
GARZA COUNTY REGIONAL JUVENILE CENTER

Policy Number: 03-041
Effective Date: January 05, 2023
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Supersedes: October 07, 2022

SUBJECT: PREA-Sexual Abuse Prevention, Detection, and Reporting

REFERENCE: Texas Juvenile Justice Department GAP 93.37
Prison Rape Elimination Act (PREA)
PREA Standards
TJJJ General Administrative Policy Standards
ACA [4-JCF-1C-07-1, 4-JCF-3D-08, 4-JCF-3D-09, 4-JCF-3D-02, 4-JCF-3D-06-4, 4-JCF-3D-07, 4-JCF-3E-01, 4-JCF-4C-50]

POLICY:

Cornerstone Programs has zero tolerance in accordance with the Prison Rape Elimination Act (PREA) towards all forms of sexual abuse and sexual harassment of residents by staff, interns, contractors, service providers, or other residents. Any person(s) who witnesses or learns of an incident of sexual abuse or sexual harassment, through an oral or written statement is obligated to report the alleged incident to his/her supervisor, the respective placing agency in facility jurisdiction, and local law enforcement.

DEFINITIONS:

- A. The definitions of prohibited behaviors regarding sexual abuse and sexual harassment include, but are not limited to, the following:
1. **Sexual Abuse** - Includes sexual abuse of a youth by another youth or sexual abuse of a youth by a staff member, contractor, or volunteer.
 2. **Sexual abuse of a youth by another youth** – includes any of the following acts, if the victim does not consent, is coerced into such an act by overt or implied threats of violence or is unable to consent or refuse.
 - a. contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
 - b. contact between the mouth and the penis, vulva, or anus;
 - c. penetration of the anal or genital opening of another person, however slight, by a finger, object, or other instrument; and
 - d. any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation

3. **Sexual abuse of a youth by a staff member, contractor or volunteer** - includes any of the following acts, with or without consent of the youth:
 - a. contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
 - b. contact between the mouth and the penis, vulva, or anus;
 - c. contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
 - d. penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
 - e. any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
 - f. any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)-(5) of this section;
 - g. any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of a youth; and
 - h. voyeurism by a staff member, contractor, or volunteer.
4. **Voyeurism** – an invasion of privacy of a youth by staff for reasons unrelated to official duties, such as peering at a youth who is using a toilet in his or her cell to perform bodily functions; requiring a youth to expose his or her buttocks, genitals, or breasts; or taking images of all or part of a youth’s naked body or of a youth performing bodily functions.
5. **Indecent Exposure** - Any display by a staff member, contractor, or volunteer of his or her genitalia, buttocks, or breast in the presence of a youth.
6. **Sexual Harassment** – Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one youth directed toward another. This also includes repeated verbal comments or gestures of a sexual nature to a youth by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

PROCEDURE:

A. Detection and Prevention of sexual abuse sexual harassment and retaliation:

1. Cornerstone Programs will take steps to prevent and detect incidents of sexual abuse and sexual harassment in accordance with the Prison Rape Elimination (PREA).

2. All forms of sexual contact, abuse, and/or harassment or prohibited in the Cornerstone Programs regardless of consent by the participating parties. Juveniles will not be subjected to sexual abuse or harassment.
3. To ensure compliance with the PREA standards Cornerstone Programs will designate an upper level, company wide PREA coordinator. Cornerstone Programs will ensure that this designee will have sufficient time and authority to develop, implement, and oversee company efforts to comply with the PREA standards.
4. Cornerstone Programs will designate a PREA compliance manager/coordinator at each of its facilities it operates with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. The PREA compliance manager/coordinator for GCRJC is Michael Breedlove, Facility Director.
5. All Cornerstone Programs staff (current and new employees) will be trained on the PREA requirements during new employee orientation and through training in conjunction with annual re-certification. Contract personnel will be trained on PREA requirements prior to rendering services to youth and will be required to complete training on PREA requirements annually, on or before contract renewal.
6. At the time of hire, all staff are required to complete and submit the "Disclosure of PREA Employment Standard Violation" form to demonstrate compliance with the requirement to disclose any type of sexual misconduct. Contract personnel are required to submit the disclosure form at the time their contract for services is executed. Any declaration of sexual misconduct will render the staff or contractor ineligible for hire.

