

PREA Facility Audit Report: Final

Name of Facility: West Texas Behavioral Health Residential Treatment Center

Facility Type: Community Confinement

Date Interim Report Submitted: NA

Date Final Report Submitted: 05/09/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Karen d. Murray	Date of Signature: 05/09/2022

AUDITOR INFORMATION	
Auditor name:	Murray, Karen
Email:	kdmconsults1@gmail.com
Start Date of On-Site Audit:	04/14/2022
End Date of On-Site Audit:	04/14/2022

FACILITY INFORMATION	
Facility name:	West Texas Behavioral Health Residential Treatment Center
Facility physical address:	3700 Mattox, El Paso, Texas - 79925
Facility mailing address:	

Primary Contact	
Name:	Ryan Hawk
Email Address:	rhawk@epcounty.com
Telephone Number:	915-772-8537 ext

Facility Director	
Name:	Belinda Hernandez
Email Address:	behernandez@epcounty.com
Telephone Number:	9157728537

Facility PREA Compliance Manager	
Name:	Belinda Hernandez
Email Address:	bhernandez@epcounty.com
Telephone Number:	

Facility Health Service Administrator On-Site	
Name:	Daphne Jones
Email Address:	Djones@umcelpaso.org
Telephone Number:	915-772-8537

Facility Characteristics	
Designed facility capacity:	120
Current population of facility:	60
Average daily population for the past 12 months:	60
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	18-99
Facility security levels/resident custody levels:	Minimum
Number of staff currently employed at the facility who may have contact with residents:	34
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	0
Number of volunteers who have contact with residents, currently authorized to enter the facility:	0

AGENCY INFORMATION	
Name of agency:	El Paso County Community Supervision and Corrections Department
Governing authority or parent agency (if applicable):	
Physical Address:	800 East Overland Ave, El Paso, Texas - 79901
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Ryan Hawk	Email Address:	rhawk@epcounty.com

SUMMARY OF AUDIT FINDINGS	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
Number of standards exceeded:	
1	<ul style="list-style-type: none"> • 115.253 - Resident access to outside confidential support services
Number of standards met:	
40	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-04-14
2. End date of the onsite portion of the audit:	2022-04-14

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	<p>On 4.3.2022 at 2:00 pm, this Auditor phoned the Associate Director of Sexual Assault Services at 915.539.1000 and inquired as to what steps the Center would take if a resident needed their services. This Auditor needed to leave a message as the Center is only open Monday through Friday from 8:00-5:00 pm. A return phone call was not received. On 4.14.2022, during the onsite review, this Auditor tested the phone system. Upon selecting the option for the advocacy center the call was answered by the center. The Auditor explained the reason for the call and the advocate stated she was aware of the memorandum of understanding and would assist clients from the center with any advocacy services they may require.</p> <p>On 4.3.2022, at 12:48 pm, this Auditor phone the El Paso County Sheriff's Department at 915.546.2280 and inquired within on how they would respond to a resident contacting them in regard to sexual abuse occurring at the West Texas Behavioral Health Residential Treatment Center. After a proper introduction, I was transferred to the Supervisor "Ester" who explained, "Dispatch would advise the sergeant of the claims and dispatch a field unit to respond in their patrol processes of those involved, complete necessary steps in assessing the situation and take action in regard to what they find."</p> <p>On 4.3.2022 at 1:00 pm, this Auditor emailed prea.ombudsman@tdcj.texas.gov and tested the system for reporting anonymously. On 4.4.2022 at 7:40 am, the following response was received by the Auditor, via email.</p> <p>Good morning Mrs. Murray, When the PREA Ombudsman Office receives an anonymous report of sexual abuse or sexual harassment, we send the information immediately to the unit for investigation without providing the inmates name who reported it. Once the investigation has been completed, we send the victim a response letter containing the results of the investigation.</p> <p>Regards, PREA Ombudsman Office/BB PH: 936/437-5570 PREA.OMBUDSMAN@TDCJ.TEXAS.GOV</p>

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	120
15. Average daily population for the past 12 months:	60
16. Number of inmate/resident/detainee housing units:	2
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	56
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	3
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	5

47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	34
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	1
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	8
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The facility provided a listing of residents by housing unit, by gender, by race. the Auditor randomly chose names of residents to ensure residents were chosen from each housing unit of both male and female residents.

<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>6</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Through the tour, interviews, review of resident files and 12-month averages, the Auditor could corroborate the facility's statement that there were no residents of this category.</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Through the tour, interviews, review of resident files and 12-month averages, the Auditor could collaborate the facility's statement that there were no residents of this category.</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Through the tour, interviews, review of resident files and 12-month averages, the Auditor could collaborate the facility's statement that there were no residents of this category.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Through the tour, interviews, review of resident files and 12-month averages, the Auditor could collaborate the facility's statement that there were no residents of this category.</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Through the tour, interviews, review of resident files and 12-month averages, the Auditor could collaborate the facility's statement that there were no residents of this category.</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>4</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Through the tour, interviews, review of resident files and 12-month averages, the Auditor could collaborate the facility's statement that there were no residents of this category. However, one resident did identify as asexual. This resident was counted in line 66.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Through the tour, interviews, review of resident files and 12-month averages, the Auditor could collaborate the facility's statement that there were no residents of this category.</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>2</p>

69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	This facility does not utilize segregated housing.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.

Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

71. Enter the total number of RANDOM STAFF who were interviewed:	12
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Security staff from all three shifts were interviewed.

Specialized Staff, Volunteers, and Contractor Interviews

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

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	8
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

<p>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Agency contract administrator <input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment <input type="checkbox"/> Line staff who supervise youthful inmates (if applicable) <input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable) <input checked="" type="checkbox"/> Medical staff <input checked="" type="checkbox"/> Mental health staff <input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches <input checked="" type="checkbox"/> Administrative (human resources) staff <input type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff <input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations <input type="checkbox"/> Investigative staff responsible for conducting criminal investigations <input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness <input type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation <input checked="" type="checkbox"/> Staff on the sexual abuse incident review team <input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation <input checked="" type="checkbox"/> First responders, both security and non-security staff <input checked="" type="checkbox"/> Intake staff <input type="checkbox"/> Other
<p>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</p>	<ul style="list-style-type: none"> <input checked="" type="radio"/> Yes <input type="radio"/> No
<p>a. Enter the total number of VOLUNTEERS who were interviewed:</p>	<p>1</p>

<p>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Mental health/counseling</p> <p><input type="checkbox"/> Religious</p> <p><input checked="" type="checkbox"/> Other</p>
<p>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>No text provided.</p>

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

<p>84. Did you have access to all areas of the facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
---	---

Was the site review an active, inquiring process that included the following:

<p>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	Four interviews with male and female residents occurred. All security staff were formally interviewed; therefore, no informal interviews were conducted.
--	--

Documentation Sampling

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

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
--	--

91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	Resident and staff files were reviewed for each interviewed by using the PREA Community Confinement Facilities Documentation Review Employee and Resident templates.
---	--

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual abuse investigation files:	The facility has not experienced an allegation of abuse or harassment in the past 36 months.
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)

Inmate-on-inmate sexual abuse investigation files

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)

Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	The facility has not experienced an allegation of abuse or harassment in the past 36 months.
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The facility has not experienced an allegation of abuse or harassment in the past 36 months.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No
---	--

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No
---	--

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?	<input type="radio"/> The audited facility or its parent agency <input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) <input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm) <input type="radio"/> Other
Identify the name of the third-party auditing entity	PREA Auditors of America

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.211	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Document Review:

1. West Texas Behavioral Health Residential Treatment Center PAQ
2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021
3. Agency Organizational Chart, dated 2.24.2020

Interviews:

1. Random clients
2. Targeted clients
3. Resident Monitors
4. PREA Coordinator
5. Operations Manager

Through interviews with clients and staff and review of client and staff files, it is evident that this facility interweaves PREA standard requirements in their daily protocols. Both clients and staff could speak to facility PREA practices and protocols being used as is described in the agency's PREA policy. The PREA Coordinator could attest to having the required time to implement PREA protocols.

Site Review Observation:

During the tour of the facility, the Auditor witnessed PREA Zero-tolerance, Audit Notices and Advocate brochures in day rooms, classrooms and hallways in each building. PREA posters included information on third party, internal and external reporting to include contact and address information for advocates. During the tour the Auditor was taken to Room 146, which is solely used clients who wish to make confidential phone calls to advocates, law enforcement, ombudsman or agency reporting offices. The Operations Manager placed the phone on speaker, dialed one phone number and each option for reporting was mentioned on the recording. The Auditor chose the option for the sexual abuse agency who the facility has a current memorandum of understanding, and an advocate answered the phone.

(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility mandates zero-tolerance toward all forms of sexual abuse and sexual harassment in the facility it operates and those directly under contract. The facility has a written policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. The policy includes sanctions for those found to have participated in prohibited behaviors. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of residents.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 4, sections a. and e., state,

- a. "West Texas Community Supervision and Corrections Department – Behavioral Health Residential Center (BHRTC) is committed to providing a safe and healthy environment for clients, staff, visitors, contractors and volunteers. BHRTC is committed to protecting clients from sexual abuse and sexual harassment. Sexual abuse and sexual harassment compromise the safety of everyone in our center and will not be tolerated. The center's policy will serve as a mechanism for complying with the Prison Rape Elimination Act (PREA) and the PREA National Standards.
- e. BHRTC has mandated a zero-tolerance policy relating to any sexual misconduct and sexual harassment between staff, volunteers, contractors, and clients or their family members. All allegations, regardless of the source, of coercive, or consensual sexual misconduct/harassment occurring among clients will be fully investigated, sanctioned (if authority to do so exists), and referred for prosecution if the prohibited conduct violates state criminal laws."

(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the PREA Coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities. The position of the PREA Coordinator in the agency's organizational structure.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 4, second paragraph, states, "The BHRTC Operations Manager is designated as the In-house investigator. The Residential Monitor Supervisors will serve as PREA Detection Managers. The Assistant Director will be designated as the PREA Coordinator and will have sufficient time and authority to develop, implement, and oversee efforts to comply with the PREA standards."

The facility provided an agency organizational chart. The organization chart designated the CCF Assistant Director as the PREA Coordinator. The PREA Coordinator reports to the Deputy Director.

Through such reviews, the facility meets standard requirements.

115.212	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review: 1. West Texas Behavioral Health Residential Treatment Center PAQ</p> <p>Interviews: 1. PREA Coordinator</p> <p>During the pre-audit phase, the PREA Coordinator conveyed the agency did not have privatized contracts.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states agency does not contract with private agencies for confinement services of their residents.</p> <p>Through such reviews, the facility meets standard requirements.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. West Texas Behavioral Health Residential Treatment Center PAQ
2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021
3. PREA Supervisions and Monitoring Plan – WTCS CD- Behavioral Health Residential Treatment Center, dated 2020
4. El Paso County Community Supervision and Corrections Department Variance Memorandums, dated November 2021 through March 2022
5. El Paso County Community Supervision and Corrections Department Staffing Plan Review, Memorandum for Record, dated 11.23.2021

Interviews:

1. Random clients
2. Targeted clients
3. Resident Monitors
4. Operations Manager

Staff and clients interviewed could attest to a Resident Monitor Supervisor being available on each shift. Clients and staff interviewed each stated female and male staff rarely enter opposite gender client dorms; if opposite gender staff enter client areas, gender announcements of 'female on bay or male on bay' announcements were made, before staff entered.

(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility requires the facility to develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect residents against abuse. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of residents is 67. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of residents on which the staffing plan was predicated is 60.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 6, section a., states, "BHRTC shall develop and document a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect clients against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, BHRTC shall take into consideration:

1. The physical layout of each building at BHRTC;
2. The composition of the client population;
3. The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
4. Any other relevant factors.
 - a. In circumstances where the staffing plan is not complied with, BHRTC shall document and justify all deviations from the plan.
 - b. Whenever necessary, but no less frequently than once each year, BHRTC shall assess, determine, and document whether adjustments are needed to:
 - (i) The staffing plan established pursuant to paragraph (a) of this section;
 - (ii) Prevailing staffing patterns;
 - (iii) The center's deployment of video monitoring systems and other monitoring technologies; and
 - (iv) The resources the center has available to commit to ensure adequate staffing levels.

The facility provided PREA Supervisions and Monitoring Plan – WTCS CD- Behavioral Health Residential Treatment Center. The staffing plan includes the following information:

- Judicial, Federal, Internal and External Finding of Inadequacy
- Physical Plant
- Monitoring and Staffing Ratio
- Monitoring
- Staff Monitoring Clients
- Supervisory Personnel
- Number and Placement of Staff
- Residential Monitor Placement
- Video Monitoring System
- Staffing Plan Review

(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility documents each time the staffing plan is not complied with, the facility documents and justifies deviations. The facility had 11 deviations, in the last 12 months, from the required ratios of their staffing plan. Primary reasons for deviating from the staffing plan included COVID-Testing, COVID 19-Positive, Vacation, Employees out sick non FMLA, and Employees out sick FMLA.

The facility provided El Paso County Community Supervision and Corrections Department Variance Memorandums. Memorandums include the following information in regard to staffing plan deviations.

- Addressed to Deputy Director
- Through: PREA Coordinator
- From: PREA Compliance Manager
- Subject: Staffing Variance for Residential Monitors (Security)
- Date

Staffing Plan deviations occurred on the following dates:

- 3.21.2021 – 3.24.2021
- 4.18.2021 – 4.24.2021
- 4.25.2021 – 4.29.2021
- 4.25.2021 – 5.1.2021
- 06.20.2021 – 6.23.2021
- 10.10.2021 – 10.16.2021
- 10.31.2021 - 11.6.2021
- 11.7.2021 - 11.13.2021
- 11.14.2021 – 11.20.2021
- 11.21.2021 – 11.27.2021
- 1.30.2022 – 2.5.2022
- 2.27.2022 – 3.5.2022

(c) The West Texas Behavioral Health Residential Treatment Center PAQ states at least once every year the facility, reviews the staffing plan to see whether adjustments are needed in (1) the staffing plan, (2) prevailing staffing patterns, (3) the deployment of video monitoring systems and other monitoring technologies, or (4) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan

The facility provided El Paso County Community Supervision and Corrections Department Staffing Plan Review, Memorandum for Record. Records include annual staffing plan reviews for years 2020 and 2021. Reviews include the following narrative:

- November 16, 2020 – “On the above date the Staffing Plan for BHRTC was reviewed. There was a change to reduce the required number of Residential Monitors needed during the first shift from 4 to 3 as a result of the lowered average number of clients in the facility. Additionally, the shift times where changed to reflex first shift working 6pm to 2pm and second shift working 2pm to 10pm.”
- November 23, 2021 – “On the above date the Staffing Plan for BHRTC was reviewed. There was a change to reduce the required number of Residential Monitors needed during the first shift from 4 to 3 as a result of the lowered average number of clients in the facility. Additionally, the shift times where changed to reflex first shift working 6pm to 2pm and second shift working 2pm to 10pm.”

Through such reviews, the facility meets standard requirements.

