

PREA AUDIT: AUDITOR'S SUMMARY

REPORT JUVENILE FACILITIES

NATIONAL
PREA
RESOURCE
CENTER



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

Name of Facility:	McFadden Ranch		
Physical Address:	3505 Haynes Rd, Roanoke TX 76262		
Date report submitted:	October 23, 2014		
Auditor information:			
Name:	Dwight Sadler		
Address:	11209 Metric Blvd, Bldg H, Austin TX 78758		
Email:	dwight.sadler@tjtd.texas.gov		
Telephone number:	(512) 490-7972		
Date of facility visit:	August 18, 2014		
Facility Information:			
Facility Mailing Address: (if different from above)	Same		
Telephone Number:	(817) 491-9387		
The Facility is:	<input type="checkbox"/> Military <input type="checkbox"/> Private for profit <input type="checkbox"/> Private not for profit	<input type="checkbox"/> County <input type="checkbox"/> Municipal	<input type="checkbox"/> Federal <input checked="" type="checkbox"/> State
Facility Type:	<input type="checkbox"/> Detention	<input checked="" type="checkbox"/> Correction	Other:
Name of PREA Compliance Manager	Sherlon Didier	Title: Assistant Superintendent	
Email Address:	sherlon.didier@tjtd.texas.gov	Telephone Number: (817) 491-9387	
Agency Information			
Name of Agency:	Texas Juvenile Justice Department		
Governing Authority of Parent Agency: (if Applicable)			
Physical Address:	11209 Metric Blvd, Bldg H, Austin TX 78758		
Mailing Address: (if different from above)	PO Box 12751, Austin TX 78711-2757		
Telephone Number:	(512) 490-7130		
Agency Chief Executive Officer:			
Name:	David Reilly		
Email Address:	david.reilly@tjtd.texas.gov		
Telephone:	(512) 490-7004		
Agency Wide PREA Coordinator:			
Name:	Jerome K. Williams	Title: PREA Coordinator	
Email:	jerome.williams@tjtd.texas.gov		
Telephone Number:	(512) 490-7671		

AUDIT FINDINGS

NARRATIVE:

The PREA Audit was conducted on August 18, 2014 at McFadden Ranch, a Texas Juvenile Justice Department (TJJD) halfway house. The audit was conducted by certified PREA Auditor Dwight Sadler.

Following the entrance meeting a thorough tour of the facility was provided by the facility's Assistant Superintendent, who also serves as the PREA Compliance Manager. A comprehensive list of residents and staff was requested and provided. Residents were randomly selected from the halfway house's 12 bedrooms as well as correctional staff covering all three shifts to be interviewed. Interviews with specialized staff included the Superintendent, Assistant Superintendent who is also the PREA Compliance Manager, the agency PREA Coordinator, staff designated as First Responders, intake staff, SARB team member, staff who screen for risk of victimization and abusiveness, higher level staff who conduct unannounced rounds, and staff who monitor for retaliation. Criminal and administrative investigations at McFadden Ranch are conducted by investigators from the Gainesville State School, also a TJJD facility, located in Gainesville, Texas, about 40 miles north of McFadden Ranch. Interviews with investigators were conducted by telephone. The McFadden Ranch halfway house had no allegations of sexual abuse or sexual harassment made during the 12 month period preceding the PREA audit.

DESCRIPTION OF FACILITY CHARACTERISTICS:

McFadden Ranch halfway house is a medium restriction facility located in Roanoke, Texas. The facility has a design capacity of 48 youth and houses only male offenders. There are twelve bedrooms in the house with four residents assigned to each room. There were 40 residents assigned to McFadden Ranch the day of the audit. This facility provides high need level drug and alcohol treatment, sex offender treatment for residents who are assessed as moderate need level as well as aftercare sex offender treatment. McFadden Ranch also provides Anger Replacement Therapy (ART) to all residents assessed as needed for this service. The average length of stay for youth at McFadden Ranch is approximately 6.7 months.

