

# PREA AUDIT: AUDITOR'S SUMMARY REPORT

## ADULT PRISONS & JAILS



**[Following information to be populated automatically from pre-audit questionnaire]**

<b>Name of facility:</b>		Cleveland Correctional Center	
<b>Physical address:</b>		901 East 5 <sup>th</sup> Street, Cleveland, Texas 77327	
<b>Date report submitted:</b>		April 9, 2015	
<b>Auditor Information</b>		Barbara Jo Denison	
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<b>Date of facility visit:</b>		March 31 – April 2, 2015	
<b>Facility Information</b>			
<b>Facility mailing address: (if different from above)</b>		Post Office Box 1678, Cleveland, Texas 77328	
<b>Telephone number:</b>		281-592-9559	
<b>The facility is:</b>	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input checked="" type="checkbox"/> Federal
	<input checked="" type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
<b>Facility Type:</b>	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
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<b>Agency Information</b>			
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<b>Governing authority or parent agency: (if applicable)</b>			
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<b>Agency-Wide PREA Coordinator</b>		
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## **AUDIT FINDINGS**

### **NARRATIVE:**

Barbara Jo Denison, Certified PREA Auditor, conducted the PREA audit of the Cleveland Correctional Center on March 31 – April 2, 2015. Prior to the audit the PREA Compliance Manager/Compliance Administrator provided the auditor with policies, procedures and supporting documentation related to each standard for review. Ongoing communication was held with the PREA Compliance Manager and the PREA Coordinator during this review period in preparation for the on-site visit. Prior to the audit the auditor was supplied with a list of offenders sorted by housing unit, as well as a list of facility custody and non-custody staff. From these lists, offenders and staff were randomly selected to be interviewed during the audit. On the first day of the audit an entrance meeting was held at 8:50 a.m. – 9:05 a.m. with the following people in attendance: Virgil Jordan Warden; Jimmy Bingham, Major; Henry Culley, Captain; Donald Williams, Lieutenant, June Petty, Sergeant; Walter Mason, Administration Sergeant; Phebia Moreland, GEO Director, Contract Compliance/PREA Coordinator; Sherry Montgomery, PREA Compliance Manager; Linda McKee, Bookkeeper; Lee DeLeon, Human Resources Specialist; Matthew Denison, Business Manager; Joni McDaniel, Warden’s Secretary; Travis Boyd, Lockhart Unit Compliance Administrator; Daisy Clark, Lockhart Unit Assistant Warden, Kenneth Gaston, TDCJ Deputy Director of Operations, Private Facilities Oversight Division; Paul Wilder, TDCJ Regional Supervisor of Contract Monitors; and, Cody Young, TDCJ On-Site Contract Monitor.

Following the entrance meeting, a tour of the facility was conducted from 9:15 a.m. – 11:30 a.m. The executive team and the PREA Coordinator accompanied the auditor on the tour. All housing units and all areas where offenders program, work and are allowed access to were toured. While touring 20 offenders and 15 staff members were informally interviewed and questioned about their knowledge of PREA. There were no findings on the tour requiring corrective action.

Twenty-two offenders were formally interviewed; one from each housing unit. Included in that number were five Spanish-speaking offenders. At the time of the audit there were no offenders who self-disclosed being gay, bisexual, transgender or intersex. There were also no offenders who were identified from intake screening to be potentially vulnerable or possible predators and none that were hearing or visually impaired. All offenders interviewed were knowledgeable of the agency’s zero-tolerance policy and knew how to report allegations of sexual abuse if it were to happen to them or if they witness it happening to someone else.

Twenty-nine staff was formally interviewed in the course of the audit. This number includes three contractors and two volunteers. The number also includes one supervisor and four correctional officers from both shifts and selected specialized staff. There are no SAFE or SANE at the facility; they are available by a Memorandum of Understanding with Memorial Medical Center in Livingston, TX. Staff

interviewed was well versed in their responsibilities in reporting sexual abuse and suspected sexual abuse. When questioned about evidence preservation, staff responses reflected agency policies and standard requirements. In the past 12 months, there have been no allegations of sexual abuse or sexual harassment reported at the Cleveland Correctional Center.

An exit briefing was held at the conclusion of the audit. The same people that were at the entrance meeting attended the exit briefing.