115.215	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. El Paso County Community Supervision and Corrections Department Memorandum, Subject: PREA Standard 115.215, dated 3.7.2021 4. El Paso County Community Supervision and Corrections Department Training Record, dated 10.21.2021 5. National PREA Resource Center Guidance in Cross Gender and Transgender Pat Searches PowerPoint, not dated <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random clients 2. Targeted clients 3. Resident Monitors 4. Intake staff 5. Operations Manager <p>Interviews with staff demonstrated cross-gender searches had been trained; however, staff interviewed stated cross-gender such searches had not been performed. Clients interviewed stated strip and pat down searches conducted were respectable. Clients stated urinalysis testing at this facility was predominately completed using mouth swab test, therefore urine testing was done respectably.</p> <p>Site Review Observation:</p> <p>During the tour of the facility the Auditor observed the intake area where searches were conducted. Searches were conducted in a private restroom where staff are able to stand at the door, giving the resident privacy. Residents are allowed to shower alone in a private shower with a PREA curtains in each shower stall used.</p> <p>(a) West Texas Behavioral Health Residential Treatment Center PAQ states the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of their Residents. In the past 12 months the facility has conducted zero cross-gender strip or cross-gender visual body cavity searches of residents. In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of residents was zero. In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of residents that did not involve exigent circumstances or were performed by non-medical staff was zero.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 9, section 1., states, "BHRTC shall not conduct cross-gender strip searches except in exigent circumstances or when performed by medical practitioners. In this case, the staff shall contact the Operations Manager to arrange for a same gender staff member to be summoned for the cross-gender strip search."</p> <p>(b) West Texas Behavioral Health Residential Treatment Center PAQ states the facility does not permit cross-gender pat-down searches of female residents, absent exigent circumstances. The facility does not restrict female residents' access to regularly available programming or other outside opportunities in order to comply with this provision.</p> <p>The facility provided an El Paso County Community Supervision and Corrections Department Memorandum, Subject: PREA Standard 115.215 Cross Gender Viewing and Searching, to BHRTC Staff, through Facility Director/PREA Coordinator, dated 3.7.2021. The memorandum states,</p> <ol style="list-style-type: none"> 1. "BHRTC does not permit cross - gender pat-down searches and cross gender strip searches of any clients regardless of their gender unless during exigent circumstances with the approval of the Operations Manager. 2. The occupancy of the facility with not be a factor in the execution pf cross-gender pat-down searches or strip searches. <ol style="list-style-type: none"> a. All direct care staff will be trained in the execution of cross - gender pat-down searches. b. Additionally there must be a staff member of both genders in the facility at all times which eliminates the need for cross - gender pat down searches. 3. In the event of exigent circumstances and approved by the Operations Manager all cross - gender pat-downs and or strip searches will be documented on the Cross- Gender Search Log. <ol style="list-style-type: none"> a. The "Log" will include the name of the client(s) b. Name of the Staff member conducting the search c. The reason of Exigent Circumstance d. Initials of the Supervisors on duty e. All Logs will be turned into the PREA Compliance Manager when used." <p>(c) West Texas Behavioral Health Residential Treatment Center PAQ states the facility policy does require that all cross-</p>

gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches be documented and justified as cross-gender strip searches and body cavity searches are not allowed. Policy compliance can be found in provision (b) of this standard.

(d) West Texas Behavioral Health Residential Treatment Center PAQ states the facility has implemented policies and procedures that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera). Policies and procedures require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 9, section 4., states, "Clients may shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine living quarter checks. Employees of the opposite gender must announce their presence when entering an area where clients are likely to be showering, performing bodily functions, or changing clothes."

(e) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility has a policy prohibiting staff from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status. Such searches (described in 115.215(e)-1) occurred in the past 12 months was zero.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 9, section 5., states, "BHRTC shall not search or physical examine a transgender or intersex client for the sole purpose of determining the client's genital status is prohibited. If the client's genital status is unknown, it may be determined during conversations with the client, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

- Pat and strip searches of transgender/intersex clients will be completed by a staff member of the same sex for which the client has been classified by referring agency.
- Making accommodations, if necessary, to search individuals according to gender identity would not violate the prohibitions on cross-gender searches. Searches of breasts will be completed using the back and or side of the hand.
- Transgender and intersex clients shall be given the opportunity to shower separately from other clients."

(f) The West Texas Behavioral Health Residential Treatment Center PAQ states 90% of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex residents in a professional and respectful manner, consistent with security needs.

The facility provided El Paso County Community Supervision and Corrections Department Training Record. The Training Record includes the following information:

- Training Title: PREA – Guidance in Cross-Gender and Transgender Pat Searches
- Location: BHRTC
- Time: 2:00 PM – 3:00 PM
- Date: 10.21.2021, 10.22.2021
- Number of Credit Hours: 1
- Facilitator: Operation Manager
- Employee Name/Agency Office/Signature
- 21 total staff completed training on training dates

The facility provided National PREA Resource Center Guidance in Cross Gender and Transgender Pat Searches PowerPoint. The PowerPoint includes the following training topics:

- Relevant PREA Standards
- Define exigent circumstances
- Key terms for pat-searches
- Considerations for searches of transgender or intersex inmates and residents
- Practice pat searches
- Trauma
- Considerations for Searching Transgender and Intersex Inmates and Residents
- Term Definition

Through such reviews, the facility meets standard requirements.

115.216	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. LanguageLine Email Authorization, dated 4.4.2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Resident Monitors <p>There were no disabled or LEP residents at the time of the onsite review. The facility reported there were no such residents within the last 12 months. During interviews with Resident Monitors, each stated residents were not used for translation services. Resident Monitors interviewed, stated they had not had the need for interpreters. Most Resident Monitors could attest to the newly implemented LanguageLine contract and instructions for this service were in PREA Binders at the duty station.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has established procedures to provide disabled residents equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 10, section a., states, "BHRTC shall take the appropriate steps to ensure that clients with disabilities (including, for example, clients who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the center's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with clients who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, BHRTC shall ensure that written materials are provided in formats or through methods that ensure effective communication with clients with disabilities, including clients who have intellectual disabilities, limited reading skills, or who are blind or have low vision. BHRTC is not required to take actions that it can demonstrate would result in a fundamental alteration of the nature of a service, program or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans with Disabilities Act, 28 CFR 35.164."</p> <p>The facility provided an email authorization, to the facility Operations Director, from LanguageLine, providing the facility with an account number and authorization code when accessing their system.</p> <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has established procedures to provide residents with limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 10, section b., states, "BHRTC shall take reasonable steps to ensure meaningful access to all aspects of center's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to clients who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.</p> <ul style="list-style-type: none"> • During the admission process, clients will be assessed by the medical provider to determine their physical and cognitive ability to participate in the program. The medical provider will notify BHRTC whether the client will need any type of assistance due to their physical or cognitive disability. • In the event a client has difficulty understanding provided information or procedures outlined in this policy, employees will ensure that such information is effectively communicated to such clients on an individual basis. • The Assistant Director will assign individuals to counselors based on the needs of the client including those with limited English skills, reading or writing abilities. Documents will available in Spanish and large font. • Auxiliary aids that are reasonable, effective, and appropriate to the needs of the client shall be provided when simple written or oral communication is not effective. • In addition to providing such education, BHRTC shall ensure that key information is continuously and readily available or visible to clients through posters, client handbooks, or other written formats." <p>(c) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency policy prohibits use of resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations. If YES, the agency or facility documents the limited circumstances</p>

in individual cases where resident interpreters, readers, or other types of resident assistants are used. In the past 12 months, the number of instances where resident interpreters, readers, or other types of resident assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the resident's safety, the performance of first-response duties under § 115.264, or the investigation of the resident's allegations was zero.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 10, section c., states, "BHRTC shall not rely on client interpreters, client readers, or other types of client assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the client's safety, the performance of first-response duties under §115.264, or the investigation of the client's allegations."

Through such reviews, the facility meets standard requirements.

115.217	Hiring and promotion decisions
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 435 300">Document Review:</p> <ol data-bbox="240 304 1361 501" style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. PREA Acknowledgment Form – Employees, not dated 4. Potential Employee Document, not dated 5. County of El Paso EPCSCD – Residential Monitor Job Bulletin, dated 4.5.2022 6. Post Audit Deputy Director Memorandum, RE: Institutional References, dated 4.15.2022 <p data-bbox="240 533 352 560">Interviews:</p> <ol data-bbox="240 564 475 591" style="list-style-type: none"> 1. Operations Manager <p data-bbox="240 595 1461 725">Interviews with the Operations Manager was conducted as the Human Resource Assistant was not available during the onsite review. The Operations Manager demonstrated applicants determined to have been convicted of sexual abuse or sexual harassment charges were screened out during the application review process. During the interview, the Operations Manager stated institutional references had not been completed and was not a current practice.</p> <p data-bbox="240 757 496 784">Site Review Observation:</p> <p data-bbox="240 788 1485 949">During review of the 13 staff personnel files reviewed, this Auditor noted institutional references were not completed for each new applicant. Files reviewed demonstrated each had criminal and applicable background checks conducted upon hire, adjudication questions were asked during the interview process and again at promotion. The facility utilizes a FBI Rap Back database for further criminal history checks. This database notifies the facility any time an employee is arrested and or convicted of a crime, of any type.</p> <p data-bbox="240 981 1477 1043">In response to institutional reference checks not being completed, the Deputy Director provided the following memorandum, post audit., on 4.15.2022</p> <p data-bbox="240 1075 1481 1205">“Effective immediately when considering an applicant for employment at the BHRTC, we shall make our best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. This includes any position that the applicant may have held in a position of trust, i.e. institutional division, jail, community confinement, daycare etc.</p> <p data-bbox="240 1236 1406 1299">This information will be documented in a spreadsheet that will be kept on file with Human Resources for review upon request.”</p> <p data-bbox="240 1330 1485 1559">(a) The West Texas Behavioral Health Residential Treatment Center PAQ states agency policy prohibits hiring or promoting anyone who may have contact with residents and prohibits enlisting the services of any contractor who may have contact with residents who: (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.</p> <p data-bbox="240 1590 1485 1680">West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 11, section a., states, “The department shall not hire or promote anyone who may have contact with clients, and shall not enlist the services of any contractor who may have contact with clients, who –</p> <ol data-bbox="240 1684 1461 1845" style="list-style-type: none"> 1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. §1997); 2. Has been convicted of engaging or attempting to engage in any type of sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or 3. Has been civilly or administratively adjudicated to have engaged in the activity described in (a)(2) of this section.” <p data-bbox="240 1877 1485 1971">(b) The West Texas Behavioral Health Residential Treatment Center PAQ states agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents.</p> <p data-bbox="240 2002 1477 2092">West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 11, section b., states, “The department shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with clients.”</p> <p data-bbox="240 2123 1449 2150">(c) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency policy requires that before it</p>

hires any new employees who may have contact with residents, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. In the past 12 months, the number of persons hired who may have contact with residents who have had criminal background record checks is five.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 11, section c., states, "Before hiring new employees or enlisting the service of any contractor/volunteer that may have contact with clients, the department shall:

1. Perform a criminal background records check;
 2. Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.
- The information shall be documented on a form completed during the initial interview and kept in the personnel file."

(d) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with residents. In the past 12 months, the number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with residents is zero.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 11, section d., states, "The department shall also perform a criminal background records check before enlisting the services of any unescorted contractor who may have contact with the clients."

(e) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency policy requires that either criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with residents or that a system is in place for otherwise capturing such information for current employees.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 11, section e., states, "The department shall either conduct criminal background record checks at least every five years of current employees and contractors who may have contact with clients or have in place a system for otherwise capturing such information for current employees."

(f) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 11, section f., states, "All employees who may have direct contact with clients shall be asked about previous misconduct either in the written or in interviews for hiring promotions and in any written self-evaluations conducted as part of reviews of current employees. The department shall also impose upon employees a continuing affirmative duty to disclose such misconduct.

- The Employment Application Supplement form will be completed upon application for employment and as part of the promotional interview process.
- The Conditions of Employment document shall also serve as verification of an employee's fulfillment of his / her continuing affirmative duty to disclose any sexual misconduct as described in this policy."

The facility provided a County of El Paso EPCCSCD – Residential Monitor Job Bulletin. Page three of this document, requests responses to questions 3-5:

3. Have you been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?
4. Have you engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?
5. Have you been civilly or administratively adjudicated to have engaged in the activity of convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?

(g) The West Texas Behavioral Health Residential Treatment Center PAQ states Agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 11, section g., states, "Material omissions or the provision of materially false information regarding sexual misconduct shall be grounds for termination."

(h) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 11, section h., states, "Unless prohibited by law the department shall provide information on substantiated allegations of sexual misconduct involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work."

Through such reviews, the facility meets standard requirements.



115.218	<p>Upgrades to facilities and technology</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. El Paso County Community Supervision and Corrections Department Memorandum, Subject: Security Video System, dated 1.22.2020 <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Coordinator 2. Operations Manager <p>The PREA Coordinator and Operations Manager attested to the facility not going under modifications during the last audit cycle. However, the facility is preparing for renovations of client bathrooms and were prepared to move clients to B Building once those modifications begin. The entire B Building has cameras and is an adequately monitored building for use. Of importance, the facility has a bed capacity of 120 clients and currently has 152 cameras. Camera placement at the facility is plentiful.</p> <p>Site Review Observation:</p> <p>Cameras were found to be throughout both buildings. Cameras did not have access into resident dorms.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has not acquired a new facility or made substantial expansions or modifications to existing facilities since the last PREA audit.</p> <p>The facility provided an El Paso County Community Supervision and Corrections Department Memorandum, Subject: Security Video System. The memorandum is addressed to: All West Texas Behavioral Health Treatment Center Staff, through: Deputy Director, from the Operations Manager, subject Security Video System and Standards, dated 1.22.2020. The memorandum states, "Cameras within the facility have been deployed strategically for operational purposes, and for activity or specialized monitoring on a periodic, as-needed, basis. The cameras serve to provide overview monitoring of larger interior and exterior areas of the facility to help detect abnormal conditions warranting further attention. The camera system is an enhancement to the other security protocols and allows for visual surveillance of areas where staff is limited.</p> <p>The Prison Rape Elimination Act (PREA) has been adopted by this facility as a no-tolerance policy. The Security Video System is integral to that policy, as a deterrent and for use in the investigation of allegations. It is important to understand that while they are installed and operating, few cameras are actively being viewed by facility staff at any given time. There are no staff positions (posts) designated solely for watching video monitors."</p> <p>Through such reviews, the facility meets standard requirements.</p>
---------	--

