

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



Name of facility:	Val Verde Correctional Facility		
Physical address:	253 FM 2523 Hamilton Lane, Del Rio, TX 78840		
Date report submitted:	December 27, 2018		
Auditor Information	Charles J. Kehoe		
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Date facility visit:	June 20 – 23, 2017		
Facility Information			
Facility mailing address:	Same as above		
Telephone number:	(830) 778-0096		
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input 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		
Facility Type:	<input checked="" type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
Name of PREA Compliance Manager:	Shannon Skipworth	Title:	Compliance Administrator
Email address:	sskipworth@geogroup.com	Telephone number:	(830) 778-0096
Agency Information			
Name of agency:	The GEO Group, Inc		
Governing authority or parent agency:	N/A		
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Agency Chief Executive Officer			
Name:	George C. Zoley	Title:	Chairman of the Board and CEO
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Agency-Wide PREA Coordinator

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AUDIT FINDINGS

NARRATIVE: The PREA Audit of the Val Verde Correctional Facility (VVCF) was conducted from June 20 to June 23, 2017. The Designated Auditor was Charles J. Kehoe.

The auditor wishes to extend his deepest appreciation to Warden Brett Bement and his staff for their professionalism, hospitality, and kindness.

The auditor also wishes to compliment the GEO Group Director of Contract Compliance and PREA Coordinator, Phebia Moreland, Manager Contract Compliance PREA, Rob Walling, and the PREA Compliance Manager, Shannon Skipworth, for their outstanding work in organizing the electronic files that were provided to the auditor in advance of the audit. This enabled the audit to move forward very efficiently.

The Vice President of GEO US Corrections was interviewed during previous GEO audits, as was the PREA Coordinator during an earlier audit.

The auditor consulted Just Detention International (JDI) to see if that agency had received any communication regarding VVCF. JDI replied that it has not received any information about this facility.

Mr. Rob Walling the Senior Manager for PREA Contract Compliance with the GEO Group and the auditor arrived at the RCI at 8:00 a.m. on June 20, 2017. They were greeted by Warden Bement.

The Audit Entrance Meeting was held from 8:05 to 8:30 a.m. with Warden Bement, 11 administrative team members and Mr. Walling in attendance. The Warden welcomed Mr. Walling and Mr. Kehoe and provided the auditor with an overview of the VVCF and the offender population it serves. The auditor reviewed the audit schedule. The PREA Compliance Manager provided the auditor a list of offenders by housing unit and staff members by shift. The auditor randomly selected inmates and staff to be interviewed from the lists. Specialized staff and targeted inmates were also identified to be interviewed.

The site review began at 8:35 a.m. The site review was conducted by Warden and the PREA Compliance Manager. The Senior Manager for PREA Contract Compliance also accompanied the auditor. The site review ended at 12:37 p.m. Throughout the site review, the auditor noticed PREA signage and posters that called attention to GEO's Zero Tolerance Policy and how to report allegations of sexual abuse and sexual harassment. The auditor also observed the notice of this audit. All the PREA signage was in English and Spanish. All areas of the facility were visited.

Following the site review, the auditor began the interviews and reviews of investigative files, training and personnel files, offender files, and documents.

Thirty-three inmates who the auditor randomly selected were interviewed. There was at least one offender interviewed from each housing unit. Thirteen inmates were interviewed who were identified as disabled or had limited English proficiency. An interpreter was used in eight of these interviews. Two inmates were completely

illiterate in both Spanish and English. The auditor also interviewed one inmate who indentified as transgender, one inmate who reported a sexual abuse in the facility , and a third inmate who disclosed an earlier sexual abuse during screening.

Ten correctional officers who were randomly selected by the auditor were interviewed from both shifts. Twenty-one interviews were conducted with staff in 14 specialized areas. These interviews included the Warden, PREA Compliance Manager (PCM), an Intermediate/Supervisory staff who makes unannounced rounds, two line staff who supervise youthful inmates, the Health Administrator, a licensed qualified mental health professional, the Human Resources Manager, two PREA Investigators, the employee who conducts screening for risk of abuse or victimization, two correctional officers who supervise inmates in restrictive housing, an Incident Review Team member, two staff members who monitor for threats of retaliation, a non-security staff member who can act as a first responder, and an Intake staff member. The auditor also interviewed one volunteer and two contractors. In total, the auditor conducted 80 interviews during the audit.

It should be noted that some of the employees have multiple responsibilities so a few staff may have interviewed more than once if their duties covered more than one specialized area.

The auditor was impressed by what the employees know about PREA, the zero tolerance policy, offender rights regarding PREA, first responder duties, and evidence collection. Volunteers and contractors are also well trained. Training is provided according to the GEO PREA curriculum and includes specialized training for investigators and health care and mental health providers. The auditor has thoroughly reviewed the comprehensive GEO PREA training curriculum, the curriculum for cross-gender searches and searches of transgender and intersex inmates, and the curriculum for the specialized training for the investigators and health and mental health care providers. GEO's training is complete and professional and exceeds the standards in every area. Annual in-service training covers the latest PREA information.

The auditor selected and reviewed seven personnel files and 14 training records of correctional officers, the PREA investigators, medical and mental health staff, contractors, and volunteers. The personnel files were very organized and included the necessary background checks and the acknowledgement forms from annual evaluations and promotions. The training records had the appropriate written documentation that the correctional officers received the required training and understood it. The auditor also examined the health care and mental health providers' training files and confirmed that the providers had received the general PREA training as well as the specialized training. The training files of the investigators confirmed they had received the specialized PREA investigator training and the basic PREA training. Documentation that the contractors and volunteers received PREA training was also provided to the auditor. Interviews with the contractors and volunteers also confirmed they received training on the PREA essentials.

The auditor also reviewed six inmate files and reviewed documentation of the offender PREA education, intake screening for risk of victimization and abusiveness

and follow-up assessments. The offender files are very organized and provided great detail about the inmates.

The auditor and the investigators reviewed 16 investigation files regarding allegations of sexual abuse and sexual harassment that were made in 2015 and 2016. Of the 16 investigations, three were allegations of inmate-on-inmate sexual abuse. Two of the allegations were unsubstantiated and one was unfounded. Ten of the allegations were for inmate-on-inmate sexual harassment. One allegation was substantiated and nine of the allegations were unsubstantiated. One of the allegations was for staff-on-inmate sexual abuse. This was determined to be unfounded. Two allegations were for staff-on-inmate sexual harassment. Both allegations, were determined to be unsubstantiated.

The auditor found that all the investigations were conducted in a professional way. In 2016, the time to complete an investigation was a long period (12 months or more) but greatly improved over time. At the end of February 2017, the average time to complete an investigation was approximately five months or less. Given the various levels within the corporation that review allegations and investigations, the time it takes to completely finish an investigation does not seem unreasonable.

The investigations showed that Incident Review Team Meetings were conducted in all the completed investigations, unless it was determined to be unfounded. In some of the cases, in late 2015, there was no documentation that the inmate who made the allegation was monitored for retaliation. Starting in 2016 and into 2017 there was documentation that the resident was being monitored for retaliation, in every case. Unless an inmate had been released or transferred before the investigation was completed, there was documentation that the inmate was informed of the outcome of the investigation.

When the on-site audit was completed, the auditor conducted the Exit Meeting on Friday, June 21, 2016 at 2:30 p.m. The Warden and 17 administrative staff were in attendance. While the auditor could not give the facility a final finding, as there were a few areas needing further information, the auditor did give an overview of the audit and thanked Warden Bement and his staff for their hard work and commitment to the Prison Rape Elimination Act. Following the on-site audit the auditor communicated with the Department of Justice regarding two standards and was informed that The GEO Group's procedures complied with the standards in question.

The auditor finds that as of July 23, 2017, the Val Verde Correctional Facility meets the requirements of the Prison Rape Elimination Act, Prison and Jail Standards.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Val Verde Correctional facility is located at 253 FM 2523 Hamilton Lane, Del Rio, Texas 78849.

"It is the mission of The GEO Group, Inc. Val Verde Correctional Facility to strive to provide a controlled correctional environment in a professional manner so as to protect the safety of the general public, the surrounding community, the staff and the offender population. Safety is an integral part of every operation at VVCF and all employees and offenders are responsible for adhering to proper safety procedures at all times. Each offender is provided basic services relating to adequate food, clothing, health care and shelter. VVCF strives to provide an environment that enables positive behavioral change

through religious opportunities to allow offenders to become successful citizens upon release and to enhance the ability of the offenders to live lawfully in the community. All of this is accomplished through an assortment of assessment, diagnostic, work, self-help, discipline, medical, mental health and social programs.”

The GEO Group, Inc. Web site states, “In December 1998 The GEO Group, Inc. (GEO) was selected to design, build, finance, and manage a new facility in Del Rio, Texas. In addition, upon completion of the new facility in January of 2001, GEO took over the operations of the existing County Jail. The most current expansion, completed in October 2007, brought the facility to its current design capacity.”

VVCF and the County Jail provide custody, control, transportation, and secure care for male and female Val Verde County inmates, for male and female offenders in the custody of the United States Marshals Service (USMS) , and for detainees in the custody of the U.S. Immigration & Customs Enforcement (ICE). The Correctional Facility follows the standards required by the State of Texas and Federal guidelines regarding general living conditions, medical care, mental health services, food service, recreation, and laundry. The County Jail is Certified by the Texas Commission on Jail Standards. VVCF is accredited by the American Correctional Association.

The facility is located on 15 acres of property. There are nine housing units, including Housing Unit 6 which is the Val Verde County Jail. On the first day of the audit, there was a total of 1,163 inmates in the facility, 1,061 were in the correctional units part of the complex and 102 inmates were housed in the County Jail. Women represented 6.4% of the overall population (75), 13.7% (14) of the County Jail population, and 5.7% (61) of the correctional units population. There were no juveniles or youthful offenders in the facility during the audit period.

VVCF has 317 authorized and budgeted positions of which 301 were filled and 17 were vacant, on the first day of the audit. The medical team includes a contract dentist (five days a week), a contracted physician (five days a week), a health services administrator, 15 nurses, one family nurse practitioner (forty hours per week), three clerks, one data entry position, one dental assistant, and one licensed professional counselor.

The facility has a total of 184 cameras with a recording retention period of two to three weeks.

