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





Name of facility: For	rt Bend County	Sheriff's O	office			
Physical address:	1410 William	s Way Blv	d Richmond ፐን	X 77467		
Date report submitted:	July 26, 2014					
Auditor Information	Edv	ward B. Mo	otley			
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Email:	Ed.motley@n	akamotog	roup.com			
Telephone number:	217-251-6349	9				
Date of facility visit:	July 14 – 18, 2	2014				
Facility Information						
Facility mailing address: (if different from above)						
Telephone number:	281-341-4732	2				
The facility is:	☐ Military		X County		Federal	
•	☐ Private for	☐ Private for profit			State	
	☐ Private not	for profit				
Facility Type:	⊠ Jail	□ Priso	n			
Name of PREA Compliance Manager:	Jeff Kovar			•	Title:	Sergeant
Email address:	Jeff.kovar@fo	Jeff.kovar@fortbendcountytx.gov Telephone number:		281-341-3848		
Agency Information						
Name of agency:	Fort Bend Cou	unty Sheri	ff's Office			
Governing authority or parent agency: (if applicable)						

Physical address:	1410 Williams Way Blvd Richmond TX 7746	7	
Mailing address: (if different from above)			
Telephone number:			
Agency Chief Executiv	ve Officer		
Name:	Troy Nehls	Title:	Sheriff
Email address:	troy.nehls@fortbendcountytx.gov	Telephone number:	281-341-4702
Agency-Wide PREA Coordinator			
Name:	William Boehnmann	Title:	Lieutenant
Email address:	William.boehneman@fortbendcountytx.gov	Telephone number:	281-341-3854

AUDIT FINDINGS

NARRATIVE: The PREA Audit of the Fort Bend County Sheriff's Office was conducted from July 14 through July 18, 2014. The purpose of the audit was to determine compliance with the Prison Rape Elimination Act standards finalized in August 2012. An entrance meeting was held with the following persons: Troy Nehls, Sheriff; Cpt. Jules Brownfield, Director of Detention Bureau; Sgt. Jeff Kovar, PREA Compliance Manager; Lt. William Boehnemann, PREA Coordinator; Lt. Daniel Quam, Administration; Lt. Chris Pressler, Inmate Processing Unit; and Lt. Yolanda Elliott, Courthouse Security on the first day of the audit and discussed any concerns that they had. I was then given a thorough tour of the facility. Throughout the tour I had informal conversations with line staff and inmates.

I would like to thank Sheriff Troy Nehls and his staff for the professionalism they demonstrated throughout the audit and for their kindness and hospitality they showed me during the audit. The correctional officers and other staff were knowledgeable about PREA, first response, evidence collecting, and maintaining a safe environment for the inmates and staff. I also wish to compliment the PREA Coordinator, Lt. William Boehnemann and PREA Compliance Manager, Sgt. Jeff Kovar for their outstanding work in organizing the files that were provided to me during the audit and discussing issues regarding their audit. This enabled me to move forward very quickly and efficiently.

Following the tour, I began interviewing staff. Twelve randomly selected correctional officers and deputies and other identified specialized staff were interviewed, including the Bureau Detention Commander, Director of Detention Bureau, PREA Compliance Manager, PREA Coordinator, Criminal Investigations Division Investigator, Chaplain, Religious Volunteers, health care providers and mental health professionals.

There were 15 inmates interviewed from the housing units. Those interviewed were randomly selected from a list of all inmates assigned to the facility. In addition, those identified as being in a designated group (i.e., disabled, limited English speaking ability, gay or who had reported a sexual abuse, etc.) were also interviewed.

A telephone interview was conducted with the head of the Safe/Sane coordinator Dr. Stacey Mitchell for the Harris Health System. There is a MOU pending between the Hospital and Sheriff's Office. The MOU should be signed by all parties no later than September, 2014. There is a signed written agreement to handle any Safe/Sane case that is brought to them until the MOU is officially signed off.

When the audit was completed, I conducted an exit briefing on July 18, 2014. There were a couple of issues during the audit that were corrected during the audit. I gave an overview of the audit and thanked the staff for all their hard work and commitment to the Prison Rape Elimination Act.

DESCRIPTION OF FACILITY CHARACTERISTICS: The Fort Bend County Sheriff's Office Detention Facility is located on 8.98 acres of land and approximately 40 miles southwest of Houston, TX. This facility houses inmates ranging from minimum to maximum security levels with felony or misdemeanor charges. The Detention Facility houses U.S.M.S. and county inmates. The Detention Facility includes three distinct styles of inmate housing units, 48 total housing units, and includes a total of 1,766 beds for male, female and youthful offenders. The beginning count was 927 inmates (797 males/130 females) and the ending count was 977 inmates (832 male/145 females) during the week of the audit.

The Detention Facility opened a new tower in 2009 with direct supervision housing units. This tower includes a total of 1,008 beds. The Detention Facility has a tower which was opened in 1995 with all indirect podular housing units. This tower includes a total of 655 beds. The Detention Facility has a block of linear housing units which opened in 1984. The linear housing units include a total of 103 beds. The Detention Facility has 24 separation cells and 17 padded cells throughout the facility.

The Detention Facility provides dining, recreation, health care and mental health services, academic and vocational and religious programs. The facility currently operates a barber shop, tailor shop, kitchen, laundry, shoe shine station, landscaping crew, and paint crew, with additional vocational training planned over the next year. The Detention Facility provides video visitation to all housing units for both public and professional visitors. Visitation is currently offered seven days per week and eleven hours per day.

The Detention Facility uses a system of cameras and digital video recorders to monitor the facility's internal and external security. All cameras are pointed and focused to optimize security. The facility has a Kiosk installed in every unit that allows the inmates to review PREA and write a grievance if they have an allegation.

On July 18, 2014, the site audit was completed at Fort Bend County Sheriff's Detention Facility. The summary of the final audit findings is listed below.

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 3

Number of standards met: 37

Number of standards not met: **0**

Not Applicable: 3

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

coordinator
□ Exceeds Standard (substantially exceeds requirement of standard)
$\hfill\square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Fort Bend County Detention Facility has a written policy mandating zero tolerance towards all sexual abuse and harassment. General Order 07.01 and General Order 06.05 details the facility's approach in preventing, detecting and responding to sexual abuse and harassment.
Sgt Jeff Kovar is the PREA Compliance Manager and Lt. William Boehnemann is the PREA Coordinator. Both are PREA certified auditors and claim they have enough time to complete all tasks associated with PREA. They are committed and have a hands-on approach through follow-ups with staff and inmates to ensure they know PREA and what is required of them through training seminars and exercises. It is evident the management is in full support of PREA to ensure they do have the time to complete their related tasks.
§115.12 - Contracting with other entities for the confinement of inmates
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\hfill\square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
XX Not applicable.

Fort Bend County Detention Facility does not contract with other entities for confinement of inmates.

§115.13 - Supervision and Monitoring	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
☐ Does Not Meet Standard (requires corrective action)	
The Texas Commission Jail Standards regulates the staffing plans for county jails. The facility is currently down by 8 correctional officers/deputies. Staffing guidelines are outline in Jail Procedures Manual 01.1. The facility uses mandatory overtime to ensure every position on shift is filled. The staffing plan is reviewed on an annual basis, but is being reviewed on a daily basis due to the overtime being used. Documentation of unannounced rounds was reviewed. There is an extensive video camera system in place and new cameras are being added. The agency has a policy that prohibits staff from alerting other staff members that supervisory staff rounds are occurring as outlined in Jail Procedures Manual 02.06.	
§115.14 - Youthful Inmates	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
☐ Does Not Meet Standard (requires corrective action)	
Youthful inmates are out of sight and sound of adult inmates outlined in Jail Procedures Manual 02.22. Youthful male inmates are in a linear supervision housing unit and female inmates are in a direct supervision unit. Both male and female have no physical contact with adult inmates. There are two female units and three male units.	
§115.15 - Limits to Cross-Gender Viewing and Searches	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
☐ Does Not Meet Standard (requires corrective action)	

The facility does not conduct cross-gender strip searches or cross-gender body cavity searches. The following policy meets the requirements of this standard: Jail Procedures Manual 02.22. Staff of the opposite gender are required to announce their presence when entering a housing unit(s) of the opposite gender. The unit officer announces any arrival of male/female staff who come on the unit prior to opening unit doors. This was observed during the tour and confirmed through inmate and staff interviews.

Policies and procedures are implemented to enable inmates to shower, perform bodily functions, and change clothes without non-medical staff observing their genitalia or buttocks. At the time of the audit, 97.8% of all staff were trained on conducting strip searches of transgender and intersex inmates in a professional manner. A review of training records indicate that those who didn't receive the training were on various leaves (medical, maternity, military or vacation).

§115.16 - Inmates with Disabilities and Inmates who are Limited English Proficient

$\hfill\square$ Meets Standard (substantial compliance; complies in all material ways with the
standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

The facility ensures that inmates who have disabilities receive training on how to report sexual abuse or sexual harassment if needed. Facility uses a Hotline with toll free numbers to Fort Bend Women's Center for male or female inmates, Kiosk, and a language line service. The following policy meets this requirement: General Order 02.22 and interview of inmates and staff confirm that it is being done. The facility has gone one step further by creating and purchasing 10 copies of PREA standards written in Braille for the visually impaired inmate.

§115.17 - Hiring and Promotion Decisions

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☑ Exceeds Standard (substantially exceeds requirement of standard)
\square Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Based on the a review of Jail Procedures Manual 13.02 and interview with Denise

Hasnel, Human Resources the facility conducts criminal history checks on staff, contactors and volunteers prior to hiring or promoting. There were 66 correctional staff, 158 contractors and 52 volunteers were hired in the last 12 months. The facility

conducts background checks on employees, volunteers and contractors on an annual basis instead of the five year checks. All employees, contractors, and volunteers have recently had their criminal background checks completed.

§115.18 - Upgrades to Facilities and Technology
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\hfill\square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
XX Not applicable
The facility has the capacity to add additional cameras using their existing system.
§115.21 - Evidence Protocol and Forensic Medical Examinations
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Staff follows General Order 06.05 and the Texas rules of Evidence for evidence protocol and forensic medical examinations. The Detention Facility has entered into an agreement with Harris Health System to conduct Forensic Medical Examinations by a SAFE/SANE nurse examiner at Ben Taub Hospital, Houston, TX. This was verified through an interview with Dr. Stacey Mitchell, coordinator. There is a pending MOU between the Detention Facility and Harris Health System which should be signed no later than September, 2014. There is a written agreement stating that they will do Forensic Medical Examinations until the MOU is signed by both parties. There is a MOU between the Detention Facility and the Fort Bend County Women's Center as a victim advocate. The facility has a qualified staff member available to provide victim advocate services if the rape crisis center is not available.
§115.22 - Policies to Ensure Referrals of Allegations for Investigations
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

General Order 07.01, General Order 06.05 and Jail Procedures Manual 13.02 ensure an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. All allegations are referred to the Criminal Investigative Division for review. During this audit there were 7 cases of sexual abuse/sexual harassment reported for investigation. Of the two cases of sexual abuse, one was unfounded and the inmate was charged with making a false accusation and the other case was sustained, but not prosecuted. It was investigated and turned into a sexual harassment case. The DA gave information to the inmate on how to file charges with the Judge when they were released. Of the five sexual harassment cases; one was unsubstantiated, one unfounded, two substantiated, and one sustained. Disciplinary action was taken on staff and the inmates notified according to policy.

§115.31 - Employee Training

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Does Not Meet Standard (requires corrective action)

A review of General Order 07.01 on training requirements and interview of staff demonstrates they have a working knowledge of the PREA zero-tolerance policy, policy and prevention, reporting and response to sexual assault or sexual harassment incidents, and sexual abuse and harassment in a confinement setting. Some staff was unclear as how to privately report incidents anonymously. Review of curriculum demonstrates all required areas are covered. All staff have been train and verified through signature sheets. Staff received training on an annual basis.

§115.32 - Volunteer and Contractor Training

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

All volunteers and contractor staff have been trained on their responsibilities under the facility's sexual abuse and sexual harassment prevention detection, response policies and procedures. An interview of volunteers and contractors indicate they have an understanding regarding PREA zero-tolerance policy standards and a review of signed acknowledgement form.

§115.33 - Inmate Education ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) □ Does Not Meet Standard (requires corrective action) PREA posters are posted throughout the housing units with phone number to report abuse. The facility inmate handbook covers the PREA information. During intake the inmates are read the facility's zero-tolerance policy and receive additional training through video orientation. Inmates can receive more information through the Kiosk that is in every unit and on close circuit TV. Inmate PREA education is also available through TDD, Language hotline, and Braille service. During the tour and interviews of most inmates, they acknowledged the information being provided upon arrival and orientation. Some were also unaware of the victim services that are available to them in the community. Recommend annual classes for inmate population as done for staff. §115.34 - Specialized Training: Investigations ☐ Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Review of policy General Order 07.01 indicates there is thorough training for investigators. There are 51 trained certified investigators who attended a 2 day seminar for PREA sexual misconduct. §115.35 - Specialized training: Medical and mental health care ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) The Detention contracts with Correctional Care Solutions for their medical and mental health. A review of staff documentation and conducting interviews indicate that they received training from their employer (Correctional Care Solutions policy J-B-04) and

the Detention Facility on zero-tolerance and what to do and how to report incidents.

§115.41 - Screening for Risk of Victimization and Abusiveness ☐ Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) □ Does Not Meet Standard (requires corrective action) The policy that addresses this standard is Jail Manual Procedures 02-22 and Correctional Care Solutions for contractors. Inmates are screened within the 72 hours of arrival for being at risk of sexual abuse or harassment. If an inmate is identified as being at risk, they are seen by medical or mental health staff to determine if they need PREA monitoring services. Services are provided for victims and perpetrators. This was verified through review of documentation and staff interviews. §115.42 - Use of Screening Information ☐ Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) The Detention facility uses screening information to determine housing, bed, education, and work assignments with the goal of keeping inmates safe from sexual abuse or harassment. Placement and programming assignments for transgender and intersex inmates are reassed twice a year. Information was verified through staff interviews and review of policies. §115.43 - Protective Custody ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) □ Does Not Meet Standard (requires corrective action) The Detention facility policy Jail Manual Procedure 02.22 meets this standard. The policy states that high risks for sexual victimization shall not be placed in involuntary

segregated housing unless an assessment of all available alternatives has been made, and

a determination has been made that there is no alternative means of separation from likely abusers. A review of the involuntary housing assignment is a 30 day review.

§115.51 - Inmate Reporting

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

The Detention facility provides multiple ways for inmates to report sexual abuse, sexual harassment or retaliation. There is a MOU with the Fort Bend County Women's Center; inmate handbook; posters throughout he facility; Kiosk; and verbally to a supervisor or any staff member. This was verified through inmate interviews and a review of policy Jail Procedures Manual 06.05 and General Order 07.01.

§115.52 - Exhaustion of Administrative Remedies

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

Jail Procedures Manual 06.05 covers the grievance standard. There were two grievances for sexual abuse filed during the past year. Files were reviewed during the audit. Neither of these was substantiated as sexual abuse, however they were substantiated as sexual harassment.

§115.53 - Inmate Access to Outside Confidential Support Services

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

Fort Bend County Women's Center is used for confidential reporting and outside confidential support services. Phone numbers and mailing addresses are provided to the inmate population on PREA posters, Kiosk, inmate handbook and during orientation. Inmate interviews indicated that they didn't know these services were available to them. This is covered in the Jail Procedures Manual 06.05.

§115.54 – Third-Party Reporting
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Facility has information on their website for third party reporting of sexual abuse or harassment: www.fortbendcountytx.gov/index.aspx?page=1239 . There are flyers posted in the visitation and in the lobby. Inmates have information in their handbook.
§115.61 - Staff and Agency Reporting Duties
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
General Order 07.01 and Jail Procedures Manual 06.05 requires all staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and not to reveal any information related to sexual abuse to anyone unless it is necessary. This was verified through staff and inmate interviews.
§115.62 - Agency Protection Duties
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
General Order 07.01 requires staff to take immediate action to protect inmates they learn is subject to substantial risks. There have been no inmates placed in this status. This was verified through staff interviews and review of documentation.
§115.63 - Reporting to Other Confinement Facilities
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Jail Procedure Manual 06.05 meets the requirements of the standard. Two inmate cases were reported while confined at another facility. Letters were sent to the facilities were the allegations were made. Both cases were unfounded by the sending agency. This was verified during the interview with the Bureau Commander.

§115.64 – Staff First Responder Duties
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\ oxtimes$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
The Detention facility Jail Procedures Manual 06.05 meets the standard. Random interviews with confirm they know what to do upon learning that an inmate was sexually abuse or harassed.
§115.65 - Coordinated Response
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Jail Procedures Manual 06.05 and their PREA Plan meet the requirements of this standard. This was confirmed that staff is knowledgeable about the coordinated duties and responsibilities in an interview with the Bureau Director and PREA Coordinator.
§115.66 - Preservation of ability to protect inmates from contact with abusers
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\hfill\square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
XX There is no Collective Bargaining Unit.
§115.67 - Agency protection against retaliation
☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (requires corrective action)	
Jail Procedures Manual 06.05 protects staff and inmates who report sexual assault or sexual harassment. The PREA Coordinator, Lt. William Boehnemann is assigned to monitor possible retaliation. His responsibilities include interviewing inmates who previously alleged sexual victimization within 30 days of allegation; 90 days following report of sexual assault/harassment allegation and to monitor by way of periodic status checks. There have been no incidents of retaliation reported in this report period.	i
§115.68 - Post-Allegation Protective Custody	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
□ Does Not Meet Standard (requires corrective action)	

Jail Procedures Manual 02-22 meets the requirements of the standard. If an inmate was at imminent risk of sexual victimization, they could be temporarily placed in temporary close custody cell until the investigation and alternative means of separation was found.

§115.71 - Criminal and Administrative Agency Investigations

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

General Order 07-01 and Jail Procedures Manual 13-02 address the requirements of this standard. If the allegation is not of a criminal nature, the Detention Bureau will investigate the allegation. Should it become a criminal case the Criminal Investigation Division or Internal Affairs Division will investigate the allegations. There are 51 certified PREA investigators assign to the Sheriff's Office. The investigators have received special investigation PREA training.

There were five reported allegations of sexual harassment and two reported allegations of sexual abuse during the last 12 months. These cases were reviewed during the audit. Of the two cases of sexual abuse, one was unfounded and the inmate was charged with making a false accusation and the other case was sustained, but not prosecuted. It was investigated and turned into a sexual harassment case. The DA gave information to the inmate on how to file charges with the Judge when they were released. Of the five sexual harassment cases; one was unsubstantiated, one unfounded, two substantiated, and one

sustained. Disciplinary action was taken on staff and the inmates notified according to policy.

All of the investigations were reviewed promptly, thoroughly, and objectively.



□ Does Not Meet Standard (requires corrective action)
Jail Procedures Manual 11.07 meets the requirements for this standard. There were no
contractors or volunteers involved in sexual abuse or sexual harassment of inmates
during this reporting period.
§115.78 - Disciplinary sanctions for inmates
☐ Exceeds Standard (substantially exceeds requirement of standard)
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□ Does Not Meet Standard (requires corrective action)
Jail Procedures Manual 04.01 and the inmate handbook address all disciplinary
sanctions for inmates.
§115.81 - Medical and mental health screenings; history of sexual abuse
☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Jail Procedure Manual 02.22 meets the requirements of this standard. This is confirmed by staff interviews.
§115.82 - Access to emergency medical and mental health services
☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
A review of Jail Procedures Manual 06.05 and interviews with medical and mental health
staff and inmates confirm compliance.
§115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers
☐ Exceeds Standard (substantially exceeds requirement of standard)

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□ Does Not Meet Standard (requires corrective action)
Jail Procedures Manual 06.03 meets the requirements of the standard. Services are provided by individual therapy to both victims and perpetrators. This was verified through mental health and medical staff interviews.
§115.86 - Sexual abuse incident reviews
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Jail Procedure Manual 06.05 meets the requirements of the standard. There was one case reviewed by the Incident Review Team within the 30 day time requirement. The case was unfounded. This was confirmed through interviews with the Bureau Commander, Bureau Director, and PREA Coordinator.
§115.87 - Data Collection
☐ Exceeds Standard (substantially exceeds requirement of standard)
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□ Does Not Meet Standard (requires corrective action)
This standard meets the requirement by policy Jail Procedure Manual 06.05. The facility publishes an annual report regarding PREA related incidents. They use the information to improve the prevention, detection and response efforts. They conduct regular sexual abuse/assault incident reviews to determine if changes to procedural, staffing and monitoring are required. This was confirmed through an interview of the PREA Coordinator.
§115.88 - Data Review for Corrective Action
☐ Exceeds Standard (substantially exceeds requirement of standard)
□ Does Not Meet Standard (requires corrective action)

Jail Procedure Manual 06.05 meets the requirement of this standard. The data is collected to assess and improve the effectiveness of it sexual abuse prevention, detection, and response policies; and to identify problem areas and take corrective actions. An annual report is being generated and is published and posted on the Fort Bend County Sheriff's website.

§§115.89 - Data Storage, Publication, and Destruction
☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Data is properly stored, maintained and secured. Access to the data is controlled. An annual report is published on the Fort Bend County Sheriff's Office website: www.fortbendcountytx.gov/index.aspx?page=1239

AUDITOR CERTIFICATION:

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

<u>Edward B. Motley</u>	<u> Iuly 26. 2014</u>
Auditor Signature	Date