115.221	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. Memorandum of Understanding Forensic Nurse Examiner Services, dated 3.15.2022 4. Incident PREA Response Plan, dated 9.2021 5. Memorandum of Understanding, The Center Against Sexual and Family Violence and El Paso County Community Supervision and Corrects Department, dated 4.13.2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Clients 2. Targeted Clients 3. Resident Monitors 4. Specialized staff 5. PREA Coordinator / Facility Monitor <p>Interviews with clients and staff interviewed demonstrated each were clearly aware of reporting protocols for sexual harassment and abuse. Of those interviewed, each were comfortable reporting internally spoke of the Room 146 where private calls could be made for outside reporting, understood third party reporting and understood the processes for reporting externally.</p> <p>Staff interviewed clearly articulated first responder duties to include protecting, preserving and reporting. When each were asked where this information was located, responses included postings on the bulletin boards in the day rooms and through training received at hire and annually. The investigator clearly articulated protocols for investigation processes and demonstrated immediate action for sexual harassment and sexual abuse allegations would take place.</p> <p>Site Review Observation:</p> <p>The facility has not experienced an allegation of sexual harassment or sexual abuse since implementation of PREA.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency/facility is responsible for conducting administrative sexual abuse investigations (including resident-on-resident sexual abuse or staff sexual misconduct). The agency/facility is not responsible for conducting criminal sexual abuse investigations (including resident-on-resident sexual abuse or staff sexual misconduct). The El Paso Police Department is responsible for conducting all facility investigations.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 14, section a., states, "To the extent BHRTC is responsible for investigating allegations of sexual abuse, the center shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions."</p> <p>The facility provided an Incident PREA Response Plan. The plan describes and includes the following:</p> <p>Protocol Purpose</p> <p>To ensure that all allegations of sexual abuse and sexual harassment are investigated thoroughly and properly so that incidents are substantiated when they should be, both to deter these incidents and to increase reporting. Thorough and proper investigations (which require that investigations be conducted by qualified and trained investigators; that all evidence be gathered and preserved; and objectivity, which means the credibility of an alleged victim must be assessed on a case by case basis and opinions are never formed on the basis of the fact that the victim is a client or that the perpetrator is a staff person) enable BHRTC to substantiate actual incidents of sexual abuse and sexual harassment and increase the chances that consequences will follow when sexual abuse and sexual harassment are reported. This will encourage reporting and deter sexual abuse and sexual harassment.</p> <p>Criminal and Administrative Investigations</p> <p>All investigations of sexual abuse and sexual harassment shall be done promptly, thoroughly and objectively. Third party investigation reports of sexual abuse and sexual harassment will also be promptly investigated.</p> <p>Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to PREA § 115.221</p> <p>Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.</p>

The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as client or staff. No agency shall require a client who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

First Responders will:

1. Secure the Victim and Perpetrator
 - a. Maintain 1:1 Supervision of the involved clients.
 - b. Escort the alleged victim to room 146 to ensure that they do not shower, brush their teeth, change clothes, use the restroom, drink or eat.
 - c. Escort the alleged client perpetrator to the Staff Conference room to ensure that they do not shower, brush their teeth, change clothes, use the restroom, drink or eating
 - d. Escort any alleged non-client perpetrator where directed by the Asst. Director and Operations Manager and preventing them from showering, brushing their teeth, change clothes, use the restroom, drink or eating
2. Secure the Crime Scene
 - a. Preserve and protect the crime scene by:
 - i. Closing or blocking off the area as much as possible
 - ii. Prohibiting unauthorized persons from entering
 - iii. Not touching or removing anything from the scene

Investigators will:

1. Interview alleged victims, accused individual/staff, and witnesses. Persons interviewed will be asked to sign and Interview Acknowledgment Form.
2. Refer the individual for mental health assessment if the investigation uncovers new information that the individual was the victim of any physical and or emotional trauma of sexual nature, whether in facility or the community.
3. Collect any additional evidence, contraband that may be uncovered during the investigation.

PREA Coordinator will:

1. Review all allegations, determine which allegations fall within the definition of sexual misconduct, and forward those allegations to the appropriate Authority of investigation.
2. Refer allegations that appear to be criminal in nature to law enforcement for investigation by the first responding staff member that receive the report.
3. Will report allegations involving employees to the Human Resource Representative and the employee of the investigation.

Criminal investigations will be conducted by the local police department with jurisdiction of the area that BHRTC is in.

Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

The local law enforcement agency will follow their protocol when collecting evidence for a Criminal Sexual Abuse Investigation. BHRTC Staff will not attempt to collect physical evidence. BHRTC Staff will ONLY secure the area until law enforcement arrives and takes control of the scene.

Procedural Guidelines

1. The PREA Coordinator or designee receives a report of sexual abuse, and/or sexual harassment from a supervisor and/or First Responder.
2. The PREA Coordinator or designee reviews the First Responder Report to ensure:
 - alleged victim and alleged perpetrator are separated, eliminating risk for continued victimization
 - medical care was provided if necessary, and victim services were offered when appropriate
 - steps were taken to preserve and protect evidence of a possible crime scene
 - law enforcement was notified if appropriate
 - mandated report was filed with Adult Protective Services when appropriate
 - staff members are temporarily reassigned if necessary
3. The PREA Coordinator consults with the Community Supervision and Corrections Department Deputy Director to determine whether the allegation merits an administrative investigation, criminal investigation, and/or adult protection notification. Determination on whether law enforcement and/or adult protective services notification is made can occur at any point during an administrative investigation.
4. The PREA Coordinator and Deputy Director may determine whether a staff person's work assignment and schedule requires a change based on the alleged staff on resident/client allegations.
5. In cases where an administrative investigation is required, The PREA Coordinator may assign one of the facility supervisors to conduct the PREA Investigation, forwarding all forms and information electronically. The Supervisor assigned to investigate, must have completed the PREA Investigator Training by the National Institute of Corrections.
6. The investigator assigned reads all materials related to the allegation. A time frames and sequence of events shall be documented and include names of the alleged victim and alleged perpetrator, where the incident reportedly occurred, and

names of possible witnesses, staff, contractors, and interns/volunteers in the building. The investigator shall identify missing information such as but not limited to dates, times. Witnesses, and location of incident.

7. The investigator arranges interviews with the alleged victim, alleged perpetrator and witnesses as necessary. Steps shall be taken to maximize privacy and confidentiality during the interview, and subjects shall be informed of measures taken to ensure this.

8. During each interview, the investigator shall explain the purpose of the interview; assure each subject of privacy, confidentiality, and the importance of looking into allegations and suspicions of any form of sexual harassment or sexual abuse because of the BHRTC Zero Tolerance Policy.

The investigator shall take notes during each interview, using the subject's own words as much as possible. The investigator shall verify dates, times, witnesses, location and other facts of the allegation. The investigator shall ask clarifying questions about references made or slang terms used to ensure accuracy.

9. The investigator shall gather and examine possible corroborating or contradicting information to include but not limited to: records of phone calls, facility log notes/chronos, video, schedules, letters or notes, photos, and reports of other incidents involving the same parties.

10. The investigator shall determine whether the incident was substantiated (allegation investigated and determined to have occurred), unfounded (allegation investigated and determined NOT to have occurred), or unsubstantiated (allegation investigated, but there wasn't enough evidence to determine whether the incident occurred). The investigator shall discuss findings with the Superintendent. The investigator shall look for a preponderance of evidence to make the determination including:

- a. interviews generally agreed on events, sequences, staff action/inaction that may have contributed to the incident, and names of the individuals (alleged victim, perpetrator, witnesses) involved
- b. Phone call record (times, dates, durations) support a conclusion
- c. Prior complaints and reports involving the alleged perpetrator
- d. Log notes and chronos support a conclusion
- e. Video of movement throughout the facility support a conclusion
- f. Work or visitation schedules support a conclusion
- g. Letters and notes support a conclusion
- h. Photos support a conclusion

(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the protocol being developmentally appropriate is not applicable as the facility does not house youthful offenders. The protocol was adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 14, section b., states, "The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011."

(c) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility offers all residents who experience sexual abuse access to forensic medical examinations. Forensic medical examinations are offered without financial cost to the victim. Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations. The facility documents efforts to provide SANEs or SAFEs. The number of forensic medical exams conducted during the past 12 months is zero. The number of SANEs/SAFEs during the past 12 months was zero. The number of exams performed by a qualified medical practitioner during the past 12 months was zero.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 14, section c., states, "BHRTC shall offer all victims of sexual abuse access to forensic medical examinations whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. BHRTC shall document its efforts to provide SAFEs or SANEs."

The facility provided Memorandum of Understanding Forensic Nurse Examiner Services. The first three paragraphs of the memorandum state the following: "This Memorandum of Understanding "MOU" is entered into between University Medical Center of El Paso (UMC) through its SANE Program and El Paso County Community Supervision and Corrections Department: West Texas Behavioral Health Residential Treatment Center, "Agency" on the 15th day of March, 2022.

SCOPE OF AGREEMENT "UMC" and "Agency" enter into this agreement to provide medical forensic examinations for persons thirteen years of age or older making an outcry of sexual assault, and for the removal of physical evidence from any aged person suspected of having committed an act of sexual assault/abuse.

These services shall be provided to these persons at no cost, and shall be billed to "Agency" on a fee for service basis based upon the rate in effect at the time of service as published by the Office of Attorney General. Services are set forth on Exhibit A attached hereto and incorporated therein by reference. Prices listed are those in effect as of the signing of this agreement."

On 4.2.2022 this Auditor conducted internet research on the University Medical Center of El Paso. The hospital web page which states, "Sexual Assault Nurse Examiner.

The SANE program provides medical forensic examinations for patients (survivors) of sexual abuse and sexual assault across the lifespan from pediatrics to geriatric patients. All our Sexual Assault Nurse Examiners (SANE) are registered nurses who have completed extensive training and are certified through the Texas Office of the Attorney General (OAG). The forensic examination and evidence collection can help the patient (survivor) to know that they are physically okay and may also aid in the investigation process. Our SANE nurses are available 24/7, 365 days a year!"

(d) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility attempts to make available to the victim a victim advocate from a rape crisis center, either in person or by other means. The efforts are documented. If and when a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff member from a community-based organization or a qualified agency staff member.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 14, section d., states, "BHRTC shall attempt to make available to the victim a victim advocate from a rape crisis center (CASVF). If a rape crisis center is not available to provide victim advocate services, BHRTC shall make available to provide these services a qualified staff member from a community-based organization or a qualified agency staff member. BHRTC shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. BHRTC may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services."

The facility provided a Memorandum of Understanding, The Center Against Sexual and Family Violence and El Paso County Community Supervision and Corrects Department. Page 1, paragraph 2, states, "The purpose of the MOU is to describe the responsibilities of the parties in accordance with the Prison Rape Elimination Act (PREA) Standard 115.221(d). The parties will work together to ensure that confidential support is available to the West Texas Behavioral Health Residential Treatment Center residents who have been impacted by sexual violence, herein after referred to as Clients."

(e) The West Texas Behavioral Health Residential Treatment Center PAQ states a qualified staff or community member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information and referrals.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 14, section e., states, "As requested by the victim, BHRTC counselor or case manager, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals."

(f) The West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 14, section f., states, "To the extent BHRTC itself is not responsible for investigating allegations of sexual abuse, BHRTC shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section."

(h) "For the purposes of this standard, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general."

Through such reviews, the facility meets standard requirements.

115.222	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Clients 2. Targeted Clients 3. Random staff 4. Operations Manager / Facility Investigator <p>Client and staff interviews demonstrated each can report incidents of sexual abuse and sexual harassment through the grievance process, verbally reporting to a staff, using the private Room 146, call the hotline number on the posters or telling a family member. Each stated being comfortable reporting incidents of sexual harassment and assault to staff.</p> <p>Staff interviewed reported if an allegation was reported or occurred, each would separate victims and suspects, accessing the 'PREA Book' if necessary, where PREA protocols were available.</p> <p>Site Review Observation:</p> <p>The facility has not experienced an allegation of sexual harassment or sexual abuse since implementation of PREA.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency ensures that an administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. In the past 12 months the facility has had zero allegations of sexual abuse and sexual harassment that were received.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 16, section a., states, "BHRTC shall ensure that an administrative investigation and a referral for a criminal investigation, where appropriate, are completed for all allegations of sexual abuse and sexual harassment."</p> <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior. Policy compliance can be found in provision (a) of this standard.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 16, section b., states, "BHRTC shall have in place a policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The department shall publish such policy on its website or, if it does not have one, make the policy available through other means. The department shall document all such referrals."</p> <p>The facility PREA policy to include the investigation process is posted on the agency website at County of El Paso Texas - EPCCSCD (epcounty.com)</p> <p>(c) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 16, section c-e., state,</p> <ol style="list-style-type: none"> a. "If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity. b. Any State entity responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in community confinement facilities shall have in place a policy governing the conduct of such investigations. c. Any Department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in community confinement facilities shall have in place a policy governing the conduct of such investigations." <p>Through such reviews, the facility meets standard requirements.</p>

115.231	Employee training
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. El Paso County CSCD PREA Staff Training PowerPoint, not dated 4. El Paso County CSCD BHRTC PREA Refresher: Prisons and Jails PREA Basics, dated 5.2013 5. Employee Training Sign-In Sheet <p>Interviews:</p> <ol style="list-style-type: none"> 1. Resident Monitors 2. Specialized staff 3. Operations Manager – Staff Trainer <p>Interviews with staff demonstrated each were aware of and received initial and annual PREA training. Interviews with specialized staff demonstrated each had received training specialized investigator training and training mandated for all employees.</p> <p>Site Observation:</p> <p>Review of the 13 personnel files demonstrated staff reviewed had received initial and annual training at hire and annually for the past two years.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency trains all employees who may have contact with residents on the agency's zero-tolerance policy for sexual abuse and sexual harassment.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 17, section a., states, "Zero Tolerance training shall be tailored to the gender of the clients at BHRTC. All staff members will be trained on the following.</p> <ul style="list-style-type: none"> • The zero-tolerance policy on sexual misconduct and sexual harassment; • How to fulfill their responsibilities of prevention, detection, reporting, and response to sexual misconduct; • Client rights to be free from sexual misconduct; • The right of clients and employees to be free from retaliation for reporting sexual misconduct; • The dynamics of sexual misconduct in confinement; • The common reactions of sexual misconduct victims; • How to detect and respond to signs of threatened and actual sexual misconduct; • How to avoid inappropriate relationships with clients; • How to communicate effectively and professionally with clients, including LGBTI and gender non-conforming clients; • How to comply with relative laws related to mandatory reporting of sexual misconduct; • State and local laws imposing criminal liability for the sexual abuse of a person held in custody; • Location, situations and circumstances in which sexual abuse may occur; and • How to comply with laws relevant to mandatory reporting of sexual abuse to outside authorities." <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states training is tailored to the gender of the residents at the facility. Employees who are reassigned from facilities housing the opposite gender are given additional training. Training compliance regarding being tailored to the gender of residents can be found in provision (a) of this standard.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 17, section b., states, "Such training shall be tailored to the gender of the residents at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa."</p> <p>(c) The West Texas Behavioral Health Residential Treatment Center PAQ states between trainings the agency provides employees who may have contact with residents with refresher information about current policies regarding sexual abuse and harassment. The frequency with which employees who may have contact with residents receive refresher training on PREA requirements annually.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 17, section c., "All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the center shall provide each employee with refresher training every two years to ensure that all employees know BHRTC's current sexual abuse and sexual harassment policies and procedures. In years in which an employee does</p>

not receive refresher training, BHRTC shall provide refresher information on current sexual abuse and sexual harassment policies.”