During the site review, the auditor visited all parts of the facility, including the food service storage and preparation areas, staff dining, the property and change rooms, Federal and State intake, warehouse supply and laundry, barbershop, medical and dental clinic, and each housing unit. The auditor was impressed with a board in the Federal Intake area that lists all the Federal inmates and identifies any inmates who at high risk of sexual abusing by a red dot that is next to the inmate’s name. A green dot identifies inmates who are at risk of sexual victimization. Staff use this system to avoid putting vulnerable inmates in harms way.

Throughout the facility, and in every housing unit, there is signage that calls attention to GEO’s Zero Tolerance Policy and how to report any allegation of sexual abuse or sexual harassment. The signs are in Spanish and English. In the main corridors and halls these signs are painted on the walls in the main halls. The inmates are informed that they have three options for reporting an allegation of sexual abuse and sexual harassment by phone. The inmate can call Hope RAINN (the National Sexual Assault Hotline) at #13, the Department of Homeland Security Office of Inspector General, U.S. Marshals Service at #14, or the Immigration and Customs

Enforcement at #15. These calls are not monitored. The auditor called #13, but there was a problem with the phone. This was reported to maintenance staff immediately. Within a short period of time, the phone was repaired. The auditor tested the phone and the call went through to RAINN. The person who answered the phone was very knowledgeable about PREA and stated that if they received an allegation from VVCF they would take the information that was reported and notify the PCM. The inmate would remain anonymous, unless permission was given to use his/her name. The person said that to her knowledge, her agency has not received any calls from VVCF.

The medical area includes an infirmary that has two negative air pressure rooms, one room with three hospital beds and one room with one hospital bed. There were two inmates with tuberculosis at the time of the site review.

Inmates can also report sexual abuse and sexual harassment allegations by telling a staff member, telling a third-party, or by the grievance procedure. Signage throughout the facility also advises inmates that they can write to STOP Prison Rape, the Texas ACLU, and the Texas Association Against Sexual Assault. Addresses are provided on the posters.

As the auditor was walking around one of the housing unit pods, during the site review, he noticed that three inmates were in one two-person cell with the cell door open. The auditor expressed his concern about this potential hazard and blind spot. The auditor was told that correctional officers rotate between pods and inmates try to take advantage of these moments. The correctional officers are told to be aware of these types of situations.

When the auditor was in the "Picket" (control room) a blind spot was pointed out to him in the back of the housing unit. The auditor was told staff in the Picket are aware of this and closely monitor this area. If anything suspicious appears to be happening, the Picket Officer will send a correctional officer to investigate.

Showers provide privacy that prevents cross-gender viewing of inmates breasts, buttocks, and genitalia. Inmates normally shower one at a time.

The female housing unit is an open-bay dormitory with a capacity of 64 inmates. The auditor noted there was very little privacy in the toilet area. The auditor was told there are only female staff allowed on the floor in this unit.

The Intake area for state inmates has four cells. One inmate was under a constant suicide watch. There was one female and two males being processed in this area. There was not contact between the female and the two males. The shower and toilet have good privacy.

The site review ended at 12:39.

Number of standards exceeded:	12
Number of standards met:	30
Number of standards not met:	0
Non-applicable:	1

§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 Corporate PREA Policy Section 5.1.2 - A and the VVCF Policy 1400.83 state the GEO Zero Tolerance Policy and the procedures and practices the facility follows when preventing, detecting, and responding to sexual abuse and sexual harassment. The GEO policies and procedures and the policies and procedures of the facility are all well arranged and easily understood.

The GEO Group has a three-tier organizational structure for the oversight and management of PREA. The PREA Director is based at the GEO Corporate Office in Florida. Each of the three GEO Regions, has a PREA Coordinator who assists the PREA Director with all PREA related matters for the institutions in the specific region. At the institution level the PREA Compliance Manager is responsible for all PREA issues in that specific facility. These position are all found on the GEO organizational chart and the organizational charts of the facilities. The PCM provided the VVCF organizational charts for the last three years.

Ms. Phebia Moreland is the GEO Group PREA Director. Ms. Moreland is a Certified PREA Auditor and is very knowledgeable about the Prison Rape Elimination Act. Ms. Moreland also conducts PREA related training and facilitates meetings to keep facility Compliance Managers, medical and mental health staff, and the PREA investigators current on any changes and best practices. Ms. Moreland has complete authority within the GEO Group over all matters related to the Prison Rape Elimination Act and works closely with the Office of Professional Responsibility at Headquarters on PREA investigations. During this audit cycle, the PREA Director was interviewed during an earlier PREA audit.

Shannon Skipworth is the PREA Compliance Manager (PCM) at VVCF. Her formal title is Compliance Administrator which includes monitoring compliance with Texas Jail Commission Standards and grievances. Ms. Skipworth also monitors for threats of retaliation against inmates who reported an allegation of sexual abuse or sexual harassment.

The auditor interviewed the PCM who reported that she had sufficient time to complete her assigned duties as the Compliance Manager and sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. She added that she has "total support from the Warden" and an excellent team that implements any PREA assignments given to them. The auditor was very impressed with PREA Compliance Manager, her enthusiasm, and her knowledge of the PREA standards. She manages all PREA issues in the facility with great efficiency and professionalism.

When the auditor interviewed the Warden, he was equally impressed by the Warden's unconditional commitment to PREA and to maintaining a sexually safe correctional environment at the VVCF and to full compliance with the PREA standards.

The GEO Group is very committed to its Zero Tolerance Policy and to the PREA standards and ensures that PREA is part of the philosophical and foundation of each facility. GEO's PREA Director, the Regional PREA Coordinator, the VVCF Warden and PCM each reinforce the company's absolute commitment to the Prison Rape Elimination Act on a daily basis. The auditor finds that VVCF exceeds the requirements of the standard.

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

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

The GEO Group and VVCF do not contract with other entities for the confinement of inmates.

§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)

GEO policies and procedures and VVCF policies and procedures address all the requirements of the standard. VVCF has a current staffing plan that meets the requirements of the GEO policy and USMS and ICE. The Facility Annual Assessment addresses all the elements of the standard from subsection (a) (1) through subsection (3). The auditor reviewed the staffing plans and the Facility Annual Assessments for 2016 and 2017 and found each item in the standard was addressed. The PREA Coordinator's signature confirmed she had reviewed the documents.

The auditor also saw documentation that supervisors conduct unannounced rounds/Security Checks on each shift. Interviews with staff and supervisors confirm this, as well. When conducting unannounced rounds, supervisors and administrators will ask inmates and staff specific questions related to PREA. For example, officers and inmates will be asked, "Do Staff/Officers of the opposite gender knock and announce when they enter the housing unit?" Inmates are asked, "Do you know how to report an incident of sexual abuse?" And, Officers/Inmates are asked, "Do Supervisors perform unannounced rounds?" These questions ensure that inmates and staff are familiar with PREA policies and procedures. The questions are changed periodically. The GEO Group, Inc is the only agency the auditor has found that does this. The auditor believes this makes the unannounced rounds a practice with many benefits.

There are 184 cameras throughout the facility. The auditor reviewed previous recordings and found the quality to be very good.

The auditor was impressed by the way the facility had painted the PREA messages on the wall. This is a very good practice. The auditor was further impressed by the facility's practice that requires mid-level supervisors and administrators to ask staff and inmates questions about PREA when making security checks/unannounced rounds. This procedure enhances the value and importance of unannounced rounds. The auditor finds VVCF exceeds the standard.

§115.14 – Youthful Inmates

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

Warden Bement stated that youthful inmates are assigned to housing unit H6 and are sight and sound separated from the adult offenders. There is no physical contact with adult inmates through the use of a shared dayroom, or other common space, shower area, or sleeping quarters. VVCF holds juveniles for the State. In 2015 there were 12 youthful offenders admitted. In 2016 there were 16 youthful offenders admitted, and in 2017 to the date of the audit, there were 15 youthful offenders admitted. Youthful offenders have direct staff supervision. VVCF does not place youthful inmates in isolation to comply with this standard. Youthful inmates are not denied daily large muscle exercise or legally required education, and have access to other programs and work opportunities, to the extent possible. The auditor reviewed the list of the youthful offenders held during the last three years and found that the vast majority stayed at VVCF less than 48 hours.

§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)

GEO Policy and Procedure 5.2.1 A prohibits cross-gender searches except in exigent circumstances. The policy also prohibits cross-gender visual body cavity searches except in exigent circumstances and then only when performed by offsite Medical Practitioners. GEO policy also requires facilities to establish procedures that enable inmates to shower, perform bodily functions, and change clothes without non-medical staff observing their genitalia or buttocks.

The VVCF Policy 1400.03, subsection H, "Searches and Observations," states:

"1. Cross-gender strip searches and cross-gender visual body cavity searches (meaning a search of the anal or genital opening) are prohibited except in Exigent Circumstances or when performed by Medical Practitioners.

2. VVCF shall not permit cross-gender pat-down searches of female inmates in the facility, absent ExigentCircumstances.
3. VVCF shall not restrict female inmates in the facility access to regularly available programming or other outside opportunities in order to comply with this provision.
4. VVCF shall document and justify all cross-gender pat-down searches of female inmates
5. VVCF shall document and justify all cross-gender strip searches and cross-gender visual body cavity searches of inmates.
- 6 .VVCF shall not search or physically examine a Transgender or Intersex inmate in the Facility solely to determine their genital status. If the genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or by learning that information as part of a broader medical examination conducted in private by a Medical Practitioner.
- 7.Security Staff shall be trained to conduct cross-gender pat-down searches and searches of Transgender and Intersex inmates at VVCF in a professional and respectful manner.
8. VVCF shall implement policies and procedures which allow inmates to shower, change clothes, and perform bodily functions without employees of the opposite gender viewing them, absent Exigent Circumstances or instances when the viewing is incidental to routine cell checks.
9. VVCF's policies and procedures shall require employees of the opposite gender to announce their presence when entering housing units or any areas where inmates are likely to be showering, performing bodily functions, or changing clothes.
10. In the VVCF, inmates who are placed on constant observation status by Mental Health Providers shall be provided visual supervision by a Security Staff member of the same gender."