To demonstrate a continuing affirmative duty to disclose any type of sexual misconduct, employees are required to re-submit the disclosure form at the time of their annual performance evaluation. All contract service providers are required to submit the disclosure form at the time of their contract renewal. Any declaration of sexual misconduct will render the staff or contractor ineligible for hire.

"Disclosure of PREA Employment Standard Violation" will be retained in the respective staff personnel or contract provider file.

7. The Cornerstone Program's facilities will designate upper level facility management staff to conduct and document unannounced weekly supervisory rounds during non-traditional work hours to identify and deter staff from sexual abuse and sexual harassment. Unannounced rounds on the overnight shift (10 p.m.-6 a.m.) will occur monthly and the PREA Coordinator will ensure that during each quarter, all hours of the overnight shift have been visited. For instance, the hours from 12 a.m.-4 a.m. are monitored during unannounced rounds, in addition to the beginning and ending hours of the shift.
8. The documentation of the unannounced rounds completed by the management designee will detail:
 - a. the date;
 - b. time

- c. entry point into the facility;
 - d. points visited;
 - e. exit point; and
 - f. a description of what was observed during the round.
9. During the management designee's unannounced weekly rounds, staff is prohibited from alerting other staff members that these supervisory rounds are occurring. Failure to comply with this directive will lead to disciplinary action.
10. Once per month the PREA Manager will collect the documentation of the unannounced rounds to ensure rounds are conducted on every shift, rounds are being appropriately documented, and every area of the facility is being visited.
11. At a minimum of once per month, random facility evaluation rounds will be conducted by the PREA manager to assess the facility's vulnerable areas and practices to include:
 - a. a random review of video footage from the facility's video monitoring system (if applicable to the facility);
 - b. surveying a sample of residents in the facility to assess their feelings of safety regarding sexual abuse and sexual harassment; and
 - c. interviewing a sample of residents and Youth Workers to assess their confidence in current prevention and detection practices.
12. The evaluation rounds will be documented in the PREA Manager's logbook located in Central Control.
13. The Cornerstone Programs will take all necessary steps to ensure that residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations will be free from staff and resident retaliation.
14. Any staff member or resident who through an administrative investigation are found to have engaged in retaliation will be subject to disciplinary action.
15. Residents who report alleged incidents of sexual abuse or sexual harassment by another resident or residents who cooperate with a sexual abuse or sexual harassment investigation will be assigned to a housing unit that ensures that they are not in contact with and free from retaliation by an alleged resident perpetrator.
16. If a resident victim, resident reporter, or resident cooperator in a sexual abuse investigation change in housing assignment does not meet the desired need of separation or they are in fear of retaliation, they can be placed on protective programming until they no longer fear retaliation.
17. Any employee accused of sexual abuse will be placed on paid administrative leave or re-assigned to a non-direct care position that prevents contact with the alleged victim, whistleblower, and/or witnesses until the conclusion of the investigation

