for all investigations.</p> <p>Upon review of the policies and upon completion of the interviews with specialized staff, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.276	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p>

Interviews conducted with:

Administrative (Human Resources) Staff

Findings (By Provision):

115.276 (a) – Harris County Residential Treatment Center, *PREA Policy* states violation of this policy as well as the sexual misconduct policy is a violation of standards of conduct and will result in disciplinary action up to and including termination.

115.276 (b) – Harris County Residential Treatment Center, *PREA Policy* states for incidents involving sexual abuse or assault by a staff member, termination of employment will be the presumptive action.

115.276 (c) – Harris County Residential Treatment Center, *PREA Policy* states disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment, that do not involve actual sexual abuse, shall be 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.

115.276 (d) – Harris County Residential Treatment Center, *PREA Policy* states all terminations for sexual misconduct or resignations by staff who would have been terminated if they had not resigned are reported to relevant licensing bodies.

The facility reported one staff violation, resignations prior to termination, or terminations for violating the agency's sexual abuse or sexual harassment policies during the twelve months prior to the audit. The staff member was disciplined for violating agency policy. The Auditor reviewed documentation which confirmed the disciplinary actions taken due to the staff's violation of policy.

The Auditor conducted an interview with Administrative / HR Staff Member who confirmed that HCRTC had one staff members violate, resign prior to termination, or be terminated for violating the agency's policy against sexual abuse or sexual

	<p>harassment during the past twelve months.</p> <p>Upon review of the policy, facility documentation, and upon completion of interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.277	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Interviews conducted with:</p> <p>Facility Director</p> <p>Findings (By Provision):</p> <p>115.277 (a) - Harris County Residential Treatment Center, <i>PREA Policy</i> states policy dictates that any contractor or volunteer who engages in sexual misconduct will be removed from the facility, banned from contact with residents, and disallowed from future involvement with the organization. Upon completion of the investigation, any relevant licensing boards will be notified of substantiated findings.</p> <p>115.277 (b) - Harris County Residential Treatment Center, <i>PREA Policy</i> states remedial measures taken by HCCSD and Gateway Foundation for sexual misconduct violations by contractors or volunteers will be documented via memo or email by a member of the HCRTC administrative team. This documentation will be included as part of the administrative investigation.</p> <p>The facility reported there have been no contractor or volunteer violations or terminations of the agency’s sexual abuse or sexual harassment polices during the</p>

	<p>twelve months prior to the audit as the contractor resigned prior to allegations being reported.</p> <p>The Auditor conducted an interview with the Facility Director regarding any violation of the facility’s sexual abuse and sexual harassment by a contractor or volunteer. The Facility Director explained that the incident would be reported to the Office of the Inspector General and an investigation would be conducted. If the investigation shows the activity was criminal, then the incident will be reported to law enforcement. The Facility Director also explained the incident would be reported to any relevant licensing boards and the contractor or volunteer would be prohibited from any further contact at HCRTC or any facility within our agency.</p> <p>Upon review of the policy and upon completion of interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.278	Disciplinary sanctions for residents
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County Residential Treatment Center, Resident Orientation Handbook</p> <p>Interviews conducted with:</p> <p>Facility Director</p> <p>Medical / Mental Health Staff</p> <p>Findings (By Provision):</p> <p>115.278 (a) – Harris County Residential Treatment Center, <i>PREA Policy</i> states residents found culpable for sexual misconduct involving other residents or visitors</p>

will be subject to disciplinary actions. Resident perpetrators of sexual abuse or sexual assault will be removed from the program subject to criminal prosecution.

115.278 (b) – Harris County Residential Treatment Center, *PREA Policy* states due process and progressive discipline that is based on the resident’s disciplinary history, severity of the act, and the sanction imposed for comparable offenses by other residents with similar histories.

115.278 (c) – Harris County Residential Treatment Center, *PREA Policy* states consideration shall be given whether the resident’s mental disabilities or mental illness contributed to the behavior.

115.278 (d) – Harris County Residential Treatment Center, *PREA Policy* states residents found to be involved in substantiated or unsubstantiated incidents of sexual misconduct may be referred for mental health assessment with the clinical staff. Follow-up services related to intervention or correction of underlying issues related to misconduct will be provided on a case-by-case basis. If this referral is made pursuant to formal disciplinary sanction, compliance will be a condition of remaining in the HCRTC program.