SUMMARY OF AUDIT FINDINGS:

McFadden Ranch has an extensive camera system which greatly reduces the possibility of blind spots existing in this facility. As required by PREA standards, cameras do not capture the resident's showers and toilets. The warehouse closet and water heater closet were identified as potential blind spots within the building. The education building, located on-site directly behind the halfway house, does not contain any surveillance cameras. The education building is owned by the local school district and has denied two attempts made by TJJD to install cameras. Residents interviewed were well informed of their rights to be free from sexual abuse and sexual harassment and how to report such incidents. Residents were able to recollect being informed of their PREA rights upon arrival at McFadden Ranch. Residents interviewed were not able to recollect staff asking or discussing with them specific questions pertaining to their vulnerability to sexual abuse. Correctional staff members interviewed were knowledgeable regarding reporting procedures but many were not familiar with the agency's protocol for collecting evidence or procedures to follow in a situation where they may be the first person notified of a sexual abuse allegation. Staff members identified as being responsible for monitoring against retaliation were not able to identify the length of time the monitoring takes place or what they would look for during the monitoring process.

SINCE THE AUDIT: The McFadden Ranch Halfway House was found to be non-compliant with 2 standards at the time the initial report of findings was issued. Since that time the Texas Juvenile Justice Department has provided additional documentation, drafted new procedures, and clarified practices in these areas that has resulted in McFadden Ranch now being PREA compliant. Details of the changes made to achieve compliance are discussed with the individual standards.

Number of standards exceeded: 1

Number of standards met: 40

Number of standards not met: 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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(a)(b) and (d)

McFadden Ranch meets the requirements of the standard. The Texas Juvenile Justice Department (TJJD) has a zero tolerance policy towards all forms of sexual abuse and harassment. The agency has one dedicated PREA Coordinator and McFadden Ranch has designated the Assistant Superintendent as their PREA Manager. Both indicated that they have time to fulfill their PREA responsibilities during the interview process.

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)
- Non-Applicable Standard

Auditor comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(e)(2)

TJJD requires all existing contracting facilities meet PREA standards upon renewal. Sample contracts were provided for review.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9955(d) and 380.9337(e)

The documentation provided demonstrates the development process described in 115.313(a) of the standard. At the time of the audit the facility reported no deviations from their staffing plan. Documentation provided and a review of video showed frequent unannounced rounds are made on all shifts by mid or higher lever supervisors.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(e)(c)(d) and 380.9709 (i)(f)

TJJD policy prohibits cross gender viewing and searches. All staff and residents interviewed verified that this practice does not happen under any circumstances. The residents and staff verified during the interview process that all female staff announce their presence when entering the hallways housing the bedrooms. This practice is covered in TJJD policy and was observed during the facility tour.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(e)

McFadden Ranch identified several staff members who are fluent in Spanish and could provide interpretive services for residents if needed. McFadden Ranch also has a contract with a provider who provides interpretive services for multiple languages and for resident's who are hearing impaired. English and Spanish PREA written materials that are covered during orientation were reviewed on site and during the pre-audit review.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(e), 385.8181(d), PRS 02.07 and 02.08

TJJD policy requirements addresses all elements of this standard. Documentation has been provided showing that TJJD conducts background checks on all current employees on a yearly basis, which far exceeds the standard requirement of every five years. There was only one new hire at McFadden Ranch during the audit period and all background checks had been completed. McFadden Ranch does not contract with any service providers.

STANDARD §115.318 – Upgrades to Facilities and Technology

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

Auditor comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(7)(a)(b)

No substantial expansion or modifications had been made to the structure or the surveillance system at McFadden Ranch during the audit period.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(I) and 385.8183

TJJD is responsible for conducting both criminal and administrative investigations at McFadden Ranch. A uniform evidence protocol is used that would maximize the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The protocol provided is titled "A National Protocol for Sexual Assault Medical Forensic Examinations, Second Edition, April 2013." Emails were provided demonstrating an effort to execute an MOU with Parkland Hospital to receive services through their Victim Intervention/Rape Crisis Program. There have been no forensic medical exams conducted in the past 12 months.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(i), (f) and INS 71.01

Agency policy requires all allegations of sexual abuse to be reported to the TJJJ Incident Reporting Center (IRC). The allegations are reviewed by the IRC then referred to TJJJ's Office of Inspector General or the Administrative Investigation Division.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed:380.9337(g)

TJJJ policy requires the agency to provide PREA-related training to all employees who may have contact with residents. Training records, training curriculum, and staff interviews verified that the McFadden employees receive the required training for this standard through new hire orientation, annual block training, e-courses, and on the job training sessions. Sign-in sheets which include the course title and description are kept for each training class.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(g)

TJJJ agency policy requires that all volunteers and contractors who have direct access to residents be trained on and understand their responsibilities regarding PREA. The TJJJ Volunteer Training Manual and volunteer orientation signature pages from trainings were provided for review. The required PREA information is covered in the trainings. The facility's Volunteer Coordinator verified this information during an on-site interview.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed:380.9337(g)

During intake residents are provided a handbook and they are read a script that is available in English and Spanish. Residents also watch a video titled "Safeguarding Your Sexual Safety PREA Orientation" during orientation. Documentation of this process is dated, signed, and placed in the resident's master file. During the tour of McFadden Ranch, and during interviews, the residents acknowledged receiving this information during the intake process. The residents also acknowledged watching the PREA video described above upon their arrival at the facility. Hotline numbers for reporting incidents of sexual abuse or sexual harassment are prominently displayed throughout the facility. Additionally, a sample of youth files were pulled and reviewed for documentation during the on-site portion of the 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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(g)

Training records provided by the Office of Inspector General and the Administrative Investigations Division and interviews conducted with investigators who serve McFadden Ranch from Gainesville State School or the Fort Worth District Office 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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(g)

McFadden Ranch is served by medical staff from the Gainesville State School, who do not conduct forensic medical exams. All medical and mental health staff do receive the training mandated by this standard. Training records and interviews with staff verified compliance.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(h)

Intake screening is conducted at the TJJD's Ron Jackson orientation and assessment facility; however, reassments are conducted at McFadden Ranch. A review of files verified that residents are screened within 72 hours of arrival at McFadden Ranch. Resident interviews, a review of agency policy, and a review of documentation provided during the pre-audit review also verified compliance with this standard.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(h), 380.9745(i) and INS 75.13

A review of and discussion regarding the Dorm Census (INS-400 form), provided prior to the on-site audit, along with staff interviews verified compliance with this standard. TJJD policy prohibits the placement of youth in isolation due to the risk sexual victimization.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(i) and (d)

TJJD policy provides multiple internal ways for residents to privately report allegations. One of the numbers provided is a toll free number maintained by the Office of the Independent Ombudsman which is a separate state agency. Interviews with staff and residents demonstrated compliance with this standard including staff acceptance of verbal reports and staff discussing ways to report allegations privately. All components of this standard are also covered in TJJD policy.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(i), (d), YRP 05.05(c) and GAP 07.03

The agency does not meet the requirements of PREA standard 115.352(d). There is no policy or practice in place requiring a final decision be made by the agency on the merits of any portion of a grievance or administrative investigation alleging sexual abuse within 90 days of the initial filing. There is no policy or practice in place for the agency to claim an extension of time to respond and to notify the victim in writing of the extension along with a date on which a decision will be made. McFadden Ranch reported no grievances were filed in the previous 12 months that alleged sexual abuse.

Corrective Action Required

TJJD will need to develop policy that ensures that agency practices fall within the timelines detailed in standard 115.352(d).

- SINCE THE AUDIT:**
1. Operations procedures have been provided from the Office of Inspector General stating that their investigations are conducted and a completed investigative report is submitted to a supervisor within sixty days.
 2. The Administrative Investigations Division of TJJD provided a memo stating that their department recently revised their operating procedures to allow 60 business days from the receipt of the allegation to final disposition of the investigation. The AID procedures allow for the investigator to request an extension up to 70 calendar days to complete the investigation.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(i), 380.9301(I) and 380.9311

A Memorandum of Understanding (MOU) with the Family Outreach of Denton County was provided. The MOU indicates the telephone number will be distributed to youth after it has been determined that the youth in question is the victim of sexual abuse and has refused the on-site counseling services offered by TJJD. The residents interviewed could not provide information on outside support contact information nor could they recall being provided this information. The facility does provide the residents with reasonable and confidential access to their parents and/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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(i)

The agency has established a method, outlined in agency policy, to receive third party reporting and this information is available on the TJJD website.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(j), 380.9333(II)(g) and GAP 07.03

TJJD policy requires all staff to immediately report to the Office of Inspector General any allegation of abuse or retaliation. Policy also prohibits staff from revealing any information related to sexual abuse to anyone other than to the extent necessary. Staff interviews demonstrated good knowledge of their reporting responsibilities, including notification of the alleged victim's parents or legal guardians.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(j)