18. Any staff member(s) being investigated as an alleged perpetrator of sexual abuse or sexual harassment by a resident where the subsequent investigation results are unfounded or inconclusive, will not be assigned to the same housing unit where the resident(s) who made the allegation or cooperated as a witness in the investigation are housed in order to prevent possible retaliation.
19. For ninety (90) days following a report of sexual abuse or sexual harassment and periodically (every 30 days) throughout a resident's confinement, the Facility Administrator, Assistant Facility Administrator, or Shift Supervisors will monitor the conduct and treatment of residents who were the alleged victim of sexual abuse and/or sexual harassment as well as residents and/or staff who reported the sexual abuse and/or sexual harassment or cooperated with the investigation for possible retaliation by other residents and/or staff members.
20. The subsequent periodic monitoring of the conduct and treatment of residents and staff will be documented by completing the Retaliation Section on the PREA Checklist form.
21. The Program Manager and Director of Operations will monitor items such as resident disciplinary reports, housing assignments, program changes, negative performance reviews, and/or staff reassignments and act promptly to remedy any situation that is or can be perceived as possible retaliation.
22. Cornerstone Program's obligation to periodically monitor the conduct and treatment of residents who were the alleged victim of sexual abuse or sexual harassment or residents or staff who reported the allegation or cooperated with the investigation will terminate if the agency determines the allegation is unfounded.
23. Cornerstone Programs will conduct a sexual abuse incident review of every sexual abuse allegation, including where the allegation has not been substantiated, unless the allegation has been determined unfounded. Such reviews will ordinarily occur within 30 days of the conclusion of the investigation.
24. Victims of sexual assault are referred, under appropriate security provisions, to a community facility for treatment and gathering of evidence. If these procedures are performed in-house, the following guidelines are used:
 - a. A history is taken by a qualified health-care professional who conducts an assessment to document the extent of physical injury and to determine if referral to another medical facility is indicated. With the victim's consent, the examination includes collection of evidence from the victim using a kit approved by the appropriate authority.
 - b. Provision is made for testing for sexually transmitted diseases (for example, HIV, gonorrhea, hepatitis, and other diseases) and counseling, as appropriate
 - c. Prophylactic treatment and follow-up for sexually transmitted diseases are offered to all victims, as appropriate.
 - d. Following the physical examination, a qualified health-care or mental health-care professional is available to assess the need for crisis-intervention counseling and long-term follow-up.

- e. Following the physical examination, a qualified health-care or mental health-care professional is available to evaluate the need for crisis- intervention counseling, and long-term follow-up.
- f. A report is made to the facility or program administrator or designee to assure separation of the victim from his or her assailant(s).

B. Reporting of sexual abuse, sexual harassment and retaliation:

1. Incoming residents will be informed verbally and in writing during orientation of their right to report incidents of sexual abuse, sexual harassment, and retaliation.
2. Information is provided to juveniles about sexual abuse/assault including the following. Information is communicated orally and in writing, in a language clearly understood by the juvenile, upon arrival at the facility.
 - a. Prevention/intervention
 - b. Self-protection
 - c. Reporting sexual abuse/assault
 - d. Treatment and counseling.
3. Residents wanting to report to facility administration incidents of sexual abuse, sexual harassment, retaliation by staff or residents, staff neglect or violation of responsibilities that contributed to the incident, may do so at any time through the following means:
 - a. verbally;
 - b. in writing;
 - c. anonymously ; and
 - d. through third parties.
4. Facility staff will provide writing materials for residents who wish to make a written complaint of sexual abuse or sexual harassment.
5. Staff will accept, immediately document, and report to department administration all allegations of sexual abuse, sexual harassment, retaliation for reporting sexual abuse, and staff neglect or violation of responsibilities that may have contributed to such incidents made by a resident verbally or in writing or anonymously, a staff member or a third party.

Although GCRJC does not accept residents detained solely for civil immigration purposes, the facility has provisions to will provide information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

6. Any resident of the Cornerstone Programs wishing to make an allegation of sexual abuse or sexual harassment may do so in writing by placing a written grievance or written “request to official: in the secure grievance or secure “request to official” box located in each housing area or verbally to any staff member at any time or to administration by submitting a “request to official” to speak with the Program manager or Director of Operations. A resident may report any allegations of sexual abuse or harassment by writing a grievance, the administrative grievance remedy process and procedures will be completed, to include all immediate action to protect and separate the alleged perpetrator from the alleged victim, as well as seeking SANE/SAFE medical and Child Advocacy mental health services related to sexual abuse. These written allegations will be reported and investigated through the alleged mistreatment and abuse reporting procedures in compliance with PREA standards. The disposition of a grievance alleging sexual abuse or sexual harassment will be dependent on the disposition rendered by an investigator of the TJJD OIG/AID or BOP OIG/OIA, investigating the alleged sexual abuse or sexual harassment. Any resident may submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. A grievance filed by a youth alleging sexual abuse will not be referred to the staff member who is the subject of the complaint.
7. GCRJC will issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Computation of the 90-day time period will not include time consumed by residents in preparing any administrative appeal. GCRJC may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency will notify the resident in writing of any such extension and provide a date by which a decision will be made.