During the interviews with inmates, 29 inmates told the auditor the staff announce their presence when they enter a housing area and sometimes it is announced from the Picket. Four offenders said females don't always announce their presence when they come on the unit or they don't remember if the announcements were made or not. The auditor observed female staff announce their presence when they entered the housing units. There is also signage that reminds the staff to announce themselves. When opposite gender announcements are made from the Picket, they are documented in a log book. The auditor mentioned to the PCM that a few inconsistencies were noted by inmates.

Inmates said they are never naked in full view of staff of the opposite gender. Female inmates said male staff are not allowed on the female unit during shower time. This was also confirmed by the staff. During the site review, the auditor made note of the privacy provided in all the shower areas.

GEO and VVCF policies require that all security staff are trained in the proper procedures for conducting cross-gender pat-down searches and searches of transgender and intersex offenders in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. VVCF provided documentation that the required training took place, the names of the participants, and dates of the training. The VVCF also provided copies of the Cross Gender Search Training curriculum, including the video developed by the Moss Group. During the interviews with randomly selected staff, every correctional officer confirmed he/she had received training in how to conduct cross-gender pat-down searches,

and searches of transgender and intersex inmates in a professional and respectful manner. When asked by the auditor to describe how these searches would be conducted, every correctional officer explained the correct approach. Staff said this training is provided one to two times a year.

§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)

GEO's PREA Policy 5.1.2-A and VVCF 1400.03 follow the requirements of the standard.

GEO has a contract with Language Line Services, Inc. which provides interpreters in several languages via the phone. The VVCF also created a list of staff members who speak Spanish and are readily available. The facility also has a TTY phone for inmates who are hearing impaired. For inmates who have a vision disability, the staff member conducting the Inmate Orientation Education will read the material to the inmate.

As previously stated, 13 of the 33 inmates interviewed were identified as disabled or had limited English proficiency. An interpreter was used in eight of these interviews. Two inmates were completely illiterate in both Spanish and English. In most cases, the inmate said he/she was verbally informed about PREA by the case manager. One inmate said the medical staff informed him during his initial visit to the medical office. The two inmates who were illiterate in Spanish and English reported that staff explained PREA to them, the Zero Tolerance Policy and how to report allegations of sexual abuse and sexual harassment. One of the two said he did not remember anything about PREA. The auditor met with that inmate's case manager and asked her to repeat the PREA orientation with the inmate. The case manager agreed to do that. Several of these inmates also said they were given the Inmate Handbook and other material about PREA and that these materials were in English and Spanish. Numerous inmates also pointed to the signs on the walls that are in English and Spanish and state the Zero Tolerance Policy and how to report an allegation of sexual abuse and sexual harassment.

One of the 33 inmates interviewed by the auditor was seriously mentally ill. The auditor did not feel the inmate was capable of understanding PREA, although he did answer some of the auditor's questions. The auditor told the PCM that this inmate should be carefully supervised. The auditor also mentioned at the Exit Meeting that he believed that this specific inmate was at high risk of victimization because of his mental illness and that he should be provided maximum supervision. Following the on-site audit, the PREA Coordinator sent documentation that mentally ill inmates are seen on a weekly basis and are closely monitored to prevent victimization.

During the random staff interviews, the staff said they would never use another inmate as an interpreter in dealing with any potential PREA allegation.

The auditor was very impressed by the comprehensive approaches the facility has to educate and inform inmates with special needs about PREA. Because GEO provides multiple services and options for inmates who have disabilities or have limited English proficiency, the auditor finds the facility exceeds the standard.

§115.17 – Hiring and Promotion Decisions

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

GEO PREA Policy addresses all the requirements of this standard.

The auditor reviewed five personnel files and found background checks of new employees, and confirmed that annual background checks of existing staff were completed, as required. There were no promotions during the 12 months before the audit, but GEO policy ensures that a background check will be completed when a promotion occurs. VVCF policy states that every employee will have an annual background check.

The Val Verde County Sheriff's Office does the criminal background checks on job candidates, current staff being considered for promotions, and annual background checks for current VVCF employees. The GEO Group also contracts with Aurico Reports, LLC (now DBA, Career Builder Employment Screening, LLC) for complete background checks (i.e., employment, education, and license verifications, etc.)

Persons who are applying for positions at VVCF are required to respond on the job application to the questions addressed in 115.17 (a) (1), (2), and (3). Current employees also confirm compliance with these standards when they are being considered for promotions and as part of their annual review. GEO procedures also state that employees have an affirmative duty to disclose any such conduct.

VVCF considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

Background checks are also conducted on all contractors who have contact with offenders prior to the start of the services. The auditor reviewed two contractor files and found the contractors had pre-service background checks and annual background checks as required by the standard and VVCF policy.

The auditor interviewed the Human Resources Specialist who confirmed these practices are followed and also pointed out that the Employee Handbook requires a continuing affirmative duty to disclose and such previous misconduct.

The GEO Office of Professional Responsibility will provide information regarding substantiated allegations of sexual abuse or sexual harassment involving a former employee to an institutional employer for whom the employee has applied to work provided the request is in writing.

Because GEO and VVCF conduct annual criminal background checks on all employees and contractors and because GEO outsources its criminal background checks to the Val Verde County Sheriff's Office and its employment, education, and license verifications to Aurico Reports, LLC, to ensure the backgrounds are objective and professional, this auditor finds that VVCF exceeds this standard.

§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)

There are 184 cameras in the VVCF and new equipment is added as needed. During the site review, the Warden pointed out a few blind spots they are aware of and take extra steps to ensure correctional officers pay close attention to these areas.

The Warden reported that, "There have not been any upgrades to the facility since the last expansion in 2007."

§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)

The auditor reviewed the policies and procedures for the criminal investigation of allegations of sexual abuse and the administrative proceedings for allegations of sexual harassment. The facility operates under GEO Corporate Policy 5.1.2 E, "Investigating Allegations of Sexually Abusive Behavior (PREA) and Evidence Collection" and VVCF Policy 1400.03.

VVCF has five staff who have completed the GEO training for investigators. These individuals can conduct the initial investigation into any allegation of sexual abuse or sexual harassment. If the allegation rises to the level of criminal behavior, VVCF requests the Val Verde County Sheriff's Office to conduct the criminal investigation. Four of the detectives at the Val Verde County Sheriff's Office completed the National Institute of Corrections course, "PREA: Investigating Sexual Abuse in a Confinement Setting." In some cases, the United States Marshals Service will also investigate, if the allegation involves an inmate in their custody.

Administrative investigations are handled by the VVCF investigative staff. If an allegation is made regarding a staff member at VVCF, the GEO Office of Professional Responsibility will immediately become involved.

If an allegation of sexual abuse requires a forensic exam, the victim will be transported to the Val Verde Regional Hospital where a forensic exam will be conducted by a SAFE/SANE without cost to the victim. The Health Administrator also told the auditor that if the Immigration and Customs Enforcement (ICE) brings a new admission to the facility and the person states she/he was raped in Mexico, VVCF has the ICE or the Border Patrol transport the person to the hospital for a forensic exam.

The GEO Group has a Memorandum of Understanding with BCFS (Baptist Child and Family Services) that states, "BCFS HHS will accept all referrals from GEO Group and will provide them with Services as specified in the Domestic Violence Program. Domestic Violence Program services may include crisis intervention, emergency care, family counseling, and legal assistance in civil and criminal cases, education and collaboration with law enforcement and other community agencies and other supportive services."

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

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

As previously reported, the auditor reviewed the policies and procedures that ensure allegations of sexual abuse and sexual harassment will be referred for investigations. VVCF operates under GEO Corporate Policy 5.1.2 E, and VVCF Policy 1400.03

The GEO Group PREA Web site states:

"All cases of alleged sexual conduct shall be promptly, thoroughly, and objectively investigated. Upon substantiation of any allegation of sexual conduct, appropriate disciplinary actions will be taken against the employee, contractor, volunteer, or individual in a GEO facility or program. Those actions may include possible criminal prosecution. If the allegation potentially involves criminal behavior, GEO will ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations."

The auditor interviewed two investigators at the facility. The investigators said allegations of sexual abuse will be referred to Val Verde Sheriff's Office and/or the USM for investigation. The GEO Office of Professional Responsibility is also involved in any allegation of sexual abuse or sexual harassment that involves a staff member.

The auditor reviewed two of the investigations conducted by the Val Verde County Sheriff's Office and found the reports to be very thorough and completed in a timely fashion.

§115.31 – Employee Training

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

All GEO employees are provided comprehensive training on the Prison Rape Elimination Act and GEO's and VVCF's policies and procedures for preventing, detecting, and responding to allegations of sexual abuse and sexual harassment.

PREA training is required of all new staff during orientation. PREA training is also provided annually, during in-service, online, and during shift briefings. Staff are tested on their knowledge of PREA requirements.

During random interviews with correctional officers, the auditor asked the employees to describe the topics covered in the training. The staff reported that training covered all the subject areas mentioned in the standard and provided details on the content of the training. In addition to the structured training, during unannounced rounds, supervisors will randomly ask staff members specific questions about PREA. This practice reinforces the importance of PREA training and always knowing the PREA policy and procedure. The auditor also reviewed the training curriculum created by the GEO's PREA Director and was impressed by how comprehensiveness of the material.

VVCF also maintains excellent attendance and training records that document staff attendance and understanding of the material that was covered.

Because GEO consistently provides the highest quality of training on several levels and all employees understand the company's Zero Tolerance Policy, the causes of sexual abuse and sexual harassment in confinement settings, prevention strategies, and how to report and respond to allegations of sexual abuse or sexual harassment, the auditor finds the VVCF exceeds the requirements of the standard.

§115.32– Volunteer and Contractor Training

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

The auditor interviewed a physician and a dentist who are contractors and one volunteer who serves as a volunteer chaplain. All three individuals confirmed that they receive PREA training annually. They also reported they received the training in a classroom setting and online. Training is provided as part of Pre-service Orientation and is required annually thereafter, by GEO policy. The auditor also reviewed the contractor and volunteer training records and confirmed that the contractors and volunteers acknowledge, in writing, that they have been given the training and understand the GEO Zero Tolerance Policy and the material covered. The auditor reviewed the PREA training curriculum for contractors and volunteers and was very impressed by the thoroughness of the PREA training.

GEO provides a very complete training for contractors and volunteers on an annual basis and maintains first-rate training records. For that reason, the auditor finds that VVCF exceeds the requirements of the standard.