## **DESCRIPTION OF FACILITY CHARACTERISTICS:**

The Cleveland Correctional Center was an existing facility when GEO took over operational responsibility of the facility January 1, 1999. The facility accepts minimum security adult male offenders from TDCJ who are within three years of parole. GEO provides programs and services that include academic education programs, vocational training, facility work assignments, a community service squad, cognitive and life skills/pre-release training, counseling services, food services, indoor and outdoor recreation, transportation, visitation, and religious programs. GEO also provides a library, a commissary and television and radio availability. GEO's responsibility is to maintain the physical structure and tangible property in good repair and working order and ensure that the facility meets all applicable safety and fire codes.

GEO's mission is "to develop innovative public-private partnerships with government agencies around the globe that deliver high quality, cost-efficient correctional, detention, community reentry, and electronic monitoring services while providing industry leading rehabilitation and community reintegration programs to the men and women entrusted to GEO's care".

The Cleveland Correctional Center is a 520-bed all cellblock construction housed in a single two-story building built in 1989. Then population on the first day of the audit was 514. The secure part of the facility includes 12.57 acres and is enclosed by a 12-foot wire mesh fence with posts embedded in concrete and reinforced with two strands of razor wire barrier on top. The main building is 124,087 sq. ft. and beyond the administration area is laid out at a 90-degree angle of two main hallways. The building has five cellblocks housing 56 inmates, six cellblocks housing 40 inmates, nine pre-hearing detention (PHD/Transient cells, a dining hall that seats 180 inmates, twelve day rooms and an inside gym. Each day room has two televisions, tables seating four and games. The 12,000 sq. ft. gymnasium includes basketball courts, a shuffleboard area, and covered seating. The other has track, baseball, handball, volleyball, weights, and horseshoes. Programming space includes five classrooms, one vocational classroom and two Prison Entrepreneurship Program (PEP) classrooms.

Medical services are provided through a contract with Texas Department of Criminal Justice (TDCJ) and the University of Texas Medical Branch (UTMB).

## **SUMMARY OF AUDIT FINDINGS:**

Number of standards exceeded:	4
Number of standards met:	36
Number of standards not met:	0
Non-applicable:	3

### **§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO policy 5.1.2 is a written plan mandating zero tolerance towards all forms of sexual abuse and sexual harassment which outlines the agency's approach to preventing, detecting and responding to such conduct. On page 6, section III-B of the policy the responsibilities of the PREA Coordinator and PREA Manager can be found. In interview with the PREA Coordinator and the PREA Compliance Manager, both indicated that they have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

### **§115.12 - Contracting with other entities for the confinement of inmates**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Not Applicable

GEO is a private provider and does not contract with other agencies for the confinement of offenders; therefore this standard is not applicable.

### **§115.13 – Supervision and Monitoring**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Based on GEO policy 5.1.2-A, page 7 section III, C-1 and the TDCJ Safe Prisons/PREA Plan, pages 10 & 11, section II, D, 1-3, the agency has developed, documented and made its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and uses video monitoring to protect offenders against sexual abuse. A contract between TDCJ and GEO issued on 4/24/08, page 16, section C.4.2, states that the contractor must provide sufficient staffing in accordance to the staffing plan. The PREA Manager, the Chief of Security/Major and the Warden completed a PREA Annual Facility Assessment on 10/22/13 and a copy was forwarded to the GEO Regional Vice President and the PREA Coordinator. This assessment noted no recommendations for changes to the staffing plan. The 2014 PREA Annual Facility Assessment completed on 9/23/14, showed no recommendations for changes as well. In the past 12 months there have been no deviations to the established staffing plan as confirmed by interview of the Warden.

The policy in place provides for a practice of unannounced rounds being conducted and documented on the Daily Shift Rosters. The Post Orders of a Lieutenant outlines in the procedures the practice of unannounced rounds in all buildings and housing units. This practice was confirmed by interview of the offenders, correctional staff and supervisors who all reported numerous rounds being conducted on a daily basis.

### **§115.14 – Youthful Inmates**

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

X Not Applicable

The Cleveland Correctional Facility is an adult male facility and does not house youthful offenders; therefore, this standard is not applicable.

### **§115.15 – Limits to Cross-Gender Viewing and Searches**

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

There have been no incidences of cross-gender strip searches or cross-gender visual body cavity searches in the past 12 months. Policy 5.1.2-A, page 15, section III, I, Safe Prison/PREA Operations Manual, page 1 and AD 03.22, pages 2 & 3, section I & II addresses offender searches including searches of transgender and intersex offenders. All staff receives training through pre-service and annually in in-service training. Unit staff is required to document all searches on a Strip Search Log.

The agency has policies and procedures in place that enable offenders to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their buttocks or genitalia. Females announce themselves when they enter the housing units. Offenders interviewed confirmed that this practice is being adhered to and indicated that they feel they have privacy when female staff is in their housing unit. The camera monitors were reviewed and showed that if female staff were to review these monitors, camera placement would allow for privacy.

### **§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient**

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

The agency takes appropriate steps to ensure that offenders with disabilities and offenders that are limited English proficient have an opportunity to participate and benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and harassment. Policy 5.1.2-A, page 10, section II-E and the Safe Prison/PREA Plan, page 32, section VI, 1 & 4, were used to verify compliance to this standard. The Orientation Handbook, posters, and brochures provided to the offenders are written in both English and Spanish. Qualified certified staff interpreters are available for Spanish-speaking offenders. A Language Line Service is available for translation of other languages. A TTD is available for the hearing-impaired offenders. The agency prohibits the use of offender interpreters, offender readers or other types of offender assistants. Five Spanish-speaking offenders were interviewed. They all reported receiving all PREA information in Spanish and were knowledgeable about methods of reporting sexual abuse and sexual harassment.

### **§115.17 – Hiring and Promotion Decisions**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

In review of GEO policy 5.1.2-A, pages 7 & 8, section III, C-2 and the TDCJ Safe Prison/PREA Plan, pages 38 & 39, section VIII, A & C, the agency does not hire or promote anyone who may have contact with offenders, and does not enlist the services of any contractor who may have contact with offenders who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution, has been convicted of engaging or attempting to engage in sexual activity in the community by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refused. The agency considers any incidents of sexual harassment in determining whether to hire or promote anyone or to enlist the services of any contractor, whether they may have contact with offenders or not.

In interview with the Human Resources Specialist, criminal background checks are completed on all applicants, contractors and volunteers by TDCJ through NCIC and DPS for criminal history. If an applicant answers on his/her application for employment that he/she has worked in a confinement facility previously, GEO has a contract with Accurate Background, Inc. to check for any past sexual misconduct that may have occurred. For consideration for promotions, employees complete a *PREA Disclosure and Authorization Form Promotions – PREA Related Positions* and another background check by Accurate Background Inc. is completed. At the time of annual performance evaluations, all employees complete a *PREA Disclosure and Authorization Form Annual Performance Evaluation*.

Background checks every five years are not required as there is continuous monitoring through a Flash Reporting system. Automatic notifications of any arrests are e-mailed to the Warden and the TDCJ Contract Monitor.

### **§115.18 – Upgrades to Facilities and Technology**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

X Not applicable

According to GEO policy 5.1.2-A, page 8, section III, A-3 and the TDCJ Safe Prison/PREA Plan, page 11, section 11, D-4 & 5, facilities shall consider the effect any new or upgrade design, acquisition, expansions or modifications of physical plant or monitoring technology might have on the facility's ability to protect offenders from sexual abuse.

This standard was found to be not applicable since there have not been any substantial new monitoring technology installed and the facility has not acquired a new facility or any expansion to the existing facility since August 20, 2012.

### **§115.21 – Evidence Protocol and Forensic Medical Examinations**

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

According to GEO policy 5.1.2-E, pages 6-10, section III, D-K and the TDCJ Safe Prisons/PREA Plan, pages 13 & 14, section II, F & G, and the facility follows a uniform evidence protocol that maximizes the potential for usable physical evidence for administrative and criminal prosecutions. The facility investigators are responsible for conducting administrative investigations and OIG is responsible for conducting criminal sexual abuse investigations.

Forensic examinations are not performed at this facility. An MOU effective 2/23/15 with the Rape Crisis Center, SAAFE House in Livingston, TX provides for SANE exams to be performed at the Memorial Medical Center, Livingston, TX at no cost to the offender. In the past 12 months, there have been no offenders that required SANE exams.

SAAFE House provides emotional support for victims of sexual abuse and the facility Chaplain is the Victim Services Coordinator and is available to provide victims of sexual abuse support services as well.

### **§115.22 – Policies to Ensure Referrals of Allegations for Investigations**

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO policy 5.1.2-E, page 4, section III, A and the TDCJ Safe Prisons/PREA Plan, page 25, section V, A-3 & 4 and page 26, section C-1, outline the agency's policy and procedure for investigating and documenting incidents of sexual abuse. All allegations of sexual abuse are referred to the agency's Office of Professional Responsibility (OPR). The facility also is required to notify the TDCJ Emergency Action Center and OIG within one hour of receiving the allegation. The agency's policy regarding referral of allegations for sexual abuse and sexual harassment for criminal investigations is available on the GEO website.

### **§115.31 – Employee Training**

X Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO employees receive training on the agency's zero tolerance policy for sexual abuse and sexual harassment at pre-service and annually at in-service training. Employees sign an acknowledgement form that they have received and understood the training they received. GEO policy 5.1.2-A, pages 11 & 12, section III, F and the TDCJ Safe Prisons/PREA Plan, pages 32-34, section VI, B & C, address the agency's training requirements. The PREA training curriculum was reviewed and verified that the training provided to employees is very comprehensive and meets all elements of this standard. In interview with staff, they were able to confirm receiving this training and knew their responsibilities for preventing and responding to allegation of sexual abuse.

### **§115.32– Volunteer and Contractor Training**

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO policy 5.1.2-A, pages 13 & 14, section III, G & H and the TDCJ Safe Prisons/PREA Plan, page 34, section VI, D and page 39, section VIII, B outlines the training requirements for volunteers and contractors. The objectives of the training ensures that volunteers and contractors are notified of the agency's zero tolerance policy regarding sexual abuse and sexual harassment and are informed of how to report such incidents. Volunteers are trained by TDCJ and information about completed training conducted every two years is available on the TDCJ mainframe. The PREA Manager provides annual training to contracted UTMB, Lee College and PEP staff. Random training files were reviewed and it was confirmed that the facility is maintaining documentation of contractors' training. In the past 12 months, six UTMB staff, two Lee College staff and two PEP volunteers have received the training. Both contractors and volunteers interviewed confirmed that they received this training and understood their responsibilities under the agency's sexual abuse and sexual harassment policy.

### **§115.33 – Inmate Education**

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO policy 5.1.2-A, page 11, section III, 2 and the TDCJ Safe Prisons/PREA Plan, page 32, section VI, A, were used to verify compliance to this standard. Incoming offenders during the



intake process are provided with educational information explaining the zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents of sexual abuse and sexual harassment. All information is provided in both English and Spanish. Offenders sign training rosters that are maintained in the Unit Safe Prisons/PREA Compliance Managers (USPPCM) office and this information is entered into the offender's ITP. New offenders' ITP's are reviewed prior to them arriving at the facility. If the ITP does not note them receiving the Sexual Assault Awareness training or the PREA video, the offenders are shown the video.

Posters regarding sexual abuse and sexual harassment prevention and methods of reporting were prominently displayed throughout the facility in both English and Spanish.

### **§115.34 – Specialized Training: Investigations**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Based on GEO policy 5.1.2-A, page 13, section III, F-3, the facility's investigators receive specialized training in addition to the general education provided to all employees. The PREA Coordinator provides a four-hour specialized investigator training webinar. The Major is the lead investigator and the Captain, Lieutenant, and PREA Manager have received this training. The training curriculum was reviewed and found to be very comprehensive. Upon interview of the PREA Manager, the Captain and the PREA Manager, they confirmed receiving this training and were all very knowledgeable of their responsibilities in conducting sexual abuse investigations.

### **§115.35 – Specialized training: Medical and mental health care**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

UTMB provides specialized training for all their medical staff assigned to the Cleveland Correctional Center. There is no mental health staff assigned to this facility. Providers who have also received this specialized training provide all mental health services via DMS. The PREA Manager maintains copies of training rosters of this specialized training that confirmed that all six UTMB medical staff has received this training. The staff is trained on how to detect signs of sexual abuse, how to preserve physical evidence and how to respond effectively and professionally to victims of sexual abuse, as well as how to report allegations of sexual abuse and sexual harassment. In interview with the RN/Nursing Supervisor and the LVN, they acknowledged receiving this specialized training and knew their responsibilities as outlined in GEO policy 5.1.2-A, pages 12 & 13, section III, F-2 and TDCJ Safe Prisons/PREA Plan, page 35, section VI, D-4-6.

The facility's medical staff does not conduct forensic examinations. SANE exams are conducted at Memorial Medical Center in Livingston, TX.

### **§115.41 – Screening for Risk of Victimization and Abusiveness**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Based on GEO policy 5.1.2-A, pages 8 & 9, section F-2 and the TDCJ Safe Prisons/PREA Plan, pages 16 & 17 section III, B-2-4, the agency and TDCJ require that offenders be screened upon admission for risk of sexual abuse victimization or sexual abusiveness toward other offenders. The TDCJ *Offender Assessment Screening* form is used to screen offenders upon their arrival to the facility and contains all requirements of 115.41 (d) of this standard. The Major or the Warden completes this screening with the offender. Offenders may not be disciplined for refusing to answer any questions or for not disclosing complete information. Within 30 days, the PREA Manager completes a *PREA Vulnerability 30-Day Reassessment Questionnaire* form with the offender to reassess his risk of victimization or abusiveness.

### **§115.42 – Use of Screening Information**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency uses the information from the risk screening form to make housing, bed, work and program assignments with the goal of separating offenders at high risk of being sexually victimized from offenders at high risk of being sexually abusive. On interview with the Warden, he explained how the facility utilizes the information from the *Offender Assessment Screening* form.

Guidelines on housing and program assignments and for the management of transgender and intersex offenders are outlined in GEO policy 5.1.2-A, page 10, section III, D-3 and in the TDCJ Safe Prisons/PREA Plan, pages 18 & 19, section III, C.

The agency does not place lesbian, gay, bisexual, transgender or intersex offenders in housing units solely based on their sexual orientation. Transgender and intersex offenders will be given the opportunity to shower separately from other offenders.

### **§115.43 – Protective Custody**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

According to GEO policy 5.1.2-A, page 16, section III, J-1 and the TDCJ Safe Prison PREA Operation Manual, page 3, section F, involuntary segregated housing may be used only after an assessment of all available housing alternatives has shown that there are no other means of protecting the offender. If an assessment cannot be made immediately, the offender may be placed in involuntary segregated housing for no more than 24 hours. Attachment A, *Sexual Assault/Abuse Available Alternates* form is used to document the assessment. If involuntary

segregated housing is used for the safety of the offender as a means of separation, it can be used for no more than 30 days. In cases where placement exceeds 30 days, the facility will review the status every 30 days to determine if this placement continues to be appropriate. On interview with the Warden, compliance to this standard was verified.

### **§115.51 – Inmate Reporting**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO Policy 5.1.2-A, page 17, section III, K-1 and the TDCJ Safe Prisons/PREA Plan pages 20 & 21, section IV-A; page 22, section B-1 and page 23 section IV, B-1, outline the procedures for offender reporting. The agency provides multiple ways for offenders to privately report sexual abuse and sexual harassment and retaliation by other offenders or staff for reporting sexual abuse and sexual harassment. Offenders are made aware of how to contact the Major, OIG and the TDCJ PREA Ombudsman through posters, the Orientation Handbook and TDCJ brochures. Family members and other outside individuals can report verbally or in writing to unit administration, the TDCJ PREA Ombudsman office or OIG. GEO staff is provided with methods of reporting privately as well.

The agency's policy mandates that staff accept all reports of sexual assault and sexual harassment made verbally, in writing, anonymously and from third parties. Staff and offender interviews verified that they are aware that they can report verbally, in writing or through a report of a third party. Staff also verified that they have access to private reporting.

GEO does not detain individuals solely for civil immigration purposes.

### **§115.52 – Exhaustion of Administrative Remedies**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

In review of policy 5.1.2-A, pages 17 & 18, section III, K-2; the Safe Prison/PREA Plan, pages 21 - 23, section IV-A; and the TDCJ Grievance Manual, section OGOM-1.04, there is a procedure in place for offenders to submit grievances regarding sexual abuse and the agency has procedures for dealing with these grievances. There is no time limit on when an offender may submit a grievance regarding an allegation of sexual abuse. Grievances may also be submitted by third parties on behalf of an offender. Emergency grievances may be filed if the offender feels he is at substantial risk of imminent sexual abuse. The PREA Manager receives all copies of grievances related to sexual abuse and sexual harassment for monitoring purposes. In the past 12 months, there have been no grievances filed related to sexual abuse or sexual harassment.

