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





[Following	information to be popu	lated aut	omatically from	pre-audit questionna	ire]
Name of facility:	Kinney County Detention	Center			
Physical address:	1501 Ranch Road 131 Brackettville, Texas 78832	2			
Date report submitted:	6/23/2016				
Auditor Information	James L. Roland Jr	The Nak	amoto Group		
Address:	11820 Parklawn Drive, Su	ite 240 Ro	ckville, MD 20852		
Email:	james.roland@nakamotog	group.com			
Telephone number:	419-610-5668				
Date of facility visit:	June 6-7, 2016				
Facility Information					
Facility mailing address: (if different from above)					
Telephone number:	830-563-6222				
The facility is:	☐ Military		☐ County	Federal	
	☑ □ Private for profit		☐ Municipal	State	
	☐ Private not for profit				
Facility Type:		□Prison			
Name of PREA Compliance Manager:		Veronica Valdez		Title:	PREA Compliance Manager
Email address: veronica	.valdez@cecintl.com			Telephone number:	830-563-6222
Agency Information					
Name of agency:	Community Education Cer	nters, Inc.			
Governing authority or parent agency: (if applicable)					
Physical address:	35 Fairfield Place - West 0	Caldwell, N	J 07006		
Mailing address: (if different from above)					
Telephone number:	973-226-2900				
Agency Chief Executive	e Officer				
Name:	Mike Caltabiano		Title:	Senior Vice President	

Email address:	mike.caltabiano@cecintl.com	Telephone number:	973-226-2900
Agency-Wide PREA	coordinator		
Name:	Andy Groff	Title:	PREA Administrator
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AUDIT FINDINGS

NARRATIVE:

The on-site visit to conduct a Prison Rape Elimination Act (PREA) compliance audit of the Kinney County Detention Center was conducted on June 5-6, 2016. The 43 standards used for this audit became effective August 20, 2012. As part of the audit, a review of all PREA policy and a tour of the facility was completed. At the time of this audit the facility employed eightyfour (84) staff. The resident population was four hundred and fifteen (415) males during the course of the audit. Twenty-five (25) residents were interviewed. This included inmates from every dormitory unit and two (2) housed in segregation. There was one resident who selfidentified as Gay, and he was also interviewed. There were two (2) allegations of sexual abuse or sexual harassment reported by residents. These two investigations were reviewed by this auditor. The investigations followed the investigative process and both were unfounded. Twenty-three (23) staff were interviewed. Fourteen (14) security/treatment staff (from all shifts) and nine (9) specialized staff were interviewed. Interview documentation was obtained from the Senior Vice President (agency head), and the Corporate PREA Coordinator. The specialty staff interviewed included the Warden, Human Resources Manager (HRM), an Intake Staff member, the PREA Orientation staff member, Intake staff, an Incident Review Team member, the Retaliation Monitor, PREA Compliance Manager, two (2) Captains, and a staff member who screens residents for victimization and abusiveness. When the auditor first arrived at the facility, an "in-briefing" was held with the Warden, Deputy Warden, PREA Manager, and the Medical HSA to explain the audit process. During the course of the audit, any potential problems or recommendations were immediately brought to the attention of the Warden, and a daily briefing of the audit progress was also held.

Mission Statement

The mission statement of Community Education Centers Inc. (CEC), which applies to the Kinney County Detention Center, is to provide a safe, secure, healthy environment for United States Marshals Detainees and all CEC Staff.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Built in 2004, the Kinney County Detention Center is located 1.3 miles south on Ranch Road, in Kinney County, Texas. The Texas Department of Health, the Fire Marshals Service, and the United States Marshals Service inspect the facility annually.

CEC began management of the Detention Center in 2007 under an agreement with the United States Marshals Service and the Kinney County Commissioners Court. In addition to jail/detention management services, CEC provides medical and dental services to the inmates, and use of a law library. There is also a volunteer religious services program and a volunteer work program that includes food service and laundry. Indoor and outdoor recreation is offered to the population, as well as law library services, barber services, and an in-cell art program.

Staff from the facility participate regularly in volunteer activities throughout the community including Relay for Life and the annual livestock show events.