§115.33 – Inmate Education

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

31 of the 33 inmates interviewed said they have received the PREA information during intake and from the Offender Handbook. Inmates also said they saw the PREA video during orientation. The two inmates who did not remember being informed at intake or during orientation were able to describe how they would report an allegation of sexual abuse or sexual harassment and acknowledged that PREA is also in the Offender Handbook. They also said they have seen the signs painted on the walls about the Zero Tolerance Policy and how to report an allegation of sexual abuse or sexual harassment.

VVCF also has posted signs that define PREA terms, GEO's Zero Tolerance Policy, inmates' rights to be free from sexual abuse and sexual harassment, how to prevent sexual abuse and sexual harassment, describes ways to report sexual abuse or sexual harassment, and the services that are available to the victim of sexual abuse or sexual harassment. The offender is also informed about what will happen when he reports an allegation of sexual abuse or sexual harassment and the investigation protocols that will be followed. The offender is also advised that designated staff will monitor victims for retaliation, following an allegation of sexual abuse.

This material is also made available to the inmate in the brochure, *Sexual Assault Awareness Program. Offender Guide on Prevention and Reporting of Sexual Abuse and Sexual Harrassment* . The brochures and signage are printed in English and Spanish.

The Offender Handbook also has a well written and detailed PREA section that is written at a level that is easily understood. The Handbook is in English and Spanish. In addition to other information, the Handbook explains how inmates can report sexual abuse and sexual harassment in a confidential manner and provides contact information for the victim's advocacy agencies/rape crisis centers. Signs are also posted near the phones that provide advocacy agencies' contact information. Calls to advocacy agencies are not monitored.

§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)

The auditor interviewed two of the investigators at VVCF who confirmed that they and the other investigators had received the specialized training for investigators and the Basic PREA Training that is required for all facility staff.

The GEO PREA Coordinator completed the "Training for Trainers: Specialized Training: Investigating Sexual Abuse in Correctional Settings" course conducted by the Moss Group and created a very comprehensive training program for all GEO PREA investigators that includes techniques for interviewing sexual abuse and sexual harassment victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action. If prosecution is indicated, the law enforcement agency that conducted the investigation will make the referral to the appropriate prosecutor. The auditor was very impressed by the thorough training the GEO investigators receive. The GEO investigator curriculum is implemented company-wide and is constantly being upgraded and improved.

A written exam, with 25 questions, insures the employees understand the material covered. The auditor reviewed the written documentation that acknowledged the five investigators at VVCF received the specialized training and the PREA training required of all GEO institutional staff.

VVCF also provided documentation that four of the detectives at the Val Verde County Sheriff's Office have completed the National Institute of Corrections, "PREA: Investigating Sexual Abuse in a Confinement Setting," course.

Given the very comprehensive scope of the investigator training and the number of investigators who completed the training, the auditor finds the facility exceeds the standard.

§115.35 – Specialized training: Medical and mental health care

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

The Health Administrator and Qualified Mental Health Professional (QMHP) confirmed that the medical and mental health staff receive specialized training, annually, from the GEO Group on how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. Medical and mental health staff also participate annually in the PREA training that is required of all employees. The contract Dentist and contract Physician also confirmed they receive the same specialized training as all the medical staff. The PCM provided the auditor with the training documentation and written acknowledgements. The auditor reviewed the training curriculum and was impressed by its thoroughness.

The fact that GEO provides this training to all the medical and mental health providers on an annual basis is praiseworthy. For these reasons, the auditor finds the facility exceeds the 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)

The GEO Val Verde Correctional Facility Risk Assessment is administered by a case manager as part of the intake process. If the screening score identifies the offender as being a potential victim or potential abuser, or if the offender discloses a prior sexual abuse, the case manager will refer the inmate to the QMHP for further evaluation, unless the offender declines.

The QMHP is responsible for doing the 30-day reassessment and any additional assessment that is conducted in response to an incident, referral, request or receipt of new information that impacts the inmate's risk of victimization or abusiveness.

In reviewing one of the investigation files of an offender who had reported being sexually abused, the auditor did not find a reassessment and noted this at the Exit Meeting. Following the audit, the GEO Corporate PREA Coordinator clarified for the auditor that a reassessment, following a PREA incident, is conducted by the QMHP using the PREA Mental Health Incident Report form. After the incident, the victim is automatically added to the "at risk" victim/abuser tracking log so he/she will be kept separate from any other potential abusers.

The auditor reviewed the GEO Val Verde Correctional Facility Risk Assessment and confirmed that it includes all the elements required by the standard.

The GEO and VVCF policies state that Risk Assessments and the PREA Mental Health Incident Report (i.e., reassessment) are maintained by the QMHP in confidential files and available only to designated/approved administrative and other staff on a need to know basis so sensitive information is not exploited by staff or other individuals. Generally, this means, the top administrative staff and intake, classification, medical, and mental health staff professionals.

Offenders are not disciplined for refusing to answer questions on the PREA Risk Assessment. However, if an offender declines to answer a specific question, a witness is brought in to confirm the offender's statement.

The auditor reviewed six offender files and reviewed documentation that the initial assessment was done during intake and a reassessment was completed within 30 days.

§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 GEO Policy “3. Use of Screening Information” states that information gathered during the intake process, and during screening for risk of victimization and abusiveness, is used to determine housing, bed, education, program, and work assignments with the goal of protecting inmates who are at high risk of sexual victimization from being sexually abused or harassed. Housing and program assignments are made on a case-by-case basis by the counselor who is responsible for classification.

On the Federal side of the facility, VVCF maintains a roster board of all offenders, by housing unit, who are identified as potential victims and possible predators through the use of colored dots on the board next to the offender’s name. This easy identification helps to maintain the separation between potential victims and possible predators.

The Transgender Care Committee makes the housing recommendations for transgender offenders and may hold a transgender inmate in the medical area for up to 72 hours, pending a housing unit assignment. A transgender offender’s own views with respect to his/her personal safety will be given serious consideration by the Transgender Care Committee. The offender can request a preferred pronoun, the gender expression the inmate uses, and a preference for which gender the officer would be when searching the offender. (This is documented on the Statement of Search Preference Form). Placement and programming assignments are re-assessed at least twice a year.

The nurse said the transgender and intersex offenders are given the opportunity to shower separately from other offenders.

The auditor reviewed six inmates’ files and documentation confirmed the facility meets the requirements of the standard. The auditor interviewed the one transgender offender in VVCF. The offender stated that the staff did ask her questions about her personal safety and made arrangements for her to shower separately. She is housed in the general population. There is no specific housing unit for LGBTI 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)
- Not Applicable

GEO policy 5.1.2 A.3 states that inmates at high risk of victimization shall not be placed in involuntary segregation unless all other available housing alternatives have been considered and determined to be unsuitable for the protection of the inmate. When inmates are placed in segregated housing, they are afforded the same rights, programs, services, and privileges that they would receive in the general population, when ever possible.

The Warden told the auditor that involuntary segregation is used to protect a victim of sexual abuse only as a last resort, and then for the shortest period of time possible. In reviewing the records and logs, the auditor found that the USM has recommended on several occasions that specific offenders be housed in restrictive house (segregated housing) for the protection of other inmates and for the offender's own protection. In every case reviewed by the auditor, the offender was involuntarily placed in restrictive housing because he was at high risk for abusing others or victimization because their current charge involved child sexual abuse or child pornography. Offenders who are placed in restrictive housing do have access to programs and services. Every 30 days, the offender's status is reviewed to determine whether there is a continuing need for separation from the general population.

§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 requires that facilities provide multiple ways for inmates to report allegations of sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

VVCF Policy 1400.03 nm states,
"Reporting of Sexual Abuse

1. Reporting Options for Individuals in a GEO Facility or Program
 - a. VVCF will provide multiple ways for inmates in the facility to privately report Sexual Abuse and Sexual Harassment, retaliation by other inmates or employees for reporting Sexual Abuse and Sexual Harassment and staff neglect or violation of responsibilities that may have contributed to such incidents.
 - b. VVCF will provide contact information to inmates detained solely for civil immigration purposes for relevant consular officials and officials at the Department of Homeland Security.
 - c. VVCF provides Inmates contact information on how to report abuse or harassment to a public or private entity or office that is not part of GEO (i.e. contracting agency ICE, USMS, BOP, etc.). This is a part of the Inmate Handbook.
 - d. VVCF provides inmates contact information on how to report Sexual Abuse incidents to the Facility PREA Compliance Manager
 - e. Employees will accept reports made verbally, in writing, anonymously and from third parties and shall promptly document any verbal reports."

VVCF has signs (in English and Spanish) that are strategically placed throughout the facility, or painted on the walls, that inform offenders how to report sexual abuse and sexual harassment. These include information from the Department of Homeland Security (DHS) that lists the contact information for the DHS Office of the Inspector General (OIG) Hotline number and the address. GEO signage lists the contact information for the Corporate PREA Coordinator.

The Offender Handbook states, "If you become a victim of sexual assault/abuse/harassment, you should report it immediately, either to a staff member, or the Hotline # located in living unit postings. Any VVCF staff member (i.e. correctional officer, case manager, etc.) will accept reports from offenders verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports."

The Offender Handbook also provides contact information for the Texas Association Against Sexual Assault, the Rape Abuse and Incest National Network (RAINN), the Texas ACLU Prison and Jail Accountability Project, and Just Detention International.

The Offender Handbook also informs offenders how they can file a sexual abuse grievance.

The Sexual Assault Awareness Program brochure also provides the reporting contact information.

Inmates who are detained solely for civil immigration purposes are provided contact information for the Mexican Consulate and the Customs and Border Protection agency.

The auditor also reviewed the PREA Offender Education curriculum that specifically explains the many ways an inmate can report sexual abuse or sexual harassment.

During the random inmate interviews, inmates mentioned several ways they could report sexual abuse or sexual harassment. The majority said they would tell a staff member, call the "800" number, or tell a family member. Inmates are aware of the Sexual Abuse Hotline (#13) and the agencies they can call to report sexual abuse. All the inmates acknowledged they have seen the PREA signage throughout the facility. In reviewing sexual abuse and sexual harassment investigations, the auditor saw evidence that offenders had reported the incidents using the various methods described here.

Random interviews with employees confirmed that the correctional officers and other non-security staff all know that if they receive a report of a sexual abuse or sexual harassment in writing or verbally, they are to report it immediately and document all reports, including verbal reports.

All staff know they can privately report a sexual abuse or harassment by calling the GEO Corporate Office Hotline. Signs are posted throughout the facility that inform the employees how they can privately report sexual abuse or sexual harassment.

VVCF has numerous ways offender can report sexual abuse. The signs painted on the walls are very effective and all the offenders acknowledged them. Because VVCF provides multiple

ways of reporting allegations of sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents, the auditor finds the facility exceeds the requirements of the 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)

GEO PREA Policy 5.1.2 – A, Exhaustion of Administrative Remedies and VVCF Policy 1400.03 provide for administrative remedies using the facility grievance procedure. The Offender Handbook also describes the procedures offenders should follow to report sexual abuse or sexual assault through the grievance procedure. The GEO policy and the VVCF policy include all the elements of the standard.

The Offender Handbook states,

“Sexual Abuse Grievances

1. An inmate may file a grievance regarding Sexual Abuse at any time after the alleged incident. (No time limit on reporting Sexual Abuse/Harassment)
2. Inmates may submit grievances regarding Sexual Abuse/Harassment to anyone other than the alleged abuser.
3. Third parties (e.g. other inmates, employees, family members, attorneys or outside advocates) may assist an inmate in filing a grievance related to sexual abuse or file the grievance on behalf of an inmate.
4. The alleged victim must agree to have the grievance filed on his/her behalf, however he/she is not required to personally pursue any subsequent steps in the administrative remedy process.
5. Inmates are not required to use any informal grievance process or attempt to resolve with employees an alleged incident of sexual abuse/harassment.
6. A final decision shall be issued to the merits of any portion of the grievance alleging sexual abuse within 90 days of the initial filing of the grievance.
7. The facility may claim an extension of time to respond (for good cause), of up to 70 days and shall notify the inmate of the extension in writing.

Emergency Grievances

1. Inmates may file an emergency grievance if he/she is subject to a substantial risk of imminent sexual abuse.
2. After receiving an emergency grievance of this nature, the Warden or designee shall ensure that immediate corrective action is taken to protect the alleged victim.
3. An initial response to the emergency grievance to the inmate is required within 48 hours and a final decision shall be provided within five (5) calendar days.
4. Inmates may receive a disciplinary report for filing a grievance relating to alleged sexual abuse in bad faith.

5. The PREA Compliance Manager shall receive and maintain copies of all grievances related to Sexual Abuse, Sexual Harassment or Sexual Activity, for monitoring purposes.”

If an allegation of sexual abuse or sexual harassment is made through the grievance procedure or as an emergency grievance, the staff member who receives the grievance will immediately refer the matter to the Warden, the PCM, and the facility investigators who will initiate an investigation. If the investigation is extended, the offender is notified in writing.

Offenders who were interviewed by the auditor stated they are aware of the grievance procedure as it applies to PREA allegations. The warden reported that no emergency grievances were filed in this reporting period.

§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)

GEO Policy 5.1.2-A and VVCF Policy 1400.03 address outside confidential support services. As previously stated, VVCF has a written Memorandum of Understanding (MOU) with BCFS Health and Human Services and “will accept all referrals from GEO Group and will provide them with Services as specified in the Domestic Violence Program. Domestic Violence Program services may include crisis intervention, emergency care, family counseling, and legal assistance in civil and criminal cases, education and collaboration with law enforcement and other community agencies and other supportive services.”

As mentioned previously, VVCF provides inmates with access to multiple agencies for reporting sexual abuse and sexual harassment and for requesting emotional support. The Offender Handbook provides contact information for six agencies, including the Mexican Consulate, the DHS, the Texas Association Against Sexual Assault, the Rape Abuse and Incest National Network (RAINN), the Texas ACLU Prison and Jail Accountability Project, and Just Detention International.

There are also signs posted throughout the facility, often near the inmate phone bank, and notices painted on the walls that provide the contact information for the agencies.

In interviewing the offenders, the auditor found that 20 of the 33 offenders interviewed said they did not know the name of the services available in the community to help if an inmate is sexually abused. The auditor made note of this in the exit meeting. The auditor said VVCF had done a very good job of trying to inform the offenders about these services through the signs painted on the walls, the inmate orientation program, and the Offender Handbook. However, given the transient nature of this population, it appears the offenders have a difficult time relating to these services in the community.

VVCF has made an excellent effort to inform offenders of these services that are available on a statewide and national level.

In spite of the fact that many offenders did not know the names of community agencies they could reach out to, the auditor finds the facility meets the requirements of the 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)

The GEO Group Web site provides considerable PREA information to offenders' family members, friends, attorneys, advocates, and others outside the facility and explains the procedures for reporting an allegation of sexual abuse or sexual harassment. The auditor found the GEO Web site easy to navigate. A large poster in the main lobby of VVCF also provides information to visitors on how to report sexual abuse or sexual harassment.

During random interviews, offenders were found to be very knowledgeable about the process of third-party reporting and often said they would use that method to report sexual abuse and sexual harassment.

Because the PREA Web site is very informative and "user friendly," and because the offenders were knowledgeable about third party reporting, the auditor found the facility exceeded the requirements of the standard.

§115.61 – Staff and Agency Reporting Duties

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

The GEO PREA Policy requires all staff, volunteers, and contractors to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and for staff not to reveal any information related to a sexual abuse report to anyone other than to the extent necessary. Staff, contractors, and volunteers must also report any retaliation against a staff member or inmate for reporting any sexual abuse or any staff negligence that may have contributed to a sexual abuse incident.

VVCF Policy states,

"Employee and GEO Reporting Duties

Employees are required to immediately report any of the following:

- 1) Knowledge, suspicion, or information regarding an incident of Sexual Abuse or Sexual Harassment that occurred in a Facility whether or not it is a GEO Facility;
- 2) Retaliation against inmates or employees who reported such an incident; and,
- 3) Any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation.

- a. Apart from reporting to designated supervisors or officials, employees shall not reveal any information related to a Sexual Abuse report to anyone.
- b. Employees reporting Sexual Abuse or Sexual Harassment shall be afforded the opportunity to report such information to the Major or Facility management privately if requested.
- c. Unless precluded by Federal, State or local law, Medical and Mental Health Practitioners are required to report allegations of Sexual Abuse in which the alleged victim is under the age of 18 or considered a vulnerable adult to designated state or local services Agencies under applicable mandatory reporting laws.
- d. Practitioners shall inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.
- e. VVCF shall report all allegations of Sexual Abuse and Sexual Harassment, including third-party and anonymous reports, to the Facility's designated investigators and/or VVSO (if applicable) for investigation of these type of incidents."

Every staff member interviewed understood and spoke specifically about this procedure. The medical and mental health staff stated that they inform inmates of their mandatory duty to report any allegations of sexual abuse and sexual harassment. VVCF staff know they can make referrals privately by calling the GEO Corporate PREA Coordinator or by requesting to speak to an administrator.

§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)

GEO PREA Policy 5.1.2-A and VVCF Policy 1400.03 specifically state that if an inmate is subject to a substantial risk of imminent sexual abuse, VVCF staff shall take immediate action to protect the inmate.

Every VVCF staff member interviewed stated that if he/she learns that an offender is subject to a substantial risk of imminent sexual abuse that it is GEO policy and VVCF policy that the staff member take immediate steps to protect the offender and notify the appropriate supervisor. All the staff reported that the first step would be to protect the inmate and separate him from the threat.

In reviewing investigation files, the auditor found several examples of this policy being fully and correctly implemented by staff at VVCF.

§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)

GEO PREA Policy 5.1.2-A states that if an inmate reports an allegation of sexual abuse that occurred at another facility, the warden of the facility where the allegation was made must report the allegation to the warden of the facility where the sexual abuse allegedly happened. The notification must happen within 72 of learning of the allegation.

VVCF Policy 1400.03 states,

“Reporting to Other Confinement Facilities

- a. In the event that an inmate alleges that Sexual Abuse occurred while confined at another Facility, VVCF shall document those allegations and the Warden or in his/her absence, the Assistant Warden shall contact the Warden or designee where the abuse is alleged to have occurred as soon as possible, but no later than 72 hours after receiving the notification.
- b. VVCF shall maintain documentation that it has provided such notification and all actions taken regarding the incident. Copies of this documentation shall be forwarded to the PREA Compliance Manager and Corporate PREA Coordinator.
- c. Any Facility that receives notification of alleged abuse is required to ensure that the PREA allegation is investigated in accordance with standards.”

The Warden reported that during this audit reporting period there have been no allegations from a detainee that he/she has been sexually abused while confined at 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 normal for the relevant review period)
- Does Not Meet Standard (requires corrective action)

GEO PREA Policy 5.1.2-A adheres to all the requirements of this standard.

VVCF Policy 1400.03 states,

“Staff First Responder Duties

Upon receipt of a report that an inmate was sexually abused, or if an employee sees abuse, the first Security Staff member to respond to the report shall:

- a. Separate the alleged victim and abuser.
- b. Immediately notify the on duty or on call supervisor and remain on the scene until relieved by responding personnel.
- c. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
- d. Do not let the alleged victim or abuser take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating.
- e. If the first responder is not a Security Staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence; remain with the alleged victim and notify Security Staff.

f. Apart from reporting to designated supervisors, Employees shall not reveal any information related to the incident to anyone other than to staff involved with investigating the alleged incident.”

All randomly selected staff, interviewed by the auditor, described in detail how they would react as first responders in the event of a sexual abuse allegation. All staff reported that they have received training on what to do if they are a first responder. The staff also noted there is a PREA Incident Checklist for Incidents of Sexual Abuse and Harassment that employees carry on the badge chain. Staff said they would always refer to the checklist to ensure all steps were completed and documented, as required.

In reviewing 16 investigations of alleged sexual abuse and sexual harassment, the auditor found documentation that established the staff at the VVCF carried out their responsibilities of as first responders without any hesitation or problems.

§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)

GEO PREA Policy 5.1.2 – A requires that each facility have a coordinated response plan that describes how staff will respond to an allegation of sexual abuse.

The Val Verde Correctional Facility (VVCF) Coordinated Response Plan (PREA) describes the duties and responsibilities of the various staff and departments that will be involved in responding to an allegation of sexual abuse. The areas in the plan include Actions Required After Report of Sexual Abuse, Initial Response, Notification required when Sexual Abuse is alleged, Evidence Protocol-Medical Responsibilities, Mental Health Responsibilities, Investigator Responsibilities, Responsibilities When Sexual Harassment is Alleged, and Responsibilities When Sexual Activity is Alleged. The coordinated response plan meets the requirements of the standard.

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

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

There is a Val Verde Correctional Facility Collective Bargaining Agreement Between the GEO Group, Inc. and the International Union Security, Police, and Fire Professionals of America (SPFPA) and it Amalgamated Local 309 (SPFPA).

Under Article 14, Just Cause, the Collective Bargaining Agreement states, "Acceptance of the principle of progressive discipline does not limit the Company's authority to immediately dismiss for serious offenses that cannot be condoned. Officers may be placed on Administrative Leave Without Pay during an internal GEO investigation."

There is nothing in the Collective Bargaining Agreement that limits GEO's ability to remove staff who are alleged sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

§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)

GEO PREA Policy 5.1.2 – A establishes the company's requirements for monitoring retaliation that may be directed at an inmate or a staff member who reported an allegation of sexual abuse or sexual harassment or who cooperated in a sexual abuse or sexual harassment investigation. The policy follows the requirements of the standard at every level.

VCCF Policy 1400.03 states,
"Protection Against Retaliation

- a. VVCF has implemented procedures to protect inmates and employees who report Sexual Abuse or Sexual Harassment or cooperate with investigations, from retaliation by other inmates in the facility or employees.
- b. The Facility PREA Compliance Manager or Mental Health personnel shall be responsible for monitoring retaliation of individuals at VVCF.
- c. A Mental Health staff member or the PREA Compliance Manager shall meet weekly with the alleged victim in private to ensure that sensitive information is not exploited by staff or others and to see if any issues exist.
- d. Any issues discussed shall be noted on the "Protection from Retaliation Log (see Attachment B)", to include corrective actions taken to address the issue.
- e. For at least 90 days following a report of Sexual Abuse, the Facility shall monitor the conduct and treatment of inmates or employees who reported the Sexual Abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy such retaliation. Monitoring shall terminate if the allegation is determined unfounded.
- f. Items to be monitored for inmates include disciplinary reports and housing or program changes.
- g. For at least 90 days following a report of Staff Sexual Misconduct (abuse or the harassment) by another Employee, the Facility Human Resources Staff or Investigator as designated by the Warden shall monitor the conduct and treatment of the Employee who reported the Staff Sexual Misconduct (abuse or harassment) or Employee Witnesses who cooperate with these investigations to see if there are changes that may suggest possible retaliation by others, and shall act promptly to

remedy such retaliation. Monitoring shall terminate if the allegation is determined unfounded.

h. Designated staff shall meet every 30 days for 90 days with employees in private to ensure that sensitive information is not exploited by staff or others and to see if any issues exist. The Employee Assistance Program (EAP) may also be offered for emotional support services for Employees who fear retaliation.

i. Any issues discussed shall be noted on the "Employee Protection from Retaliation Log", to include corrective actions taken to address the issue.

J. Items to be monitored for Employees include negative performance reviews and Employee reassignments.

k. Items to be monitored for employees include negative performance reviews and Employee reassignments which shall be monitored by the Human Resources Department.

l. If any other individual expresses fear of retaliation, VVCF shall take appropriate measures to protect that individual as well.

m. Completed Monitoring Logs shall be retained in the investigative file of the corresponding PREA incident."

The Human Resources Specialist monitors for retaliation which may be directed toward an employee who reported sexual abuse or sexual harassment or who participated or cooperated in a PREA investigation. The auditor interviewed the Human Resources Specialist who told the auditor she would reach out on a monthly basis to an employee who could be the subject of retaliation. She said she would also monitor for shift or assignment changes and negative write-ups or evaluations. If indicated, the Human Resources Specialist could make a referral to the employee assistance program. Another option would be to move the employee to another shift or post. In that case, she said she would work with the Major to ensure the changes were made.

The PCM monitors for retaliation which may be directed toward an inmate who reported sexual abuse or sexual harassment or who participated or cooperated in a PREA investigation. The PCM told the auditor that she would see the inmate who was being monitored on a weekly basis and monitor for 90 days. The PCM said she would review work assignments, housing changes, disciplinary write-ups, and changes in behavior. The period of monitoring could be expanded beyond 90 days, if warranted, and could continue until the threat is over. If indicated, emotional support could be provided to the inmate by the QMHP or the agency that is designated to provide emotional support.

Both the Human Resources Specialist and the PCM said they keep Monitoring Logs that document their contacts with the employee or the inmate. Some monitoring was not documented in the logs in 2015, but since January of 2016, there is documentation that monitoring contacts have been recorded in the logs.

The Warden reported that there have been no allegations of retaliation directed toward a staff or an inmate during this audit period.

§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 GEO PREA Policy states that any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of 115. 43. The VVCF policy states, "Post- Allegation Protective Custody. Any use of segregated housing to protect a detainee who is alleged to have suffered Sexual Abuse shall be subject to the requirements of Section J (1) Protective Custody.

The Warden reported, "The Val Verde Facility has not segregated any inmate based upon allegations of sexual abuse this accreditation period."

§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)

GEO PREA Policy 5.1.2-E. B Investigations address the protocols that are to be followed when conducting administrative investigations regarding allegations of sexual abuse. The Policy also addresses criminal investigations and outside law enforcement assistance.

All investigators, including those at the Val Verde County Sheriff's Office, have received the specialized training for PREA Investigators.

Investigators interview the victim and any witnesses who may have relevant information. Physical evidence is secured for law enforcement. Video recordings, phone call monitoring, and inmate records are reviewed. The credibility of the alleged victim, the alleged abuser, and any witnesses is determined on a case-by-case basis. The inmate making the allegation will not be subjected to a polygraph exam.

VVCF Policy 1400.03 mirrors the GEO Corporate Policy.

If VVCF investigators substantiate an allegation of sexual abuse and a criminal investigation is warranted the Val Verde County Sheriff's Office and/or the USM will be notified. The Sheriff's Office and USM will determine if the matter should be referred for prosecution. VVCF also notifies the USM and the DHS Office of the Inspector General if the abuse involved a federal inmate. VVCF also notifies the GEO PREA Coordinator. The Office of Professional Responsibility in the GEO Corporate Office is also notified if the incident involves a VVCF staff member, contractor, or volunteer.

As previously written, the auditor and the investigator reviewed 16 investigation files regarding allegations that were made in 2015 and 2016. Of the 16 investigations, three were allegations of inmate-on-inmate sexual abuse. Two of

the allegations were unsubstantiated and one was unfounded. Ten of the allegations were for inmate-on-inmate sexual harassment. One allegation was substantiated and nine of the allegations were unsubstantiated. One of the allegations was for staff-on-inmate sexual abuse. This was determined to be unfounded. Two allegations were for staff-on-inmate sexual harassment. Both allegations, were determined to be unsubstantiated.

The auditor found that all the investigations were conducted in a professional way and documented in a written report. The reports included a description of the physical and testimonial evidence, the reasoning behind the credibility assessments, and investigative facts. In 2016, the time to complete an investigation was as a long period (12 months or more) but greatly improved over time. At the end of February 2017, the average time to complete an investigation was approximately five months or less. Given the various levels within the corporation that review allegations and investigations, the time it takes to completely finish an investigation does not seem unreasonable.

The auditor also reviewed investigations that had been completed by the Val Verde County Sheriff's Office and found those reports to be thorough and completed in a reasonable time period. The investigator provided documentation to the auditor that some sexual abuse cases had been referred to the prosecutor for review and possible prosecution. The investigations showed that Incident Review Team Meetings were conducted in all the completed investigations, unless it was determined to be unfounded. In some of the cases, in late 2015, there was no documentation that the inmate who made the allegation was monitored for retaliation. Starting in 2016 and into 2017 there was documentation the resident was being monitored for retaliation, in every case. Unless an inmate had been released or transferred before the investigation was completed, there was documentation that the inmate was informed of the outcome of the investigation.

§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)

The GEO Policy 5.1.2 –E states, "Facilities shall impose no standard higher than a preponderance of the evidence in determining whether allegations of Sexual Abuse or Sexual Harassment are Substantiated."

VVCF Policy 1400.03 states,
"Evidentiary Standard for Administrative Investigation
VVCF will impose no standard higher than a preponderance of the evidence in determining whether allegations Sexual Abuse or Harassment are substantiated."

In reviewing the investigation reports, the auditor found that the "preponderance of the evidence" standard is used to determine if an allegation is substantiated.

§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 PREA Policy 5.1.2 – E states:

K. "Reporting to Individuals in a GEO Facility or Program
(§115.73/§115.273/§115.373)

- I. At the conclusion of an investigation, the facility investigator or staff member designated by the Facility Administrator shall inform the victim of Sexual Abuse in writing, whether the allegation has been: Substantiated, Unsubstantiated or Unfounded.
 2. If the alleged abuser was an Employee, the victim shall also be informed whenever:
 - a) The Employee is no longer posted within the victim's housing unit/area.
 - b) The Employee is no longer employed at the facility;
 - c) The facility learns that the Employee has been indicted on a charge related to the Sexual Abuse within the facility; or,
 - d) The facility learns that the Employee has been convicted on a charge related to Sexual Abuse within the facility.
 3. If the alleged abuser was another Individual in a GEO Facility or Program, the victim shall also be informed whenever:
 - a) The facility learns that the alleged abuser has been indicted on a charge related to Sexual Abuse within the facility; or,
 - b) The facility learns that the alleged abuser has been convicted on a charge related to Sexual Abuse within the facility.
- Note: Items (b) and (c) are not required for allegations determined Unfounded.
4. The individual shall receive the original completed "Notification of Outcome of Allegation" form (see attachment D) in a timely manner and a copy of the form shall be retained as part of the investigative file.
 5. The individual will be provided an updated notification at the conclusion of a criminal proceeding, if the individual is still in custody at the facility
 6. The facility's obligation to report under this section shall terminate if the individual is released from custody .
 7. If the facility did not conduct the investigation, it shall request the relevant information from the investigating agency in order to inform the individual.
 8. At the conclusion of every investigation of Sexual Abuse, the written results shall be promptly forwarded to the Corporate PREA Coordinator for review."

The VVCF Policy 1400.03 mirrors the GEO Corporate Policy.

As stated in the GEO Policy, VVCF uses the "Notification of Outcome of Allegation" form that is provided to the offender that informs the offender of the outcome of the investigation and any action taken against the abuser. The practice of VVCF is to inform the inmate of the outcome of any PREA investigation, be it an allegation of sexual abuse or sexual harassment. Of the 16 PREA investigations that the auditor reviewed, in six of the investigations, the inmate informed of the outcome of the investigation. In the other ten investigations the inmate had been transferred or released before the investigation was completed.

§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)

The GEO PREA Policy 5.1.2 - E and VVCF Policy 1400.03 strictly prohibit any sexual contact or misconduct between staff and inmates and state that termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. The policies also state that any violation of the sexual abuse and sexual harassment policies shall be subject to disciplinary sanctions up to and including termination. Terminations, or resignations of staff who would have been terminated if not for the resignation, will be reported to law enforcement, unless the activity was clearly not criminal, and to any relevant licensing bodies.

VVCF Policy 1400.03 states,

"Employee Disciplinary Sanctions

- a. Employees may be subject to significant disciplinary sanctions for sustained violations of Sexual Abuse and Harassment policies, up to and including termination for any Employee found guilty of Sexual Abuse.
- b. All terminations and resignations for such conduct shall be reported to law enforcement and licensing agencies, unless the activity was clearly not criminal.
- c. VVCF is committed to investigating, disciplining and/or referring for prosecution, Employees that engage in such behavior."

The GEO Employee Handbook states:

"Sexual Abuse and Sexual Harassment - GEO has a zero tolerance for sexual abuse or sexual harassment of any individual lawfully housed in a GEO facility or otherwise served by GEO. Therefore, sexual abuse or sexual harassment of any individual lawfully housed in a GEO facility or program or otherwise served by GEO is strictly prohibited and will not be tolerated. Unwelcome sexual advances, request for sexual favors, and other verbal or physical contact of a sexual nature with any individual lawfully housed in a GEO facility or otherwise served by GEO will subject you to immediate disciplinary action up to and including termination."

The Warden reported that no employees have been terminated for sexual abuse involving an offender in this audit cycle.

§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)

The GEO PREA Policy 5.2.1-E meets all the requirements of the standard. The policy states:

- a. "Any Contractor or Volunteer who engages in Sexual Abuse or Sexual Harassment shall be prohibited from contact with Individuals in a GEO Facility or Program and shall be reported to law enforcement and relevant licensing bodies, tmlcss the activity was clearly not criminal.
- b. In the case of any other violation of GEO Sexual Abuse or Sexual Harassment policies by the Contractor or Volunteer, the facility shall notify the applicable CEO Contracting Authority who will take remedial measures, and shall consider whether to prohibit further contact with the Individuals in a GEO Facility or Program."

The Warden reported that there have been no allegations of sexual abuse by contractors or volunteers during this Audit Cycle.

§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)

The GEO PREA Policy 5.2.1- E meets all the requirements of the standard. The policy is stated as follows:

2. "Individuals In a GEO Facility or Program Disciplinary Sanctions (§115.78/§115.278)
 - a. Individuals in a GEO Facility or Program who were found guilty of engaging in Sexual Abuse involving other Individuals in a GEO Facility or Program (either through administrative or criminal investigations) shall be subject to formal disciplinary sanctions.
 - b. Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the individual's disciplinary history, and the sanctions imposed for comparable offenses by other individuals with similar histories.
 - c. The disciplinary process shall consider whether an individual's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any should be imposed.
 - d. If the facility offers counseling or other interventions designed to address the reasons or motivations for the abuse, the facility shall consider requiring the offending individual to participate.
 - e. Disciplining an Individual in a GEO Facility or Program for sexual contact with an Employee is prohibited unless it is found that the Employee did not consent to the contact.

- f. A report of Sexual Abuse made in good faith by an Individual in a GEO Facility or Program, based upon a reasonable belief that the alleged conduct occurred, will not constitute false reporting or lying.
- g. Facilities may not deem that Sexual Activity between Individuals in a GEO Facility or Program is Sexual Abuse unless it is determined that the activity was coerced.
- h. The PREA Compliance Manager shall receive copies of all disciplinary reports regarding Sexual Activity and Sexual Abuse for monitoring purposes.
- i. The incident shall be reported to law enforcement, unless the activity was clearly not criminal.”

VVCF Policy 1400.03 states:

“2. Individuals in a GEO Facility or Program Disciplinary Sanctions

- a. Inmates who are found guilty of engaging in Sexual Abuse/ Activity involving other inmates (either through administrative or criminal investigations) shall be subject to formal disciplinary sanctions.
- b. The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any should be imposed.
- c. A report of Sexual Abuse made in good faith by an inmate, based upon a reasonable belief that the alleged conduct occurred, will not constitute false reporting or lying.
- d. Facilities may not deem that Sexual Activity between inmates is Sexual Abuse unless it is determined that the activity was coerced.
- e. The PREA Compliance Manager will receive copies of all disciplinary reports regarding Sexual Activity and Sexual Abuse for monitoring purposes.
- f. The incident shall be reported to law enforcement, unless the activity was clearly not criminal. VVCF is committed to investigating, disciplining and/or referring for prosecution, inmates that engage in such behavior.”

The QMHP told the auditor that she would conduct an evaluation on the sexual abuser, if the investigation identifies the person. She stated that the facility is somewhat limited in providing therapy or counseling because this is a transient population.

The auditor also reviewed the Inmate Handbook that described the disciplinary procedures for sexual abuse and sexual harassment.

The Warden stated, “This accreditation period there have been no detainees sent to disciplinary concerning PREA allegations.”

§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)

GEO PREA Policy 5.1.2-A meets all the requirements of the standard. VVCF Policy 1400.03 also addresses the standard and states,

“Medical and Mental Health Screenings; History of Sexual Abuse

a. If during the intake assessment, persons tasked with screening determine that a detainee in the Val Verde Correctional Facility is at risk for either sexual victimization or abusiveness, the inmate shall be referred to Mental Health for further evaluation.

b. Any inmate at the Val Verde Correctional Facility who is identified (pursuant to the screening conducted in Section D 1) who has previously experienced prior sexual victimization or has previously perpetrated Sexual Abuse, whether in an institutional setting or the community shall be offered a follow-up meeting with a Medical or Mental Health Practitioner within 14 days of the initial intake screening.

c. Information related to sexual victimization or abusiveness in an institutional setting is limited only to Medical and Mental Health Practitioners and other employees as necessary to inform treatment plans, security and management decisions or otherwise required by Federal, State or local law.

d. Medical and Mental Health Practitioners are required to obtain informed consent from inmates at Val Verde Correctional Facility before reporting information about prior sexual victimization that did not occur in an institutional setting (unless the individual is under the age of 18).”

The auditor reviewed six offender files and confirmed that the PREA Risk Assessment, and the Mental Health Evaluations are documented as required. As previously stated, the initial screening is done by the case manager. If the inmate reported being sexually abused or sexually abusing someone else, the inmate would be referred to the QMHP for a follow-up mental health evaluation within 14 days. These meetings are documented in the Mental Health Evaluation. The inmate has the right to decline the meeting with the QMHP and when this happens, the inmate acknowledges in writing that he/she has declined this meeting.

The Health Administrator and the QMHP stated the medical and mental health staff do obtain informed consent from offenders before reporting about prior sexual victimization that did not occur within an institutional setting. They also inform the offenders that they are mandatory reporters. The medical and mental health staff do not have to obtain informed consent when reporting sexual abuse.

The Health Administrator and the Mental Health Clinician both stated that information is confidential and shared only with other staff on a “need-to-know” basis. The information is maintained in the mental health offices.

§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)

The GEO PREA Policy 5.2.1-A states:

“7. Access to Emergency Medical and Mental Health Services (§115.82/§115.282)

a. Victims of Sexual Abuse in custody shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services as directed by Medical and Mental Health Practitioners. Community

Confinement Facilities shall utilize local community Facilities to provide emergency medical treatment and crisis intervention.

b. This access includes offering timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, where medically appropriate. All services shall be provided without financial cost to the victim and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

c. No attempt will be made by Facility medical staff to clean or treat the victim unless the injuries are such that not treating them would cause deterioration of the victim's medical condition; however, visible injuries shall be documented both photographically and in writing, and placed in the victim's medical record.

d. Facility Medical staff shall not participate in sexual assault forensic medical examinations or evidence gathering. Victims/Abusers shall either be transported to a local community Facility for examination by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) or one shall be brought into the Facility to conduct the examination. All refusals of medical services shall be documented."

VVCF Policy 1400.03 follows the GEO policy and also meets all the requirements of the standard. The VVCF Policy states,

"Access to Emergency Medical and Mental Health Services

a. Victims of Sexual Abuse in VVCF custody shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services as directed by Medical and Mental Health Practitioners.

b. This access includes offering timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, where medically appropriate. All services shall be provided without financial cost to the victim.

c. No attempt will be made by VVCF medical staff to clean or treat the victim unless the injuries are such that not treating them would cause deterioration of the victim's medical condition; however, visible injuries shall be documented both photographically and in writing, and placed in the victim's medical record.

d. VVCF Medical staff shall not participate in sexual assault forensic medical examinations or evidence gathering. Victims/Abusers will be transported to VVRMC for examination by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) or one shall be brought into the Facility to conduct the examination. All refusals of medical services shall be documented. The results of the physical examination and all collected physical evidence are provided to the VVSO Investigators."

In the interview with the Health Administrator she stated that a victim of a sexual assault would be taken to the Val Verde Regional Medical Center for a forensic exam. She also stated that offenders would be offered information and timely access to emergency sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Female inmates will be offered timely information and access to emergency contraception.

Treatment services are provided to victims of sexual abuse at no cost to the offender regardless of whether the victim names the abuser or cooperates in the investigation.

The PCM provided documentation that forensic exams have been given to inmates of VVCF at the Val Verde Regional Medical Center during this audit cycle.

§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 PREA Policy 5.1.2 – A states:

N. "Ongoing Actions After Reports of Sexual Abuse

1. Ongoing Medical and Mental Health Care (§J15.83/§115.283)

- a. Each Facility shall offer medical and mental health evaluations (and treatment where appropriate) to all victims of Sexual Abuse that occurs in any prison, jail, lockup, or juvenile facility.
- b. The evaluation and treatment should include follow-up services, treatment plans, and (when necessary) referrals for continued care following a transfer or release.
- c. These services shall be provided in a manner that is consistent with the level of care the individual would receive in the community and include pregnancy tests and all lawful pregnancy-related medical services where applicable.
- d. Victims shall also be offered tests for sexually transmitted infections as medically appropriate. All services shall be provided without financial cost to the victim.
- e. The Facility shall attempt to conduct a mental health evaluation on all known inmate on inmate or resident on resident abusers within 60 days of learning of such abuse history and offer treatment deemed appropriate by Mental Health Practitioners. Note: "known abusers" are those inmate or resident abusers in which a PREA investigation determined either administratively substantiated or substantiated by outside law enforcement."

VVCF Policy 1400.03 is very similar to the GEO Policy and states,

"M. Ongoing Actions After Reports of Sexual Abuse

1. Ongoing Medical and Mental Health Care

- a. VVCF will offer medical and mental health evaluations (and treatment where appropriate) to all victims of Sexual Abuse that occurs in any prison, jail, lockup, or juvenile Facility.
- b. The evaluation and treatment should include follow-up services, treatment plans, and (when necessary) referrals for continued care following a transfer or release.
- c. These services shall be provided in a manner that is consistent with the level of care the individual would receive in the community and include pregnancy tests and all lawful pregnancy-related medical services where applicable.

- d. Victims shall also be offered tests for sexually transmitted infections as medically appropriate. All services shall be provided without financial cost to the victim.
- c. VVCF shall attempt to conduct a mental health evaluation on all known inmate abusers within 60 days of learning of such abuse history and offer treatment deemed appropriate by Mental Health Practitioners. Note: "know abusers" are those inmate abusers in which a PREA investigation determined either administratively substantiated or substantiated by outside law enforcement.
- f. All refusals for medical and mental health services shall be documented."

The Health Services Administrator and QMHP both said the level of care provided to the offenders in the VVCF is better than the level of care the offender would receive in the community. Every inmate who is at risk of victimization or abusiveness is seen by a QMHP team within 14 days of admission. The Health Services Administrator said that the evaluation and treatment of a victim of sexual abuse would involve an initial immediate assessment by an R.N. with immediate services to follow. The QMHP said a victim of sexual abuse would be seen as quickly as possible and offered counseling and, if needed, on-going basic therapy.

The Health Administrator told the auditor that if pregnancy resulted from a sexual abuse, as described in 115.83 (d), such victim would receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

Victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

Treatment services will be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

The PCM provided documentation that inmate victims have received the treatment 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)

GEO Policy 5.1.2 – A states:

3. Sexual Abuse Incident Reviews (§115.86/§115.286)
 - a. "Facilities are required to conduct a Sexual Abuse incident review at the conclusion of Every Sexual Abuse investigation in which the allegation has been determined substantiated or unsubstantiated.
 - b. Such review shall occur within 30 days of the conclusion of the investigation. The review team shall consist of upper-level management officials and the local PREA Compliance Manager, with input from line supervisors, investigators and Medical or Mental Health Practitioners. The Corporate PREA Coordinator may be consulted as part of this review.

- c. Unless mandated by client contract, a "PREA After Action Review Report (see Attachment J)" of the team's findings shall be completed and submitted to the Corporate PREA Coordinator no later than 10 working days after the review. The Facility shall implement the recommendations for improvement, or document its reasons for not doing so.
- d. The PREA Compliance Manager shall maintain copies of all completed "PREA After Action Review Reports" and a copy shall also be maintained in the corresponding investigative file."

VVCF Policy 1400.03 corresponds the the GEO Policy and states,

"3. Sexual Abuse Incident Reviews

- a. VVCF is required to conduct a Sexual Abuse incident review at the conclusion of every Sexual Abuse investigation in which the allegation has been determine substantiated or unsubstantiated.
- b. Such review shall occur within 30 days of the conclusion of the investigation. The review team shall consist of upper-level management officials and the local PREA Compliance Manager, with input from line supervisors, investigators and Medical or Mental Health Practitioners. The Corporate PREA Coordinator shall attend via telephone or in person.
- c. A "PREA After Action Review Report of the team's findings shall be completed and submitted to the Corporate PREA Coordinator no later than 10 working days after the review. VVCF shall implement the recommendations for improvement, or document its reasons for not doing so.
- d. The PREA Compliance Manager will maintain copies of all completed "PREA After Action Review Reports" and a copy shall also be maintained in the corresponding investigative file."

The Warden said the VVCF Incident Review Team members include the Warden, an Assistant Warden, the Health Administrator, the QMHP, a Major, and the PCM.

Of the 16 investigations reviewed by the auditor, 14 had Incident Review Team meetings and PREA After Action Review Reports. The other two investigations determined the allegations were unfounded. The auditor found the PREA After Action Review Reports were well written and provided considerable detail. It was clear in each report that the team considered the five (5) provisions that are noted in the standard.

The After Action Review Reports were sent to the GEO Corporate PREA Coordinator.

§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 GEO PREA Policy 5.1.2 - A requires the following:

Data Collection (§115.87/§115.287)

- a. "Each Facility shall collect and retain data related to Sexual Abuse as directed by the Corporate PREA Coordinator.
- b. This data shall be aggregated at least annually and is required to include, at a minimum, the data necessary to answer all questions on the most recent version of the Survey of Sexual Violence conducted by the Bureau of Justice Statistics (BJS).
- c. Upon request, GEO shall provide such data from the previous calendar year to the Department of Justice no later than June 30.
- d. Facility PREA Compliance Managers shall be responsible for compiling data collected on Sexual Activity, Sexual Harassment and Sexual Abuse incidents and forwarding statistical reports to the Corporate PREA Coordinator on a monthly basis. ("Monthly PREA Incident Tracking Log", see Attachment K).
- e. In addition to submitting the Monthly PREA Incident Tracking Log, PREA Compliance Managers will ensure that a PREA Survey is created, updated and submitted for review and approval in the PREA Portal for every allegation of Sexual Abuse, Sexual Harassment and Sexual Activity as required."

VVCF Policy 1400.03 states,

"P. Data

1. Data Collection

- a. VV CF will collect and retain data related to Sexual Abuse as directed by the Corporate PREA Coordinator.
- b. This data shall be aggregated at least annually and is required to include, at a minimum, the data necessary to answer all questions on the most recent version of the Survey of Sexual Violence conducted by the Bureau of Justice Statistics (BJS). The findings will be presented to the Field Office Director and ICE/ERO HQ for use in determining whether changes are needed to existing policies and practices to further the goal of eliminating sexual abuse.
- c. Upon request, VVCF will provide such data from the previous calendar year to the Department of Justice no later than June 30.
- d. Facility PREA Compliance Managers shall be responsible for compiling data collected on Sexual Activity, Sexual Harassment and Sexual Abuse incidents and forwarding statistical reports to the Corporate PREA Coordinator on a monthly basis. ("Monthly PREA Incident Tracking Log", see Attachment D)."

Data is collected on every allegation of sexual abuse and sexual harassment at the VVCF. The PREA Compliance Manager is responsible for collecting and organizing the data. Information is provided to the PREA Compliance Manager primarily from the institution investigators. Data is summarized on the Monthly and Annual PREA Incident Tracking Logs. Data is forwarded to the PREA Coordinator in the GEO Corporate Office where it is collected and aggregated for all the company's facilities.

GEO exceeds the standard in the organized way it goes about collecting PREA data, doing an analysis of the data, and making changes in systems or physical plants, based on the data. GEO uses this information and data to make informed decisions to improve sexual safety throughout all of its facilities. For this reason, the auditor finds that VVCF exceeds the requirements of this standard.

§115.88 – Data Review for Corrective Action

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

As previously stated, the GEO PREA Policy 5.2.1-A requires the VVCF to review the data collected regarding sexual abuse and sexual harassment allegations to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies; and to identify problem areas and take corrective actions.

VVCF Policy 1400.03 states,

“2. Data Review for Corrective Action

- a. GEO-VVCF review all data collected in order to assess and improve the effectiveness of its Sexually Abusive Behavior Prevention and Intervention Program.
- b. The Corporate PREA Coordinator shall prepare an annual report which shall include findings and corrective actions taken for each GEO Facility.
- c. All aggregated Sexual Abuse data shall be made readily available to the public upon approval, at least annually through GEO's website or the client's website as required by contract.
- d. In addition to submitting the Monthly PREA Incident Tracking Log, PREA Compliance Manager will ensure that a PREA Survey is created, updated and submitted for review and approval in the PREA Portal for every allegation of Sexual Abuse, Sexual Harassment and Sexual Activity as required.”

The GEO Group 2016 Annual PREA Report is a very comprehensive 15-page report that has numerous data points and areas of information regarding sexual abuse and sexual harassment. All the GEO Annual PREA Reports are available on the GEO Group Web site.

As previously noted, GEO exceeds the standard in the organized way it goes about collecting PREA data, doing an analysis of the data, and making changes in systems or physical plants, based on the data. GEO uses its Annual Report to track vital information and to make informed decisions to improve sexual safety throughout all of its facilities. For this reason, the auditor finds that VVCF exceeds the requirements of this standard.

§§115.89 – Data Storage, Publication, and Destruction

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

The GEO PREA Policy 5.2.1-A states,

“Storage, Publication, and Destruction

Data collected pursuant to this procedure shall be securely retained for at least 10 years or longer if required by state statute. Before making aggregated Sexual Abuse data publicly available, all personal identifiers shall be removed.”

VVCF Policy 1400.03 states,

"3. Data Storage, Publication, and Destruction

a. All case records associated with claims of sexual abuse are maintained and filed in a secure file cabinet in the Compliance Office.

b. Data collected pursuant to this procedure shall be securely retained for at least 10 years or longer if required by state statute. Before making aggregated Sexual Abuse data publicly available, all personal identifiers shall be removed."

The PCM at the VVCF is responsible for the maintenance and secure storage of PREA data. Access to data is tightly controlled. The GEO Group PREA Policy and the VVCF policy require that data be retained for at least 10 years.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his knowledge and no conflict of interest exists with respect to his ability to conduct an audit of the agency under review. The auditor finds that as of July 23, 2017, the Val Verde Correctional Facility meets the requirements of the Prison Rape Elimination Act, Prison and Jail Standards.



December 27, 2018

Auditor Signature

Date