(d) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency documents that employees who may have contact with residents understand the training they have received through employee signature or electronic verification.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 17, section e., “Security staff (Residential Monitors and Supervisors, Clinical and Support and Supervisors) shall receive additional training on the following:

1. How to conduct cross-gender pat-down searches and searches of transgender and intersex clients, in a manner that is professional, respectful and the least intrusive possible while being consistent with security needs;
2. How to utilize the Guidance in Cross-Gender and Transgender Pat Searches training curriculum from the PREA Resource Center to educate and train security staff. “

The facility provided an El Paso County CSCD PREA Staff Training PowerPoint. The PowerPoint includes the following topics:

- Module 1: Prison Rape Elimination Act (PREA)
- Module 2: Legal Considerations
- Module 3: Policies and Procedures Related to Sexual Abuse
- Module 4: Prevalence, Dynamics, and Impact of Sexual Abuse in Detention
- Module 5: Sexual Abuse Detection, Reporting, and Response
- Module 6: Maintaining a Professional Environment

The facility provided an El Paso County CSCD BHRTC PREA Refresher: Prisons and Jails PREA Basics. Training includes the following topics:

- Zero Tolerance Policy
- Dynamics of Sexual Abuse in Detention
- Detecting Signs of Sexual Abuse

During the on-site review, the facility provided an Employee Training Sign-In Sheet. Each employee had dated, printed and signed their name, verifying each had completed initial and annual training.

Through such reviews, the facility meets standard requirements.

115.232	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Operations Manager <p>The interview with the Operations Manager demonstrated the facility does not currently utilize volunteers and or contractors since COVID-19 halted this practice.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. The number of volunteers and contractors, who may have contact with residents, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response is zero.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 19, section a., states, "Volunteers and contractors who have contact with clients will be trained and acknowledge by electronic or manual signature, their understanding of the received training. Training shall include their responsibilities under the BHRTC's zero-tolerance policy of sexual misconduct/harassment prevention, detection, reporting and responding.</p> <ol style="list-style-type: none"> a. Signed documentation will be maintained in the volunteer or contractor's file. b. Volunteers or (unescorted) contractors who have contact with clients on a recurring basis shall be provided a copy of this policy prior to admission to BHRTC to begin their assignment or task. c. The PREA Acknowledge of Understanding form serves as verification of the volunteers or contractor's review and understanding of the contents of this policy and shall be completed by each volunteer or contractor who has contact with clients on a recurring basis. A newly signed PREA Acknowledge of Understanding form will be required for future revisions of this policy." <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with residents. All volunteers and contractors who have contact with residents have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. Policy compliance can be found in provision (a) of this standard.</p> <p>(c) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency maintains documentation confirming that volunteers and contractors who have contact with residents understand the training they have received. Policy and acknowledgment compliance can be found in provision (a) of this standard.</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.233	Resident education
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. PREA and Inmate Education, A Resource Guide 2016 4. Client Education PowerPoint, dated 4.4.2022 5. El Paso County Community Supervision and Corrections Department Behavioral Resident Treatment Center PREA Acknowledgment Form, dated 1.5.2017 6. Client Orientation Program Handbook 4.0, dated 1.30.2019 7. CASFV – Services for Survivors Brochure, not dated <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Clients 2. Resident Monitors 3. Intake staff 4. Operations Manager / Training <p>Interviews with the random clients, each reported their knowledge on PREA, reporting options to staff, third parties and or phone numbers posted on Zero-tolerance Posters throughout the facility.</p> <p>Site Observation:</p> <p>Of the 16 client files reviewed, each demonstrated evidence of PREA education within 72 hours of intake.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states residents receive information at time of intake about the zero-tolerance policy, how to report incidents or suspicions of sexual abuse or harassment, their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. The number of residents admitted during past 12 months who were given this information at intake was 192.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 20, section a., states, “During the intake process, clients shall receive information explaining the center’s zero-tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse or sexual harassment, their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding BHRTC policies and procedures for responding to such incidents.</p> <ul style="list-style-type: none"> • BHRTC clients will receive continuous PREA Education as part of their treatment schedule” <p>The facility provided the PREA and Inmate Education, A Resource Guide 2016. The resource guide provides the following training topics:</p> <ul style="list-style-type: none"> • The Importance of Inmate Education • Understanding the PREA Standards on Inmate Education <ul style="list-style-type: none"> o Adult Prisons and Jails o Police Lockups o Community Confinement Facilities o Juvenile Facilities o Inmate Education at Intake o Comprehensive Inmate Education Program o Models of Inmate Education o Making Your Program: Case Studies <p>The facility provided a Client Education PowerPoint. The PowerPoint includes the following training topics:</p> <ul style="list-style-type: none"> • PREA – What you need to know • What is PREA • Three Key Concepts <ul style="list-style-type: none"> o Don’t be afraid o Don’t be afraid to report o How to get mental and physical help • Zero Tolerance • Terms and Definitions • Sexual Assault • Sexual Harassment

- Sexual Abuse
- Voyeurism and Consent
- PREA defines sexual abuse between clients as:
- PREA defines sexual abuse between staff and clients as:
- How to get help
- Tips to stay safe
- Right to report
- Free Medical and Mental Health Care
- What to Remember

(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility provides residents who are transferred from a different community confinement facility with refresher information referenced in 115.233(a)-1. The number of residents transferred from a different community confinement facility during the past 12 months was zero. The number of residents transferred from a different community confinement facility, during the past 12 months, who received refresher information was zero. The agency states residents who are transferred from a different community confinement facility will receive the above described training.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 20, section b., states, "BHRTC shall provide refresher information whenever a client is transferred to a different facility."

(c) The West Texas Behavioral Health Residential Treatment Center PAQ states Resident PREA education is available in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled and those who have limited reading skills.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 20, section c., states, "BHRTC shall provide client education in formats accessible to all clients, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled as well as clients who have limited reading skills."

(d) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency maintains documentation of resident participation in PREA education sessions. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 20, section d., states, "BHRTC shall maintain documentation of client participation in these education sessions.

- PREA Acknowledgement Form
- Group Sign in Sheet"

(e) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, resident handbooks, or other written formats.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 20, section e., states, "In addition to providing such education, BHRTC shall ensure that key information is continuously and readily available or visible to clients through posters, client handbooks, or other written formats.

- Center billboards
- Wall posters
- Orientation Handbook"

The facility provided an El Paso County Community Supervision and Corrections Department Behavioral Resident Treatment Center PREA Acknowledgment Form. This acknowledgement serves as affirmation, understanding, and signature acknowledgment facility clients understand and acknowledge they have received training on the following PREA topics:

- Prohibited behaviors
- Client on Client Sexual Abuse
- Resident Education – Your Rights
- Regarding agency policies and procedures for responding to such incidents

The facility provided a Client Orientation Program Handbook. Page 7 of the handbook has detailed information on the following PREA topics:

- Prison Rape Elimination Act (PREA): Zero Tolerance for Sexual Abuse and Sexual Harassment
- Prohibited behaviors
- Client on Client Sexual Abuse
- Staff Sexual Misconduct
- What is Sexual Abuse
- What is staff voyeurism
- Right to Report
- How to Report
- Privacy and Confidentiality

The facility provided the CASFV – Services for Survivors Brochure. The brochure provides clients with information on services for their crisis hotline, hospital accompaniment, emergency shelter, confidential location – call crisis hope-line and crisis intervention and advocacy services.

Through such reviews, the facility meets standard requirements.

115.234	Specialized training: Investigations
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 435 300">Document Review:</p> <ol data-bbox="242 304 1374 432" style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. Employee National Institute of Corrections: Certificates of Completion – PREA: Investigating Sexual Abuse in a Confinement Setting <p data-bbox="242 463 352 492">Interviews:</p> <ol data-bbox="242 497 687 526" style="list-style-type: none"> 1. Operations Manager / Facility Investigator <p data-bbox="242 530 1485 560">Interviews with the Operations Manager demonstrated investigators have completed specialized investigator training course.</p> <p data-bbox="242 591 419 620">Site Observation:</p> <p data-bbox="242 624 1414 683">Of the two investigator staff files reviewed, each had certificates from the National Institute of Corrections Investigator training.</p> <p data-bbox="242 714 1493 772">(a) The West Texas Behavioral Health Residential Treatment Center PAQ states agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings.</p> <p data-bbox="242 804 1485 931">West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 21, section a., states, “In addition to the general training provided to all employees pursuant to § 115.231, BHRTC shall ensure that, to the extent the center itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings.”</p> <p data-bbox="242 963 1477 1155">(b) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 21, section b., states, “The PREA Coordinator shall ensure that more than one (1) person at the Department receives training as a sexual abuse investigator. This will ensure that a trained investigator is available as a back-up during employee absences (e.g., leave, paid time off, sickness, offsite training, etc.) from work. Investigators shall receive training in conducting sexual abuse investigations in confinement settings BHRTC shall ensure all staff are trained call law enforcement to investigate the allegations.</p> <ol data-bbox="242 1160 1477 1391" style="list-style-type: none"> 1. BHRTC has designated: Residential Supervisors as the Back-up Sexual Abuse Investigators: <ol data-bbox="242 1196 316 1288" style="list-style-type: none"> a. M.V. b. J.V. c. M.R. 2. Specialized training shall include techniques for interviewing sexual abuse victim, 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 or prosecution referral.” <p data-bbox="242 1422 1469 1514">(c) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency maintain documentation showing that investigators have completed the required training. The number of investigators currently employed who have completed the required training is three.</p> <p data-bbox="242 1545 1461 1637">West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 21, section c., states, “Documentation confirming that investigators have completed the required specialized training in conducting sexual abuse investigations shall be maintained in accordance with Department record retention policies.”</p> <p data-bbox="242 1668 1477 1727">The facility provided three staff NIC Certificates of Completion, PREA: Investigating Sexual Abuse in a Confinement Setting. Certificates have a completion date of 11.23.2021, 3.6.2022.</p> <p data-bbox="242 1758 876 1787">Through such reviews the facility meets standard requirements.</p>

115.235	<p>Specialized training: Medical and mental health care</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Operations Manager <p>The interview with the Operations Manager demonstrated the facility does not employ medical and or mental health staff or contractors.</p> <p>(a) West Texas Behavioral Health Residential Treatment Center PAQ states the agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. The number of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy is 12. The percent of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy is 100% (2 employees).</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 22, section a., states, "BHRT shall ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in:</p> <ol style="list-style-type: none"> 1. How to detect and assess signs of sexual abuse and sexual harassment; 2. How to preserve physical evidence of sexual abuse; 3. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and 4. How and to whom to report allegations of sexual abuse and sexual harassment. <p>(b) West Texas Behavioral Health Residential Treatment Center PAQ states the agency medical staff at this facility do not conduct forensic medical exams.</p> <p>(c) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 22, section c., states, "BHRTC shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the department or elsewhere."</p> <p>(d) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 22, section d., states, "Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.231 or for contractors and volunteers under § 115.232, depending upon the practitioner's status at BHRTC."</p> <p>Through such reviews the facility meets the standard requirements.</p>
---------	--

115.241	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. El Paso County Community Supervision and Corrections Department Behavioral Health Residential Treatment Center Sexual Victimization and Abusiveness Screening, dated 3.14.2019 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Clients 2. Targeted Clients 3. Operations Manager <p>Interviews with Operations Monitor demonstrated that risk assessments are completed with each resident within 72 hours of intake. Residents attested to answering questions on the risk assessment during intake and most attested to being asked similar questions within weeks of intake.</p> <p>Site Observation:</p> <p>During review of 16 client files, this Auditor noted each resident had received screening within 72 hours of admission, primarily on the day of admission. Of the 18 files reviewed, each had been reassessed within 30 days of admission.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other residents.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 23, section a., states, "All clients will be assessed during an intake screening and upon transfer to another Facility for their risk of being sexually abused by other residents or sexually abusive toward other clients.</p> <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency policy requires that residents be screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their intake. The number of residents entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their entry into the facility was 192.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 23, section b., states, "Intake screening shall ordinarily take place within (72) hours of arrival to BHRTC."</p> <p>(c-e) The West Texas Behavioral Health Residential Treatment Center PAQ states the risk assessment is conducted using an objective screening instrument.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 23, section c.-e., states,</p> <p>c. "Screenings will be completed and documented using the Sexual Victimization and Abusiveness Screening Form, which will be given to client's counselor for proper treatment planning and monitoring. The case manager will transmit a copy to the program Assistant Director.</p> <p>d. The intake screening shall consider, at minimum, the following criteria:</p> <ol style="list-style-type: none"> 1. Whether the client has a mental, physical, or developmental disability; 2. The age of the client; 3. The physical build of the client; 4. Whether the client has previously been incarcerated; 5. Whether the client's criminal history is exclusively nonviolent; 6. Whether the client has prior convictions for sex offenses against an adult or child; 7. Whether the client is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; 8. Whether the client has previously experienced sexual victimization; and 9. The client's own perception of vulnerability. <p>e. The intake screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior intentional violence or sexual abuse, as known to BHRTC, in assessing clients for risk of being sexually abusive.</p> <ul style="list-style-type: none"> • Should any risk factors be identified at this time, Assistant Director will consult with the Operations Manager, Residential Monitor Supervisor and the counselor to determine a housing assignment that ensures the safety of all clients.

• All completed screening tool forms will be scanned to the treatment team with the original to be kept in the Assistant Director's office. Screening of clients should only be used as a guideline for determining appropriate housing and services and should never be used as the sole reason for the deprivation of a program or privilege."

The facility provided an El Paso County Community Supervision and Corrections Department Behavioral Health Residential Treatment Center Sexual Victimization and Abusiveness Screening. The screening compiles the following information:

- Date/Client Name/DOB/Age
- Staff completing admission form/Staff completing 30-day follow up and date
- Client Build: small/medium/large

Client Questions:

- Do you have a mental, physical, or developmental disability?
- Have you previously been incarcerated?
- Is your criminal history exclusively non-violent?
- Do you have a prior conviction for sex offenses against an adult or child?
- Are you or do you perceive yourself to be lesbian, gay, bi-sexual, transgender, intersex (LGBTI), or gender non-conforming?
- Have you previously experienced sexual victimization?
- Do you perceive yourself as being vulnerable / easy target for sexual victimization?

(f) The West Texas Behavioral Health Residential Treatment Center PAQ states the number of residents entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake was 185.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 23, section f., states, "Within a set time period, not to exceed 30 days from the client's arrival at the facility, BHRTC will reassess the client's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

- Counselors will monitor any client who has the potential for violating other clients (aggressors) and clients who may be at risk for victimization. Any evidence that this is occurring must be immediately reported to the counselor or a program supervisor."

(g) The West Texas Behavioral Health Residential Treatment Center PAQ states the policy requires that a resident's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 24, section g., states, "A client's risk level shall be reassessment when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that may impact the client's risk of victimization or abusiveness."

(h) The West Texas Behavioral Health Residential Treatment Center PAQ states the policy prohibits disciplining residents for refusing to answer (or for not disclosing complete information related to) the questions regarding: (a) whether or not the resident has a mental, physical, or developmental disability; (b) whether or not the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) Whether or not the resident has previously experienced sexual victimization; and (d) the resident's own perception of vulnerability.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 24, section h., states, "Clients may not be disciplined for refusing to answer, or for not disclosing complete information, in response to questions asked pursuant to the following:

1. Whether the client has a mental, physical, or developmental disability;
2. Whether the client is, or is perceived to be, LGBTI or Gender Non-Conforming;
3. Whether the client has previously experienced sexual victimization; or
4. The client's own perception of vulnerability."