SUMMARY OF AUDIT FINDINGS:

When the on-site audit was completed, an "out-brief" meeting was held with the PREA Manager/Compliance Officer and the Deputy Warden. 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 were found to be courteous, cooperative, and professional. All areas of the facility toured were found to be clean and well maintained. At the conclusion of the audit the auditor thanked the Kinney County Detention Center staff for their hard work and commitment to the PREA audit process. A summary of the audit findings are listed below:

Number of standards exceeded: 0

Number of standards met: 41

Number of standards not met: 0

Not Applicable: 2

§115.11 - Zero tolerance of sexual abuse and coordinator

Exceeds Standard	(substantially	exceeds require	ement 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 facility exceeds the standard with their policies and practice. CEC Corporate policy PREA 1200.06 clearly meets this standard. The facility PREA plan states zero tolerance as required by the standard. In addition to the facility PREA Compliance Manager, there is a designated Corporate PREA Coordinator, who also oversees compliance to zero-tolerance. Interviews

with staff and residents confirmed the zero-tolerance standard is in place and covered in training. The local PREA Compliance Manager stated she has sufficient time to complete her duties.

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

☐ Exceeds Standard (substantially exceeds requirement of standard)	
$\hfill \square$ Meets Standard (substantial compliance; complies in all material ways w for the relevant review period)	ith the standard
□ Does Not Meet Standard (requires corrective action)	
Not Applicable -The agency has not contracted with other entities for the cinmates.	onfinement of

§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)

CEC policy 1200.06 addresses this standard. Policy requires each facility within the agency to review their respective staffing plans on an annual basis. The staffing plan is reviewed annually, taking into consideration the four hundred and fifty (450) bed capacity. Compliance to the PREA and other safety and security issues are always of primary focus when considering and reviewing staffing plans according to the facility Warden. Kinney County Detention Center has been provided all necessary resources to support the programs and procedures to ensure compliance with the PREA. The audit included an examination of all resident access to phones, housing assignments, and a review of all staffing rosters. "Rounds" are conducted by administrative staff on a daily basis, and supervisors are able to enter the units with no warning to line staff. Also, interviews with residents and line staff confirmed that visits are conducted on an irregular basis, by administrative staff, to all areas of the facility. Corrections officers make "rounds" in a manner to provide excellent supervision. The video monitoring program (cameras) is sufficient to provide additional surveillance to ensure resident safety. The program consists of 74 cameras. Documentation supporting compliance to this standard was reviewed by the auditor.

§115.14 – Youthful Inmates
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\hfill \square$ 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 – The facility does not house youthful inmates at this facility.
§115.15 – Limits to Cross-Gender Viewing and Searches
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\ oxed{oxed}$ 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 of the opposite gender are required to announce their presence when entering the inmate-housing unit(s). This is also noted in the log book and has been added to the post orders. This was documented during interviews with staff and inmates, as well as recorded in housing unit log books. Privacy notices are posted in each housing unit. CEC Corporate policy PREA 1200.06 clearly meets this standard. There has been no cross gender strip or visual body cavity searches by non-medical staff in the past year. Staff have been trained on conducting pat-down searches of transgender and intersex inmates in a professional manner.
§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient
☐ 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 is a Memorandum of Understanding (MOU) for interpreter services. Resident interpreters are not used.

§115.17 – Hiring and Promotion Decisions	
☐ 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)	
Based on interviews with the HR, all components of this standard are being met. CEC Corporate policy PREA 1200.06 clearly meets this standard. Practices are also located in the HR Facility Guide. All employees/contractors have recently had their criminal background check completed. A tracking system is in place to ensure they will be completed every five years.	
§115.18 – Upgrades to Facilities and Technology	
☐ 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)	
Modifications have been made to improve the facilities ability to protect the inmates from sexual abuse this includes installing two (2) additional cameras in the laundry area. Shower curtains with clear panels at head level and short enough to view the inmates feet have been installed in all restroom areas. 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)	
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 meets this standard. Medical personnel determine if the inmate should be transported to Val Verde Regional Medical Center for a SAFE/SANE exam. A MOU is in place with Hill Country Medical and Mental Retardation	