At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, the resident may consider the absence of a response to be a denial at that level.
8. The Cornerstone Program’s informal grievance process will not be utilized or applied if a resident wishes to make an allegation of sexual abuse, sexual harassment, retaliation for reporting sexual abuse, and staff neglect or violation of responsibilities that may have contributed to such incidents by using the facility grievance process.
9. A resident may file an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, the grievance coordinator (Director of Operations) will 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, will provide an initial response within 48 hours, and will issue a final decision within 5 calendar days. The initial response and final decision will document the determination whether the resident is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

10. Cornerstone may discipline a resident for filing a grievance related to alleged sexual abuse only where it has been demonstrated that the resident filed the grievance in bad faith. Disciplinary action will be taken by way of the resident disciplinary plan.
11. All residents of Cornerstone Programs will have free, confidential, and unimpeded access to contact their respective state's oversight or placing agency via the telephone number listed on the posters located on each Cornerstone Programs living unit to report allegations of sexual abuse and/or sexual harassment.
12. Cornerstone Programs will not impose a time limit on when a resident may make an allegation of sexual abuse, sexual harassment, or retaliation.
13. Employees of Cornerstone Programs have the right and responsibility to report any and all knowledge, ret, or information they receive regarding an incident of sexual abuse, sexual harassment, or retaliation to company or facility administration and/or to their respective state's oversight or placing agency immediately upon gaining knowledge of the incident.
14. An allegation of sexual abuse, sexual harassment, or retaliation made by a resident will be disseminated to the residents' parent or guardian (unless the facility has official documentation showing the parents or legal guardian should not be notified), to the Department of Family and Protective Services if he/she is under their guardianship, and/or to the child's attorney or other legal representative (within 14 days) by the Facility Administration or designee.
15. Employees of Cornerstone Programs can report incidents of sexual abuse, sexual harassment, retaliation by residents or staff, staff neglect, or violations of responsibilities that contributed to an incident of sexual abuse anonymously by:
 - a. submitting an inter-office communication form (IOC) anonymously to the Program Manager or the Director of Operations;
 - b. reporting the incident via the toll-free telephone to the Texas Juvenile Justice Department; or
 - c. completing the online Texas Juvenile Justice Departments Incident Report form.
16. A completed Incident Report Form will be submitted by fax or e-mail to the Texas Juvenile Justice Department within (24) hours of the report by phone. Garza County Sheriff's Department and or the OIG will be responsible for criminal investigations related to sexual abuse/assault or sexual harassment. The TJJD Administrative Investigation Division will be responsible for conduction administrative investigations related to sexual abuse/assault or sexual harassment.
17. Any staff with knowledge of the allegation is prohibited from revealing any information related to the sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and/or other security management decisions.
18. Third parties, including fellow residents, staff members, family members, attorneys, and outside advocates are permitted to assist residents in filing and/or can file allegations of sexual abuse, sexual harassment, or retaliation by staff or residents, on their behalf.