115.278 (e) – Harris County Residential Treatment Center, *PREA Policy* states a resident may be disciplined for sexual contact with staff only if it is determined the staff member did not consent to the contact.

115.278 (f) – Harris County Residential Treatment Center, *PREA Policy* states disciplinary action is prohibited for a report of sexual abuse made in good faith, based on a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

115.278 (g) – Harris County Residential Treatment Center, *PREA Policy* states HCRTC prohibits sexual activity between residents. Consensual sexual activity will be subject to disciplinary sanctions as outlined in policy. Any evidence of coercion or force in an incident of sexual misconduct, HCRTC Management staff will refer the matter for criminal investigation.

Harris County Residential Treatment Center, *PREA Policy* and the HCRTC Resident Handbook states sexual misconduct between residents is prohibited and shall result

in disciplinary sanctions.

The Auditor conducted an interview with the Facility Director and discussed the facility's policy on disciplinary sanctions for a resident after an administrative or criminal finding that the resident engaged in resident-on-resident sexual abuse. The Facility Director referred to the existing policy that a resident would be subject to disciplinary sanctions, which would be conducted in accordance with the formal disciplinary process to include termination from the program.

The Auditor conducted an interview with Medical and Mental Health Staff members and discussed the victim advocacy services available to residents and counseling services available for abusers. Both Medical and Mental Health Staff members explained the services provided at the facility include one-on-one counseling, and support groups. These services are offered for victims of sexual abuse or sexual harassment as well as residents of sexual abuse.

Upon review of the policy, Harris County Residential Treatment Center, Resident Orientation Handbook, and upon completion of interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.282	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion Document Review: HCRTC PAQ Harris County Residential Treatment Center, <i>PREA Policy</i> Interviews conducted with: Residents who reported sexual abuse Medical / Mental Health Staff Security Staff / Non-Security Staff First Responders

Site Review Observations:

Secondary Medical Records

Findings (By Provision):

115.282 (a) - Harris County Residential Treatment Center, *PREA Policy* states resident victims of sexual abuse shall receive timely unimpeded access to emergency medical treatment and crisis intervention services. All services will be delivered without unreasonable delay based on the recommendations of professional medical and mental health staff.

115.282 (b) - Harris County Residential Treatment Center, *PREA Policy* states if crisis intervention services are not engaged via the rape crisis center at the time an incident is reported, staff serving as the first responder or manager on duty will contact clinical Director.

The Auditor conducted interviews with twelve random staff members regarding his/her role as a First Responder to an allegation of sexual abuse. The staff members provided specific details of their responsibilities as a First Responder. These responsibilities include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify Medical and Mental Health. In addition, each staff member acknowledged the importance of the agency's response protocol to a sexual abuse allegation as well as his or her role as a First Responder.

115.282 (c) - Harris County Residential Treatment Center, *PREA Policy* states medical services will include timely information regarding emergency contraception, sexually transmitted infections, prophylaxis, and if applicable to the incident, pregnancy testing.

The Auditor conducted a targeted interview with a resident who reported an incident of sexual abuse and inquired the resident, after reporting, did the facility allow them to contact anyone. The resident denied reporting an incident of sexual abuse or sexual harassment and refused to discuss specifics or answer further questions.

115.282 (d) – Harris County Residential Treatment Center, *PREA Policy* states treatment services indicated by medical or mental health assessment are provided to every victim in a timely fashion, without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.

The Auditor conducted interviews with Medical and Mental Health Staff at the facility. During the interviews, the Auditor discussed the required protocols medical staff would complete if a resident reported an incident of sexual abuse within the facility. Each Medical Staff Member described the process to the Auditor to include a systematic overview of the initial treatment process and the steps required, to include documentation of the resident’s medical treatment.

Additionally, during the interview Medical Staff members confirmed resident victims are provided immediate access to medical treatment as well as crisis intervention, therapy, and counseling services. Each Medical and Mental Health Staff member explained the services provided at the facility to include counseling, and support groups. These services are offered for victims of sexual abuse or sexual harassment as well as residents of sexual abuse.

Upon review of the policy and upon completion of staff interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.283	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: HCRTC PAQ Harris County Residential Treatment Center, <i>PREA Policy</i>
	Interviews conducted with:

Medical / Mental Health Staff

Residents who reported sexual abuse

Findings (By Provision):

115.283 (a) – Harris County Residential Treatment Center, *PREA Policy* states medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse.