Center for victim advocate services. The telephone numbers are posted in each housing unit

and common areas.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations
☐ Exceeds Standard (substantially exceeds requirement of standard)
□ Does Not Meet Standard (requires corrective action)
CEC Corporate policy PREA 1200.06 clearly meets this standard. There has been two allegations of sexual abuse or sexual harassment in the past twelve months. Investigations were completed and reviewed by the auditor. Both cases were ruled unfounded.
§115.31 – Employee Training
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period
□ Does Not Meet Standard (requires corrective action)
Training is a primary concern and focus at the Kinney County Detention Center. The institution exceeds the basic training requirement by insuring all staff receive PREA training. CEC Corporate policy PREA 1200.06 clearly meets this standard. All staff interviewed indicated that they received the required PREA training.
§115.32- Volunteer and Contractor Training
☐ Exceeds Standard (substantially exceeds requirement of standard)
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□ Does Not Meet Standard (requires corrective action)
PREA Compliance Manager conducts the same required training for volunteers, contractors, and employees.

9115.33 – Inmate Education
☐ Exceeds Standard (substantially exceeds requirement of standard)
□ Does Not Meet Standard (requires corrective action)
At booking, inmates receive PREA information in the inmate handbook, which is also available in Spanish. Inmates are also given pamphlets for additional services. There are posters throughout the facility and the phone number to call to report an incident is in each housing unit. The auditor reviewed the inmate training roster and the Inmate Personal Property Storage Record. CEC Corporate policy PREA 1200.06 clearly meets this standard.
§115.34 – Specialized Training: Investigations
☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Administrative investigations are done by two trained Captains. Criminal investigations are conducted by the United States Marshals Service Investigator. The auditor reviewed the specialized training #203-19-nos, Beyond the Silence, Part 1. CEC Corporate policy PREA 1200.06 clearly meets this standard.
§115.35 – Specialized training: Medical and mental health care
☐ 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)
The Health Care Administrator, a Registered Nurse, 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 meets this

standard.

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§115.41 – Screening for Risk of Victimization and Abusiveness
☐ Exceeds Standard (substantially exceeds requirement of standard)
□ Does Not Meet Standard (requires corrective action)
CEC Corporate policy PREA 1200.06 clearly meets this standard. Interviews with the Booking Corrections Officer verified that there is a thorough system for collecting this information and providing continued re-assessment and follow-up services as needed. This auditor reviewed the Assessment instrument CEC PREA Screener, corporate form C-7.
§115.42 – Use of Screening Information
3113.42 — Ose of Screening Information
☐ Exceeds Standard (substantially exceeds requirement of standard)
□ Does Not Meet Standard (requires corrective action)
CEC Corporate policy PREA 1200.06 clearly meets this standard. Interviews with the Booking Corrections Officer and Nurse verified that there is a thorough system for collecting this information and providing continued re-assessment and follow-up services as needed. This auditor reviewed the Assessment instrument CEC PREA Screener, corporate form C-7. The C-7 form is used to evaluate special needs or considerations for treatment and placement. There have been two reports of inmates at risk of sexual abuse victimization or sexual abusiveness toward other inmates in the past twelve months.
§115.43 – Protective Custody
☐ Exceeds Standard (substantially exceeds requirement of standard)
□ 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 one inmate placed in this status in the past twelve months. It was

his choice to be housed there. CEC Corporate policy PREA 1200.06 clearly meet this

standard.