19. A parent or legal guardian of a resident can file an allegation of sexual abuse, sexual harassment, of retaliation, including appeals on a residents' behalf and the filing of said allegation is not conditioned upon the resident's agreement to have the allegation filed on his/her behalf.
20. If a third party, other than a parent or legal guardian, files an allegation on behalf of a resident, it is required that the resident agree to the filing of the allegation and that agreement will be documented in writing and maintained in the residents file.
21. If a resident declines to have the request processed on his behalf, the refusal will be documented in writing and maintained in the residents file
22. Third parties filing allegations of sexual abuse on behalf of a resident can do so to any staff member, to local law enforcement, or to the Texas Juvenile Justice Department.
23. A parent or legal guardian of a resident or a third party who has the resident's permission may file an allegation on a resident's behalf by:
 - a. contacting any staff member of Cornerstone Programs directly, by phone, or by letter;
 - b. contacting local law enforcement; or
 - c. contacting the Texas Juvenile Justice Department.
24. Upon receiving an allegation that a resident of the Cornerstone Programs was sexually abused while confined at another facility, the Facility Administrator will:
 - a. notify the head of the facility or the appropriate office of the agency where the alleged abuse occurred within 72 hours of receipt of the allegation;
 - b. notify the Texas Juvenile Justice Department and/or the Department of Family and Protective Services as per the registration of said facility; and
 - c. document that such notification was provided and to whom it was provided to.
25. Upon receiving an allegation that a former resident of the Cornerstone Programs from a contracting county was sexually abused or sexually harassed, the allegation will be investigated and the results of that investigation will be forwarded to the appropriate party within the contracting county.
26. Juveniles who are victims of sexual abuse have the option to report the incident to a designated staff member other than an immediate point-of-contact line staff member.
27. An investigation is conducted and documented whenever a sexual assault is alleged, threatened, or occurs.

C. Employee Corrective Action and Sanctions:

1. Sexual conduct between staff and juveniles, volunteers, or contract personnel and juveniles, regardless of consensual status, is prohibited and subject to administrative and criminal disciplinary sanctions.
2. If at the conclusion of an administrative investigation, an employee, resident, intern, contractor, or volunteer is found to have been the perpetrator in an incident of sexual abuse, sexual harassment, or retaliation or their failure to act contributed to the abuse, they will be subject to corrective action or disciplinary sanctions.
3. All Cornerstone Programs employees will be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse, sexual harassment, and retaliation policies.
4. If at the conclusion of an administrative or criminal investigation, an allegation of Sexual Abuse of a resident by an employee is substantiated, that employee will be terminated.
5. If at the conclusion of an administrative or criminal investigation of sexual abuse, it is determined that an employee's actions or failures to act contributed to the abuse, that employee will be subject to disciplinary action up to and including termination
6. Employees will not be subject to disciplinary action for reporting an allegation of sexual abuse in good faith based upon a reasonable belief that the alleged conduct occurred regardless of the outcome of the investigation.
7. Disciplinary sanctions for violations of Cornerstone Programs policies and procedures relating to sexual abuse, (other than actually engaging in sexual abuse) sexual harassment, and/or retaliation will be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable incidents by other staff members with similar histories.
8. All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, will be reported to the Garza County Sheriffs Office, (unless the

activity was clearly not criminal) to the Texas Juvenile Justice Department and/or any other relevant licensing bodies.

D. Contractors, Volunteers, And Interns Corrective Action:

1. Any contractor, volunteer, or intern who engages in sexual abuse will be prohibited from contact with residents and will be reported to the Garza County Sheriff's Office (unless the activity was clearly not criminal), the university to which the attend (interns), and to all relevant licensing bodies.
2. Cornerstone Programs will take appropriate remedial measures and will consider whether to prohibit further contact with residents, in the case of a violation of the Cornerstone policies and procedures relating to sexual abuse (other than actually engaging in sexual abuse) and sexual harassment by a contractor, volunteer, and/or intern.