115.283 (b) – Harris County Residential Treatment Center, *PREA Policy* states ongoing counseling is available through HCRTC if indicated by clinical assessment as permitted by contract. Counseling and support services will also be available through HCCSCD’s MOU with Houston Area Women’s Center. Clinicians will ensure referrals for follow-up services are arranged prior to the resident’s discharge or release.

115.283 (c) – Harris County Residential Treatment Center, *PREA Policy* states HCRTC licensed mental health counselors are available to provide medical and mental health evaluation and treatment shall be offered to resident victims of sexual abuse and will be consistent with the community level of care.

115.283 (d, e) – Harris County Residential Treatment Center, *PREA Policy* states medical services will include timely information and access to pregnancy testing. If pregnancy is a consequence of the incident such victims shall receive timely medical information, and timely access will also be provided for any lawful pregnancy-related medical services.

115.283 (f) – Harris County Residential Treatment Center, *PREA Policy* states resident victims of sexual assault will also be provided tests for sexually transmitted infections as medically indicated.

115.283 (g) – Harris County Residential Treatment Center, *PREA Policy* states all treatment services indicated by medical or mental health assessment are provided to every victim in a timely fashion, without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.

115.283 (h) – Harris County Residential Treatment Center, *PREA Policy* states when a resident is identified as a potential abuser or perpetrator, either as result of assessment or as result of a substantiated or unsubstantiated incident finding, the resident will be referred to mental health practitioner for assessment within at least 60 calendar days.

The Auditor conducted an interview with Medical and Mental Health Staff members at the facility. Medical Staff confirmed that resident victims are provided immediate access to medical treatment as well as crisis intervention, therapy, and counseling services. Each Medical and Mental Health Staff member explained the services provided at the facility include advocacy and emotional support services. These services are offered for victims of sexual abuse or sexual harassment as well as residents of sexual abuse.

The Auditor conducted a targeted interview with a resident who reported an incident of sexual abuse and inquired the resident, after reporting, did the facility allow them to contact anyone. The resident denied reporting an incident of sexual abuse or sexual harassment and refused to discuss specifics or answer further questions.

Upon review of the policy and upon completion of interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.286	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Interviews conducted with:</p> <p>Facility Director</p>

Incident Review Team

Findings (By Provision):

115.286 (a, b) – Harris County Residential Treatment Center, *PREA Policy* states the HCRTC Leadership Team will conduct an Incident Review within 30 days of the completion of an investigation into sexual assault or sexual abuse that was determined to be substantiated or unsubstantiated.

During the Auditor’s review of the closed investigations, a sexual abuse incident review was completed for the investigation which was closed as unsubstantiated, and the sexual abuse incident review was completed within the required 30 days.

115.286 (c) – Harris County Residential Treatment Center, *PREA Policy* states the review will be completed by HCRTC Leadership Team which includes upper-level management officials, with input from supervisors, investigators, and medical or mental health practitioners.

115.286 (d) – Harris County Residential Treatment Center, *PREA Policy* states the review will be completed by HCRTC Leadership Team to determine if responses implemented have been appropriate, sufficient, and effective. The review shall also consider 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 facility; Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; Assess the adequacy of staffing levels in that area during different shifts; Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and this review with participating members will be documented and include determinations made pursuant to the above considerations, and any recommendations for improvement.

115.286 (e) – Harris County Residential Treatment Center, *PREA Policy* states if the Manager of Residential Services, or above determines that any recommendations from the review are not to be taken, the response must include an explanation for this decision and documented as such.

	<p>The Auditor conducted an interview with an Incident Review Team member and inquired if the Incident Review Team considers whether an incident or allegation was motivated by race, ethnicity, or gender identity and if the Incident Review Team examines the area in the facility where the incident allegedly occurred. The Incident Review Team member confirmed the Incident Review Team does consider whether the incident was motivated by race, ethnicity, or gender identity, and gang affiliation. The Incident Review Team also tours the area where the alleged incident occurred as well as considering whether the addition of monitoring technology should be deployed to supplement supervision by staff. The Incident Review Team member explained how touring the area provides the team with the best possible representation of an incident and assists the Incident Review Team in determining if adding monitoring technology is warranted.</p> <p>The Auditor conducted an interview with the Facility Director and discussed the incident review process. The Facility Director explained the Incident Review Team includes upper- level management with input from Investigators, Line Staff, and Medical and Mental Health personnel. The Facility Director articulated the process of the incident review, including listing the elements required per the PREA standard. The Facility Director explained how the Incident Review Team uses the information obtained from the review to determine if changes need to be made to the physical plant, policy and procedure or any other change that would improve the safety of the resident population and prevent sexual abuse.</p> <p>Upon review of the policy and upon completion of interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.287	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County Residential Treatment Center, Annual Report 2023</p>

Findings (By Provision):

115.287 (a, c) - Harris County Residential Treatment Center, *PREA Policy* states the PREA Coordinator will prepare a summary report annually using the PREA Summary Annual Report form. PREA Summary Annual Report form is an aggregate report based on the DOJ's Survey on Sexual Victimization (SSV SSV-IA).