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§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) Based on staff and inmate interviews, this reporting is clearly documented. The procedures for reporting are clearly stated in the inmate handbook and on posters. CEC Corporate policy PREA 1200.06 clearly meets this standard. §115.52 – Exhaustion of Administrative Remedies ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard.) for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) CEC Corporate policy 1200.06 addresses this standard. Residents may file a grievance at any time, however, all allegations of abuse or harassment, when received by staff, would immediately result in the opening of a formal investigation (criminal or administrative). Policy allows residents to seek assistance from others in the filing of a grievance, and also allows for the filing of an emergency grievance. 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. Staff and resident interviews, as well as a review of policy, confirm compliance to this standard. §115.53 – Inmate Access to Outside Confidential Support Services □Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action)

CEC Corporate policy 1200.06 addresses this standard. The facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse, by posting and providing PREA brochures (at the time of intake) with appropriate telephone numbers, or otherwise making accessible mailing addresses and other telephone numbers, including toll free hotline numbers (posted in the housing units). The local rape crisis center, Hill Country Medical and Mental Retardation Center, is available to provide all requested and necessary services. The facility enables reasonable communication between residents and these organizations and agencies, in a confidential manner. Staff and resident interviews, and a review of documentation, support compliance to this standard.

§115.54 – Third-Party Reporting ☐ Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) This information is made available to inmates through posters and their handbook. §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) CEC Corporate policy 1200.06 addresses this standard. Staff interviewed were aware that they must immediately report allegations of abuse, harassment, retaliation, or neglect relevant to the PREA. Compliance with all aspects of the standard was verified through a review of the policy and staff interviews. All staff carry a first responder action card and were able to list all of the steps of first responder's duties. Policy requires that information relevant to this standard must be maintained in a confidential manner. §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 other units or special housing cells, 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 meets 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)
	Operating procedures include all the components of this standard. This was also verified through interviews with the Superintendent and PREA Coordinator. There have been no allegations in the past twelve months.
	§115.64 – Staff First Responder Duties
	☐ 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)
	CEC Corporate policy PREA 1200.06 clearly meets this standard. This was also verified through interviews with random staff. Each officer carries a "Quick Card" listing all the steps required of the first responder. This auditor interviewed twenty- three (23) staff members and all staff were able to list the steps without referring to the cards.
	§115.65 – Coordinated Response
	☐ Exceeds Standard (substantially exceeds requirement of standard)
	□ Does Not Meet Standard (requires corrective action)
tı b a	CEC policy 1200.06 addresses this standard. This policy fully describes procedures for all staff o comply with this standard. The facility's response to an incident would be coordinated between the facility staff and the United States Marshals Service, corporate staff, and all who are responsible for providing services or support. There has been two (2) incidents of this nature requiring a coordinated response during the last 12 months.

§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) CEC Corporate policy PREA 1200.06 clearly meet this standard. Kinney County Detention Center does not have a union or collective bargaining agreement that would stop the facility from removing a staff member from a post that involves interaction with residents as a preventative measure during an investigation or a determination about discipline. §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) 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 Retaliation Monitor (interviewed by the auditor) is the designated staff member to monitor all possibilities of retaliation and at a minimum would conduct checks with a resident or staff who may have been victimized or reported victimization at least every 30 days for at least 90 days following an allegation. The Monitor will take the necessary steps to protect the resident and staff. 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. §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 housing cells and then they would be transferred to segregated housing for protective custody. CEC Corporate policy PREA

1200.06 clearly meets this standard.

§115.71 – Criminal and Administrative Agency Investigations
☐ Exceeds Standard (substantially exceeds requirement of standard)
□ Does Not Meet Standard (requires corrective action)
CEC Corporate policy 1200.06 outlines the procedures to comply with this standard. The Captains conduct administrative investigations within the facility, and are trained to do so. If an allegation appears to be criminal in nature, the United States Marshall's Service is contacted to conduct a criminal investigation. If they substantiate the allegation, the case is to be referred to the U. S. Attorney for prosecution. There were two (2) administrative investigations conducted in the previous year. All incidents would be recorded on a PREA Incident Form. The (2) incidents were unfounded.
§115.72 – Evidentiary Standard for Administrative Investigations
☐ Exceeds Standard (substantially exceeds requirement of standard)
□ Does Not Meet Standard (requires corrective action)
CEC Corporate policy 1200.06 meets this standard. The evidence standard in policy 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)
□ Does Not Meet Standard (requires corrective action)

CEC Corporate policy PREA 1200.06 clearly meets this standard. There were two allegations of sexual abuse or harassment in the past twelve months. These were investigated and ruled unfounded. The auditor reviewed documentation to confirm the inmates were notified of the outcome.

