

JUVENILE FACILITIES

NATIONAL
PREA
RESOURCE
CENTER



BJA
Bureau of Justice Assistance
U.S. Department of Justice

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| Auditor Information | | | |
| Auditor name: Natasha Shafer | | | |
| Address: PO Box 110993, Aurora, CO 80042-0993 | | | |
| Email: NShaferdu@gmail.com | | | |
| Telephone number: 720-371-2172 | | | |
| Date of facility visit: June 8-9, 2016 | | | |
| Facility Information | | | |
| Facility name: San Patricio County Juvenile Detention Center | | | |
| Facility physical address: 107 W. Fifth St, Sinton, TX 78387 | | | |
| Facility mailing address: (If different from above) P.O. Box 1122, Sinton, TX 78387 | | | |
| Facility telephone number: 361-364-9500 | | | |
| The facility is: | <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 | | |
| Facility type: | <input type="checkbox"/> Correctional | <input checked="" type="checkbox"/> Detention | <input type="checkbox"/> Other |
| Name of facility's Chief Executive Officer: Kenneth Haliburton | | | |
| Number of staff assigned to the facility in the last 12 months: 20 | | | |
| Designed facility capacity: 20 | | | |
| Current population of facility: 2 | | | |
| Facility security levels/inmate custody levels: Secure | | | |
| Age range of the population: 10 to 17 | | | |
| Name of PREA Compliance Manager: Gerald Crain | | Title: | Compliance Officer |
| Email address: gerald.crain@co.san-patricio.tx.us | | Telephone number: | 361-364-9518 |
| Agency Information | | | |
| Name of agency: 36th Judicial District Juvenile Probation Department | | | |
| Governing authority or parent agency: (If applicable) | | | |
| Physical address: 107 W. Fifth Street, Sinton, TX 78387 | | | |
| Mailing address: (If different from above) P.O. Box 1122, Sinton, TX 78387 | | | |
| Telephone number: 361-364-9500 | | | |
| Agency Chief Executive Officer | | | |
| Name: Jaime Coronado | | Title: | Director of Juvenile |
| Email address: jaime.coronado@co-san-patricio.tx.us | | Telephone number: | 361-364-9500 |
| Agency-Wide PREA Coordinator | | | |
| Name: Kenneth Halliburton | | Title: | Detention |
| Email address: kenneth.halliburton@co-san-patricio.tx.us | | Telephone number: | 361-364-9508 |

AUDIT FINDINGS

NARRATIVE

The audit was conducted by certified PREA auditor Natasha Shafer. This auditor began communicating with the PREA Coordinator in February 2016 to begin planning for and explaining the audit process. The on-site audit date was confirmed April 14, 2016. The on-site PREA Audit was conducted on June 8-9, 2016, at the San Patricio County Juvenile Detention Center, located in Sinton, Texas. Pre-Audit activity began approximately thirty (30) days prior to the on-site audit. The PREA Coordinator sent an email dated April 25, 2016 confirming the posting of the PREA announcements within the facility. The email included three (3) pictures stating fifteen (15) notices were posted throughout the facility. The auditor received the USB drive on Friday, May 13th, which contained the Pre-audit Questionnaire and supporting documentation. This auditor sent an email to the PREA Coordinator on May 23, 2016 informing him that I had an opportunity to review the documents and was requesting supporting documentation or clarification for twenty-two (22) standards). Supporting documents were provided during the on-site audit and within the 30-days of the issuance of this report.

An entrance meeting was held with the Director of Juvenile Services, Jaime Coronado; PREA Coordinator/Detention Superintendent, Kenneth Halliburton; Facility Compliance Officer, Gerald, Crain; and Assistant Director of Juvenile Services, Bryan Loya. The auditor was accompanied on a tour by the Director of Juvenile Services, PREA Coordinator/Facility Superintendent, PREA Compliance Manager/Facility Compliance Officer, and Assistant Director of Juvenile Services. The auditor reviewed camera placement to identify potential blind spots, and staff supervision and presence. During the tour the auditor observed zero-tolerance posters and resident methods of reporting. Following the tour, interviews with staff and youth were scheduled for the remainder of the day. The PREA Coordinator provided an employee list, which was utilized by this auditor to randomly select staff to interview. Since there were 2 residents admitted to the facility during the on-site audit (1 male, 1 female) this auditor interviewed both residents. The selection of Juvenile Correction Officers (JSO)s was inclusive of all four shifts. The agency head, facility superintendent, PREA Coordinator/Detention Superintendent, Compliance Officer were interviewed. Given the small size of the facility the PREA Coordinator/Detention Superintendent and Facility Compliance Officer assume the responsibilities as the intermediate and higher level staff, staff that monitor retaliation, staff on the incident review team, and staff who supervise residents in isolation. The facility has one volunteer who is never one-on-one with residents and always under staff sight and sound supervision. The auditor completed all staff interviews in the evening of the first day by interviewing the overnight staff. The on-site audit concluded with a brief exit meeting to address areas identified as "Does not meet standard" and "Exceeds standard".

There are no SAFE or SANE staff at the facility; forensic sexual assault exams are conducted at Driscoll Children's Hospital.

The second day of the on-site audit included a review of documents provided to the auditor on-site and an exit.

The facility has not had any incidents of sexual abuse or sexual harassment in the last 12 months; as a result the auditor was unable to assess the facility's application of their policy...that is a good problem to have.

DESCRIPTION OF FACILITY CHARACTERISTICS

San Patricio County Juvenile Detention Center is a secure detention facility located in Sinton, Texas, that serves adolescent males and females between the ages of ten and eighteen. The facility has a capacity of 20 and had a population of 2 residents as of June 7th and 8th, 2016, with an average daily population of 5. Entry and exit from the facility is controlled through one secure entrance and exit. The facility has one (1) building within the secure area. There are 3 housing units and other areas throughout the building including: medical room, dining hall, education, visitation area, isolation/seclusion rooms. All housing units are single cell in design, and all units share a community restroom and shower area. Each room has a toilet eliminating the need for egress on the overnight shift except in emergency situations. The facility is equipped with 38 cameras for video monitoring. Cameras are placed inside and outside of the facility as well as in the administrative building where the Director of Juvenile Services and county Probation Officers are housed. Youth receive non-urgent medical care on campus through the contract medical provider. Criminal and administrative investigations are conducted by external agencies; criminal investigations are conducted by the Sinton Police Department and all child abuse reports are conducted by Texas Juvenile Justice Department.

SUMMARY OF AUDIT FINDINGS

At the conclusion of the initial review of the supporting documents after receiving the USB drive, the Pre-audit Questionnaire; and completing the on-site audit San Patricio County Juvenile Detention Center did not meet the standards in 6 areas. The standards requiring action were generally related to lack of supporting documents, or partial compliance. The facility had zero incidents of reported sexual abuse or sexual harassment allegations.

Screening for risk victimization is conducted during intake at the facility; housing decisions are also completed at the facility. The facility policy prohibits cross-gender searches and the facility reported they did not have any residents who identify as lesbian, gay, bisexual, transgender, questioning or intersex.

The facility maintains a 1:8 during waking hours and 1:16 sleeping hours staff to resident ratio.

San Patricio County Juvenile Detention Center has a video monitoring system with 38 cameras installed inside and outside the facility. There are no cameras in resident rooms; however, there are cameras facing the two (2) isolation rooms located near the control center. The rooms have toilets but the camera view is blocked off from anyone monitoring the camera, which allows the residents with adequate privacy. Areas of concerns include the hallway leading to the education rooms and cafeteria where there is a camera blind spot. This blind spot could be mitigated with the installation of a camera in the opposite direction from current camera view. There other area of concern is in the kitchen area. The kitchen has limited use, but is located in a relatively isolated area and should be monitored for prevention.

Eight (8) random staff was interviewed covering all four (4) shifts; and 2 residents were interviewed. The residents interviewed appeared to be informed of their rights to be free from sexual abuse and sexual harassment and how to report such incidents. Both residents were aware of the outside reporting and victim support services provided. The JSO interviewed were knowledgeable on reporting and protection procedures.

During the on-site exit meeting the facility participants were provided with feedback and recommendations for achieving compliance. All were very motivated to achieve compliance prior to the 30 days corrective action period, and committed to working to comply. Documentation and evidence provided during the 30 days prior to the report period led to the determination that the facility achieved compliance with all applicable standards.

Number of standards exceeded: 3

Number of standards met: 38

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.

Reviewed documents:

- Policy 1.00 PREA Definitions
- Policy 1.01 Definitions Related to Sexual Abuse
- Policy 2.00 Zero Tolerance of Sexual Abuse and Sexual Harassment; PREA Coordinator
- Agency Mission Statement as documented on the PAQ
- Schematic of facility
- 36th Judicial District Juvenile Probation Department Org Chart

The San Patricio County Juvenile Detention Center meets this standard. The facility has a zero tolerance policy towards all forms of sexual abuse and sexual harassment. The San Patricio County Juvenile Detention Center has dedicated a facility PREA Coordinator who states he has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards. The facility has also designated a PREA Compliance Manager with sufficient time and authority to coordinate the facility’s efforts to comply with the PREA standards. Both individuals indicated during the interview process that they have the time and authority to fulfill their PREA responsibilities.

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.

Reviewed documents:

- Policy 3.00 Contracting with other Entities for the Confinement of Residents

The San Patricio County Juvenile Detention Center contracts with the Atascosa County Juvenile Justice Center for the confinement of its residents. The PREA Coordinator provided an updated but unsigned copy of the contract between the two (2) agencies which includes the Atascosa County Juvenile Justice Center to comply with the juvenile PREA standards. San Patricio is licensed by the Texas Juvenile Justice Department (TJJD) to detain juvenile’s residents of San Patricio County.

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.

Reviewed documents:

Policy 4.00 Supervision and Monitoring
Unannounced rounds security check logs

The documentation provided for the review initially did not contain the facility staffing plan. During the 30 days prior to the issuance of the report the PREA Coordinator submitted a signed and dated staffing plan, which addressed all eleven (11) components of the PREA standard. This was the first staffing implemented within the facility so there was no annual review; the first review should take place in June 2017 or sooner if adjustments are needed. The PREA Coordinator provide to the auditor a sample of emails to demonstrate documented unannounced rounds being conducted by mid-level supervisors on the morning and evening shifts. The auditor recommended to the facility that they modify their practice to implementing a log book and including higher level supervisors in the security checks. The facility made the changes with the 30 days period and provided supporting documentation for the auditors review. The facility is adequately staffed to provide staffing ratio of 1:8 during waking hours and 1:16 during sleeping hours.

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.

Reviewed documents:

Policy 6.00 Limits to Cross-Gender Viewing and Searches
Strip search body charts for 2 residents
Staff training acknowledgment log

San Patricio County Detention Centers' policy prohibits cross gender viewing and searches. All staff and both residents interviewed verified during the interview that this practice does not happen. The PREA Coordinator provided the strip search body charts for both residents admitted to the facility at the time of the on-site audit. The staff and residents verified during interviews that male and female staff announce their presence when entering the housing units. While conducting the facility tour I witnessed male staff announce their presence by knocking on the unit door while both the male and female resident was on the unit with male and female staff.

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.

Reviewed documents

Policy 7.00 Resident with disabilities and residents who are limited English proficient
Signed resident acknowledgment forms

The agency has policies in place to assist residence with disabilities or have limited English proficiency. There are four (4) staff identified as Spanish speaking willing to provide translation and interpretation services. The facility has a designated room for residents with physical disabilities. Per policy residents are required to receive orientation within 12 hours of intake in their primary language and include an explanation of the facility's program rules, grievance policy and procedure, the procedures to access health care, reporting abuse, neglect, exploitation, and Prison Rape Elimination Act of 2003.

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.

Reviewed documents

Policy 8.00 Hiring and promotion decisions
Updated policy 8.00 Hiring and promotion decisions
7 current employee background check clearance documentation

The San Patricio Juvenile Detention Center policy now addresses all elements of this standard. The PREA Coordinator provided the auditor with background clearance documents for seven (7) current staff at the facility. During the on-site audit it was recommended to the facility that they add language to include conducting background checks every five years for current employees. The PREA Coordinator explained to the auditor that TJJD policy requires a background check for current employees. Documents reviewed show that the facility conducts background checks on all current employees every two (2) years, which exceeds the standard requirement of every five years.

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.

Reviewed documents:

Policy 9.00 Upgrades to facilities and technologies

The San Patricio County Detention Juvenile Center has not modified any areas of the facility. During the on-site tour the auditor observed the placement of cameras and possible blind spots. The facility is equipped with 38 cameras inside and outside of the facility. The monitoring equipment is in the facility's control center and under surveillance the by staff working in the control center. The auditor recommended the facility implement a video monitoring check sheet, to assist the facility with monitoring the operation of the cameras.

Recommendation: place an opposite facing camera in the hallway leading to the school and in the kitchen areas nears the exit door of the facility.

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.

Reviewed documents:

Policy 10.00 Evidence protocol and forensic medical examinations

The San Patricio County Juvenile Justice Center does not conduct its own criminal sexual abuse investigations. Referrals for criminal investigations are made to the Sinton Police Department. When conducting the investigation Sinton Police use the evidence protocols utilized for the general public as appropriate for youth. The facility's policy requires notification to the Texas Juvenile Justice Department (TJJD) Office for investigation. The facility did not have any sexual abuse or sexual harassment allegations requiring a referral to law enforcement or TJJD. In the event a resident is sexually abused within the facility requiring a SANE exam, the resident will be transported to Driscoll Children's Hospital.

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.

Reviewed documents:

Policy 11.00 Polices to ensure referrals of allegations for investigations

The San Patricio County Juvenile Detention Center requires that all allegations of sexual abuse or sexual harassment are reported to the appropriate investigation agency. There were zero (0) allegations of sexual abuse or sexual harassment referred for either criminal or administrative investigation in the past twelve (12) months.

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.

Reviewed documents:

Policy 12:00 Employee training
Staff training logs

While the auditor was on on-site the auditor received training logs dated August 15, 2013, which did not meet the 2 year training requirement per PREA standard or the facilities policy. The facility was required to complete the training within the 30 day report submission. The auditor received training logs dated June 16, 2016 for 10 JSO staff and 5 Control Tech staff. The training is provided using the training curriculum provided by TJJD.

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.

Reviewed documents:

13.00 Volunteers and contractor training

The San Patricio County Juvenile Detention Center requires all volunteers and contractors who have direct access to residents be trained and understand their responsibilities regarding PREA. Training records for (two) 2 contractor dated June 16, 2016 was provided demonstrating the individual received training on the zero tolerance policy.

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.

Reviewed documents:

Policy 14.00 Resident education
20 signed resident acknowledgment forms
10 signed video acknowledgment forms
Resident handbook

During intake, residents are provided a brochure and they are provided information on their rights to be free from sexual abuse and sexual harassment. The residents' intake date as well as their signature is documented on the facility's resident orientation acknowledgment form. The form is placed in the residents facility file. During the interviews the residents acknowledged receiving the information within hours of admission. The resident reported they had not received PREA education verbally or via a video. The facility was provided with information re: resident education videos on the internet that are better suited for resident 10-18 years old, and provided the auditor with 10 signed acknowledgment for all admissions since the on-site audit.

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.

Reviewed documents:

Policy 15.00 Specialized training: Investigations
TJJD Policy 358.820
2 NIC investigator training certificates

Training records for the facility PREA Coordinator and PREA Compliance Manager were reviewed by the auditor. Documentation provided and interviews with investigators verified that the required training is provided.

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.

Reviewed documents:

Policy 16.00 Specialized training: Medical and mental health care

The contract medical provider at San Patricio County Juvenile Detention Center does not conduct forensic medical exams. Instead the facility will have residents transported to Driscoll Children’s Hospital in nearby Corpus Christi, Texas. The facility does not employ mental health care staff, instead the facility has an agreement with the local mental health provider to provide acute care on an as-needed basis.

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.

Reviewed documents:

Policy 17.00 Obtaining information from residents
Behavioral screening form

All residents are assessed during the intake screening process. This screening occurs within 24 hours. The facility uses an objective screening instrument that was modeled after the minimum criteria established within the PREA standard. The random staff and resident interviews and documentation support that the screening process does take place. While the auditor was on-site there were no intakes, therefore; the auditor could not observe an intake. Information obtained in response to screening questions shall be considered confidential and shall only be made available to those who have a need to know.

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.

Reviewed documents:

Policy 18.00 Use of screening information

The San Patricio County Juvenile Detention Center policy covers all components of this standard. Policy prohibits the placement of youth in isolation due to the risk of sexual victimization. The facility reported that they do not have any youth who have identified themselves as lesbian, gay, bisexual, transgender, or intersex.

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.

Reviewed documents:

Policy 19.00 Resident reporting

The San Patricio County Juvenile Detention Center has implemented numerous ways for residents to privately report incidents of sexual abuse and sexual harassment. These avenues also exist to report issues of retaliation by staff and residents for reporting sexual abuse or harassment and staff neglect or violation of responsibilities. The different options include; verbally, TJJJD hotline, grievance procedures, or through a third party (i.e., parents/legal guardians, legal professionals, etc.)

Residents are made aware of the avenues for reporting such incidents during intake and provided the necessary tools to report in writing. The random staff and residents interviewed were aware of the reporting options.

Staff may also privately report their knowledge or suspicion of sexual abuse. The facility allows staff to bypass the chain of command and report directly to the licensing agency using the TJJJD hotline. During staff interviews they expressed their awareness of the different reporting methods and would feel comfortable accessing the different options.

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.

Documents reviewed:

Policy 20.00 Exhaustion of administrative remedies

The San Patricio County Juvenile Detention Center's policy addresses the handling of sexual abuse and sexual harassment grievances. The facility has not received any grievances alleging sexual abuse or sexual harassment. Any resident may submit a grievance without submitting it to a staff member who is the subject of the complaint. Third parties are permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and shall be permitted to file such requests on behalf of residents.

Emergency grievances alleging a resident is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken.

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.

Reviewed documents:

Policy 21.00 Resident access to outside confidential support services
Unsigned Memorandum of Understanding

A Memorandum of Understanding with the Women's Shelter of South Texas was provided and states they will provide a 24 hour hotline, respond to the facility upon receiving a crisis call on the hotline, provide victim advocacy and resident accompaniment to the hospital for a SANE exam, and provides victims with support and referrals. Both residents interviewed verified that the facility does provide residents with reasonable and confidential access to their legal representatives and parents or legal guardians.

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.

Reviewed documents:

Policy 22.00 Third-party reporting

It is the policy of the San Patricio County Juvenile Detention Center to prominently display signage provided by TJJD regarding a zero-tolerance policy concerning abuse of juveniles. Signage shall be posted in all of the following places: Lobby or visitation areas of the facility to which the public has access; youth housing and common areas; common medical treatment areas; common educational areas; and other common areas. During the facility tour the auditor observed the posters displayed throughout the facility; and resident interviews indicated they were aware of the third-party reporting option. The facility has not received any third-party reports in the last 12 months.

Signage is posted in both English and Spanish in all areas and contains the TJJD abuse, neglect, & exploitation toll free number.

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.

Reviewed documents:

Policy 23.00 Staff and agency reporting duties

The San Patricio County Juvenile Detention Center policy requires staff to immediately report any allegation of sexual abuse, harassment, or retaliation to TJJD. Agency policy prohibits staff from revealing any information related to sexual abuse to anyone other than to the extent necessary. Staff demonstrated their knowledge of their reporting responsibilities during the interview process.

The policy requires that notification be made to the alleged victim's family or legal guardians upon receiving any allegation of sexual abuse unless the facility has official documentation showing the parents or legal guardian should not be notified.

The facility has not received an allegation of sexual abuse or sexual harassment requiring reporting.

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.

Reviewed documents:

Policy 24.00 Agency protection duties

Random staff interviews as well as interviews with the PREA Coordinator/Facility Superintendent and PREA Compliance Manager support this standard. The pre-audit questionnaire as well and review of the policy states that immediate action is taken to protect residents that are subject to a substantial risk of abuse.

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.

Reviewed documents:

Policy 25.00 Reporting to other confinement facilities

The San Patricio County Juvenile Detention Center reported zero (0) cases where a resident alleged that he or she was sexually abused while confined at another county or state facility. The facility also has not received an allegation that required a Director to Director notification to San Patricio from another facility. The reviewed policy appropriately addresses all PREA requirements should the agency receive such an allegation.

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.

Reviewed documents:

Policy 26.00 Staff first responder duties

The San Patricio County Juvenile Detention Center has established a policy regarding first responder duties. Staff designated as first responders were able to articulate their responsibilities during the interview process. There were no allegations of sexual abuse requiring the implementation of a staff first responder response. This auditor recommends the facility establish a "table top" first responder drill to reinforce the responsibilities since the facility does not experience sexual abuse allegations.

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.

Reviewed documents:

Policy 27.00 Coordinated response
Facility Coordinated response flow chart

The facility plan was developed to coordinate action taken in response to an incident of sexual abuse. The plan is broken down into responsibilities for investigators, medical, first responders and intermediate and higher level staff members.

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.

Reviewed documents:

Policy 28.00 Preservation of ability to protect residents from contact with abusers

The San Patricio County Juvenile Detention Center nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement limiting the agency's ability to remove alleged staff sexual abusers from contact with residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

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.

The facility has established a policy to protect residents and staff who report incidents or assist/coordinate in the investigation of incidents of sexual abuse or harassment. The facility has policies in place to employ multiple protection measures to protect the same including but not limited to transfers, housing unit changes, removal of alleged staff/resident abusers and emotional support services.

San Patricio Juvenile Detention Center will monitor for any retaliation actions towards residents or staff for 90 days to see if there is any changes that may suggest retaliation.

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.

Reviewed documents:

Policy 30.00 Post allegation protective custody

The San Patricio Juvenile Detention Center policy states, "Residents will be isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged. During any period of isolation, the SPCJDC shall not deny residents daily large-muscle exercise and any legally required educational programming or special education services. Residents in isolation shall receive daily visits from a medical or mental health care clinician. Residents shall also have access to other programs and work opportunities to the extent possible. The Protective Isolation will be approved in writing by the facility administrator or designee."

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.

Reviewed documents:

Policy 31.00 Criminal and administrative agency investigations

The San Patricio Juvenile Detention Center policy covers all of the components of this standard. All investigations of sexual abuse and sexual harassment are conducted by the Sinton Police Department and/or TJJJ. In accordance with TJJJ Standards, the internal investigation shall be conducted by a person qualified to investigate due to experience or training. The investigation will be comprehensive. The investigation shall be initiated immediately by administrator or designee upon the knowledge of alleged abuse. The investigation may only be postponed if directed by law enforcement, requested by TJJJ, or the internal investigation would compromise the integrity of a potential crime scene. The internal investigation shall be completed within 30 business days of the initial report to TJJJ.

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.

Reviewed documents:

32.00 Evidentiary standard for administrative investigations

The San Patricio County Detention Center requires that the investigator's findings must be based on a preponderance of the evidence. When there is a substantiated allegation of conduct that appear to be criminal the facility shall advocate for prosecution.

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.

Reviewed documents:

Policy 33.00 Reporting to residents

The San Patricio County Juvenile Detention Center policy addresses all components of this standard. The facility did not have any reported allegations of sexual abuse or sexual harassment requiring an investigation or resident notification.

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.

Reviewed documents:

Policy 34.00 Disciplinary sanctions for staff

The San Patricio County Juvenile Detention Center policy addresses all components of this standard. The facility reported no disciplinary action during the audit period due to violating sexual abuse or sexual harassment policy.

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.

Reviewed documents:

Policy 35.00 Corrective action for contractors and volunteers

The San Patricio County Juvenile Detention Center policy addresses all components of this standard. According to the policy the facility will take remedial measures and will consider whether to prohibit further contact with residents. No incidents involving contractors/volunteers have been reported.

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.

Reviewed documents:

Policy 36.00 Disciplinary sanctions for residents

The San Patricio County Juvenile Detention Center policy addresses all components of this standard. There were no allegations of resident on resident or resident on staff sexual abuse or sexual harassment.

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.

Reviewed documents:

Policy 37.00 Medical and mental health screenings; history of sexual abuse

The San Patricio County Juvenile Detention Center policy addresses all components of this standard. Residents who disclose prior victimization or having been a perpetrator are automatically seen by the medical staff for a complete health screen evaluation.

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.

Reviewed documents:

Policy 38.00 Access to emergency medical and mental health services

The San Patricio County Juvenile Detention Center policy addresses all components of this standard. The facility had zero (0) allegations of sexual assault requiring medical attention to review.

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.

Reviewed documents:

Policy 39.00 Ongoing medical and mental health care for sexual abuse victims and abusers

The San Patricio County Juvenile Detention Center policy addresses all components of this standard. This type of abuse has not been reported in the facility so no resident interviews were conducted.

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.

Reviewed documents:

Policy 40.00 Sexual abuse incident reviews

The San Patricio County Juvenile Detention Center policy addresses all components of this standard. No incident reviews have been completed in the past 12 months since there have been zero (0) sexual abuse allegations.

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.

Reviewed documents:

Policy 41.00 Data collection

The San Patricio County Juvenile Detention Center policy addresses all components of this standard. For the purposes of this standard sexual abuse and sexual harassment allegations would be captured in the Serious Incident Report category of the data collection category. The facility had zero (0) sexual abuse or sexual harassment allegations during the 2015 calendar year and so far in the 2016 calendar year.

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.

Reviewed documents:

Policy 42.00 Data review for corrective action

The San Patricio County Juvenile Detention Center policy addresses all components of this standard. Given that the facility has not had any allegations of sexual abuse there is no need for corrective action.

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.

Reviewed documents:

Policy 43.00 Data storage, publication, and destruction

The San Patricio County Juvenile Detention Center policy addresses all components of this standard. The policy states the facility will maintain sexual abuse data collected for at least 10 years after the date of its initial collection unless Federal, State, or local law requires otherwise.

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.

Natasha Shafer

7/8/16

Auditor Signature

Date