Agency policy and interviews with staff verified compliance with this standard. McFadden Ranch reported having no residents subject to a substantial risk of imminent sexual abuse in the past 12 months.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(j)

Agency policy addresses the requirements for this standard. Interviews demonstrated an understanding of the reporting requirements. McFadden Ranch reported no cases requiring reporting to other facilities during the audit period.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(j)

The agency has established policies regarding first responder duties. Most staff interviewed were able to articulate an understanding of the first responder duties and procedures. Additional training is recommended for the correctional staff in this area. McFadden Ranch had no reported allegations of sexual abuse in the past 12 months.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(j)(5)

This standard requires a written institutional plan for each facility. TJJJD as an agency has developed a blanket policy that covers all facilities.

Corrective Action Required

A written institutional plan to coordinate responses should be developed specifically for McFadden Ranch.

SINCE THE AUDIT: The agency has provided a written institutional plan to coordinate actions in response to allegations of sexual abuse that is specific to McFadden Ranch.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(j)

The Texas Juvenile Justice Department does not enter into collective bargaining agreements.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(j)

The agency has a retaliation policy that protects all residents and staff members who report sexual abuse or sexual harassment or who cooperate with an investigation. McFadden Ranch has designated staff members responsible for monitoring against retaliation. McFadden Ranch reported no allegations of sexual abuse or cases where protection measures were needed against 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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(j)

TJJD's policy prohibits the use of segregated housing to protect residents who have alleged sexual abuse.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(k)

TJJD policy covers all components of this standard. All investigations of sexual abuse or harassment are conducted by the Office of Inspector General (OIG) or the Administrative Investigation Division (AID). Training records and sample cases provided verified compliance with the standard. Interviews conducted with investigators for both offices verified compliance with the requirements of the

standard. OIG and AID investigators office out of the Gainesville State School and/or Fort Worth District Office and travel to McFadden Ranch as necessary.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(k)

Agency policy was reviewed, and an interview with an administrative investigator who serves McFadden Ranch for verified compliance with the standard.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(k)

A review of agency policy and interviews with the Superintendent and Administrative Investigations Division Investigator verified agency policy that the residents are notified of the outcome of investigations. McFadden Ranch has had no allegations of sexual abuse within the past 12 months.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(l)

McFadden Ranch reported no staff disciplinary action during this period due to violating agency sexual abuse or sexual harassment policy. Agency policy contains all components of this standard.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(l) and (j)

There have been no cases of volunteers or contractors at McFadden Ranch reported to law enforcement or relevant licensing bodies for engaging in sexual abuse of the residents. TJJD policy contains all components of the standard.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(l), 380.9503(i) and INS 75.13

There were no substantiated cases, either administrative or criminal, regarding resident on resident sexual abuse in the past 12 months at McFadden Ranch.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.933(m)

TJJD has policy that addresses this standard. McFadden Ranch has not had any reports of prior sexual victimization or previously perpetrated sexual abuse in the past 12 months.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(m)

There were no cases of sexual assault requiring medical attention at McFadden Ranch 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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(m)

TJJD policy addresses the components of this standard. There are no female residents at this facility, and no allegations of sexual abuse were made in the past 12 months.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(n)

TJJD policy addresses the requirements of this standard. McFadden Ranch had no administrative or criminal investigations requiring a Sexual Assault Review Board (SARB) to be conducted.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(o)

TJJD collects uniform data on all allegations of sexual abuse using a standardized instrument. This allows the agency to submit the annual DOJ Survey of Sexual Violence. This was confirmed through an interview with the agency PREA Coordinator.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(p) (1)

TJJD policy mandates the review of aggregate sexual abuse data to assess and improve the effectiveness of the agencies policies, practices and training. Documentation provided verified the agency's preparation and review of the data with corrective action plans. The annual report is posted on the agency website.

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 comments, including corrective actions needed if does not meet standard

Policy Reviewed: 380.9337(o) and (p)

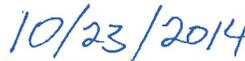
TJJD policy ensures that all sexual abuse data is retained securely. This policy was verified through an interview with the agency PREA Coordinator.

AUDITOR CERTIFICATION:

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



Auditor Signature



Date