115.287 (b) - Harris County Residential Treatment Center, *PREA Policy* states the PREA Coordinator is responsible for ensuring the most current SSV-IA is used each year and that the PREA Summary Annual Report is updated to meet SSV standards annually.

115.287 (d) - Harris County Residential Treatment Center, *PREA Policy* states the summary report will review all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews in the calendar year shall be maintained, reviewed, and collected as needed to complete the SSV.

115.287 (e) - This provision does not apply to HCRTC.

115.287 (f) - The HCRTC PAQ states the Department of Justice has not requested agency data for the previous calendar year. Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

During the pre-on-site phase of the audit, the Auditor reviewed the Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Harris County Residential Treatment Center, publishes the reports on the Gateway Foundation website <https://corrections.gatewayfoundation.org/prea-resources/reporting/>

Upon review of the policy, and Annual Report, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.288	Data review for corrective action
	<p data-bbox="280 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 564 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 544 376">Document Review:</p> <p data-bbox="280 412 440 448">HCRTC PAQ</p> <p data-bbox="280 483 1078 519">Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p data-bbox="280 555 1126 591">Harris County Residential Treatment Center, Annual Reports</p> <p data-bbox="280 698 663 734">Interviews conducted with:</p> <p data-bbox="280 770 533 806">PREA Coordinator</p> <p data-bbox="280 842 612 878">Agency Head Designee</p> <p data-bbox="280 985 612 1021">Findings (By Provision):</p> <p data-bbox="280 1128 1461 1290">115.288 (a) – Harris County Residential Treatment Center, <i>PREA Policy</i> states the report will compare the current year to the previous year in terms of the number of reports received and effectiveness of prevention and responses to date. The report will include the following topics:</p> <ul data-bbox="351 1352 1420 1478" style="list-style-type: none"> • Identifying problem areas • Taking corrective action on an ongoing basis • A review of its findings for each facility as well as the agency as a whole. <p data-bbox="280 1585 1439 1747">The Auditor conducted an interview with the PREA Coordinator and inquired if the agency reviews data collected and aggregated pursuant to §115.287. The PREA Coordinator explained how the facility collects data to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies.</p> <p data-bbox="280 1854 1477 2016">115.288 (b) – Harris County Residential Treatment Center, <i>PREA Policy</i> states the annual report shall include a comparison of the data and corrective actions from the current year with those from prior years and shall provide an assessment of the progress made in addressing sexual abuse.</p>

The Auditor reviewed Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Harris County Residential Treatment Center, publishes the reports on the Gateway Foundation website <https://corrections.gatewayfoundation.org/prea-resources/reporting/>

115.288 (c) - Harris County Residential Treatment Center, *PREA Policy* states annual reports shall be submitted to the Facility Administrator and Program Directors and Vice President of Gateway Corrections for review and approval and made readily available to the public through the Gateway Foundation website <https://corrections.gatewayfoundation.org/prea-resources/reporting/> and through the HCCSCD's website <https://cscd.harriscountytexas.gov/More-Information/Prison-Rape-Elimination-Act>.

115.288 (d) - Harris County Residential Treatment Center, *PREA Policy* states the publicly available report will have personal identifying information redacted, including names, ages, ethnicities, and position titles of victims and perpetrators. Any other information to be redacted must be limited information that would pose a potential threat to safety and security. The nature of any redactions will be noted in the public version.

The Auditor conducted an interview with the PREA Coordinator regarding how data is collected pursuant to PREA Standard §115.87. The PREA Coordinator acknowledged that the data collected is securely retained and the agency takes corrective action on an ongoing basis based on the collected data. The PREA Coordinator confirmed the preparation of an annual report, and it is submitted to the Facility Administrator and Program Directors and Vice President of Gateway Corrections for review and approval. The PREA Coordinator confirmed the agency redacts sensitive information and all public data information.