(i) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 24, section a., states, "All information will be confidential. Appropriate controls shall be implemented within BHRTC regarding the dissemination of responses to questions asked in order to ensure that sensitive information is not exploited by employees or other clients to the client's detriment."

Through such reviews, the facility meets standard requirements.

115.242	Use of screening information
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 275 435 304">Document Review:</p> <ol data-bbox="242 306 1361 367" style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p data-bbox="242 398 352 427">Interviews:</p> <ol data-bbox="242 430 477 557" style="list-style-type: none"> 1. Targeted Clients 2. Random Clients 3. Operations Manager 4. PREA Coordinator <p data-bbox="242 562 1449 689">Interviews with the Operations Manager and the PREA Coordinator demonstrated once client risks are entered into the agency system the risk is shared with appropriate departments and not the reason for the risk level. Staff were able to demonstrate clients with a designated risk are designated on facility rosters with letters EM for Extra Monitoring or EC for Extra Care.</p> <p data-bbox="242 721 1493 815">(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency/facility uses information from the risk screening required by §115.241 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p data-bbox="242 846 1465 974">West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 25, section a. states, "BHRTC shall use information from the risk screening required by § 115.241 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those clients at high risk of being sexually victimized from those at high risk of being sexually abusive."</p> <p data-bbox="242 1005 1449 1066">(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency/facility makes individualized determinations about how to ensure the safety of each resident.</p> <p data-bbox="242 1097 1449 1158">West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 25, section b. states, "BHRTC shall make individualized determinations about how to ensure the safety of each client."</p> <p data-bbox="242 1189 1453 1249">(c-d) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency/facility makes housing and program assignments for transgender or intersex residents in the facility on a case-by-case basis.</p> <p data-bbox="242 1281 1477 1471">West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 25, section c-d. state, a. "In deciding whether to house a transgender or intersex client in a male housing bay or a female housing bay, or when making other housing and programming assignments for such clients, BHRTC shall consider the transgender or intersex client's own views with respect to his/her own safety and shall consider on a case-by-case basis whether such a placement would ensure the client's health and safety. Consideration should also be given as to whether the placement would present management or security problems.</p> <p data-bbox="242 1503 1441 1532">b. A transgender or intersex client's own view with respect to his or her own safety shall be given serious consideration."</p> <p data-bbox="242 1563 1449 1624">(e) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 9, section 5., last bullet states, "Transgender and intersex clients shall be given the opportunity to shower separately from other clients."</p> <p data-bbox="242 1655 1489 1783">(f) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 25, section f., states, "BHRTC shall not place lesbian, gay, bisexual, transgender, or intersex clients in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated are within BHRTC, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such clients."</p> <p data-bbox="242 1812 882 1841">Through such reviews, the facility meets standard requirements.</p>

115.251	Resident reporting
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. Client Orientation Program Handbook, dated 1.30.2019 4. BHRTC Grievance Form, dated 1.31.2018 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Clients 2. Targeted Clients 3. Resident Monitors 4. Operations Manager <p>Staff and clients were comfortable reporting verbally to any staff. Each client interviewed stated he or she would report to staff verbally, through a third party and or use Room 146 to make private calls to the numbers posted in the units. PREA posters with internal, external and advocate information were posted in each day room and throughout highly trafficked areas of the facility.</p> <p>Resident Monitors interviewed stated if a resident wanted to use a staff phone to call an advocate or the hotline, they would offer the private room set aside for confidential calls, take them to a private location to speak with them one on one or offer to let them speak with a supervisor.</p> <p>Interview with the Operation Manager demonstrated employees may privately report sexual harassment and or sexual abuse to the Human Resource office. The Human Resource office is a separate county entity.</p> <p>Site Observations:</p> <p>During the tour a private room, Room 146, is set aside for all confidential calls. The room is equipped with a monitor for online sessions with mental health services, if requested.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has established procedures allowing for multiple internal ways for residents to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other residents or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 26, section a., states, "BHRTC shall provide multiple internal ways for clients to privately report sexual abuse and sexual harassment, retaliation by other clients or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents."</p> <p>The facility provided a BHRTC Grievance Form. The grievance form is in English and Spanish. The Grievance form has Level 1 and Level 2 sections. Level 1 grievances are responded to in 48 hours and Level 2 grievances are responded to in seven days. Clients completing a grievance regarding sexual harassment or sexual abuse are instructed to complete a Level 1 Grievance.</p> <p>The facility provided a Client Orientation Program Handbook. Page 7 of the handbook has detailed information on the follow PREA topics:</p> <ul style="list-style-type: none"> • Prison Rape Elimination Act (PREA): Zero Tolerance for Sexual Abuse and Sexual Harassment • Prohibited behaviors • Client on Client Sexual Abuse • Staff Sexual Misconduct • What is Sexual Abuse • What is staff voyeurism • Right to Report • How to Report to include phone numbers to the facility, reporting to any staff, submitting a grievance, reporting to the Program Assistant Director, Deputy Director and third party information. • Privacy and Confidentiality <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency provides at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of the agency.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 26, section b., states,</p>

"BHRTC shall also inform clients of at least one way to report abuse or harassment to a public or private entity or office that is not part of the center and that is able to receive and immediately forward client reports of sexual abuse and sexual harassment to agency officials, allowing the client to remain anonymous upon request.

1. Clients shall use BHRTC's Grievance process. Residential Monitors will ensure copies of blank grievances are available in the center at all times.

2. Clients shall have access to a grievance form at all times. Clients can submit a grievance without submitting it to a staff member who is the subject of the complaint. Upon completion, the client may submit the grievance to the RM Supervisor on duty, place in the Grievance box or submit the form to one of the following staff members: Case Manager, Case Manager Supervisor, Residential Monitor Supervisor, Operations Manager, Counselor or Assistant Director.

3. Clients may also privately and anonymously report sexual assault, abuse, or harassment directly to the Texas Department of Criminal Justice-

PREA Ombudsman Office

PO Box 99

Huntsville, TX 77342-0099

Phone (936) 437-5570

Fax (936) 437-5555

E-mail: prea.ombudsman@tdcj.texas.gov

4. El Paso County Sheriff Department. 911 or 915-546-2280 (non-emergency)"

On 4.3.2022, at 12:48 pm, this Auditor phone the El Paso County Sheriff's Department at 915.546.2280 and inquired within on how they would respond to a resident contacting them in regard to sexual abuse occurring at the West Texas Behavioral Health Residential Treatment Center. After a proper introduction, I was transferred to the Supervisor "Ester" who explained, "Dispatch would advise the sergeant of the claims and dispatch a field unit to respond in their patrol processes of those involved, complete necessary steps in assessing the situation and take action in regard to what they find."

On 4.3.2022 at 1:00 pm, this Auditor emailed prea.ombudsman@tdcj.texas.gov and tested the system for reporting anonymously. On 4.4.2022 at 7:40 am, the following response was received by the Auditor, via email.

Good morning Mrs. Murray,

When the PREA Ombudsman Office receives an anonymous report of sexual abuse or sexual harassment, we send the information immediately to the unit for investigation without providing the inmates name who reported it. Once the investigation has been completed, we send the victim a response letter containing the results of the investigation.

Regards,

PREA Ombudsman Office/BB

PH: 936/437-5570

PREA.OMBUDSMAN@TDCJ.TEXAS.GOV

(c) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 26, section c., states, "Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

1. Regardless of its source, staff who receive information concerning staff on client sexual misconduct, observe staff on client sexual misconduct, or have reasonable cause to suspect a client is the victim of sexual misconduct, must immediately report the incident to their immediate supervisor, Operations Manager, or the Assistant Director or designee."

(d) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has established procedures for staff to privately report sexual abuse and sexual harassment of residents. Employees are made aware of the following through the facility PREA policy training received at orientation and annually thereafter.

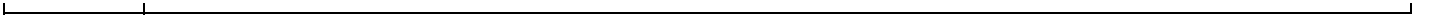
West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 26-27, section d., states, "BHRTC shall provide a method for staff to privately report sexual abuse and sexual harassment of residents.

1. Employees may privately report sexual abuse and sexual harassment of clients to the El Paso Police Department, EPSO, TDCJ-CJAD, Direct supervisor or the PREA coordinator. Staff must also report sexual abuse and sexual harassment immediately to the Director.

- Employees may privately report sexual abuse and sexual harassment of clients by forwarding a letter, sealed and marked "confidential," to the Department Director Magdalena Morales-Aina. Employees can also make an anonymous report to Administration Department at 915-546-8120.

- Any report of sexual assault, abuse, or harassment alleged to have occurred within BHRTC will be investigated to the fullest extent by the Deputy Director or designee and will be reported to the EPSO for possible criminal investigation and prosecution."

Through such reviews, the facility meets standard requirements.



115.252	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Clients 2. Targeted Clients 3. PREA Coordinator <p>Clients interviewed were aware of the grievance procedures and understood they could complete a grievance. Clients reported grievance boxes were available outside of their dorm hallways, at the Duty Station and in the Dining Hall.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has an administrative procedure for dealing with resident grievances regarding sexual abuse.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 28, first section, states, "BHRTC has administrative procedures to address resident grievances regarding sexual abuse.</p> <ol style="list-style-type: none"> 1. There is no time limit on when a client may submit a grievance regarding an allegation of sexual misconduct or risk of imminent sexual misconduct. 2. No formal grievance process is required nor is the client required to attempt to resolve the incident with staff regarding an allegation of sexual misconduct. 3. Nothing in this policy shall restrict the Department's ability to defend against a lawsuit filed by a client on the grounds that the application statute of limitations has expired." <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency policy or procedure allows a resident to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 28, section c., states, "BHRTC shall establish procedures for the filing of an emergency grievance alleging that a client is subject to a substantial risk of imminent sexual abuse.</p> <ol style="list-style-type: none"> 1. After receiving an emergency grievance alleging a client is subject to a substantial risk of imminent sexual abuse, BHRTC shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final department decision within 5 calendar days. 2. The initial response and final center decision shall document the center's determination whether the client is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance." <p>(c) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency's policy and procedure allows a resident to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The agency's policy and procedure require that a resident grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint. Compliance can be found in provision (a) of this standard.</p> <p>(d) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency policy and procedure requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. In the past 12 months, the number of grievances filed that alleged sexual abuse was zero. In the past 12 months, the number of grievances alleging sexual abuse that reached final decision within 90 days after being filed was zero.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 28, section b., states, "The department shall ensure:</p> <ol style="list-style-type: none"> 1. A client who alleges sexual misconduct may submit a grievance without submitting it to a staff member who is the subject of the complaint; 2. Such grievance is not referred to a staff member who is the subject of the complaint; 3. The Department shall issue a final decision on the merits of any portion of a grievance alleging sexual misconduct within 90 days of the initial filing of the grievance; 4. Computation of the 90-day time period shall not include time consumed by the clients in preparing any appeal; 5. The department may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The department shall notify the client in writing of any such extension and provide a date by which a decision will be made;

6. At any level of the grievance process, including any properly noticed extension, the client may consider the absence of a response to be a denial at any level;

(e) The West Texas Behavioral Health Residential Treatment Center PAQ states agency policy and procedure permits third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of residents. Agency policy and procedure requires that if a resident decline to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the resident's decision to decline. The number of grievances alleging sexual abuse filed by residents in the past 12 months in which the resident declined third-party assistance, containing documentation of the resident's decision to decline was zero. Policy compliance can be found in provision (d) #7., of this standard.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 28, section b. 7-9, states, "The department shall ensure:

7. Third parties, including fellow clients, staff members, family members, attorneys, and outside advocates, shall be permitted to assist clients in filing requests for a grievance relating to allegations of sexual misconduct, and shall also be permitted to file such requests on behalf of clients;

8. If a third-party file such a request on behalf of a client, the department may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the grievance process; and

9. If the client declines to have the request processed on his or her behalf, the department shall document the client's decision."

(f) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has a policy and established procedures for filing an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. Agency policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours. The number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months was zero. The agency's policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires that a final agency decision be issued within 5 days. The number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within 5 days was zero.

Policy compliance can be found in provision (b) of this standard.

(g) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has a written policy that limits its ability to discipline a resident for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the resident filed the grievance in bad faith. In the past 12 months, the number of resident grievances alleging sexual abuse that resulted in disciplinary action by the agency against the resident for having filed the grievance in bad faith was zero.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 29, section d., states, "BHRTC may discipline a client for filing a grievance related to alleged sexual abuse only where the center demonstrates that the client filed the grievance in bad faith."

Through such reviews, the facility meets standard requirements.

115.253	Resident access to outside confidential support services
	Auditor Overall Determination: Exceeds Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. CASFV – Services for Survivors Brochure, not dated 4. Memorandum of Understanding between The Center Against Sexual and Family Violence and El Paso County Community Supervision and Corrections Department, dated 3.15.2022. <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Clients 2. Targeted Clients 3. Resident Monitors <p>Staff and clients interviewed informally and formally were aware of outside advocates and the availability of the private Room 146 to meet with outside support services. In addition, the outside support service conducts weekly classes via Zoom for all clients.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility provides residents with access to outside victim advocates for emotional support services related to sexual abuse. The facility provides residents with access to such services by giving residents mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations. The facility provides residents with access to such services by enabling reasonable communication between residents and these organizations in as confidential a manner as possible.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 30, section a., states, “BHRTC shall provide clients with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and by enabling reasonable communication between residents and these organizations, in as confidential a manner as possible.</p> <ol style="list-style-type: none"> 1. Clients will have access to the SANE nurse at University Medical Center (UMC). The SANE nurse will respond to the hospital to provide emotional support services and resources for legal representation. 2. Clients will have access to the Center against Sexual and Family Violence (CASFV). Reasonable communication between the client and the Center against Sexual and Family Violence (CASFV) will be held in a confidential manner as possible. <ul style="list-style-type: none"> • 915-539-7300 Sexual Assault Services, 580 Giles Rd. El Paso Texas 79915” <p>The facility provided the CASFV – Services for Survivors Brochure. The brochure provides clients with information on services for their crisis hotline, hospital accompaniment, emergency shelter, confidential location – call crisis hope-line and crisis intervention and advocacy services.</p> <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility informs residents, prior to giving them access to outside support services, of the extent to which such communications will be monitored.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 30, section b., states, “Clients will be informed prior to access the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to the authorities in accordance with mandatory reporting laws.”</p> <p>(c) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency or facility maintains memorandum of understanding (MOUs) or other agreements with community service providers that are able to provide residents with emotional support services related to sexual abuse.</p> <p>The facility provided a Memorandum of Understanding with Memorandum of Understanding between The Center Against Sexual and Family Violence and El Paso County Community Supervision and Corrections Department. The second paragraph of the Memorandum of Understanding, states, “The purpose of this MOU is to describe the responsibilities of the parties in accordance with the Prison Rape Elimination Act (PREA) Standard 115.221(d). The parties will work together to ensure that confidential support is available to the West Texas Behavioral Health Residential Treatment Center residents who have been impacted by sexual violence, herein after referred to as Clients.” This memorandum is current with an agreement date of March 15, 2022.</p> <p>The facility provided a Memorandum of Understanding, The Center Against Sexual and Family Violence and El Paso County Community Supervision and Corrects Department. Page 1, paragraph 2, states, “The purpose of the MOU is to describe the responsibilities of the parties in accordance with the Prison Rape Elimination Act (PREA) Standard 115.221(d). The parties will work together to ensure that confidential support is available to the West Texas Behavioral Health Residential Treatment</p>

Center residents who have been impacted by sexual violence, herein after referred to as Clients.”

On 4.3.2022 at 2:00 pm, this Auditor phoned the Associate Director of Sexual Assault Services at 915.539.1000 and inquired as to what steps the Center would take if a resident needed their services. This Auditor needed to leave a message as the Center is only open Monday through Friday from 8:00-5:00 pm. A return phone call was not received. On 4.14.2022, during the onsite review, this Auditor tested the phone system. Upon selecting the option for the advocacy center the call was answered by the center. The Auditor explained the reason for the call and the advocate stated she was aware of the memorandum of understanding and would assist clients from the center with any advocacy services they may require.

Through such reviews and daily access, through video equipment, to community advocacy services, the facility exceeds standard requirements.

115.254	Third party reporting
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. Facility website with Third Party information County of El Paso Texas - EPCCSCD (epcounty.com) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Clients 2. Targeted Clients 3. Resident Monitors 4. Supervisory staff <p>Clients and staff interviewed demonstrated their reporting knowledge of third-party reporting stating that resident family members, friends and or legal counsel could report sexual harassment or sexual abuse allegations.</p> <p>Site Observation:</p> <p>During tours of visitation areas PREA Zero-tolerance posters were present. Posters included contact information and instruction for third party reports.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency or facility provides a method to receive third-party reports of resident sexual abuse or sexual harassment. The agency or facility publicly distributes information on how to report resident sexual abuse or sexual harassment on behalf of residents.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 31, section a-b., states, "BHRTC has a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of a client.</p> <ol style="list-style-type: none"> a. Third parties, including fellow clients, staff, family members, attorneys, and outside advocates will be permitted to assist clients in filing requests for administrative remedies relating to allegations of sexual abuse, and will also be permitted to file such requests on behalf of the clients. b. If a third party, other than a parent or legal guardian, submits a grievance on behalf of a client and the alleged victim does not want to pursue charges on his or her behalf, the refusal will be documented within the investigation. BHRTC will follow subsequent steps in the administrative remedy process. <ul style="list-style-type: none"> • A family member or legal guardian shall be allowed to file a grievance regarding allegations of sexual abuse on behalf of the client without the client agreeing to have the request filed on his or her behalf. • A community grievance form is available on www.epcounty.com Go to: https://www.epcounty.com/EPSCS/ToReportAbuse link, and the Community Grievance Form. • Print the form and mail or deliver to: 800 E. Overland Suite 100 El Paso, Texas 79901 Phone (915) 546-8120 Fax (915) 546-8130 Attention: BHRTC PREA Coordinator." <p>The facility website at County of El Paso Texas - EPCCSCD (epcounty.com), includes the following information:</p> <p>The BHRTC's ZERO-TOLERANCE policy includes protection against retaliation for anyone who reports or cooperates in an investigation regarding sexual misconduct. Reports about sexual misconduct and/or retaliation can be made via any of the following:</p> <p>BHRTC Facility 3700 Mattox El Paso, Texas 79925 Phone: (915)772-8537</p> <p>El Paso County Community Supervision and Corrections Department 800 East Overland, Suite 225 El Paso, Texas 79901 Phone: (915)546-8120</p> <p>TDCJ PREA Ombudsman Office:</p>

PO Box 99
Huntsville, TX 77342-0099
Phone: 936-437-5570
Fax: 936-437-5555
E-mail: preaombudsman@tdcj.texas.gov

Through such reviews, the facility meets standard requirements.

115.261	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Document Review:

1. West Texas Behavioral Health Residential Treatment Center PAQ
2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021

Interviews:

1. Random Clients
2. Targeted Clients
3. Resident Monitors
4. Specialized staff
5. Operations Manager / Facility Investigator
6. Assistant Facility Director / PREA Coordinator

Interviews with each staff and clients interviewed demonstrated each actively practices and understood the importance of immediately reporting all allegations of sexual abuse and sexual harassment. All staff interviewed stated they had never received an allegation of sexual harassment or sexual abuse.

Site Observations:

The facility has not experienced an allegation of sexual harassment or sexual abuse since implementation of PREA.

(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The agency requires all staff to report immediately and according to agency policy retaliation against residents or staff who reported such an incident. The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 32, section a., states, "BHRTC shall require all staff to report immediately and according to center policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred at the center, whether or not it is part of the center; retaliation against clients or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation."

(b) The West Texas Behavioral Health Residential Treatment Center PAQ states, apart from reporting to designated supervisors or officials and designated state or local services agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 32, section b., states, "All information concerning an event of client sexual abuse or sexual harassment is to be treated as confidential. Apart from reporting to designated PREA-trained team members, employees shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, and as specified in this policy, to make treatment, investigation, and other security and management decisions."

(c) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 32, section c., states, "Unless otherwise precluded by Federal, State, or local law, medical (UMC) and mental health professionals (EHN/Private) shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform clients of their duty to report, and the limitations of confidentiality at the initiation of services."

(d) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 32, section d., states, "If the alleged victim is under the age of eighteen (18) or considered a vulnerable adult under a State or local vulnerable person's statute, the allegation shall be reported to the designated state or local services agency under applicable mandatory reporting laws (115.261 (d)). At this Department, the designated State and /or local reporting agencies are:

1. Texas Department of Family and Protective Services - Texas Abuse Hotline (1-800-252-5400) if the situation is urgent and needs to be investigated within 24 hours.
2. 911 or local law enforcement agency if it is an emergency or life-threatening situation that must be dealt with immediately."

On 4.3.2022 at 3:29 pm, this Auditor phoned 1.800.252.5400 and tested the hotline phone number. Within one ring the following message began, "Hello, you have reached the Texas Abuse Hotline of the Department of Family and Department Services. For English, press 1, for Spanish press, 2."

(e) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 32, section e., states, "BHRTC shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the center's designated investigators."

Through such reviews, the facility meets standard requirements.

115.262	Agency protection duties
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Targeted Clients 2. Operations Manager / Facility Investigator 3. PREA Coordinator / Facility Investigator <p>Interviews with the facility investigators demonstrated the facility staff act promptly and respond properly at the discovery of an incident.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states when the agency or facility learns that a resident is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the resident. In the past 12 months, the number of times the agency or facility determined that a resident was subject to a substantial risk of imminent sexual abuse was zero.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 33, only paragraph, states, "When it is learned that a client is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the client.</p> <ul style="list-style-type: none"> • Move to Wellness Room • Removal from the program and referred to another facility • Removal of the perpetrator" <p>Through such reviews the facility meets standard requirements.</p>

115.263	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. Post Audit Memorandum, RE: 115.263, dated 4.15.2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Targeted Client 2. Assistant Director / PREA Coordinator 3. Deputy Director <p>An interview with a targeted client demonstrated she had reported she believed she had a sexual experience she did not want to have at the local police station. The client reported she had notified the judge and the West Texas Behavioral Health Residential Treatment Center; however, the disclosure was not reported to the local police department.</p> <p>The interview with Assistant Director demonstrated the client had reported the allegation regarding the disclosure and the report had not been reported to the local police department. The Assistant Director was asked to provide an action plan to the Auditor regarding the reporting of the disclosure and compliance, moving forward.</p> <p>Post Audit, the facility provided a memorandum, from the Assistant Director/PREA Coordinator, addressed to the Deputy Director, stating the following: "In accordance to PREA Standard 115.263 Reporting to Other Confinement Facilities, BHRTC has received a written statement from a client (E.H.) that warranted review and notification as stipulated in the standard. On April 15, 2022. the allegation was transmitted to your attention for further investigated that includes notifying the other confinement facility(ies). Further, a copy of the statement of the client will need to be forwarded to the appropriate official at the location where the incident was reported to have occurred. The West Texas Behavioral Health Residential Treatment Center (BHRTC) is committed to meeting the standard that requires such notification is completed within 72 hours of receipt of a client's allegation.</p> <p>The interview with the Deputy Director demonstrated that she was aware that upon receiving an allegation that a resident was sexually abused while confined at another facility, she had the responsibility to notify the head of the facility where the allegation occurred within 72 hours of receipt.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has a policy requiring that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. During the past 12 months, the number of allegations the facility received that a resident was abused while confined at another facility was zero.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 34, section a., states, "Upon receiving an allegation that a client was sexually abused while confined at another facility, the BHRTC Asst. Director or Operations Manager that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. "</p> <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency policy requires the facility head to provide such notification as soon as possible, but no later than 72 hours after receiving the allegation.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 34, section b., states, "Such notification shall be provided as soon as possible, but the alleged abuse took place within 72 hours after receiving the allegation.</p> <ol style="list-style-type: none"> 1. If the allegation was reported and investigated by the appropriate officials, the department shall document the allegation, name and title of the person contacted, and that the allegation has already been addressed. Under this circumstance, further investigation and notification need not occur. 2. If the allegation was not reported or not investigated, a copy of the statement of the client shall be forwarded to the appropriate official at the location where the incident was reported to have occurred." <p>(c) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency or facility documents that it has provided such notification within 72 hours of receiving the allegation.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 34, section c., states, "All such contacts and notifications shall be documented including the allegation, any details learned from contact with the site where the alleged abuse took place, and the department's response to the allegation."</p>

(d) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency or facility policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards. In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities was zero.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 34, section d., states, "The Director (Maggie Morales-Aina or designee) will ensure that allegation is investigated in accordance with these standards.

1. The investigating authority is recommended to follow the National Protocol for Sexual Assault Medical Forensic Examinations (www.ncjrs.gov/pdffiles1/ovw/206554.pdf)."

Through such reviews the facility meets standard requirements.

115.264	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Resident Monitor 2. Specialized staff 3. Operations Manager / Facility Investigator <p>Interviews with each staff interviewed demonstrated they were aware of their first responder responsibilities. Staff stated reporting information is posted on posters throughout the facility and their access to 'PREA Binder' kept at the Duty Station. Staff interviewed articulated they would separate and have a staff stay with the victim and perpetrator, ensure neither drank, ate, changed clothing, or otherwise contaminate themselves and or the area where the incident was alleged to have taken place. Staff interviewed stated they would notify supervisory staff, law enforcement, medical and or mental health agencies depending on the type of allegation reported</p> <p>Site Observation:</p> <p>The facility has not experienced an allegation of sexual harassment or sexual abuse since implementation of PREA.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to separate the alleged victim and abuser. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. The policy requires that, upon learning of an allegation that a resident was sexually abused and the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report shall be required to request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. The policy requires that, upon learning of an allegation that a resident was sexually abused and the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report shall be required to ensure that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.</p> <p>In the past 12 months, zero allegations occurred where a resident was sexually abused. Of these allegations, the number of times the first security staff member to respond to the report separated the alleged victim and abuser was zero. In the past 12 months, there were zero allegations where staff were notified within a time period that still allowed or the collection of evidence. Of these allegations the number of times the first security staff member to respond to the report was zero.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 35, section a., states, "Upon learning of an allegation that a client was sexually abused, the first staff member to respond the report shall be required to:</p> <ol style="list-style-type: none"> 1. Ensure that the victim is safe and kept separate (with no contact) from the abuser. <ul style="list-style-type: none"> • Notify the supervisor on duty and/or one of the members of the PREA team and the Assistant Director or designee shall notify the investigating agency if appropriate; 2. Take steps to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; 3. If the abuse occurred in a time frame that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and 4. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged abuser not take any actions that could destroy physical evidence including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking drinking, or eating; <ul style="list-style-type: none"> • Photograph the scene and any visible evidence and seal access to the immediate area off the scene if possible (i.e., lock or block door/entrance)." <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility's' policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify security staff. Of the allegations that a resident was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder was zero.</p>

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 35, section b., states, "If the first responder is not a staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and then notify the appropriate BHRTC staff. CONFIDENTIALITY All required information concerning the allegation is kept confidential by discussing the information with only those employees who have a direct need to know."

Through such reviews, the facility meets standard requirements.

115.265	Coordinated response
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 435 300">Document Review:</p> <ol data-bbox="242 304 1361 365" style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p data-bbox="242 396 352 425">Interviews:</p> <ol data-bbox="242 430 687 524" style="list-style-type: none"> 1. Resident Monitors 2. Operations Manager / Facility Investigator 3. PREA Coordinator <p data-bbox="242 528 1437 589">Interviews with the random and specialized staff demonstrated the response to allegations of sexual assault is written to coordinate actions taken in response to sexual abuse and sexual harassment incidents.</p> <p data-bbox="242 620 1485 714">(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p data-bbox="242 745 1469 840">West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 36, states, "The PREA Coordinator shall ensure following coordinated response process is completed upon receipt of a reported sexual abuse incident:</p> <ol data-bbox="242 871 1485 1565" style="list-style-type: none"> a. Immediately report all allegations of rape, sexual assault, or employee on client sexual misconduct to state or local law enforcement agencies for criminal investigation if the allegation (if proven true) would be considered a criminal act under federal, state, or local law. The reporting party should request guidance from the law enforcement agency(ies) in preserving the crime scene and coordinating an investigation. b. If the allegation involves an employee, BHRTC will ensure steps are taken to place this person in a role that does not involve contact with clients. c. Ensure that medical and mental health referrals are completed (when appropriate). d. Ensure that an investigation is initiated and documented. Investigations into allegations of sexual abuse must be investigated by an employee who has received training in the investigation of sexual abuse cases. e. Ensure appropriate Incident Reports are completed. f. Review any video recordings of the alleged crime scene from the time period implicated by the allegation. Ensure all video recordings are downloaded to the main server hard drive, secured and preserved from the time period implicated in the allegation. g. Conduct a preliminary review of the incident and BHRTC's response forty-eight (48) to seventy-two (72) hours following a reportable PREA incident. The review will be convened by the Department Deputy Director or designee. At a minimum, the review shall include: <ol data-bbox="242 1404 1166 1565" style="list-style-type: none"> 1. Discussion of the incident, and whether the incident response meets applicable standards; 2. Appropriate categorization of the incident report; 3. Completion of required notifications; 4. A request for law enforcement involvement (if appropriate); and 5. Whether employee actions or failures to act contributed to the sexual abuse." <p data-bbox="242 1597 882 1626">Through such reviews, the facility meets standard requirements.</p>

115.266	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <p>1. West Texas Behavioral Health Residential Treatment Center PAQ</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency, facility, or any other governmental entity is not responsible for collective bargaining on the agency's behalf has not entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.267	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Operations Manager <p>The interview with the Operations Manager demonstrated he and or the Assistant Director would complete retaliation monitoring for clients and staff. The Operations Manager stated he would check in 2-3 times per week, document check ins at least once a month every 30 days for at least 90 days and or as long as was necessary.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The agency designates staff member(s) or charges department(s) with monitoring for possible retaliation. Monitoring is completed by the Facility Assistant Director and the Operations Manager.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 38, section a., states, "Retaliation against clients, employees, or other parties for reporting sexual misconduct will not be tolerated. Those who retaliate may face disciplinary action up to and including unsuccessful discharge for clients and dismissal for employees."</p> <p>(b) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 38, section b., states, "BHRTC employs multiple protection measures that include but are not limited to the following:</p> <ol style="list-style-type: none"> 1. Housing changes or transfer for client victims or abuser; 2. Removal of alleged staff or client abusers from contact with victims; 3. Emotional support services will be provided for clients or staff who fear retaliation for reporting sexual misconduct or for cooperating with investigations." <p>(c) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility monitors the conduct or treatment of Residents or staff who reported sexual abuse and of residents who were reported to have suffered sexual abuse to ascertain if there are any changes that may suggest possible retaliation by Residents or staff. The facility will monitor conduct or treatment until the Resident is discharged. The facility acts promptly to remedy any such retaliation. In the past 12 months, the facility has had zero incidents of retaliation.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 38, section c., states, "For at least 90 days following a report of sexual abuse, BHRTC shall monitor the conduct and treatment of clients or staff who reported the sexual misconduct, any individual expressing a fear of retaliation, and of clients who were reported to have suffered sexual misconduct to see if there are changes that may suggest possible retaliation by clients or staff, and shall:</p> <ol style="list-style-type: none"> 1. Promptly act to remedy any such retaliation, included but not limited to: <ul style="list-style-type: none"> • Client disciplinary reports • Housing changes • Program changes • Negative performance reviews of staff • Reassignment of staff 2. BHRTC shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need." <p>(d) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 38, section d., states, "In the case of clients, such monitoring shall also include periodic status checks."</p> <p>(e) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 38, section e., states, "If any other individual who cooperates with an investigation expresses a fear of retaliation, BHRTC shall take appropriate measures to protect that individual against retaliation."</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.271	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Operations Manager / Facility Investigator <p>The investigator clearly articulated processes required during an investigation, to include a thorough review and in-depth investigation documentation process. The investigator stated the process would immediately begin by ensuring the scene was secured, separation of clients, offer medical and mental health services, proper notifications completed, reviewing of camera footage, securing of any physical evidence, review team would review and decide on the investigation outcome and notify the victim of the outcome once the investigation was completed.</p> <p>Site Observation:</p> <p>The facility has not experienced an allegation of sexual harassment or sexual abuse since implementation of PREA.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency/facility has a policy related to criminal and administrative agency investigations.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 39, section f. g., state, g. "BHRTC shall defer criminal investigations to the appropriate law enforcement authorities."</p> <p>f. Administrative Investigations:</p> <ol style="list-style-type: none"> 1. Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and 2. Shall be documented and shall detail the following components: <ul style="list-style-type: none"> • Investigative facts (i.e., specific details about what actually happened); • Physical evidence (e.g., clothes collected, medical evidence, etc.); • Testimonial evidence (e.g., witness statements); • Reasoning behind credibility assessments (i.e., why is the person deemed credible or not credible. Credibility shall be assessed on an individual basis and not be determined by the person's status as a client or employee.); • Investigative findings (i.e., discovery or outcome of the investigation); • Whether actions and/or failures of staff to act contributed to the incident, including an explanation as to what determined the conclusion." <p>(b) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 21, section a., states, "In addition to the general training provided to all employees pursuant to § 115.231, BHRTC shall ensure that, to the extent the center itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings."</p> <p>(c) Policy compliance can be found in provision (a) of this standard.</p> <p>(d) This provision is not applicable as the facility does not complete sexual abuse investigations, therefore they do not conduct compelled interviews.</p> <p>(e) Policy compliance can be found in provision (a) of this standard. The facility does not use a truth telling device.</p> <p>(f) Policy compliance can be found in provision (a) of this standard.</p> <p>(g) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 39, section g., states, "BHRTC shall defer criminal investigations to the appropriate law enforcement authorities."</p> <p>(h) The West Texas Behavioral Health Residential Treatment Center PAQ states substantiated allegations of conduct that appear to be criminal are referred for prosecution. The number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA audit, was zero. Policy compliance can be found in provision (g) of this standard.</p> <p>(i) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 39, section i., states, "The department shall retain written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuse is incarcerated or employed by the department, plus five years."</p> <p>(j) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 39, section j., states, "The departure of the alleged abuser or victim from the employment or control of the center or department shall not provide a</p>

basis for terminating an investigation.”

(l) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 39, section I, states, “When outside agencies investigate sexual abuse, BHRTC shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.”

Through such reviews, the facility meets standard requirements.

115.272	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Operations Manager / Facility Investigator <p>The interview with the facility investigator demonstrated the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ Bureau states the agency imposes a standard of a preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 40 states, "In any sexual abuse or sexual harassment investigation in which BHRTC is the primary investigating entity, the BHRTC shall utilize a preponderance of the evidence standard for determining whether allegations of sexual abuse or sexual harassment are substantiated."</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.273	Reporting to residents
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Operations Manager / Facility Investigator 2. Assistant Facility Director / PREA Coordinator <p>Interviews with a facility investigator and the PREA Coordinator demonstrated notification requirements to victims are provided in writing with documentation of each notification.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has a policy requiring that any resident who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. The number of criminal and/or administrative investigations of alleged resident sexual abuse that were completed by the agency/facility in the past 12 months was zero.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 41, section a., states, "Following an investigation into a client's allegation of sexual misconduct suffered at BHRTC, BHRTC shall inform the client as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded."</p> <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states an outside entity conducts such investigations; the agency requests the relevant information from the investigative entity in order to inform the resident of the outcome of the investigation. The number of investigations of alleged resident sexual abuse in the facility that were completed by an outside agency in the past 12 months was zero.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 41, section b., states, "If BHRTC did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the client."</p> <p>(c) The West Texas Behavioral Health Residential Treatment Center PAQ states following a resident's allegation that a staff member has committed sexual abuse against the resident, the agency/facility subsequently informs the resident (unless the agency has determined that the allegation is unfounded) whenever: (a) the staff member is no longer posted within the resident's unit; (b) the staff member is no longer employed at the facility; (c) the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (d) the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 41, section c., states, "Following a client's allegation that a staff member has committed sexual misconduct against the client, BHRTC shall subsequently inform the client (unless the agency has determined that the allegation is unfounded) whenever:</p> <ol style="list-style-type: none"> 1. The staff member is no longer posted within the client's area; 2. The staff member is no longer employed at the BHRTC; 3. The center learns that the staff member has been indicted on a charge related to sexual abuse center; or 4. The center learns that the staff member has been convicted on a charge related to sexual abuse within the center." <p>(d) The West Texas Behavioral Health Residential Treatment Center PAQ states following a resident's allegation that he or she has been sexually abused by another resident in an agency facility, the agency subsequently informs the alleged victim whenever: (a) the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (b) the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 41, section d., states, "Following a client's allegation that he or she has been involved in an incident of sexual misconduct by another client, BHRTC shall subsequently inform the alleged victim whenever:</p> <ol style="list-style-type: none"> 1. BHRTC learns that the alleged abuser has been indicted or convicted on a charge related to sexual misconduct within the Department; or 2. BHRTC learns that the alleged abuser has been convicted on a charge related to sexual abuse within BHRTC." <p>(e) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency has a policy that all notifications to residents described under this standard are documented. In the past 12 months, there has been zero notifications to a</p>

resident, pursuant to this standard.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 41, section e., states, "All such notifications or attempted notifications shall be documented. The client shall sign the forms, verifying that such notification has been received. The signed forms shall be kept in the client's file."

Through such reviews, the facility meets standard requirements.

115.276	Disciplinary sanctions for staff
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 435 300">Document Review:</p> <ol data-bbox="242 304 1361 365" style="list-style-type: none"> <li data-bbox="242 304 927 333">1. West Texas Behavioral Health Residential Treatment Center PAQ <li data-bbox="242 336 1361 365">2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p data-bbox="242 396 352 425">Interviews:</p> <ol data-bbox="242 430 687 459" style="list-style-type: none"> <li data-bbox="242 430 687 459">1. Operations Manager / Facility Investigator <p data-bbox="242 463 1453 524">Through review of investigations with the Facility Investigator demonstrated there were zero staff who were disciplined for violation of an agency sexual abuse or sexual harassment policy.</p> <p data-bbox="242 555 1473 616">(a) The West Texas Behavioral Health Residential Treatment Center PAQ states staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p data-bbox="242 647 1493 770">West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 42, section a., states, "Employees shall be subject to disciplinary sanctions up to and including termination for violating Department sexual abuse or sexual harassment policies. Termination shall be the presumptive disciplinary sanction for employees who have engaged in sexual abuse."</p> <p data-bbox="242 801 1493 898">(b) The West Texas Behavioral Health Residential Treatment Center PAQ states in the last 12 months, there has been zero staff from the facility that had violated agency sexual abuse or sexual harassment policies. Policy compliance can be found in provision (a) of this standard.</p> <p data-bbox="242 929 1466 1088">(c) The West Texas Behavioral Health Residential Treatment Center PAQ states disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. In the past 12 months there have zero staff requiring discipline for sexual abuse or sexual harassment.</p> <p data-bbox="242 1120 1490 1243">West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 42, section b., states, "Disciplinary sanctions for violations of Department sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the employee's disciplinary history, and the sanctions imposed for comparable offenses by other employees with similar histories."</p> <p data-bbox="242 1274 1442 1397">(d) The West Texas Behavioral Health Residential Treatment Center PAQ states all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past 12 months, zero staff have been terminated for sexual abuse or harassment.</p> <p data-bbox="242 1429 1474 1552">West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 42, section c., states, "All terminations for violations of the Department sexual abuse or sexual harassment policies, or resignations by employees who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies."</p> <p data-bbox="242 1583 882 1612">Through such reviews, the facility meets standard requirements.</p>

115.277	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Site Observation:</p> <p>During the last audit cycle, the facility did not have any volunteers or contractors subject to disciplinary action due to violating sexual abuse or sexual harassment policies. Of the volunteer and contractor files reviewed, none had disciplinary action for violations of sexual abuse or sexual harassment.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies. Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with residents. In the past 12 months, contractors or volunteers have not been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of residents. In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of residents was zero.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 43, section a., states, "Any civilian or contractor who engages in sexual abuse shall be prohibited from contact with clients and shall be reported to law enforcement agencies and to any relevant licensing body. Any other violation of the Department sexual abuse or sexual harassment policies by a civilian or contractor will result in further prohibitions."</p> <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ the facility takes appropriate remedial measures and considers whether to prohibit further contact with Residents in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. Policy compliance can be found in provision (a) of this standard.</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.278	Disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Assistant Facility Director / PREA Coordinator <p>An interview with the PREA Coordinator demonstrated residents who falsely reported PREA allegations would typically be moved to another dorm and or facility due to such behaviors are not tolerated at the facility.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that a resident engaged in resident-on-resident sexual abuse. Residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for resident-on-resident sexual abuse. In the past 12 months, the number of administrative findings of resident-on-resident sexual abuse that have occurred at the facility was zero. In the past 12 months, the number of criminal findings of guilt for resident-on-resident sexual abuse that have occurred at the facility was zero.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 44, section a., states, "All clients found guilty of sexual abuse shall be institutionally disciplined in accordance with the Department disciplinary procedures. Because the burden of proof is substantially easier to prove in a client's disciplinary case than in a criminal prosecution, a client may be institutionally disciplined even though law enforcement officials decline to prosecute."</p> <p>(b) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 44, section b., states, "Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the client's disciplinary history, and the sanctions imposed for comparable offenses by other clients with similar histories."</p> <p>(c) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 44, section c., states, "The disciplinary process shall consider whether a client's mental disabilities or mental illness contributed to his/her behavior when determining what type of sanction, if any, should be imposed."</p> <p>(d) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility does not offer therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse.</p> <p>(e) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency disciplines residents for sexual conduct with staff only upon finding that the staff member did not consent to such contact.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 44, section e., states, "A client may be disciplined for sexual conduct with an employee only upon finding that the employee did not consent to such contact."</p> <p>(f) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 44, section f., states, "Clients who deliberately allege false claims of sexual abuse can be disciplined."</p> <p>(g) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 4, first paragraph, states, "There is Zero Tolerance of sexual abuse and sexual harassment at the Behavioral BHRTC. Clients have the right to be free from sexual abuse, sexual harassment, neglect, and exploitation. This includes not being subjected to sexually assaultive, abusive, or harassing behavior from staff and other clients. At BHRTC, no person regardless of age can "agree" or "consent" to have sex or sexual contact with staff or another client at the center. BHRTC is committed to preventing, detecting, and responding to such conduct. If BHRTC learns a client is subject to a substantial risk of imminent sexual abuse, the staff will take immediate action to protect the client."</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.282	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Assistant Facility Director / PREA Coordinator <p>Interviews with the Assistant Facility Director demonstrated disclosure reports are reported to the PREA Coordinator or the Operations Manager. Documentation of disclosures and follow up appointments are completed in the client file.</p> <p>Site Observation:</p> <p>A review of 16 resident files reviewed demonstrated resident disclosures while at the facility had not occurred.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 45, section a., states, "Victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. The victim will be referred to University Medical Center (UMC) for medical services."</p> <p>(c) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 45, section b-c., state,</p> <ol style="list-style-type: none"> a. "Such examinations shall be performed by a SAFE or SANE where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The investigating entity shall document its efforts to provide SAFEs or SANEs. b. If a medical or mental health practitioner is not on duty at the time of the report, the first responder will take preliminary steps to protect the victim and will immediately notify the appropriate medical and mental health practitioners, PREA Coordinator or Operations Manager. <p>(c) The West Texas Behavioral Health Residential Treatment Center PAQ states, resident victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 45, section d., states, "Client victims of sexual abuse while incarcerated will be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate. The required information/care will be provided by the jail."</p> <p>(d) The West Texas Behavioral Health Residential Treatment Center PAQ states, treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 45, section e., states, "Treatment services will be provided to the victim without financial cost and regardless of if the victim names the abuser or cooperates with the investigation arising from the incident."</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.283	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Clients 2. Targeted Clients 3. Resident Monitors 4. Operations Manager <p>Interviews with staff and residents demonstrated that each interviewed are aware of their access to emergency medical and mental health services. There were three clients who reported past sexual abuse and each reported staff acted empathetically, addressed their concerns and offered them mental health services.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 46, section a., states, "BHRTC will offer medical and mental health evaluation and, as appropriate, services to all residents who have been victimized by sexual abuse. Referrals will be made to:</p> <ul style="list-style-type: none"> • University Medical Center (UMC) • Emergence Health Network (EHN) • Center Against Sexual and Family Violence (CASFV)" <p>(b) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 46, section b., "The evaluation and services will include, as appropriate, follow-up services, service plans, and when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody."</p> <p>(c) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 46, section c., states, "Services provided will be consistent with the community level of care."</p> <p>(d) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility offers Female victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 46, section d., states, "Client victims of sexually abusive vaginal penetration while incarcerated will be offered pregnancy tests "</p> <p>(e) The West Texas Behavioral Health Residential Treatment Center PAQ states li pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 46, section e., "If pregnancy results from the abuse, the victim will receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services."</p> <p>(f) The West Texas Behavioral Health Residential Treatment Center PAQ states resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 46, section f., states, "Tests for sexually transmitted infections as medically appropriate will be offered."</p> <p>(g) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 46, section g., states, "Treatment services will be provided to the victim without financial cost regardless of if the victim names the abuser or cooperates with the investigation of the incident."</p> <p>(h) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility does not attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 46, section h., states,</p>

“BHRTC shall make for a mental health evaluation of all known client-on-client abusers within 60 days of learning of such abuse history and offer the treatment opportunity when deemed appropriate by mental health practitioners.