### **§115.53 – Inmate Access to Outside Confidential Support Services**

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

As stated in GEO policy 5.1.2-A, pages 23 & 24, section III, L-8 and the TDCJ Safe Prison/PREA Plan, page 12, section II, E-1 and page 13, section II, E-3-a, offenders are provided with access to outside victim advocates for emotional support. An MOU with SAAFE House provides offenders with confidential support services. The Chaplain is the Offender Victim Representative on the unit and is available to provide emotional support services as well.

### **§115.54 – Third-Party Reporting**

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Based on policy 5.1.2-A, page 18, section III, K-3 and the Safe Prison/PREA Plan, page 23, section IV-B, the agency has a method to receive third party reports of sexual abuse and sexual harassment. Family members or other individuals may report verbally, in writing any time they have knowledge or suspect an offender has been sexually abused, sexually harassed, or requires protection. Outside parties can report verbally or in writing to the unit administration, the TDCJ Ombudsman office, OIG or the PREA Ombudsman. Information for third party reporting can be found on the GEO website at [www.geogroup.com](http://www.geogroup.com). Offenders interviewed were aware of this method of reporting.

### **§115.61 – Staff and Agency Reporting Duties**

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

As outlined in GEO policy 5.1.2-A, pages 13 & 14, section III, G-2; pages 18 & 19, section III, K-4 and in the GEO PREA training curriculum, all staff, contractors and volunteers are to report immediately any knowledge or information regarding an incident of sexual abuse or sexual harassment. Any retaliation or suspected retaliation against offenders or staff is also to be reported immediately. Interviews with staff, contractors and volunteers revealed that they are very aware of their reporting responsibilities and know not to reveal any information about sexual abuse incidents to anyone other than to the extent necessary.

The Cleveland Correctional Center houses adult male offenders, none of whom according to their classified level of care are considered vulnerable adults under the State Vulnerable Persons Statute.

### **§115.62 – Agency Protection Duties**

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

When the agency learns that an offender is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the offender. Policy 5.1.2-A, page 19, section III, L, outlines the agency's procedures related to its efforts to protect offenders at risk for sexual abuse. In interview with the Warden, there were no times during the past 12 months that it was necessary for the agency to take immediate action in regards to an offender being in substantial risk of sexual abuse. Correctional staff interviewed was aware of their responsibilities if they felt an offender was at risk for sexual abuse.

### **§115.63 – Reporting to Other Confinement Facilities**

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Based on GEO policy 5.1.2-A, page 22, section L-5 and the TDCJ Safe Prison/PREA Plan, page 24, section IV-D, there is procedures in place if an allegation is received that an offender was sexually abused while confined at another facility. The facility is to document the allegation and the Warden is required to notify the Warden of the facility of where the abuse is alleged to have occurred as soon as possible, but no later than 72 hours. This information is required to be shared with the PREA Manager and the PREA Coordinator who ensure that the allegation is investigated in accordance with the PREA standards. The Warden reported during interview that there have been no incidents of this occurring in the past 12 months.

### **§115.64 – Staff First Responder Duties**

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO policy 5.1.2-A, pages 19-22, section III, L-2-4 and the TDCJ Safe Prison/PREA Plan, pages 25 & 26, section V, were used to verify that there is a plan to coordinate actions taken in response to an incident of sexual abuse. Correctional and non-correctional staff interviewed where knowledgeable of the policy and the practice to follow. They reported that they knew that the alleged victim and abuser must be separated, how to preserve the crime scene and evidence. There have been no allegations of sexual abuse reported in the past 12 months.

### **§115.65 – Coordinated Response**

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO policy 5.1.2-A, pages 5 & 6, section III, A-4, outlines the plan to coordinate actions of staff first responders, medical and mental health staff, investigators and facility administration in response to incidents of sexual abuse. TDCJ Safe Prison/PREA Operations Manual, 05.01 procedures state that allegations of sexual abuse require the coordinated efforts of security staffs, OIG, medical and mental health staff and victim advocates and outlines what procedures are to be followed. In the past 12 months, there have been no allegations of sexual abuse. Specialized staff interviewed confirmed that they are knowledgeable of the plan and the necessary actions to be taken.

### **§115.66 – Preservation of ability to protect inmates from contact with abusers**

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO policy 5.1.2-A, page 5, section III-A-3 and the TDCJ Safe Prison/PREA Plan, page 39, section VII-A-8 & 9 were used to verify compliance to this standard. In all cases of abuse by staff, contractors or volunteers, the abuser will be subject to disciplinary sanctions for violating GEO and TDCJ policies on sexual abuse and sexual harassment. The Cleveland Correction Center does not have a collective bargaining unit. GEO would not enter into any collective bargaining agreement at any of its facilities that would limit a facility's ability to remove an alleged sexual abuser from contact with offenders pending the outcome of an investigation.

### **§115.67 – Agency protection against retaliation**

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO policy 5.1.2-A, pages 24 & 25, section III, M-2 and TDCJ Safe Prisons/PREA Plan, pages 23 & 24 section IV-C, state that offenders and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations will be protected from retaliation from other offenders and staff. The PREA Manager is responsible for monitoring for retaliation. Monitoring continues for at least 90 days and beyond 90 days if warranted. The PREA Manager when interviewed was knowledgeable of the procedure for monitoring for retaliation for both offenders and staff.

### **§115.68 – Post-Allegation Protective Custody**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency prohibits offenders who have alleged sexual abuse to be placed in involuntary segregated housing. If segregated housing is used, the provision outlined in GEO policy 5.1.2-A, page 23, section III, L-6 and page 16, section III, J; as well as the TDCJ Safe Prisons/PREA Plan, pages 18 & 19, section III, C-3-7, would apply. Interview of the Warden and staff assigned to restrictive housing revealed that involuntary segregated housing has not been used for this purpose in the past 12 months.

### **§115.71 – Criminal and Administrative Agency Investigations**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency has policies governing administrative and criminal investigations of sexual abuse. Administrative investigations are the responsibility of the Major, a Captain, A lieutenant and the PREA Manager who have all had extensive specialized investigative training by the PREA Coordinator. When interviewed they were knowledgeable in their responsibilities in conducting administrative investigations of allegations of sexual abuse. OIG is the investigative organization responsible for all TDCJ criminal offenses, including sexual abuse investigations. Facility investigators conduct investigations immediately if notified of an allegation of abuse and follow the procedures outlined in GEO policy 5.1.2-E, page 4-6, section III, sections B & C. In the past 12 months, there have been no allegations of sexual abuse received.

### **§115.72 – Evidentiary Standard for Administrative Investigations**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

According to GEO policy 5.1.2-E, page 6, section III, B, 2-d, the facility shall impose not standard higher than the preponderance of the evidence in determining whether allegations of sexual abuse or harassment are substantiated. When the Investigators interviewed were asked what standard of evidence was used in determining if an allegation is substantiated, they confirmed the agency's policy.

### **§115.73 – Reporting to Inmate**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO policy 5.1.2-E, page 10 & 11, section III, K and TDCJ Safe Prisons/PREA Operations Manual, 05.10, section I were used to verify compliance to this standard. The policies indicate that proper notification be given to offenders as to the outcome of the investigation of sexual abuse and sexual harassment allegations if the outcome proved to be substantiated, unsubstantiated or unfounded. Attachment D of the GEO policy 5.1.2-E, available in English and Spanish is presented to the offender at the conclusion of an investigation. Based on interview with the Warden and PREA Manager, this process is in place and notifications would be made as required by policy.

### **§115.76 – Disciplinary sanctions for staff**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Staff shall be subject to disciplinary sanctions up to and including termination for violating the agency's and TDCJ's sexual abuse policies as outlined in GEO policy 5.1.2-E, page 11, section III, L, the TDCJ Safe Prisons/PREA Plan, pages 38 & 39, section VIII, A-6 & 7 and the Employee Handbook. In the past 12 months, there have been no staff that have been terminated or resigned prior to termination for violating the sexual abuse or sexual harassment policies.

### **§115.77 – Corrective action for contractors and volunteers**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO policy 5.1.2-A, page 14, section III, H-3, TDCJ Safe Prisons/PREA Plan, page 39, section VIII, B and the TDCJ Handbook for Volunteers all state that any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to law enforcement agencies. In interview with the Warden, there have no incidences of sexual abuse by contractors or volunteers. If it were to occur, appropriate remedial actions would be taken.

### **§115.78 – Disciplinary sanctions for inmates**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

As per GEO policy 5.1.2-E, pages 11 & 12, section III, L-2, offenders found guilty of engaging in sexual abuse involving other offenders shall be subject to formal disciplinary sanctions.

Disciplining an offender for engaging in sexual activity with an employee is prohibited unless the



employee did not consent to the contact. The TDCJ Safe Prisons/PREA Plan Appendices section A-1 lists offenses of sexual misconduct that offenders will be disciplined for. In the past 12 months, there have been no incidents of disciplinary sanctions imposed on offenders for violation of sexually related misconduct.

### **§115.81 – Medical and mental health screenings; history of sexual abuse**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Upon intake, mental health staff will see any offender who is assessed to be at risk for sexual victimization or abusiveness or who has previously experienced prior sexual victimization or previously perpetrated sexual abuse. GEO policy 5.1.2-A, pages 9 & 10, section III, D-2 and TDCJ Safe Prisons/PREA Plan, page 14, section II-G and pages 17 & 18, section III, B-6, 7 and 8, outline the procedure for referral to mental health. Mental health services are available via DMS. The Major, who is responsible for intake screening and the RN/Nursing Supervisor, verified that this process is in place.

### **§115.82 – Access to emergency medical and mental health services**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO policy 5.1.2-A, page 23, section III, L-7 and the TDCJ Safe Prisons/PREA Plan, page 13, section II, F, mandate that victims for sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention. All services are provided without cost to the victim. Offenders in need of SANE exams are taken to the Memorial Medical Center in Livingston, TX. In interview with the RN/Nursing Supervisor and the LVN confirmed this practice and that the requirements of the standard are adhered to. In the past 12 months, there has been no access to emergency medical and mental services required.

### **§115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers**

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO policy 5.1.2-A, page 24, section III, M and the TDCJ Safe Prisons/PREA Plan, page 14, section II, G and interview with the RN/Nursing Supervisor were used to verify compliance to this standard. The facility offers medical and mental health evaluation and treatment to all offenders who victimized by sexual abuse. Victims will be offered prophylactic treatment and follow-up for sexually transmitted diseases, counseling and testing at no cost to the victim. The

facility also attempts to conduct a mental health evaluation of all known offender-on-offender abusers.

### **§115.86 – Sexual abuse incident reviews**

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

Based on GEO policy 5.1.2-A, page 25, section III, M-3 and the TDCJ Safe Prisons/PREA Plan, page 31, section V-1 and on interview with the Warden, PREA Manager and Captain who are all members of the Incident Review Team, the facility is required to conduct a sexual abuse incident review for every sexual abuse investigation. Attachment "C", *PREA-After Action Review Report*, of policy 5.1.2-A is used to document incident reviews and upon completion is forwarded to the PREA Coordinator. Copies of the forms are filed in the corresponding investigative file.

### **§115.87 – Data Collection**

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

The facility shall collect data related to sexual abuse and this data is aggregated at least annually according to GEO policy 5.1.2-A, page 25, section III, N-1 and the TDCJ Safe Prisons/PREA Plan, page 35, section VII, A. It is the responsibility of the PREA Manager for compiling data collected on sexual activity, sexual harassment and sexual abuse incidents and forwarding to the PREA Coordinator on a monthly basis using the *Monthly PREA Incident Tracking Log* (attachment D of policy 5.1.2.A). This information will also be shared with Safe Prisons/PREA Management Office (SPPMO).

### **§115.88 – Data Review for Corrective Action**

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

According to GEO policy 5.1.2-A, page 26, section III, N-2, GEO shall review all data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies and practices and training. An annual report is prepared which includes a comparison of the current year's data and corrective actions with those from prior years. This report is available on GEO's website ([www.geogroup.com](http://www.geogroup.com)) The SPPMO compiles a monthly report using data received on sexual abuse and sexual harassment investigations and uses the

information to prepare an annual report as well as outlined in TDCJ Safe Prisons/PREA Plan, page 35, section VII, A and page 36, section VII, B.

**§§115.89 – Data Storage, Publication, and Destruction**

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

According to GEO policy 5.1.2-A, page 26, section III, N-3 and the TDCJ Safe Prisons/PREA Plan, page 36, section II, C, GEO and TDCJ ensures that the data collected is securely retained. According to the TDCJ Record Retention Schedule, Criminal Investigation Case files, Sexual Abuse Investigation Checklists and Offender Protection Investigation Summaries must be permanently retained. The PREA Coordinator is responsible for preparing the GEO Annual PREA Report and the TDCJ Ombudsman is responsible for preparing the TDCJ Safe Prisons Program Annual Report. Both reports are available to the public on their respective websites.

**AUDITOR CERTIFICATION:**

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

Barbara Jo Denison

April 9, 2015

Auditor Signature

Date