The Auditor conducted an interview with the Agency Head Designee and inquired how the agency uses incident-based sexual abuse data to assess and improve sexual abuse prevention, detection, and response policies, practices, and training. The Agency Head Designee explained that sexual abuse data is collected annually and utilized to complete the Survey of Sexual Victimization. The Auditor inquired as to who is responsible for approving annual reports written pursuant to §115.88. The Agency Head Designee confirmed the Facility Administrator and Program Director and Vice President of Gateway Corrections are both responsible for reviewing and approving the annual PREA report.

	<p>Upon review of the policy, Annual Reports, and upon completion of interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.289	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Document Review:</p> <p>HCRTC PAQ</p> <p>Harris County Residential Treatment Center, <i>PREA Policy</i></p> <p>Harris County Residential Treatment Center, Annual Reports</p> <p>Interviews conducted with:</p> <p>PREA Coordinator</p> <p>Findings (By Provision):</p> <p>115.289 (a) - Harris County Residential Treatment Center, <i>PREA Policy</i> states the PREA Coordinator shall retain all records of reports, investigations, and responses in a secure manner.</p> <p>115.289 (b) - This provision does not apply to HCRTC.</p> <p>115.289 (c) - Harris County Residential Treatment Center, <i>PREA Policy</i> states the publicly available report will have personal identifying information redacted, including names, ages, ethnicities, and position titles of victims and perpetrators. Any other information to be redacted must be limited information that would pose a potential threat to safety and security. The nature of any redactions will be noted in the public version.</p>

	<p>115.289 (d) – Harris County Residential Treatment Center, <i>PREA Policy</i> states the Manager of Residential Services shall retain copies of annual PREA Summary reports for ten years.</p> <p>The Auditor reviewed two years of Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Harris County Residential Treatment Center, publishes the reports on the Gateway Foundation website https://corrections.gatewayfoundation.org/prea-resources/reporting/</p> <p>The Auditor conducted an interview with the PREA Coordinator regarding how data is collected pursuant to PREA Standard §115.87. The PREA Coordinator acknowledged that the data collected is securely retained and the agency takes corrective action on an ongoing basis based on the collected data.</p> <p>Upon review of the policy and upon completion of interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.401 (a) – During the prior three-year audit period, the agency ensured that each facility operated was audited, once.</p> <p>115.401 (b) – Harris County Residential Treatment Center had its first PREA audit conducted on January 27 – 28, 2022; the third year of the third three-year auditing cycle. This was the facility's second PREA audit and was conducted on January 8 – 9, 2025; the third year of the fourth three-year auditing cycle.</p> <p>115.401 (h) – The Auditor was granted complete access to, and the ability to observe, all areas of the facility.</p>

	<p>115.401 (i) - The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p>115.401 (m) - The Auditor was permitted to conduct private interviews with residents and staff.</p> <p>115.401 (n) - The Auditor verified through resident and staff interviews that residents and staff were permitted to send confidential correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p> <p>Upon review of the policy and upon completion of interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.403 (b) - Harris County Residential Treatment Center, publishes all PREA Audit Reports for all facilities within the Gateway Foundation on the agency website. HCRTC has published the prior PREA Audit Reports on the agency website. The Auditor reviewed the prior PREA Audit Report (January 2022) for HCRTC.</p> <p>Upon review of the policy and upon completion of interviews, HCRTC demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.</p>

Appendix: Provision Findings		
115.211 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.211 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities?	yes
115.212 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.212 (b)	Contracting with other entities for the confinement of residents	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.212 (c)	Contracting with other entities for the confinement of residents	
	If the agency has entered into a contract with an entity that fails to comply with the PREA standards, did the agency do so only in	na

	emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	
	In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	na
115.213 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect residents against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The physical layout of each facility?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the resident population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.213 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (NA if no deviations from staffing plan.)	na
115.213 (c)	Supervision and monitoring	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to prevailing	yes

	staffing patterns?	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels?	yes
115.215 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.215 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
115.215 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female residents?	yes
115.215 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enable residents 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?	yes
	Does the facility have procedures that enable residents to shower,	yes

	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?	
	Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?	yes
115.215 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If the resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.215 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.216 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are blind or have low vision?	yes

	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes
115.216 (b)	Residents with disabilities and residents who are limited English proficient	

	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.216 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations?	yes
115.217 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of	yes

	force, or coercion, or if the victim did not consent or was unable to consent or refuse?	
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
115.217 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with residents?	yes
	Does the agency consider any incidents of sexual harassment in determining to enlist the services of any contractor who may have contact with residents?	yes
115.217 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.217 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
115.217 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes
115.217	Hiring and promotion decisions	