- Emergence Health Network
- Private Provider when applicable
- Center for Sexual and Family Violence (CASFV)”

Through such reviews, the facility meets standard requirements.

115.286	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. El Paso County Community Supervision and Corrections Department Memorandum, Subject: PREA Incident Review Team, dated 10.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Resident Monitor Supervisor 2. Operations Manager 3. Deputy Director <p>The team on-site clearly articulated their review of all incidents reported and investigations of sexual harassment and sexual abuse.</p> <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. In the past 12 months there has been zero criminal and or administrative investigations of alleged sexual abuse completed at the facility,</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 47, section a., states, "BHRTC will conduct a sexual abuse incident report review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.</p> <ol style="list-style-type: none"> 1. Following completion of the investigation, the allegation will be classified as follows: <ul style="list-style-type: none"> • Substantiated – An incident shall be classified as substantiated if the results of the Investigation determine that the allegation did occur. • Unsubstantiated – An incident shall be classified as unsubstantiated if the results of the investigation determine that the evidence was insufficient to make a final determination of whether or not the allegation occurred. • Unfounded – An incident shall be classified as unfounded if the results of the investigation determine the allegation did not occur." <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states sexual abuse incident reviews are ordinarily conducted within 30 days of concluding the criminal or administrative investigation. In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents were zero.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 47, section b., states, "Such review shall ordinarily occur within thirty (30) days of the conclusion of the investigation."</p> <p>(c) The West Texas Behavioral Health Residential Treatment Center PAQ states the sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 47, section c., states, "The review team shall include upper management (Director and Deputy Director), with input from line supervisors (Assistant Director, Operations Manager, Residential Monitor Supervisors), investigators, and medical and/or mental health practitioners (i.e., UMC and EHS)."</p> <p>The facility provided an El Paso County Community Supervision and Corrections Department Memorandum, Subject: PREA Incident Review Team. This memorandum is for: Memorandum of Record, From the PREA Compliance Manager, Subject: PREA Incident Review Team, on 10.1.2021. The memorandum states, "The below listed staff members will serve as the PREA Incident Review Team.</p> <p>Annalisa Davila - El Paso County CSCD Deputy Director or Special Programs Belinda Henandez - Facility Director/PREA Coordinator / investigator Ryan Hawk - Operations Manager/PREA Compliance Manager / investigator Michael Perez - Licensed Chemical Dependency Counselor Javier Villela - Residential Monitor Supervisor / Investigator Daphne Jones - Nurse Practitioner University Medical Center Mattox Clinic"</p> <p>(d) The West Texas Behavioral Health Residential Treatment Center PAQ states the facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)</p>

(1) -(d)(5) of this section, and any recommendations for improvement and submits such report to the facility head and PREA Coordinator. Policy compliance can be found in provision (c) of this standard.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 47, section d., states, "The review team shall:

1. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect or respond to sexual abuse;
2. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; LGBTI and/or gender Non-Conforming identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the center;
3. Examine the area in BHRTC where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
4. Assess the adequacy of staffing levels in that area during different shifts; and
5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.
6. Prepare a report of its findings (Sexual Abuse Incident Review Form); including but not necessarily limited to determinations made pursuant to paragraphs (d)(1) -(d)(5) of this section, and any recommendations for improvement, and submit such report to the Director and PREA compliance manager."

(e) The West Texas Behavioral Health Residential Treatment Center PAQ states, the facility implements the recommendations for improvement or documents its reasons for not doing so.

West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 47, section r., states, "BHRTC shall implement the recommendations for improvement or shall document reasons for not doing so."

Through such reviews, the facility meets standard requirements.

115.287	Data collection
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. West Texas CSCD Behavioral Health Residential Treatment Center Yearly Analysis of Community Confinement Facility, not dated <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 48, section a., states, "Within 30 days of the conclusion of the investigation, the PREA Team will convene a review team who shall:</p> <ol style="list-style-type: none"> 1. Consider whether the allegation or investigation indicates a need to change policy or practice; 2. Where the allegation has not been substantiated, unless the allegation has been determined to be unfounded; 3. Consider whether the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bi-sexual, transgender, intersex identification, status or perceived status, gang affiliation, or otherwise caused by other group dynamics at the Facility; 4. Examine the area in the Facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; 5. Assess the adequacy of staffing levels in that area during different shifts; 6. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and 7. Compile a report of the findings to include implementing recommendations for improvement or document reasons for not doing so." <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency aggregates the incident-based sexual abuse at least annually.</p> <p>The facility provided a West Texas CSCD Behavioral Health Residential Treatment Center Yearly Analysis of Community Confinement Facility, template. The document has the following criteria:</p> <ol style="list-style-type: none"> 1. Number of alleged sexual abuse incidents. 2. Number of substantiated sexual abuse incidents. 3. Substantiated sexual abuse rate (# substantiated divided by #alleged.) 4. Number of alleged sexual harassment incidents. 5. Number of substantiated sexual harassment incidents. 6. Substantiated sexual harassment rate (#substantial divided by #alleged). 7. Number of alleged retaliation incidents. 8. Number of substantiated retaliation incidents. 9. Substantiated retaliation rate (# substantiated divided by # alleged.) 10. Are substantiated sexual abuse incidents trending upward? 11. Are substantiated sexual harassment incidents trending upward? 12. Are substantiated retaliation incidents trending upward? 13. Did facility have a PREA audit? <ol style="list-style-type: none"> a. If yes to question 13, did facility meet or exceed PREA standards? 14. Did facility provide a copy of facility's annual report? <ol style="list-style-type: none"> a. Did annual report identify any PREA compliance issues? <p>(c) The West Texas Behavioral Health Residential Treatment Center PAQ states the standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.</p> <p>West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 48, section c., states, "BHRTC shall collect, maintain, and review accurate uniformed data for every allegation of sexual misconduct using the Survey of Sexual Violence by the Department of Justice."</p> <p>(d) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Policy compliance can be found in provision (a) of this standard.</p> <p>(e) This provision is not applicable as West Texas Behavioral Health Residential Treatment Center does not have private facilities.</p>

(f) This provision is not applicable as West Texas Behavioral Health Residential Treatment Center as the DOJ has not requested agency data.

Through such reviews, the facility meets standard requirements.

115.288	Data review for corrective action
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. El Paso County Community Supervision and Correction Department, Memorandum, PREA Yearly Review, 1.2.2022, 1.4.2021, 1.6.2020 3. Yearly Analysis of Community Confinement Facility, 2019-2021 <p>(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency reviews data collected and aggregated pursuant to §115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including: (a) identifying problem areas; (b) taking corrective action on an ongoing basis; and (c) preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole.</p> <p>The facility provided El Paso County Community Supervision and Correction Department, Memorandum, PREA Yearly Review for years 2020 – 2022. Each Annual Report provides information on Criminal and Administrative investigations, client and or staff sexual harassment and or misconduct. Internal review of the camera system and staff placement. Additional technology due to blind spots and extra coverage for the exterior of the building.</p> <p>The facility provided a Yearly Analysis of Community Confinement Facility for years 2019 – 2021. Annual analysis criteria include data for the following:</p> <ol style="list-style-type: none"> 1. Number of alleged sexual abuse incidents. 2. Number of substantiated sexual abuse incidents. 3. Substantiated sexual abuse meat (# substantiated divided by # alleged). 4. Number of alleged sexual harassment incidents. 5. Number of substantiated sexual harassment incidents. 6. Substantiated sexual harassment rate (# substantiated divided by # alleged). 7. Number of alleged retaliation incidents. 8. Number of substantiated retaliation incidents. 9. Substantiated retaliation rate (# substantiated dived by # alleged). 10. Are substantiated sexual abuse incident trending upward? 11. Are substantiated sexual harassment incidents trending upward? 12. Are substantiated retaliation incidents trending upward? 13. Did facility have a PREA audit? <ol style="list-style-type: none"> a. If yes to questions 13, did facility meet or exceed PREA standards? 14. Did facility provide a copy of facility's annual report? <ol style="list-style-type: none"> a. Did annual report identify and PREA compliance issues/ <p>(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the annual report includes a comparison of the current year's data and corrective actions to those from prior years. The annual report provides an assessment of the agency's progress in addressing sexual abuse.</p> <p>(c) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency makes its annual report readily available to the public, at least annually, through its website. Annual reports are approved by the agency head.</p> <p>The facility has annual reports posted on their website at County of El Paso Texas - EPCCSCD (epcounty.com)</p> <p>(d) The West Texas Behavioral Health Residential Treatment Center PAQ states when the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility.</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.289	Data storage, publication, and destruction
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 275 435 304">Document Review:</p> <ol data-bbox="242 306 1361 434" style="list-style-type: none"> 1. West Texas Behavioral Health Residential Treatment Center PAQ 2. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, dated 9.1.2021 3. El Paso County Community Supervision and Corrections Department Memorandum, Subject: PREA Records Management, dated 10.1.2021 <p data-bbox="242 463 1493 524">(a) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency ensures that incident-based and aggregate data are securely retained.</p> <p data-bbox="242 553 1455 613">West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 49, section a., states, "BHRTC shall ensure that data collected pursuant to §115.287 are securely retained."</p> <p data-bbox="242 642 1493 837">The facility provided an El Paso County Community Supervision and Corrections Department Memorandum, Subject: PREA Records Management. The Memorandum is for Memorandum for Record, From the PREA Compliance Manager. The Memorandum states, "All Prison Rape Elimination Act (PREA) incident information shall be saved to the Departments Secure Server (G Drive), in the folder labeled PREA. Access to the folder is limited to Annalisa Davila (Deputy Director), Belinda Henandez (Facility Director/PREA Coordinator), Ryan Hawk (Operations Manager, {PREA Compliance Manager). In accordance with PREA Standard § I 15.289 this record/file must be maintained for at least 10 years."</p> <p data-bbox="242 866 1485 965">(b) The West Texas Behavioral Health Residential Treatment Center PAQ states the agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website.</p> <p data-bbox="242 994 1473 1093">West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 49, section b., states, "The department shall make all aggregated sexual abuse data, from BHRTC readily available to the public at least annually through its website or, if it does not have one, through other means."</p> <p data-bbox="242 1122 1457 1249">(c) The West Texas Behavioral Health Residential Treatment Center PAQ states before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 49, section c., states, "Before making aggregated sexual abuse data publicly available, BHRTC shall remove all personal identifiers."</p> <p data-bbox="242 1279 1489 1377">(d) West Texas CSCD Behavioral Health Residential Treatment Center PREA Employee Manual, page 49, section d., states, "BHRTC shall maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise."</p> <p data-bbox="242 1406 882 1435">Through such reviews, the facility meets standard requirements.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>(a) During the prior three-year audit period, the agency ensured that each facility operated was audited, once.</p> <p>(b) This is the second audit cycle for West Texas Behavioral Health Residential Treatment Center Facility and the third year of the third audit cycle.</p> <p>(h) The Auditor was granted complete access to, and the ability to observe, all areas of the facility.</p> <p>(i) The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p>(m) The Auditor was permitted to conduct private interviews with residents.</p> <p>(n) Residents permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(b) The agency has posted the current 2019 PREA audit report, on their website.</p> <p>Through such reviews, the facility meets the standard requirements.</p>

Appendix: Provision Findings		
115.211 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.211 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities?	yes
115.212 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.212 (b)	Contracting with other entities for the confinement of residents	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.212 (c)	Contracting with other entities for the confinement of residents	
	If the agency has entered into a contract with an entity that fails to comply with the PREA standards, did the agency do so only in emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	na
	In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	na
115.213 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect residents against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The physical layout of each facility?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the resident population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes

115.213 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (NA if no deviations from staffing plan.)	yes
115.213 (c)	Supervision and monitoring	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to prevailing staffing patterns?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels?	yes
115.215 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.215 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
115.215 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female residents?	yes
115.215 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?	yes

115.215 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If the resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.215 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

115.216 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations?	yes
115.217 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
115.217 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with residents?	yes
	Does the agency consider any incidents of sexual harassment in determining to enlist the services of any contractor who may have contact with residents?	yes
115.217 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.217 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
115.217 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes

115.217 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.217 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.217 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.218 (a)	Upgrades to facilities and technology	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012 or since the last PREA audit, whichever is later.)	no
115.218 (b)	Upgrades to facilities and technology	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)	no
115.221 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes

115.221 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.221 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.221 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.221 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.221 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.221(d) above).	yes
115.222 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.222 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.222 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for conducting criminal investigations. See 115.221(a).)	yes
115.231 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.231 (b)	Employee training	
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes

115.231 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.231 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.232 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.232 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.232 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.233 (a)	Resident education	
	During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?	yes
	During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?	yes
115.233 (b)	Resident education	
	Does the agency provide refresher information whenever a resident is transferred to a different facility?	yes

115.233 (c)	Resident education	
	Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills?	yes
115.233 (d)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.233 (e)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.234 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.231, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
115.234 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing sexual abuse victims?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
115.234 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a).)	yes

115.235 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.235 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.)	na
115.235 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.235 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	yes
115.241 (a)	Screening for risk of victimization and abusiveness	
	Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
	Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
115.241 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.241 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

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

115.241 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that residents are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.241 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes
115.242 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.242 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each resident?	yes
115.242 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.242 (d)	Use of screening information	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.242 (e)	Use of screening information	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes

115.242 (f)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: transgender residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.251 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.251 (b)	Resident reporting	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
115.251 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.251 (d)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes

115.252 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.252 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.252 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.252 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.252 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes

115.252 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.252 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.253 (a)	Resident access to outside confidential support services	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility enable reasonable communication between residents and these organizations, in as confidential a manner as possible?	yes
115.253 (b)	Resident access to outside confidential support services	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.253 (c)	Resident access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.254 (a)	Third party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes

115.261 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.261 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.261 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform residents of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.261 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.261 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.262 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.263 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.263 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.263 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.263 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

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

115.267 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency:4. Monitor resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor resident program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignment of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.267 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.267 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.271 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
115.271 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.234?	yes

115.271 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.271 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	no
115.271 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	no
115.271 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.271 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.271 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.271 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.271 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes
115.271 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.221(a).)	yes
115.272 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

115.273 (a)	Reporting to residents	
	Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.273 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.273 (c)	Reporting to residents	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.273 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.273 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes
115.276 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.276 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.276 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.276 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.277 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.277 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes
115.278 (a)	Disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, are residents subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.278 (b)	Disciplinary sanctions for residents	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
115.278 (c)	Disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.278 (d)	Disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending resident to participate in such interventions as a condition of access to programming and other benefits?	no
115.278 (e)	Disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.278 (f)	Disciplinary sanctions for residents	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.278 (g)	Disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.282 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.282 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.282 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.282 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.283 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.283 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.283 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all-male" facility. Note: in "all-male" facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes

115.283 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.283 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.283 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.286 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.286 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.286 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.286 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.286 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.287 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.287 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.287 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.287 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.287 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	na
115.287 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
115.288 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.288 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.288 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.288 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.289 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.287 are securely retained?	yes

115.289 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.289 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.289 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with residents?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes