

**PREA AUDIT REPORT    INTERIM    FINAL**  
**JUVENILE FACILITIES**

**Date of report:** October 17th, 2016

<b>Auditor Information</b>			
<b>Auditor name:</b> Jerome K. Williams			
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<b>Email:</b> Jerome.williams@tjtd.texas.gov			
<b>Telephone number:</b> 512-490-7671			
<b>Date of facility visit:</b> August 10 <sup>th</sup> to 12 <sup>th</sup> , 2016			
<b>Facility Information</b>			
<b>Facility name:</b> Barbara Culver Juvenile Justice Center			
<b>Facility physical address:</b> 3800 N. Lamesa Rd Midland, Texas 79705			
<b>Facility mailing address:</b> <i>(if different from above)</i> <a href="#">Click here to enter text.</a>			
<b>Facility telephone number:</b> 432-688-4541			
<b>The facility is:</b>	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input checked="" type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
<b>Facility type:</b>	<input type="checkbox"/> Correctional	<input checked="" type="checkbox"/> Detention	<input type="checkbox"/> Other
<b>Name of facility's Chief Executive Officer:</b> Forrest Hanna, Chief Juvenile Probation Officer			
<b>Number of staff assigned to the facility in the last 12 months:</b> 25			
<b>Designed facility capacity:</b> 44			
<b>Current population of facility:</b> 12			
<b>Facility security levels/inmate custody levels:</b> Secure, court ordered placement and detainment			
<b>Age range of the population:</b> 10 to 17 years of age			
<b>Name of PREA Compliance Manager:</b> N/A		<b>Title:</b> <a href="#">Click here to enter text.</a>	
<b>Email address:</b> <a href="#">Click here to enter text.</a>		<b>Telephone number:</b> <a href="#">Click here to enter text.</a>	
<b>Agency Information</b>			
<b>Name of agency:</b> Barbara Culver Juvenile Justice Center			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> Midland County Juvenile Justice Department			
<b>Physical address:</b> 3800 N. Lamesa Rd, Midland, Texas 79705			
<b>Mailing address:</b> <i>(if different from above)</i> <a href="#">Click here to enter text.</a>			
<b>Telephone number:</b> 432-688-4541			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> Forrest Hanna		<b>Title:</b> Chief Juvenile Probation Officer	
<b>Email address:</b> juv101@co.midland.tx.us		<b>Telephone number:</b> 432-688-4556	
<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> Cathey Chavez		<b>Title:</b> Facility Administrator	
<b>Email address:</b> juv102@co.midland.tx.us		<b>Telephone number:</b> 432-688-4552	

## **AUDIT FINDINGS**

### **NARRATIVE**

The PREA Audit was conducted on August 10th to the 12th, 2016 at the Barbara Culver Juvenile Justice Center in Midland, Texas, a county-run facility. The audit was conducted by the certified PREA Auditor for Juvenile & Adult Facilities, Jerome K. Williams. Pictures of the Audit Notice posting were sent prior to this audit and were seen through the facility on colored paper.

Following the entrance meeting a thorough tour of the facility was provided by the PREA Coordinator. Continuing on this first day of the audit a comprehensive listing of the youth and staff was requested and provided for the interviews with the necessary adjustments being made to compensate for schedule changes, etc. During the tour random interviews were conducted of youth and staff to ascertain their knowledge of the PREA Standards, reporting procedures, services available and their reporting responsibilities. A total of 11 youths were interviewed during this on site visit and they all acknowledged receiving PREA training, written information (i.e. handbook, Hotline numbers, observing Break the Silence posters, etc.) and were informed of related policies that outlines the facility's zero tolerance towards sexual abuse, sexual harassment and their right to be free from retaliation for reporting sexual abuse and sexual harassment allegations.

A total of 8 specialized staff members were interviewed comprising of the agency Head, the Facility Director, the PREA Coordinator, first responder, medical and mental health staff, Intake staff, a volunteer, Contract Administrator, a member of the Sexual Abuse Incident Review Team was interviewed. A total of 11 random staff members were interviewed also. The staff interviewed was knowledgeable of their responsibilities in reporting sexual abuse and sexual harassment allegations, staff negligence and the steps required in monitoring for staff and or youth for retaliation. When questioned about evidence preservation, all the staff responses reflected their knowledge of the agency's policy and their first responder duties. There were no SAFE and or SANE personnel at this facility but they were available at the Midland Memorial Hospital. The personnel indicated that they are aware of the SANE protocol if the facility were bringing a youth there for a SANE examination.

The auditor reviewed blind spots, staff placement, and supervisory presence, toured the facility and reviewed documentation to assist in determining PREA standard compliance. Upon completion of the audit an exit meeting was held with the agency head, the Facility Director, the PREA Coordinator and other members of their administrative team. The facility was provided with a general overview of the audit process, audit highlights which included a synopsis of the files, documentation review, and staff and youth interviews and of the facility tour. During the debriefing the auditor informed them that in the event there were standards that were not met that he would work closely with the agency's PREA Coordinator to accomplish PREA compliance within the 180 day corrective action period, if applicable. All corrective action documentation to demonstrate compliance with a "did not meet" standard is to be uploaded on a USB Drive and sent to the auditor within the agreed upon timeframe during the corrective action period. Once compliance is achieved then the agency will be required to post the final report, once issued, on the agency's website.

This report is considered to be the Final PREA Audit Report.

## **DESCRIPTION OF FACILITY CHARACTERISTICS**

The Barbara Culver Juvenile Justice Center is a short term, secure facility, pre and post detention center with a design of 24 beds, post adjudication coed long-term secure facility located in Midland, Texas with the mission to protect the community, hold juveniles accountable, and help them achieve goals for good citizenship while providing detention and secure custody services for all youth committed to their care. Through the probation department their supervision takes into consideration the uniqueness of each child, their family and the developmental needs of children in general. Adherence to Texas law, the order of the court, and consideration given to the least restrictive avenues of intervention, as they guide, supervise and educate those youth whom they interact with. The facility is located in Midland, Texas and services youths from Midland County and some surrounding counties.

On the day of the audit there were 11 youths assigned to the facilities in totality (there were no female youth in the facility during the audit). The facility provides professional custodial care, crisis intervention, counseling, education, and other services through counselors, clinical staff, and a licensed psychologist that provide a wide variety of treatment services grounded in evidence-based principles and cognitive behavioral interventions including relationship-based and strength based services. They also provide individual, family and group counseling, substance abuse treatment, psychological evaluations, aggressive management, case management, individualized education, community service, life skills, drug education, and social skills for daily living.

The facility has 3 classrooms, 3 pods (housing areas), an administrative area, a medical office, a large outside court for recreation, numerous offices, an intake areas and 2 control communication centers. The facility has three (3) dorms (a 12 bed for female youth and two 11 beds) and a 4 bed dorm which can be utilized for isolation and or seclusion. The showers were located in the corner of each housing unit where the cameras cannot view inside. Shower routines are conducted by male staff only for the male youth in each housing unit and conducted by female staff only for the female youth in each housing unit of this facility. Staff of the opposite gender do announce their presence when entering a male or female housing unit of the opposite gender. The facility was operating safely and observably clean throughout during the days of this on site audit visit.

## SUMMARY OF AUDIT FINDINGS

The Barbara Culver Juvenile Justice Center is a secure, coed, post adjudication detention center with a design of 24 beds located in Midland, Texas which has an administrative building, 3 dorm housing areas, classrooms for educational services, an intake processing area, a nurse's office, a large outside recreation area for basketball, and numerous offices in the administrative area which were all clean, well maintained, staffed accordingly and operating orderly during the days of this onsite visit. The Zero Tolerance and End the Silence posters were displayed throughout the administrative building, having the hotline number on them along with the PREA Audit Notices (in English and Spanish) in the housing areas on colored paper making them easily distinguished. Observably, there was appropriate staff to youth ratios of 1:8 during waking hours and 1:16 during sleeping hours and the shift supervisors were visible in each housing area and throughout the facility. There are 66 cameras installed in this facility but it was recommended that the installation of cameras, if funding becomes available, be placed in areas to cover any blind spots i.e. utility closets, hallways, dining area, etc. in and throughout each housing and administrative area to further augment staff's supervision and monitoring. The 11 residents interviewed appeared to be well informed of their rights to be free from sexual abuse and sexual harassment, how to report such incidents and their rights to be free from retaliation if they report a sexual abuse and sexual harassment allegation. They were knowledgeable of the Midland County Rape Crisis Center and Child Advocacy Center, which is the outside advocate agency that would provide emotional support and crisis counseling services related to sexual abuse if needed. The Intake staff has provided the comprehensive education of PREA to the youth within 10 days by showing but not allow discussion about the Safeguarding Your Sexual Safety DVD during the orientation phase to enhance their knowledge; and did provide all the youths with a hard copy of the PREA-related brochures and Zero Tolerance information during this time. The 8 specialized staff members and the eleven (11) random staff members interviewed were knowledgeable regarding the facility's reporting procedures, the facility's Zero Tolerance (PREA) policy, they were able to articulate the facility's protocol for collecting evidence, knowledgeable of their first responder's duties and the procedures to be followed in a situation when they become knowledgeable of, suspect or are notified of a sexual abuse allegation. A review of the youth, staff training and personnel files did contain the required documentation in accordance to the standards to demonstrate their compliance in these areas which also provided more insight as to their preparation for this audit and their practice towards preventing, detecting and responding to sexual abuse, sexual harassment and staff neglect policy violation. During the past 12 months the facility reported that there were zero administrative and zero criminal investigative cases, including zero grievances alleging sexual abuse and sexual harassment in this facility. Of the 41 standards this facility was found to have "met" 39 of the standards, "2 of the "did not meet" standards and had zero "not applicable" standards at the conclusion of this onsite visit. A corrective action plan will be required to be developed in conjunction with the PREA Coordinator and this facility will have 180 days to provide documentation and to institutionalize any identified practices and protocols in order to become fully compliant and receive a Final report certifying the same.

Upon issuance of the Interim Report a corrective action post audit phase was entered into with the development of the corrective action plan of the two (2) did not meet standards with the PREA Coordinator. She did provide the required documentation from the Midland Independent School District, additional signed training rosters of the staff and the youth that were retrained on the reporting process and institutionalized the Sexual Abuse Review Team monthly memorandum practice required in order to demonstrate compliance with these identified standards. Now, of the 41 standards this facility was found to have "met" 41 of the standards, "0 of the "did not meet" standards and had zero of the "not applicable" standards at the conclusion of this corrective action period and is thereby found PREA complaint. This report is consider to be the Final PREA Audit Report.

Number of standards exceeded: 0

Number of standards met: 41

Number of standards not met: 0

Number of standards not applicable: 0

### **Standard 115.311 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Organizational Chart, Agency Website and Interview with the PREA Coordinator.

Findings: A. The Barbara Culver Juvenile Justice Center has a written Zero Tolerance policy towards preventing, detecting and responding to all forms of sexual abuse and sexual harassment. The Zero Tolerance policy includes a description of how the agency responds to allegations of sexual abuse and sexual harassment as well as how they will go about reducing and preventing these incidents. This policy also has definitions that pertained to PREA. Their Zero Tolerance policy does have sanctions for youth, staff, volunteers and contractors who participate in the listed prohibited behaviors of sexual abuse, sexual harassment and policy violation. The facility's Zero Tolerance policy is not posted on the agency's web site for review nor is there a link explaining what PREA and or is Zero Tolerance. B. The facility has one dedicated PREA Coordinator reports to the Facility Director as indicated by the organizational chart provided reflecting this position and the PREA Coordinator indicated that he has sufficient time to fulfill his PREA responsibilities during his interview, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

### **Standard 115.312 Contracting with other entities for the confinement of residents**

- 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Sample Residential and Service Contracts and Interview with the Contract Specialist.

Findings: The Barbara Culver Juvenile Justice Center does include in all of their residential contracts to contracting facilities the PREA compliance language requirement which indicates that they will adopt and comply with the PREA standards. A. The facility provided contracts for 12 residential providers that were reviewed during the audit process for verification. The facility's Contract Administrator indicated during the interview that this language is included and is reviewed with each contractor prior to their annual contract renewal period. B. The monitoring for PREA compliance is conducted quarterly by that office and each agency contract program is working independently towards their PREA certification to be achieved by August 2016. A listing of residential providers was also given for the auditors review, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### Standard 115.313 Supervision and monitoring

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

**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.**

Policies and Evidence to be reviewed: Zero Tolerance Policy, Staffing Plan, Budget and Schedules, Memorandum, meeting minutes, Unannounced Rounds log/documentation, Staffing and Youth Roster, Video Monitoring documentation, Facility Administrator, PREA Coordinator and Intermediate and Higher Level Staff Interviews and Youth Interviews.

Findings: The Barbara Culver Juvenile Justice Center Zero Tolerance policy requires the supervision and monitoring of the youth in the facility. A. The daily average number of youth in this facility is 14 and the staffing plan is predicated on the average daily population total of 24 youths. B and C. The facility did provide documentation during the audit that demonstrated compliance with this standard and at no time has the facility deviated from their staff-to-youth ratio of 1:8 during waking hours and 1:16 during sleeping hours, which is inclusive of their staffing plan. D. The facility did provide written evidence indicating that the PREA Coordinator, the Facility Administrator and the Agency Head reviews the staffing plan annually which includes video monitoring and their commitment to adherence of this plan annually. For fiscal year 2015-16 this plan did not include the hiring of any full time equivalents (FTEs), since they are already meeting the required ratio, of 1:8 during waking hours and 1:16 during sleeping hours by October of 2017. A budgeted spreadsheet for the FTEs for staffing this facility on each shift was provided as a sample. E. The facility did provide written evidence of higher level supervisors conducting unannounced rounds on all shifts reflecting such practices. The facility's Zero Tolerance policy does indicate that disciplinary action does occur if staff alert other staff of these unannounced rounds and during the random interviews of staff, especially those working the control centers, indicated that they are aware of this policy. During the visits to the housing units I observed the opposite gender staff utilized the knock and announce method to announce their presence before entering that pod and both staff and youth indicated during their interviews that this practice is occurring, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### Standard 115.315 Limits to cross-gender viewing and searches

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Search Logs, Cross Gender Pat Search Training Curriculum, Staff and Youth Interviews.

Findings: A and B. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does prohibit cross gender viewing during rest room, changing clothes and shower routine and prohibits cross gender pat, visual body and strip searches absence exigent circumstances. A review of the records and staff interviews revealed that there were no cross gender pat, visual or strip searches conducted by medical personnel or for an exigent circumstance during the last 12 months. C and E. A review of the search logs as well as the staff and youth interviews verified that this prohibited practice do not exist including searching or physically examining a Transgender or Intersex youth to determine their genitalia. The facility did provide written evidence in the form of a memorandum attesting the prohibition of this practice. D. During the youth interviews they were able to definitively articulate that either the female and or male staff do knock and announce their presence when entering the opposite gender’s pod (housing unit), that they are able to shower, dress and change clothing without being observed by the opposite gender and that at no time had a staff of the opposite gender pat searched their person. A copy of the training curriculum on searches was provided and reviewed which also emphasized that all searches would be conducted professionally and in a respectful manner consistent with the security needs of the facility. The staff definitively articulated this practice during their interviews though it was not observed during the facility tour. F. The facility’s PREA Coordinator did provide written evidence demonstrating that the staff was trained in cross gender pat searches and searching of a Transgender and Intersex youth, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

### **Standard 115.316 Residents with disabilities and residents who are limited English proficient**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Intake and Orientation Documentation, Youth Handbook, PREA Posters, local agency Interpreting Contract, Midland Independent School District Memorandum of Agreement, Random Staff and Youth Interviews.

Findings: A. The Barbara Culver Juvenile Justice Center provided to the auditor the Zero Tolerance policy as well as written PREA material in English i.e. handbook, brochures, etc. which the Intake staff provides to the youth during intake and orientation. B. The facility did provide the auditor a copy of the memorandum establishing services with the Language Line for Interpreting and Translation, a memorandum indicating that the Midland Independent School District will provide interpreting services for youth who may be deaf, speech impaired, limited in English proficiency, blind and or low vision, or who are psychiatric or intellectually disabled. The facility did provide a listing of the staff utilized as interpreters for Spanish speaking youth, as applicable. The facility did not identified any youth in their care and custody, during this audit to be interviewed as being limited in English Proficiency or needing other interpreting services in the last 12 months. C. The facility’s PREA Coordinator did indicate that they do not utilize youth interpreters, youth assistants or youth readers and that this practice is prohibited by policy. The facility's Intake area did have written PREA-related information available to provide to the youth during Intake in Spanish during the onsite visit, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

### **Standard 115.317 Hiring and promotion decisions**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Volunteer and Contractor Policy and Agreements, Criminal Records and Child Abuse Registry Check Documentation, Training Records and Interview with the Human Resource Specialist.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does consider any incident of sexual abuse and sexual harassment in determining whether to hire, promote or enlist the services of contractors who have contact with the youth. The Zero Tolerance policy does state that providing false information will be grounds for termination for omitting information of misconduct. It also provides that a former employee's misconduct will be provided to another agency for substantiated findings of sexual abuse and sexual harassment. B. The Zero Tolerance policy does state that for volunteers, their services will be terminated and for contractors, the finding will be reported to their licensing authority. An interview with the PREA Coordinator revealed that the agency does conduct criminal background checks and child abuse registry checks prior to hiring and promotions. C, D and E. The facility’s PREA Coordinator did provide written evidence showing that they do conduct background checks and child abuse registry checks on all current employees, which is also performed every two years exceeding five years requirement of the standard. F. The facility did provide written evidence on self reporting requirements of their employees, that the Zero Tolerance policy reference omissions regarding misconduct shall be grounds for termination and they did provide a sample reference check forms that staff, volunteers and contractors complete for the background checks. The facility PREA Coordinator did provide documentation supporting that 100% of their staff; volunteers and contractors have had background and child abuse registry checks performed during the last 12 months. There were 5 new hires during this reporting period and 30 service contractors and volunteers whereas background and child abuse registry checks were conducted, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.318 Upgrades to facilities and technologies**

- 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Facility Onsite Visit, Facility Schematics reflecting the camera locations and viewing Control Room cameras.

Findings: A. The Barbara Culver Juvenile Justice Center has not made any modifications to or any renovations in this facility as of August 20, of 2012 and they currently have 66 cameras throughout the facility to augment the staff’s supervision and monitoring of the youth. B. It was recommended by the auditor if funding becomes available that some additional cameras be purchased for placement in other identified blind spot i.e. hallways, dining, classrooms, etc. areas throughout the facility to augment staff supervision, monitoring and in the prevention, detection and response to sexual abuse and sexual harassment allegations, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A



### Standard 115.321 Evidence protocol and forensic medical examinations

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Memorandum from Midland County Sheriff Department, Midland Memorial Hospital Contract, Memorandum of Understanding with the Midland Rape Crisis and Advocacy Center, Medical and Mental Health staff and PREA Coordinator's Interviews.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outline the protocol for conducting investigations of sexual abuse and sexual harassment as well as requesting information from the respective investigative entities on the progress of each investigation. B. The facility states that they follow the National Protocol for Sexual Assault Medical Forensic Examinations, Adult/Adolescents 2013 for obtaining usable evidence for administrative and criminal investigations. The Barbara Culver Juvenile Justice Center is responsible for conducting administrative investigations for the agency and the Midland County Sheriff is responsible for conducting criminal investigations of sexual abuse. C. The Midland Memorial Hospital is the hospital where a youth receives emergency medical care including where they would be taken by local law enforcement in the event a forensic examination (SANE) for sexual abuse incident is required. D. The facility did provide written evidence verifying that they have obtained emotional support and crisis counseling services from the Midland Rape Crisis and Advocacy Center, if and when needed. In the last 12 months the facility indicated that there have been no SANE examinations required which was also confirmed by the medical personnel during a file review and during the interview. E. The facility did indicate that they do have a qualified staff member to serve as an advocate if needed, for a victim of sexual abuse. F. The facility provided written evidence requesting the Midland County Sheriff Department to follow the requirements of the National Protocol for Sexual Assault Medical Forensic Examinations, Adult/Adolescents 2013 for obtaining usable evidence for administrative and or criminal investigations, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### Standard 115.322 Policies to ensure referrals of allegations for investigations

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Incident Reports, Copies of Investigative Cases if applicable, Agency Website, and the Investigator's Interviews.

Findings: A and B. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does require that all allegations of sexual abuse and sexual harassment are to be reported to the Facility Administrator. It further describes that the Internal Investigators are charged with conducting the administrative investigations and the Midland County Sheriff will conduct all criminal investigations. The facility did

provide the auditor with a copy of their Incident Report that is shared with the Midland County Sheriff in the event of a criminal investigation as applicable. The Barbara Culver Juvenile Justice Center reported zero allegations during the last 12 months for sexual abuse with zero resulting in a criminal investigation, and zero in an administrative investigation, which were all closed as Unfounded. The facility does have their internal administrative investigation policy on their website for review as required by this standard, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### Standard 115.331 Employee training

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, PREA-related Training Curriculums, Staff Training Rosters, Training Certificates, Random Staff and PREA Coordinator Interviews and a review of Search Logs.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does require that the facility provide PREA related training to all its employees who may have contact with youth. The agency did provide written evidence of the various PREA training curriculums i.e. LGBTI, communication boundaries, wherein staff are trained. The facility has provided cross gender pat down search training to all of their security staff. B. The PREA Coordinator indicated that their PREA Refresher training occurs annually and certification training, which includes PREA, occurs every two years. C. The number of facility staff trained during the last 12 months was 24 with 100% of them being trained. The staff interviewed articulated that the required elements of 115.331a (1-11), (b) were being met through the new hire orientation/training and through on the job training sessions (refresher). The staff seemed well versed and trained in the areas of PREA, their reporting duties, were knowledgeable of their first responder responsibilities and what individuals and or entity conducts the administrative and criminal investigations based on the interviews. D. The facility's PREA Coordinator did provide written evidence of the trainee sign in sheets with the course title, descriptions for each training class and acknowledgement statement for the auditor's review. The facility's PREA Coordinator/Facility Administrator did indicate during her interview that they would provide Gender Responsiveness training to the staff as applicable since this is a coed facility, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### Standard 115.332 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, PREA Questionnaire, Volunteer and Contractor's PREA-related Training Curriculum, Training Roster and or Certificates, Volunteer and Contractor Interviews.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does require that all volunteers and contractors who have direct access to youth are notified and trained on understanding their reporting responsibilities regarding PREA. B. The facility's PREA Coordinator did provide written evidence of the PREA curriculum for volunteers and contractors and did provide signed training rosters with an acknowledgment statement to demonstrate their compliance with this standard. C. The facility's PREA Coordinator did provide written evidence indicating that the number of volunteers and contractors trained in PREA during the last 12 months were 30 and 100% of them were trained, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### Standard 115.333 Resident 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Youth Resident Handbook, PREA Video, Brochures, etc. , Juvenile Case Management System Database, Admitted and Educated Youth Documentation, Language Line Solutions Interpreting Agency Provider and the Midland Independent School District Agreement if applicable, Retaliation Log, Random Staff and Youth Interviews.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance do provide the youths with an orientation packet of information in English and in Spanish upon Intake, they watch the Safeguarding Your Sexual Safety PREA video during orientation and are given additional PREA brochures and other information i.e. hotline number, phone location, etc. during this time. The Zero Tolerance policy does indicate that this information be provided to the youth in an age appropriate manner as demonstrated in the Youth Resident Handbook. A review of this material verified that this standard is being met. The date and time of the resident's intake, orientation and when this information is provided is documented in the youth's file in JCMS, which is their client management database, as reviewed by the auditor. B. The comprehensive education does occur within 10 days of Intake. C. The facility admitted and educated 151 youth from the 367 youth who came into Intake during the last 12 months. D and E. The facility did provide a written evidence demonstrating that the Language Line Solutions an interpreting service agency would provide services to those youth who are limited in English proficiency, hearing and visionally impaired but did not provide written evidence that the Midland Independent School District would provide assistance for those youth who are intellectually, psychiatric disabled and also limited in English proficiency; they did provide a listing of staff that would be utilized as interpreters on each shift if needed. F. During the facility tour and interviews of the youths they acknowledged receiving the PREA information during the Intake and Orientation process, acknowledged that they watched the Safeguarding Your Sexual Safety PREA video, which the facility shows to every youth during the Orientation process and they were not able to fully articulate their knowledge regarding PREA, the reporting process and their freedom from retaliation. The Zero Tolerance and other PREA related posters, brochures with the hot line numbers for reporting incidents of sexual abuse and sexual harassment were prominently displayed throughout the facility and on the pods.

Corrective Action Findings: The facility must provide written evidence of a memorandum of understanding with the Midland Independent School District that they will provide assistance for those youth who are intellectually, psychiatric disabled, hearing and visually impaired, and also limited in English proficiency in order to demonstrate compliance with this standard. The facility must also retrain the youth in their custody on the reporting process and obtain a signed acknowledgement statement from each youth that they understood and had the opportunity to ask questions after viewing the Safeguarding Your Sexual Safety video in order to demonstrate compliance with this standard.

Resolution: The facility's PREA Coordinator did provide written evidence in the form of a Memorandum of Understanding from the Midland Independent School District that they will provide assistance for those youth who are intellectually, psychiatric disabled, hearing  
PREA Audit Report

and visually impaired, and also limited in English proficiency in order to demonstrate compliance with this standard. She also provided and obtain signed acknowledgement statements from each youth that they understood and had the opportunity to ask questions after viewing the Safeguarding Your Sexual Safety video, thus demonstrating compliance with this standard

### **Standard 115.334 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Memorandum, Investigator's Training Curriculum, Investigator's Specialized Training Roster, Certificates if applicable, and the Investigator's Interview if applicable.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does indicate that the entity who would conduct their administrative investigations is the Texas Juvenile Justice Department and that the Midland County Sheriff Department is the outside law enforcement entity who will conduct the criminal investigations for sexual abuse and sexual harassment allegations. The facility's PREA Coordinator did provide written evidence in the form of a memorandum indicating that the Midland County Sheriff Department agrees to follow the National Protocol for Sexual Assault Medical Forensic Examination when conducting a sexual abuse investigation if applicable. B. The Barbara Culver Juvenile Justice Center's PREA Coordinator did indicate during her interview that the TJJD internal investigators have received specialized interview training including Miranda and Garrity warning, evidence collection, etc. to assist him in conducting sexual abuse and sexual harassment investigations even though criminal investigations will be referred to outside law enforcement, which was confirmed by this auditor. C. The PREA Coordinator did not have to provide a copy of the external investigator's training record reflecting receipt of their specialized interviewing training when conducting sexual abuse investigations, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

### **Standard 115.335 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Midland Memorial Hospital Contract/Agreement, PREA Training Roster, Specialized PREA Training Certificates for Medical and Mental Practitioners, Medical and Mental Health Staff Interviews.

Findings: A. The Barbara Culver Juvenile Justice Center does not conduct forensic medical exams on a youth for sexual abuse but if applicable, they refer the alleged victim to the Midland Memorial Hospital where the examination would occur free of charge. B. The

medical staff in this facility do not conduct SANE examination nor has the Midland Memorial Hospital conducted a SANE examination for this facility in the last 12 months. C. All of the medical and contracting mental health personnel at the facility indicated that they have received specialized training in PREA and provided certificates of the specialized training received. The interviews conducted with the mental health and medical staff verified their compliance with this standard including their receiving the facility's PREA training as demonstrated by written evidence, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.341 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Client Management Database, Electronic and Hard Copy of Screening Instrument and Instruction Form, Intake Staff Interview, Youth Interviews, and the PREA Coordinator's Interview.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outline that the screening of youth during intake must occur within 72 hours. B, C and D. The screening instrument, which is in their client management database called Juvenile Case Management System (JCMS) that is automated, contains all of the eleven screening elements (1-11) required of this standard and contains questions which covers the youth own perception of vulnerability as well as any observations of the intake staff regarding a youth's gender non-conforming or perceived vulnerable appearance. They also have a process in accordance with their policy for the re-assessment of a youth; a hard copy of this form was provided for the auditor's review. E. Information obtained by the Intake Officer during the initial screening revealed that all sensitive information has limited dissemination to prevent exploitation to the detriment to the youth and that appropriate controls are in place along with being password protected. Information obtained from the Intake staff and youth interviews coupled with a review of the documentation provided during the pre-audit and on site documentation review process, demonstrated this facility's compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.342 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Isolation/Segregation Policies, Intake Officer Interview, Behavior Screening PREA Audit Report

Instrument and Instructions, Isolation/Segregation Logs, and the Behavior Classification /Housing Assignment Log and interview with Mental Health Specialist.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy was provided to the auditor for his review to ascertain their compliance with this standard. The facility's Intake staff was able to demonstrate how the screening instrument is used to make informed housing assignments which is discussed weekly during their staff meetings. B. The facility's Zero Tolerance policy does prohibit the placement of youth in isolation due to risk of sexual victimization and they did provide written evidence indicating that seclusion (isolation) is not used for sexual abuse and sexual harassment victims and or perpetrators. Through the interview with the PREA Coordinator and the Agency

Head they verified that this does not occur. C and D. A copy of the Behavior Screening and Classification form was provided to the auditor for review and he was informed by the PREA Coordinator that housing assignments are not based on LGBTGNC status, perceived status or identification status as an indicator of likelihood of being sexually abusive. This facility did not have any identified Transgender or Intersex youth in their population during this on site audit. E, F and G. The facility policy also allows for an Intersex and Transgender youth to shower separately and to be reassessed twice a year to review any threats to safety experienced by the youth as confirmed through the interview with the youth and staff as well as given consideration serious considerations with respect to his or her safety. H and I. During the last 12 months the facility reported that there were zero youth placed in isolation, zero youth denied daily access to services and zero youth averaging any time in isolation, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.351 Resident 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance, Incident Report, Grievance Policies, Facility memorandum on Civil Immigration, PREA Posters, Hotline Numbers, Staff and Youth Interviews, and the Third Party Reporting Policy.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy provide multiple internal ways (i.e. sick call, grievance, trusting adult) and several external numbers for a youth to privately report allegations of sexual abuse and sexual harassment. B. One such number for reporting an allegation is to the 1-877-STOP-ANE which a toll free number posted by the phone on each housing unit as observed. C. Interviews conducted with the facility's staff and youth demonstrated their knowledge, access and compliance with this standard including that staff do accept, document and immediately report verbal reports of sexual abuse and sexual harassment from a youth to the appropriate upper level supervisory and or administrative staff. D. Youth are provided with a Grievance Form as a tool for reporting and allegation. E. The staff and youth also informed the auditor during their interviews, that they can report sexual abuse and sexual harassment allegations privately; confidentially, anonymously and or through a 3rd party. The staff can use the same 1-877-STOP-ANE number for making such reports. The facility's Zero Tolerance policy does state that they do not detain youth for civil immigration purposes and the facility provided a memorandum to attest to this fact, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.352 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance and Grievance Policies, Retaliation Monitoring Form, Grievance Logs, Applicable Investigation Case Logs that exceeded 90 days or Required an Extension of 70 days, Disciplinary Action taken for Bad Faith filings if applicable, Youth Handbook, Investigator's, Random Staff and Youth Interviews.

Findings: A, B and C. The Barbara Culver Juvenile Justice Center Grievance and Zero Tolerance policy does impose no time limit regarding filing an allegation for sexual abuse; it indicates that a youth cannot resolve a sexual abuse grievance with the alleged staff person informally, that it is not referred to the alleged staff member. D. The facility shall issue a final decision within 90 days of the initial filing. E. That a 3rd party can file a grievance on behalf of a youth. The facility's Zero Tolerance policy does not state that a youth will be monitored for retaliation up to 90 days or until the investigation is closed or is unfounded. F. The PREA Coordinator showed the auditor the grievance lock boxes where a youth could file their grievance and provided him with a copy of the Youth Handbook that describes the youth the grievance procedure including the filing of emergency grievances. G. The facility's Zero Tolerance policy does state that disciplinary action can be taken against a youth if a grievance is filed in bad faith. The Barbara Culver Juvenile Justice Center did not provide written evidence but did indicate that zero grievances in the last 12 months were filed for sexual abuse and sexual harassment, zero emergency grievances filed, and that there were zero sexual abuse and sexual harassment grievances and or administrative/criminal investigations that were not completed within 90 days or that required extensions up to 70 days, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

### **Standard 115.353 Resident 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance and Visitation Policies, Midland Rape Crisis Center and Children’s Advocacy Memorandum of Agreement, Youth Handbook, PREA Posters and other Documentation, Facility's Schematics of Visitation Area/Space, Random Staff, Youth, and PREA Coordinator Interviews.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outline how a youth would have access to outside confidential support services. The facility provides the youth with information regarding their access to outside and other services i.e. 1-877-STOP ANE hotline during Intake and orientation via the Youth Handbook which contains toll free and or local phone numbers. B and C. The facility did provide written evidence on the established Memorandum of Understanding with the Midland Rape Crisis Center and Children’s Advocacy for the provision of emotional support and crisis counseling services as needed for victims of sexual abuse. The youth interviewed could recall being given this information on outside support services during the Orientation process, knew that they can communicate with outside service providers privately; that this conversation is confidential, and the youth indicated also that this was discussed during the comprehensive PREA groups that are being held in their sections every Saturday and Sunday. D. The facility does provide the youths with reasonable and confidential access to their parents, legal guardians and lawyers for visitation as indicated during the

staff and youth interviews also as reviewed on the facility schematics for designated visitation space, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

### **Standard 115.354 Third-party reporting**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance, Grievance and Third Party Reporting Policies, Agency Website, Third Party Reporting Form, Staff and Youth Interviews, Copy of Youth Grievance Form, and the PREA Coordinator's Interview.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does establish the method outlined to receive a 3rd party report of sexual abuse and sexual harassment on behalf of a youth and that this information is also available on the Midland County Juvenile Center's website. The facility's PREA Coordinator did provide written evidence for the link to this website which was visited by the auditor for review. The Barbara Culver Juvenile Justice Center's PREA Coordinator did provide written evidence outlining how they receive the 3rd party report for sexual abuse and sexual harassment, did provide to the auditor with a copy of the Parent brochure on PREA, which is mailed to them and a sample copy of the 3rd party form to be used by a 3rd party for reporting abuse, neglect, exploitation, sexual abuse and sexual harassment, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

### **Standard 115.361 Staff and agency reporting duties**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Rape Crisis/ Advocacy Center Memorandum of Agreement, Intake Officer, Medical and Mental Health Practitioners, Facility Administrator, Agency Head, PREA Coordinator, PREA Compliance Manager and Random Staff Interviews, Referral Form to Outside Law Enforcement or Investigative Entity, and First Responder Interview.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does require that all staff to immediately report to the Facility Director any suspicion, knowledge, or information of an allegation of sexual abuse, sexual harassment, retaliation and staff policy violation for neglect of their responsibilities that may have contributed to the incident or retaliation, including 3rd party reports. The facility



also provided other related policies regarding their internal processes, personnel action and the first responders responsibilities and duties of the staff including referrals to be made to the Midland Rape Crisis and Children's Advocacy Center for mental health assessment and treatment as necessary. B and D. The facility's Zero Tolerance policy does indicate that all staff are mandatory reporters which was also verified during the staff interviews. The agency's policy directs the facility staff including medical and mental health personnel as mandatory reporters of child abuse, to immediately report the information, complete a serious incident report and forward it to the Facility Director. C. The facility's Zero Tolerance policy prohibits the staff from revealing any information related to the sexual abuse and sexual harassment allegation to anyone other than to the extent necessary. E and F. The Facility Director or designee will then report the allegation to their Internal Investigators, Texas Juvenile Justice Department and to the local law enforcement agency as appropriate. During the staff interviews they demonstrated knowledge regarding their reporting responsibilities including notification to their immediate supervisor, the Facility Director, local law enforcement, the internal investigators, the alleged victim's parent, legal guardian, lawyers and to the court of jurisdiction if applicable, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.362 Agency protection duties**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance policy, Isolation/Segregation Policies and log, Memorandum on the Agency's Protection Duties, Agency Head, Facility Administrator and Random Staff Interviews, Isolation/Segregation Logs.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy outlines their internal processes regarding the agency's protection duties when informed that a youth is subject to substantial risk of imminent sexual abuse. The specialized and random staff interviews verified their knowledge and compliance with this standard. The facility did provide written evidence in the form of a memorandum which indicated that they had zero youth in isolation during the last 12 months who were subject to any type of substantial risk of imminent sexual abuse while in their facility, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.363 Reporting to other confinement facilities**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Allegation Notification to Other Facilities, Facility Administrator, PREA Coordinator, Intake Officer and Internal investigator's Interviews, and a review of Investigative Administrative and or Criminal Case if applicable.

Findings: A. and B The Barbara Culver Juvenile Justice Center Zero Tolerance policy doe outlines the staff's requirement of reporting to other confinement facilities within 72 hour of being informed during Intake of an allegation being made by a youth of sexual abuse and sexual harassment and that it will be documented in the youth's electronic file. The interview conducted with the Intake staff as well as with the administrative/supervisory staff demonstrated their knowledge and understanding of this reporting requirement and policy adherence. C. The Barbara Culver Juvenile Justice Center documented zero reported cases of reporting to another confinement facility an allegation of sexual abuse that occurred within the past 12 months as verified by the PREA Coordinator and the Facility Director during their interviews. During the random staff interviews they were able to recite the notification protocol. D. The facility did provide written evidence in the form of a memorandum to demonstrate that if an allegation from an alleged facility of occurrence did occur that they would have been notified well within 72 hours of the sexual abuse and sexual harassment allegation and that this case would have been properly investigated and closed by the appropriate investigative entities, thus demonstrating compliance with this standard.

Corrective Action: None

Resolution: N/A

### **Standard 115.364 Staff first responder duties**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, PREA-related Training Curriculum, First Responder, Non-Security Staff Interview, Random Staff Interviews and PREA Compliance Manager/ PREA Coordinator Interviews, Investigative Cases, if applicable.

Findings: A and B. The Barbara Culver Juvenile Justice Center has established a Zero Tolerance policy that outline the first responder duties for responding to sexual abuse and sexual harassment allegations. The facility did report there were zero allegation of sexual abuse and sexual harassment, whereas in this instance the collection of evidence, which was not applicable, would have been collected in the appropriate time frame, but none was required. That there was zero times that the crime scene and or evidence needed to be preserved, zero times was requested of a victim not to take any action, zero times requested of the abuser not to take action, zero times that non-security staff had to respond, and in all times was the security staff notified and responded to the allegation. All of the random staff interviewed were able to articulate their knowledge, understanding, responsibilities and duties as a first responder including informing the victim and the abuser not to destroy evidence by washing, eating, changing clothes, drinking, defecating or brushing teeth. The facility had reported zero allegation of sexual abuse and sexual harassment during the past 12 months and that in any instance the first responder acted in accordance with the agency's policy and the facility's protocol, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.365 Coordinated response**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Copy of Facility's Written Plan for Coordinated Response to Sexual Abuse Allegation, Sexual Abuse Review Team Member and PREA Coordinator Interviews.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outline the procedure for specific staff's response to allegations of sexual abuse and sexual harassment. The Barbara Culver Juvenile Justice Center staff, as verified by the interview with a member of the Sexual Abuse Review Team, he knew of the process for reporting a sexual abuse and sexual harassment allegations, the responsibilities of the facility administrator, medical and mental health personnel, the investigator and the responsibility of a first responder. The PREA Coordinator did provide the auditor with a copy their written coordinated response plan, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.366 Preservation of ability to protect residents from contact with abusers**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance and Human Resource Policies, Human Resource Specialist and Facility Administrator's Interviews.

Findings: A and B. The Barbara Culver Juvenile Justice Center does not enter into collective bargaining agreements and the facility's policy do allow for an alleged staff abuser to be removed from contact with a youth pending an investigation or of a determination of whether and what extent discipline is warranted. The facility's PREA Coordinator did provide written evidence in the form of a memorandum attesting to this policy, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.367 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance and Retaliation Policies, Protective Measure/Retaliation Policy and Forms, Advocacy/Rape Crisis Center Memorandum of Agreement, Internal Investigator, PREA Coordinator and Mental Health Specialist Interviews.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outline their response to retaliation and protection for all youth and staff members who report an allegation of sexual abuse and sexual harassment and or who cooperate with an investigation. The facility has designated one of their Assistant Facility Administrator who is responsible for monitoring youth and staff against retaliation for reporting a sexual abuse or sexual harassment allegation. B. The facility's Zero Tolerance policy does indicate that they employ multiple protective measures to protect a youth from changing housing assignments, removing them from the facility to another, removing the abuser or alleged staff member from contact with the victim, and providing emotional support to the victim. C and D. The facility’s PREA Coordinator did indicate that a youth's conduct would be monitored up to 90 days against retaliation, including periodic status checks, that they would promptly remedy any such retaliation, and will provide treatment services as needed. E. The facility’s Zero Tolerance policy does indicate that they will protect any other individual who cooperates with an investigation who may express fear of retaliation. The facility did provide a memorandum attesting to these aforementioned points. F. The facility's obligation to monitor shall terminate if the allegation is determined Unfounded. The facility reported zero times where protective measures were required to protect staff and or youth against retaliation in the last 12 months, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

#### **Standard 115.368 Post-allegation protective custody**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance, Isolation/Segregation Policies and Logs, Memorandum on Post Allegation Protective Custody, Random Staff, PREA Compliance Manager and PREA Coordinator Interviews.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does state the prohibition of the use of segregation and or seclusion housing to protect a youth who have alleged sexual abuse and sexual harassment. The facility did provide written evidence in the form of a memorandum indicating that there were zero youths who were held in isolation who alleged sexual abuse and sexual harassment or who suffered sexual abuse in the last 12 months even though the facility's PREA Coordinator and Agency Head stated during their interviews that they do not use segregation and or seclusion to protect a youth from sexual abuse or sexual harassment, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

#### **Standard 115.371 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance and Investigative Policies, Internal Investigator Interview, review of Administrative and Criminal Investigative Cases, PREA Compliance Manager, PREA Coordinators Interviews, and the Investigator's Training Records.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outline that they conduct all administrative investigations and that the Midland County Sheriff Department will conduct all criminal investigations of sexual abuse and sexual harassment. B. The Barbara Culver Juvenile Justice Center did provide written evidence of their investigators training records to also verified compliance with this standard. C. The facility's Investigators described during the interview his gathering process i.e. evidence, videos, interviews, etc. and review of prior complaints and reports of sexual abuse of the alleged perpetrator. The Barbara Culver Juvenile Justice Center did not provide written evidence of a case where sexual abuse occurred at another facility and nor any cases for sexual abuse and sexual harassment that has occurred in their facility, since there were none, being investigated by the appropriate entities. D and F. The facility reported that all cases, if any, would have closed in accordance with facility's policy. G, H, I and J. They also reported that zero substantiated investigative cases had been referred for prosecution and that they would retain these case files as long as the abuser is incarcerated or employed 5 years plus according to their policy and applicable law. K. An employee's termination or the departure of the victim and or perpetrator's being out of the control of the facility shall not cause the investigation to be terminate and that polygraphs are not utilized. M. The Internal Investigator described how they remained in contact with the investigative entities during that time, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

**Standard 115.372 Evidentiary standard for administrative investigations**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Investigation Policy, Interviews with the Investigator, Facility Administrator and the PREA Coordinator.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does state that the standard used for proof when determining substantiation of an allegation for sexual abuse and sexual harassment in an administrative investigations is the preponderance of evidence. The facility did provide written evidence in the form of a memorandum that the standard used for proof when determining substantiation of an allegation for sexual abuse and sexual harassment in an administrative investigations is the preponderance of evidence, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

### Standard 115.373 Reporting to residents

- 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Youth PREA Notification Documentation Sample, Administrative and or Criminal Investigative Cases if applicable, and Interview with the Investigator.

Findings: A and B. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outline the facility's responsibility in notifying a youth regarding the initiation and the outcome of an administrative and criminal investigation for sexual abuse and sexual harassment. C and D. The facility's Zero Tolerance policy also outlines the notification process for a staff on youth allegation and a youth on youth allegation. The facility has reported zero sexual abuse and sexual harassment allegation during the past 12 months, that they would have informed the youth of the outcomes, and that the investigation would have been completed internally or by and out law enforcement entity as applicable. E. The facility’s PREA Coordinator did provide written evidence verifying that notification will be given to a youth during the initial of and at the conclusion of an the investigation, whether it is youth on youth or staff on youth, since there were none reported. The facility did provide a sample copy of the notification letter that would be given. The facility reported that there were zero notifications made and zero notifications were documented since there were no investigations. The facility also indicated that there had not been any indictments, referrals for prosecution or convictions of an abuser for sexual abuse and sexual harassment in the last 12 months, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

### Standard 115.376 Disciplinary sanctions for staff

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance and Human Resource Policy, Memorandum on Disciplinary Sanction for Staff, Disciplinary Letter if applicable, Referrals to law Enforcement Entity Documentation, and Human Resource Specialist Interview.

Findings: A and C. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outline the steps to be taken to discipline a staff for sexual abuse and sexual harassment and that this violation's sanction will be commensurate with the nature and circumstances of the act committed. B. The Barbara Culver Juvenile Justice Center did provide written evidence in the form of a memorandum that there have not been any staff disciplinary actions taken during the past 12 months due a to violation of the agency’s policy of sexual abuse and sexual harassment and that termination would be the presumptive disciplinary sanction. D. The facility’s PREA Coordinator did report that there were zero referrals for sexual abuse and sexual harassment allegations made to a law enforcement or relevant licensing entity, thus

demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.377 Corrective action for contractors and volunteers**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance, Volunteer and Contractor's Policies, Volunteer and Contractor's Disciplinary Letter (if applicable), Memorandum on Corrective Action for Volunteers and Contractors, Referral to Local Law Enforcement and Licensing Entity (if applicable), PREA Compliance Manager/PREA Coordinator Interviews

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does prohibit volunteers and contractors from contact with youths and outlines the steps to be taken when disciplining volunteers and contractors for sexual abuse and sexual harassment violations. B. The facility did provide written evidence in the form of a memorandum that there were zero cases where a volunteer and or a contractor had received disciplinary action during the past 12 months due to violation of the agency's policy of sexual abuse and sexual harassment. The facility's PREA Coordinator did indicate that there were zero reports made to local law enforcement or to a relevant licensing body for a contractor or volunteer engaging in sexual abuse with a youth, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.378 Disciplinary sanctions for residents**

- 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)

**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.**

Policy and Evidence to be reviewed: Zero Tolerance, Isolation/Segregation Policies, Administrative and or Criminal Investigative Cases if applicable, Youth Handbook, Intake staff, PREA Coordinator and Facility Administrator's Interviews.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does prohibit denying a youth large muscle exercise, daily visits. Educational programming and access to other programs as a disciplinary sanction; outlines the process for taking disciplinary action against a youth when they participate in sexual misconduct with another youth, staff, volunteer or contractor in the facility. B and E. The facility's Zero Tolerance policy does outline the formal due process hearing must occur following an administrative finding which the sanctions are commensurate with the nature and circumstances of the abuse committed including when a finding of sexual contact with a

staff proves that they did not consent to such contact. C and D. The disciplinary process, according to their policy does includes if the youth's mental disabilities and mental illness contributed to the behavior when determining sanctions and if therapy, counseling or other interventions shall be considered for the youth to participate in. F. The facility's Zero Tolerance policy does indicate that they do not impose disciplinary sanctions if a youth makes a report of sexual abuse and sexual harassment in good faith. G. The facility's PREA Coordinator reported zero administrative finding of a youth on youth sexual abuse, zero criminal finding of a youth on youth sexual abuse and zero disciplinary sanctions imposed for a sexual abuse and sexual harassment substantiated allegation. The facility has a Zero Tolerance policy against all forms sexual abuse, sexual harassment and sexual misconduct in the facility. During this reporting period the facility reported that zero youths were placed in isolation as a disciplinary sanction for a youth on youth sexual abuse and sexual harassment allegation in the past 12 months, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

### **Standard 115.381 Medical and mental health screenings; history of sexual abuse**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Mental and Medical Screening Instrument Form, Client Management Database Review, Prior Sexual Victimization Referral Forms and or Listing as applicable, Youth Medical and Mental Health Files and Follow Up Documentation, Medical, Mental Health Practitioners, PREA Compliance Manager//PREA Coordinator and Random Staff Interviews, and Facility's Schematics for Medical/Clinic/Infirmary.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outline the procedure to follow for medical and mental health screenings i.e. Maysi, consisting of the youth's history of sexual abuse, if applicable. The electronic files containing some of this information are not accessible to non-treatment staff. B. The Barbara Culver Juvenile Justice Center identified zero youths who had disclosed a prior sexual victimizations in the past 12 months, which occurred either at another confinement facility or in a community setting, and provided written evidence demonstrating that medical and mental health follow up assessments were offered to these and other youths within 14 days of Intake and or when prior sexual victimization was alleged to have occurred. C. The medical and mental health staff indicated during their interviews that they maintain secondary information in their treatment files, which are kept in an office under lock and key whereas only they have access to them. The facility's Zero Tolerance policy states that all staff are considered mandatory reporters of child abuse according to their State law which include medical and mental health practitioners, also demonstrates compliance with the standards. D. The facility's policy indicates how consent is to be obtained from a youth, unless under the age of 18, where sexual abuse did not occur in an institutional setting, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

### **Standard 115.382 Access to emergency medical and mental health services**

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



**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Memorandum on Access to Emergency Medical and Mental Health Care, Medical and Mental Health Practitioners Interviews, Youth Medical and Mental Health Files and Electronic Medical Records review.

A. The Barbara Culver Juvenile Justice Center reported that there were zero cases of sexual abuse requiring medical attention at this facility during the past 12 months and the facility's policy outlines how a youth have access to these emergency services in a timely, unimpeded manner. B and C. The Zero Tolerance policy does indicate that if no qualified medical or mental health practitioner is on duty what the first responder's responsibilities are to protect the victim and are offered timely information and access to emergency contraception and STI prophylaxis. D. The facility did provide written evidence in the form of a memorandum indicating that access to emergency medical and mental health services would be provided at the Midland Memorial Hospital and that these treatment services shall be provided at no cost to the victim whether they name the abuser or cooperates with the investigation. There were zero sexual abuse and sexual harassment cases to review that required a youth emergency access to medical and mental health services in the last 12 months according to the Juvenile Health Specialist during her interview, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

### **Standard 115.383 Ongoing medical and mental health care for sexual abuse victims and abusers**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance and Medical and Mental Health Treatment Policies, Memorandum on Ongoing Medical and Mental Health Care, Sick Call Referral Form, Treatment Services Referral Form, Medical and Mental Health Practitioners Interviews.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outline the procedure for a sexual abuse victim and or abuser being offered an evaluation who has been victimized including receiving ongoing medical and mental health care. B, D, E, F and G. The facility did provide written evidence in the form of a memorandum stating that these services will be provided to those youth who have been adjudicated and who are assigned to their post detention facility, that services are provided free of charge to the youth and that pregnancy tests (as applicable) as well as other treatment i.e. STI's as deemed appropriate by the medical and mental health practitioner will be offered. C. During the interviews with the Medical and or Mental Health staff they indicated that the mental health and medical services are consistent with the community level of care and are at no cost to the victim whether they name the abuser or cooperates with the investigation. H. The facility's PREA Coordinator did indicate that they do attempt to conduct an evaluation on the committed youth abuser within 60 days of learning of the abuse history and offer treatment when deemed appropriate by the mental health practitioner. The Barbara Culver Juvenile Justice Center reported that there were zero youth identified as a sexual abuse victim and or abuser who required ongoing medical and mental health services during the last 12 months, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

### **Standard 115.386 Sexual abuse incident reviews**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Sexual Abuse Review Team Initial and Ongoing Meeting Minutes, Monthly Meeting Notification (if applicable), Administrative and Criminal Investigative Case review, Interviews with a Sexual Abuse Review Team member and the PREA Coordinator.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outlines the process for conducting sexual abuse reviews for substantiated and unsubstantiated cases of sexual abuse and sexual harassment. A review would not be held for Unfounded cases. B and C. Their sexual abuse team is represented by the agency head, the PREA Coordinator/Facility Director, the Assistant Facility Director, the Medical and Mental Health Practitioner, the PREA Compliance Manager and a member of the local Rape Crisis Center, which is convened within 30 days of the conclusion of an administrative and or criminal investigation for sexual abuse and sexual harassment. D and E. The Team considers the six (6) elements of the review and submits its findings and the meeting is facilitated by the Agency Head and the PREA Coordinator as Co-Chair, who prepares the minutes and report recommendations for improvement as applicable. The Barbara Culver Juvenile Justice Center did provide written evidence indicating that there were zero sexual abuse reviews held in the last 12 months. The facility did provide the auditor with a copy of the initial meeting minutes to demonstrate that the sexual abuse review board is active monthly and a memorandum indicating that no allegations of sexual abuse and sexual harassment has occurred during the month of June 2016. The auditor recommended to the PREA Coordinator a best practice by providing written evidence in the form a an e-mail to all of the Sexual Abuse Review Team members keeping them apprised monthly if there are any sexual abuse and sexual harassment allegations. The facility has reported zero allegations of sexual abuse and sexual harassment during the last 12 months and that zero reviews were conducted since there were none alleged.

Corrective Action Findings: The facility must provide evidence in the form of memorandums for the months of July, September and October stating that there has been no sexual abuse or sexual harassment incidents whereas the sexual abuse review board had to convene in order to demonstrate compliance with this standard.

Resolution: The facility’s PREA Coordinator did provide evidence in the form of memorandums for the months of June, July, August and September stating that there have been no sexual abuse or sexual harassment incidents whereas the sexual abuse review board had to convene, thus demonstrating compliance with this standard.

### **Standard 115.387 Data collection**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, DOJ Survey for Sexual Victimization for 2014/2015, Administrative and Criminal Investigative Cases, Sexual Abuse and Sexual Harassment Allegations for 2014, Trends, Implemented Recommendations, etc. and PREA Coordinator Interview.

Findings: A. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outline the procedure for collecting uniform data on all allegations of sexual abuse and sexual harassment at all their facilities including private contractors if applicable, using a standardized instrument to demonstrate compliance with this standard. B and C. The Barbara Culver Juvenile Justice Center did provide written evidence of their annual DOJ Survey of Sexual Victimization, the last one being for 2015, as the standardized instrument for capturing this aggregate data annually, which was confirmed through an interview with the agency's PREA Coordinator and viewed on the agency's website. D and E. The facility's PREA Coordinator, during the interview, indicated that she reviews, collects all the data including investigative reports and files from private facilities, if applicable, of which they contract for the confinement of its youth, identifies trends, implements recommendations and documents the reason for not doing so locally. The PREA Coordinator did state that upon request, this information would be provided to DOJ no later than June 30<sup>th</sup>, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.388 Data review for corrective action**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, DOJ Survey for Sexual Victimization for 2014-2015, Facility's Aggregated Sexual Abuse and Sexual Harassment Data, Agency's Website, PREA Compliance Manager and PREA Coordinator Interviews.

Findings: A and B. The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outline the review of aggregate sexual abuse and sexual harassment data, including that of their private contractors, to assess and improve the effectiveness of the agency's policies, practices and training, identified problems and takes corrective action. The facility's PREA Coordinator did provide written evidence that demonstrated her review of the data collected, identification of trends, problem areas, and subsequent corrective action to be taken in accordance with this standards. C and D. The facility's PREA Coordinator indicated during the interview that she prepares a report from these findings, comparing the current year's data with the prior year data, redacting any information that may present a clear and specific threat to the safety and security of the facilities, obtains approval from the agency's head, makes available on the agency's website or other means and provides a copy to the Department of Justice upon their request, thus demonstrating compliance with this standard.

Corrective Action Findings: None

Resolution: N/A

### **Standard 115.389 Data storage, publication, and destruction**

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

**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.**

Policy and Evidence to be reviewed: Zero Tolerance Policy, Agency’s Website, DOJ Survey for Sexual Victimization for 2014-2015, Data Collection Memorandum and Instrument, Data Storage and Publication Policy, Review of Sexual Abuse and Sexual Harassment Incidents, Interview with the PREA Coordinator.

Findings: The Barbara Culver Juvenile Justice Center Zero Tolerance policy does outline that all sexual abuse data is under their control, that all personal identifiers are redacted and that this information is retained securely. A review of this policy and during the interview with the PREA Coordinator this practice was verified. Furthermore, the Barbara Culver Juvenile Justice Center policy indicated that all sexual abuse data is retained securely and will be maintained for at least 10 years after the date of the initial collection, thus demonstrating compliance with this standard.

Corrective Action Findings: None  
Resolution: N/A

**AUDITOR CERTIFICATION**

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Jerome K. Williams

October 17th, 2016

Auditor Signature

Date