(f)		
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.217 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.217 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.218 (a)	Upgrades to facilities and technology	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012 or since the last PREA audit, whichever is later.)	na
115.218 (b)	Upgrades to facilities and technology	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the	yes

	agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)	
115.221 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.221 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.221 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.221 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.221 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.221(d) above).	yes

115.222 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.222 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.222 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for conducting criminal investigations. See 115.221(a).)	yes
115.231 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with	yes

	residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.231 (b)	Employee training	
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.231 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training,	yes

	does the agency provide refresher information on current sexual abuse and sexual harassment policies?	
115.231 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.232 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.232 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.232 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.233 (a)	Resident education	
	During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?	yes

	During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?	yes
	During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?	yes
115.233 (b)	Resident education	
	Does the agency provide refresher information whenever a resident is transferred to a different facility?	yes
115.233 (c)	Resident education	
	Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills?	yes
115.233 (d)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.233 (e)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.234 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.231, does the agency ensure that, to the extent	yes

	the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	
115.234 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing sexual abuse victims?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
115.234 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a).)	yes
115.235 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.235 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.)	na
115.235 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.235 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	yes
	Do medical and mental health care practitioners contracted by	yes

	and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	
115.241 (a)	Screening for risk of victimization and abusiveness	
	Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
	Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
115.241 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.241 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.241 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization:	yes

	Whether the resident's criminal history is exclusively nonviolent?	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the resident about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the resident is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident's own perception of vulnerability?	yes
115.241 (e)	Screening for risk of victimization and abusiveness	
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes
115.241 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the resident's arrival at the facility, does the facility reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.241 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess a resident's risk level when warranted due to a: Referral?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Request?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness?	yes
115.241 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that residents are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.241 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes
115.242 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes

	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.242 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each resident?	yes
115.242 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.242 (d)	Use of screening information	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.242 (e)	Use of screening information	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes
115.242	Use of screening information	

(f)		
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: transgender residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.251 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.251 (b)	Resident reporting	

	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
115.251 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.251 (d)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.252 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.252 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve	yes

	with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	
115.252 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.252 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.252 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf	yes

	of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes
115.252 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.252 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to	yes

	alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	
115.253 (a)	Resident access to outside confidential support services	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility enable reasonable communication between residents and these organizations, in as confidential a manner as possible?	yes
115.253 (b)	Resident access to outside confidential support services	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.253 (c)	Resident access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.254 (a)	Third party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.261 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or	yes

	information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.261 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.261 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform residents of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.261 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.261 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.262 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.263 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.263 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.263 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.263 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.264 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate,	yes

	washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.264 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.265 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.266 (a)	Preservation of ability to protect residents from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no
115.267 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes

	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.267 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.267 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency:4. Monitor resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor resident program changes?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignment of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.267 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.267 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.271 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
115.271 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.234?	yes
115.271 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.271 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.271 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.271 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.271 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.271	Criminal and administrative agency investigations	

(h)		
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.271 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.271 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes
115.271 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.221(a).)	yes
115.272 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.273 (a)	Reporting to residents	
	Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.273 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency	yes

	request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	
115.273 (c)	Reporting to residents	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.273 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform	yes

	the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.273 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes
115.276 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.276 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.276 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.276 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.277 (a)	Corrective action for contractors and volunteers	

	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.277 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes
115.278 (a)	Disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, are residents subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.278 (b)	Disciplinary sanctions for residents	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
115.278 (c)	Disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.278 (d)	Disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending resident to participate in such interventions as a	yes

	condition of access to programming and other benefits?	
115.278 (e)	Disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.278 (f)	Disciplinary sanctions for residents	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.278 (g)	Disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.282 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.282 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.282 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information	yes

	about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	
115.282 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.283 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.283 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.283 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.283 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive	yes

	information about and timely access to all lawful pregnancy-related medical services? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	
115.283 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.283 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.286 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.286 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.286 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.286 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.286 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.287 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.287 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.287	Data collection	

(c)		
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.287 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.287 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	na
115.287 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.288 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

115.288 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.288 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.288 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.289 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.287 are securely retained?	yes
115.289 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.289 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.289 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes

115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with residents?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the	yes

	same manner as if they were communicating with legal counsel?	
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes