# PREA AUDIT: AUDITOR'S SUMMARY REPORT ADULT PRISONS & JAILS





[Following information to be populated automatically from pre-audit questionnaire]					
Name of facility:	Fannin County Jail				
Physical address:	2389 Silo Road Bonham, Texas 75418				
Date report submitted:	05/10/2015				
<b>Auditor Information</b>	James L. Roland Jr	- The Nal	kamoto Group		
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Date of facility visit:	April 27-30, 2015				
<b>Facility Information</b>					
Facility mailing address: (if different from above)					
Telephone number:	330-424-4065				
The facility is:	☐ Military		□ County	Federal	
	☐ Private for profit		☐ Municipal ☐ State		
	☐ Private not for profit				
Facility Type:		□Prison			
Name of PREA Compli	ance Manager:	Bry	an Lambert	<b>Title:</b> PREA Compliance Manager/CO	
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Agency Information					
Name of agency:	Community Education Cer	nters, Inc.			
Governing authority or parent agency: (if applicable)					
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Mailing address: (if different from above)					
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Agency Chief Executive Officer				
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Agency-Wide PREA Coordinator				
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### **AUDIT FINDINGS**

### **NARRATIVE:**

The Fannin County Jail is operated by Community Education Centers to house mainly presentenced county and United Stated Marshal Service (USMS) inmates. The facility complies with Texas Commission on Jail Standards and Federal standards for the USMS. The facility operates under a contract with the county and is monitored by the Fannin County Sheriff's Office.

### **Mission Statement**

To provide a healthy, drug-free, safe and secure environment within which we will provide treatment and education services that focus on changing addictive and criminal behaviors. We provide our participants with the knowledge and skills necessary to lead a productive lifestyle prior to reintegration into their communities.

### **Services**

CEC provides jail/detention management services at the Fannin County Jail. Basic medical, dental and mental health services are provided. Volunteers tutor students while at facility. An inmate work program is offered that includes sanitation, maintenance support, and food service.

### **DESCRIPTION OF FACILITY CHARACTERISTICS:**

Fannin County Jail opened in September 2009 which has an additional location, the South Annex, which was the original jail and re-opened November 2011. The main jail has 36 housing areas, four segregation areas, and seven medical observation cells. The South Annex has twelve dorms, and ten segregation cells. The total capacity is 432 (main jail) and 96 (South Annex) totaling 528. The offenders housed in the two locations are United States Marshal Service inmates and Fannin county inmates. The institutions house both male and female inmates. At the time of the audit there were 409 males and 78 females.

The institution has medical staff on-site seven days a week, twenty-four hours a day, and it has seven observation rooms. There is a Law Library available to all inmates with a Lexis-

Nexis computer system at both jail sites and also a regular library in which inmates can check out books. There are several religious programs offered to the inmate population.

The standards used for this audit became effective August 20, 2012. The Warden was interviewed on site. As part of the audit, a review of all PREA Policy and a tour of the facility were completed. At the time of this audit the facility employed One hundred and sixteen (116) staff. The resident population was four hundred and seventy-eight (478). Four hundred and two (402) in the main complex and seventy-six (76) in the south annex. Thirty (33) inmates were interviewed. One incident of sexual abuse or sexual harassment was reported from residents. The allegation was one of inmate on inmate sexual harassment and the finding was unsubstantiated. The inmates who reported were interviewed and the investigation was reviewed for compliance of investigation protocol. The investigation was conducted by the Fannin County Sheriff's department. A total of twenty-six (26) staff were interviewed: Thirteen (13) custody-treatment staff (from all three shifts) and thirteen (13) specialty staff were interviewed. Interview sheets were obtained for the Senior Vice President and the Corporate PREA Coordinator. The administrative staff interviewed included the Warden, PREA Compliance Manager, Mental Health Staff, the Human Resources Manager, Health Services Administrator/, Intake Staff, Program Counselors, two Operations Supervisors, Operations Manager, Incident Review Team member, Officer in charge of monitoring retaliation, and a volunteer.

When the auditor first arrived at the facility, an in-briefing was held with the Warden, Assistant Warden, Corporate PREA Compliance Coordinator, and the Chief of Security to explain the audit process.

The auditor concluded, through interviews and the examination of policy and documentation, that all staff was knowledgeable concerning their responsibilities involving PREA. During the interviews, the residents stated that staff was respectful and that they felt safe at the facility. Staff was able to describe in detail their specific duties and responsibilities, including being a "first responder", if an allegation of sexual abuse/harassment were made.

### **SUMMARY OF AUDIT FINDINGS:**

When the on-site audit was completed, a "out-brief" meeting was held on April 30, 2015 with the following staff in attendance: John Clancy, Jr. Agency PREA coordinator, Michelle Coffin, Deputy Warden of QM, Warden Ray Thompson, and Chief of Security Bryan Lambert. No final rating was given at that time; however, the overall audit process was discussed. The auditor had been provided extensive and lengthy files of documentation prior to the audit, in an effort to support a conclusion of compliance with the PREA. During the course of the on-site visit, staff was found to be courteous, cooperative, and professional. All areas of the facilities toured were found clean and well maintained. At the conclusion of the out briefing the auditor thanked the CEC Luzerne staff for their hard work and commitment to the Prison Rape Elimination Act.

Number of standards exceeded: 0

Number of standards met: 42

Number of standards not met: 0

Not Applicable: 0

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

	Exceeds	Standard	(substantially	exceed	s requirement	: ot	standa	ard)
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☐ Does Not Meet Standard (requires corrective action)

CEC Corporate policy PREA 1200.06 meets this standard. The facility PREA Plan has a zero tolerance as required by the standard. In addition to the agency PREA Coordinator, and facility PREA Compliance Manager, there is a designated National PREA Coordinator and a PREA Compliance manager assigned to each regional office in the agency to ensure the PREA standards are adhered to.

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

	Lxceeds	Standard	(substantially	exceeds requirement	t of standard)
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⊠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 contracts with the United States Marshal's Service (USMS) and Fannin County Jail to operate, manage and supervise the Facility on behalf of the county, to receive, detain, and care for all properly classified prisoners. The Fannin County Jail is monitored by CEC international and the Texas Jail Commission.

### §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) Community Education Center (CEC) policy 1200.06 addresses this standard. Policy requires each facility within the agency to review their respective staffing plans on an annual basis. Compliance with PREA and other safety and security issues are always of primary focus when considering and reviewing staffing plans according to the facility Warden. Fannin County Jail has been provided all necessary resources to support the programs and procedures to ensure compliance with PREA. The audit included an examination of all resident access to phones, resident access to an email system and a review of all staffing rosters. Rounds are conducted by administrative staff on a weekly basis, and they are able to enter the units with no warning to staff. Also interviews with residents and line staff confirmed that weekly visits are conducted by administrative staff to all areas of the complex. This auditor reviewed the Request to Purchase (RFP) of an additional 138 video cameras to enhance their video monitoring system. Cameras are placed using information for the incident review team. §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) CEC policy 1200.06 Youthful inmates (pg. 13) meet the components of the standard. Youthful inmates are housed in a separate area away from adult inmates. Youthful inmates have no sight or sound of adult inmates within their unit. The auditor interviewed the only youthful inmate in the facility to review compliance of this standard. Presently the State of Texas recognizes youthful inmates as being up to the age of 17. However this facility does house 17 year olds in a separate housing unit away for adults. Youthful inmates receive the same privileges as general population. §115.15 – Limits to Cross-Gender Viewing and Searches ☐ Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard

for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Community Education Center (CEC) policy 1200.06 addresses this standard. The facility does not allow cross-gender searches of any kind by non-medical staff. All staff reported that they received cross-gender pat search training (including how to search transgender and intersex residents) during institution familiarization training, by watching a mandatory video, and during annual refresher training. Corrections Officers reported that residents are always allowed to shower, dress, and use the toilet privately, without being viewed by staff of the opposite gender. Opposite gender staff announces their presence verbally when entering all areas holding residents. Announcements were observed by the auditor during the tour of all areas of the facilities. Staff were aware the policy prohibits the searching of a transgender or intersex resident to determine their genital status. The interviewed residents confirmed they were afforded significant privacy when using the toilet, changing clothes, or when showering and that announcements were made when opposite gender staff entered the housing units or any area holding residents. PREA notifications (English and Spanish) are posted in each housing unit of each facility within the complex, the intake units, resident work areas, and in all resident program areas.

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

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

Cec Luzerne takes appropriate steps to ensure residents with disabilities and residents with limited English proficiency have an opportunity to participate in and benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. PREA handouts, postings and resident handbooks are in English and Spanish. Staff interviewed were aware that under no circumstance are resident interpreters or assistants to be used in dealing with any PREA related matter. The auditor used the automated interpreter service while interviewing three (3) inmates with limited English proficiency.

### §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)

Community Education Center (CEC) policy 1200.06 and CEC procedure PREA Background Screening Procedure address this standard. The Human Resources Manager was interviewed,

and stated that all components of this standard have been met. All employees, contractors, and volunteers have had their criminal background check completed. Policy does state that material omissions or false information submitted by applicants shall be grounds for termination. The agency cannot hire anyone with any background of sexual harassment or abuse. A tracking system is in place to ensure that updated background checks are conducted every five years.

### §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)

CEC Corporate policy PREA 1200.06 addresses this standard. Modifications have been made to improve the facilities ability to protect the inmates from sexual abuse this includes RFP for the additional of 138 additional video cameras, and shower curtains. These modifications were done based on reviews by the facilities PREA team and facility staff.

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

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

Community Education Center (CEC) policy 1200.06 addresses compliance with all aspects of this standard. Custody staff were interviewed concerning this standard. Staff reported knowledge of the facilities' procedures to obtain usable physical evidence if sexual abuse is alleged. The facility uses the Fannin County Sheriff's Department for collection of Forensics evidence. Staff were aware that an outside source Fannin County Sheriff's Department conduct all investigations. Specific actions and clinical decisions are required to determine if a resident is to be transported to the local hospital to receive a SAFE exam. No SAFE exams were conducted within the last year. The facility has contracted with a local hospital to provide these services (the resident will not be charged for any services related to PREA compliance). Emails were reviewed indicating that negotiations are ongoing for a Memorandum of Understanding with the local rape crisis center was presented and reviewed. The local rape crisis center has indicated in reviewed emails with the facility that they will provide those services regardless of the MOU negotiations.

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

☐ Exceeds Standard (substantially exceeds requirement of standard)

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☐ Does Not Meet Standard (requires corrective action)
Community Education Center (CEC) policy 1200.06 addresses this standard. Administrative or criminal investigations would be completed on all allegations of sexual abuse and sexual harassment. The facility has three trained investigators who conduct all administrative investigations. If, during the course of an investigation, evidence surfaces indicating criminal misconduct, the investigation would be referred to the Fannin County Sheriff's Department. There was one allegations of sexual harassment during the last year. The residents was not interviewed due to her being released from custody prior to the audit. The investigative packets was reviewed. All investigative protocol was followed. The allegation was ruled unsubstantiated by the Fannin County Sheriff's Department.
§115.31 – Employee Training
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\ oxtimes$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period
☐ Does Not Meet Standard (requires corrective action)
Community Education Center (CEC) policy 1200.06 addresses this standard. All staff, contractors, and volunteers are provided training relative to their PREA responsibilities. Much of this training was provided through courses on PREA provided by the facility or other training was provided by CEC. Training curricula was reviewed for content. Annual Refresher Training with PREA as a topic is also provided to all employees. Staff acknowledge in writing their understanding of PREA. All staff were issued and carry an embossed reference card detailing their duties and responsibilities as first responders. Staff interviewed indicated that they received the required PREA training.
§115.32- Volunteer and Contractor Training
☐ Exceeds Standard (substantially exceeds requirement of standard)
$ exttt{ iny}$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Community Education Center (CEC) policy 1200.06 addresses this standard. During the past 12 months all volunteers received training related to their responsibilities concerning PREA (zero-tolerance, detection, prevention, response, and reporting requirements). All training is documented. Some contractors will be required to be trained in PREA as a requirement in their Scope of Work in upcoming bid proposals for July 1, 2015. All contractors who have

repeated contact with residents are trained in PREA policies. All others are escorted within the facility and have no direct contact with residents. Training records were reviewed for compliance.

### §115.33 – Inmate Education

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

Community Education Center (CEC) policy 1200.06 addresses this standard. Residents receive information at time of intake verbally, in a PREA pamphlet, and there is information provided in the resident handbook (provided to residents at the time of intake in English/Spanish. Provisions are in place to meet the needs of all disabled residents. There are posters throughout the facility, and the "hotline" phone number to call to report abuse or harassment is in each housing unit. Residents sign an acknowledgement of having received this information at the time of intake. Orientation training is conducted with all residents with seventy-two (72) hours arrival to the facility.

### §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)

Community Education Center (CEC) policy 1200.06 addresses this standard. The Assistant Warden, Chief of Security, and one other management staff or designee has received specialized training relevant to PREA. The Warden was interviewed and explained to the auditor in detail the steps to be taken during a PREA-related investigation. The training records reviewed confirmed completion of the required instruction.

### §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) The Health Care Administrator, and all medical staff have received specialized training on victim identification, interviewing, reporting, and interventions for medical and mental health staff. CEC Corporate policy PREA 1200.06 clearly meet this standard. §115.41 – Screening for Risk of Victimization and Abusiveness ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard) for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Community Education Center (CEC) policy 1200.06 addresses this standard. All residents are immediately assessed at intake for their risk of being sexually abused by other residents or being sexually abusive towards other residents by intake staff. A Clinical Supervisor also screens all new arrivals within their first 72 hours following arrival. At the time of arrival, staff also conduct the screening by reviewing records or other information from another facility or other source which may be relevant to compliance with this standard. Residents identified as high risk for sexual victimization or at risk of sexually abusing other residents would be referred to a mental health professional for further assessment. Careful housing assignment (placement in a housing unit with additional supervision) or other appropriate action would then be considered to address the resident's needs. Any information received after intake is immediately considered, and may result in a change in housing or other necessary action. Status reassessments, by policy, will occur every 90 days. Staff interviews and observations of the intake process confirmed this information. §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)

☐ Does Not Meet Standard (requires corrective action)

Community Education Center (CEC) policy 1200.06 addresses this standard. Policy requires the use of a screening form to determine housing, bed, work, education, and program

assignments with the goal of keeping residents at high risk of being sexually victimized

for the relevant review period)

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separate from those who are at a high risk of being sexually abusive. Housing and program assignments are made on a case by case basis. There is in place a procedure for providing continued re-assessment and follow-up monitoring if needed.

§115.43 – Protective Custody
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
If an inmate was at risk of sexual victimization, they could temporarily be placed in one of the special housing cells and then transferred to another unit once it was indicated that the inmate would be safe. Placement would be discussed with the inmate before making that decision. There have been no inmates placed in this status in the past twelve months. CEC Corporate policy PREA 1200.06 clearly meet this standard.
§115.51 – Inmate Reporting
☐ Exceeds Standard (substantially exceeds requirement of standard)
$ exttt{ iny}$ 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 staff and inmate interviews, this is clearly documented. The procedures for reporting are clearly stated in the inmate handbook, on posters and CEC Corporate policy PREA 1200.06 clearly meet this standard.
§115.52 – Exhaustion of Administrative Remedies
 ☐ Exceeds Standard (substantially exceeds requirement of standard)
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☐ Does Not Meet Standard (requires corrective action)

Community Education Center (CEC) policy 1200.06 addresses this standard. Residents may file a grievance; however, all allegations of abuse or harassment, when received by staff, would immediately result in the opening of a formal investigation (criminal or administrative). This process would not involve staff who may be the subject of the complaint. There have been no grievances involving PREA related issues filed during the previous year.

### §115.53 - Inmate Access to Outside Confidential Support Services

□Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard) for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Community Education Center (CEC) policy 1200.06 addresses this standard. The facilities provide residents with access to outside victim advocates for emotional support services related to sexual abuse, by posting and providing PREA brochures with appropriate telephone numbers, or otherwise making accessible mailing addresses and telephone numbers, including U.S. Department of Justice Rape Hotline, and Crime Tip line. All of these numbers are toll free hotline numbers. The facility enables reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible. There is also an MOU in place for the local rape crisis center. §115.54 – Third-Party Reporting ☐ Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) This information is made available to inmates through posters and their handbook. Inmates have access to phones for 0800 to 1130 every day. §115.61 – Staff and Agency Reporting Duties ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard) for the relevant review period) ☐ Does Not Meet Standard (requires corrective action)

Community Education Center (CEC) policy 1200.06 addresses this standard. The staff interviewed stated their duties and responsibilities if they became aware of a resident being in imminent risk for abuse (first-responder or otherwise), certain immediate, mandatory actions to protect the resident would take effect. All staff produced a card during the interview, issued by the facility, outlining all actions to be taken by a correctional officer who became aware of sexual abuse or harassment.

### §115.62 – Agency Protection Duties ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard) for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) If an inmate was at risk of sexual victimization, they could temporarily be placed in one of the special housing cells and then transferred to another unit once it was indicated that the inmate would be safe. Placement would be discussed with the inmate before making that decision. There have been no inmates placed in this status in the past twelve months. CEC Corporate policy PREA 1200.06 addresses this standard. This was also verified through interviews with random staff. §115.63 – Reporting to Other Confinement Facilities ☐ Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Community Education Center (CEC) policy 1200.06 addresses this standard. Policy requires reporting any PREA related allegation by a resident that occurred at another facility to the Warden of the facility where the incident is alleged to have occurred by the Warden of the facility in which the resident is currently housed. The notification is to occur as soon as possible, but always within 72 hours of receiving the allegation. Policy also requires that an investigation be initiated. There have been no allegations of sexual abuse or harassment that may have occurred at the Fannin County Jail reported from another facility. §115.64 – Staff First Responder Duties ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard)

Community Education Center (CEC) policy 1200.06 addresses this standard. All staff interviewed were very knowledgeable concerning their first responder duties and responsibilities upon learning of an allegation that a resident had been the victim of sexual abuse. The correctional operations counselors interviewed quoted specific actions (such as protection of the victim and preservation of evidence) to be taken, in compliance with PREA. All staff, including the Warden, were carrying an embossed card as reference to direct them as to their responsibilities as a first responder to an allegation of a PREA incident. There has been one incident within the previous year requiring first responder actions.

for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### §115.65 – Coordinated Response ☐ Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) CEC Corporate policy PREA 1200.06 clearly meet this standard. Each Officer carries a "Quick Card" which lists all the steps to aid is a coordinated response. §115.66 – Preservation of ability to protect inmates from contact with abusers ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard) for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Community Education Center (CEC) policy 1200.06 addresses this standard. First responder duties include the protection of residents from their abuser(s). §115.67 – Agency protection against retaliation ☐ Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Community Education Center (CEC) policy 1200.06 meets this standard. The policy specifically prohibits any type of retaliation to any staff member or resident who has reported sexual abuse or sexual harassment or who has cooperated with such investigations. The Chief of Security is the designated staff member to monitor all possibilities of retaliation and at a minimum would conduct checks with a resident who may have been victimized or reported

victimization at least every 30 days for at least 90 days following an allegation. These checks may occur more frequently if indicated. This follow-up may also extend without limit if necessary. There have been no cases of retaliation discovered or reported within the previous

year.

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### §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) Inmates could temporatily be placed in one of the special holding cells located in Medical, then they would be transferred to protective custody. CEC Corporate policy PREA 1200.06 clearly meet this standard. §115.71 – Criminal and Administrative Agency Investigations ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard) for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Community Education Center (CEC) policy 1200.06 addresses this standard. The Asst. Warden or his designee conducts administrative investigations within the facility. If an allegation appears to be criminal in nature the Fannin County Sheriff's Office is contacted for a criminal investigation. If the Sheriff's office substantiates the allegation the case is to be referred to the County Prosecutor's Office for prosecution. There was no criminal investigations ongoing reported in the last twelve (12) months. All incidents are recorded on a PREA Incident Form. §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) Community Education Center (CEC) policy 1200.06 meets this standard. The evidence standard is a preponderance of the evidence in determining whether allegations of sexual

abuse or sexual harassment are substantiated.

§115.73 – Reporting to Inmate
□ Exceeds Standard (substantially exceeds requirement of standard)
$\ oxtimes$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
CEC Corporate policy PREA 1200.06 clearly meet this standard. There was one allegations of sexual harassment in the past twelve months. This was investigated and ruled unsubstantiated. The auditor reviewed documentation to confirm the inmate was notified of the outcome.
§115.76 – Disciplinary sanctions for staff
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\ oxdot$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Community Education Center (CEC) policy 1200.06 addresses this standard. During the previous year, no staff member was disciplined in any manner nor has any resigned for violating agency sexual abuse or sexual harassment policies.
§115.77 – Corrective action for contractors and volunteers
□ Exceeds Standard (substantially exceeds requirement of standard)
$\ oxtimes$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
CEC Corporate policy PREA 1200.06 clearly meet this standard. No cases against volunteers or contractors have occurred in the last twelve (12) months.

### §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) Community Education Center (CEC) policy 1200.06 addresses this standard. Residents shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for resident-on-resident sexual abuse. Fannin County Jail has had one incidents of sexual misconduct with another resident in the past year. Fannin County Jail sanctions shall be 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 sanctions to residents as a result of sexual conduct with other residents or staff. §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) CEC Corporate policy PREA 1200.06 clearly covers all of the components. Through interviews with specialized staff, the facility has a thorough system for collecting this information and also has the capacity to provide continued re-assessment and follow-up services as needed. No inmates disclosed prior victimization during screening. §115.82 – Access to emergency medical and mental health services

☐ Exceeds Standard (substantially exceeds requirement of standard)
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☐ Does Not Meet Standard (requires corrective action)
Community Education Center (CEC) policy 1200.06 addresses this standard. Fannin County Jail has had no resident in need of access to emergency medical or mental health treatment

relevant to PREA within the previous year. If a need occurred, the facility would comply with all actions required by this standard (free treatment, documentation of services, information

about sexually transmitted disease, confidentially).

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

☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
A MOU is in place with the Fannin County Family Crisis Center to provide mental health care for victims and abusers. No resident has been determined to need this type of treatment within the previous year.
§115.86 – Sexual abuse incident reviews
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\boxtimes$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Community Education Center (CEC) policy 1200.06 addresses this standard. Staff interviews confirmed that at the conclusion of an investigation of sexual abuse there would be a review by the institution executive staff of all allegations other than those found to be unfounded as required by this standard.
§115.87 – Data Collection
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\boxtimes$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Community Education Center (CEC) policy 1200.06 addresses this standard. Fannin County Jail would collect accurate uniform data for every allegation of sexual abuse by using a standardized instrument (Incident Report Corp. Form). The report allows the facility to submit

Jail would collect accurate uniform data for every allegation of sexual abuse by using a standardized instrument (Incident Report Corp. Form). The report allows the facility to submit the annual DOJ Survey of Sexual Violence in a timely fashion, prepare an annual PREA report, monitor trends, and take corrective action when indicated. There has been one incident reported during the previous year. This investigation results in the case being ruled unsubstantiated.

# \$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) CEC Corporate policy PREA 1200.06 and Fannin Standard Operating Procedure (SOP) 03.06.01 PREA clearly meet this standard. Yearly data is posted on the CEC website. \$\$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)

CEC reviews the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and to identify problem areas and take corrective action. The Institution PREA Compliance Manager ensures the data collected on sexual abuse for resident-on-resident cases is forwarded to his/her respective CEC Regional PREA Coordinator annually. The National PREA Coordinator ensures the information is provided for purposes of agency reporting. An annual report is prepared and published on the CEC website.

### **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.

J-J hJ.

May 5, 2015

**Auditor Signature** 

Date