§115.76 – Disciplinary sanctions for staff
□ 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)
CEC Corporate policy 1200.06 addresses this standard. During the previous year, no staff member was disciplined in any manner nor has any resigned for violating the PREA agency sexual abuse or sexual harassment policies. A review of the policy indicates required compliance to this standard, if staff were disciplined.
§115.77 – Corrective action for contractors and volunteers
☐ 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)
CEC Corporate policy 1200.06 addresses this standard. During the previous year, there have not been any incidents where a contractor or volunteer was accused of sexual abuse or sexual harassment. Policy (reviewed by the auditor) covers the required procedures to be taken in compliance to this standard.
§115.78 – Disciplinary sanctions for inmates
☐ Exceeds Standard (substantially exceeds requirement of standard)
□ Does Not Meet Standard (requires corrective action)
CEC Corporate 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. Kinney County Detention Center has had no incidents of sexual misconduct between residents (or residents and staff) in the past

year. The facility sanctions shall be commensurate with the nature and circumstances of the

underlying reasons for abuse is available in the community. Residents may be disciplined for sexual contact with staff, that is not consensual (staff did not consent). Residents are not

abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories. Therapy to address the

disciplined for making a report in "good faith", which may be found later to be

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unsubstantiated or unfounded. Interviews with staff and residents confirm compliance to this standard.

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

☐ 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)
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.

§115.82 – Access to emergency medical and mental health services

☐ 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)

CECCorporate policy 1200.06 addresses this standard. Kinney County Detention Center has had no resident in need of access to emergency medical or mental health treatment relevant to the PREA within the previous year. If a need occurred, the facility would ensure compliance with all actions required by this standard (free treatment, documentation of services, information about sexually transmitted diseases, confidentially). The resident would be immediately sent to a local hospital or rape crisis center where all required services will be provided. Interviews with staff and a review of policy confirm compliance to this standard.

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

☐ 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)			
CEC Corporate policy 1200.06 addresses this standard. No residents have been determined to need this type of treatment within the previous year. Therapy will be offered to abusers, when identified (none in the past 12 months), within 60 days. Policy (reviewed by the auditor) is in place to provide for the services required by this standard			

§115.86 – Sexual abuse incident reviews ☐ Exceeds Standard (substantially exceeds requirement of standard) ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) CEC Corporate policy 1200.06 addresses this standard. Staff interviews confirmed that at the conclusion of an investigation of sexual abuse or harassment there would be a review by the institution leadership of all allegations other than those determined to be unfounded, as required by this standard. Identified weaknesses found during the review (in the prevention program) would be addressed, resolved, and documented. §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) CEC policy 1200.06 addresses this standard. The facility will collect accurate uniform data for every allegation of sexual abuse by using a standardized instrument (Incident Report Corporate Form). The report allows the facility to submit the mandatory annual Department of Justice (DOJ) Survey of Sexual Violence in a timely fashion, prepare an annual PREA report, monitor trends, and take corrective action when indicated. There have been no incidents to report during the previous year. The most recent documentation was reviewed by the auditor. §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 policy 1200.06 addresses this standard. The corporate office 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

resident-on-resident cases is forwarded to the Corporate PREA Coordinator annually. The Corporate PREA Coordinator ensures the information is provided for the purposes of agency

PREA Compliance Manager would ensure that the data collected on sexual abuse for

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reporting. An annual report (disclosable information) is prepared and published on the CEC website. The Corporate PREA Coordinator was interviewed (confirmed compliance to this standard), and the most recent documentation was examined by the auditor.

§§115.89 –	Data Storage,	Publication ,	and Destruction

☑ 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 addresses this standard. The CEC Corporate PREA Coordinator reviews data compiled and from this information issues a report to the CEC Chief Executive Officer (CEO) on an annual basis. The data is securely retained and published on the CEC website (disclosable data only). The required reports (most recent reviewed by the auditor) cover all data required by this standard, and are retained in a file for over 10 years.

AUDITOR CERTIFICATION:

J-J HJ.

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.

June 15, 2016

Auditor Signature Date