E. Resident Corrective Action:

1. If at the conclusion of an administrative and/or criminal investigation alleging Sexual Abuse of a resident by another resident, the allegation is substantiated or the resident is found guilty, the alleged perpetrator will be subject to internal disciplinary sanctions.
2. A resident perpetrator may be subject to internal disciplinary action only pursuant to the Cornerstone Programs formal disciplinary process.
3. The disciplinary process will consider whether a resident's mental disabilities or mental illness contributed to his/her behavior when determining what type of sanction, if any, will be imposed.
4. In the event a disciplinary sanction results in the isolation of a resident, the resident will not be denied daily large muscle exercise or access to any legally required educational programming or special education services.
5. Residents in isolation as a result of internal discipline for perpetrating resident on resident sexual abuse, will receive daily visits for a medical and/or mental health clinician.
6. The Cornerstone Programs Center may require participation in therapy, counseling, or other interventions to address and correct underlying reasons and motivations for sexual deviance.

7. Participations in these interventions may be required as a condition of access to any rewards-based behavior management system or other behavior based incentives, but not as a condition of access to general programming.
8. When possible, resident's being isolated for perpetrating resident on resident sexual abuse will have access to regular programming.
9. A resident will be disciplined for sexual contact with a staff in accordance with the facility's resident discipline plan given that the staff member did not consent to such contact.
10. A resident will be subject to corrective action in accordance with the facility's resident discipline plan for falsely reporting an incident of sexual abuse, sexual harassment, or retaliation.
11. An allegation of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred will not constitute falsely reporting an incident or lying, even if the investigation does not establish evidence sufficient to substantiate the allegation.
12. Cornerstone Programs prohibits all sexual activity between residents within its programs and will discipline violators in accordance with the resident discipline plan however, such actions do not constitute sexual abuse if neither resident was coerced.
13. GCRJC will provide residents with access to outside victim advocates for third support services related to sexual abuse, by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies. Information related to outside victim advocates is documented in the resident handbook, toll-free hotline phone numbers are posted on resident dorm bulletin boards, as well as in the resident handbook. GCRJC will enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible.

GCRJC will inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. Youth access to victim advocacy or rape crisis organizations will remain confidential, to the extent that facility safety and security is ensured. However, all allegations or sexual abuse or sexual harassment will be reported under the PREA guidelines, as well as

TAC 343.358, specifying the reporting of all ANE and PREA related allegations to law enforcement, committing agency, approved parents/guardians, OIG and AID.

14. GCRJC will maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse. GCRJC will maintain copies of agreements or documentation showing attempts to enter into such agreements.
15. The facility provides residents with reasonable and confidential access to their attorneys or other legal representation and reasonable access to parents or legal guardians.

F. Data Collection, Review, and Storage

1. Cornerstone Programs will collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions as instructed by the Cornerstone Programs PREA Coordinator.
2. Cornerstone Programs will aggregate the incident-based sexual abuse data at least annually.
3. The incident-based data collected will include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.
4. Cornerstone Programs will maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.
5. Cornerstone Programs also will obtain incident-based and aggregated data from every facility that provides confinement for the confinement of its residents.
6. Upon request, Cornerstone Programs will provide all such data from the previous calendar year to the Department of Justice no later than June 30.
7. Cornerstone Programs will review data collected and aggregated pursuant to PREA Standards § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including:
 - Identifying problem areas;
 - Taking corrective action on an ongoing basis; and
 - Preparing an annual report of its findings and corrective actions for each facility, as well as Cornerstone Programs as a whole.

8. The report will include a comparison of the current year's data and corrective actions with those from prior years and will provide an assessment of the agency's progress in addressing sexual abuse.
9. Cornerstone Programs report will be prepared by the Cornerstone Programs PREA Coordinator and approved by the Cornerstone CEO or designee and will be made readily available to the public through its website or through other means, as applicable.
10. Cornerstone Programs may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted.
11. Cornerstone Programs will ensure that data collected pursuant to PREA Standards §115.387 are securely retained.
12. Cornerstone Programs will make all aggregated sexual abuse data from facilities under its direct control readily available to the public at least annually through its website or through other means, as applicable.
13. Before making aggregated sexual abuse data publicly available, Cornerstone Programs will remove all personal identifiers.
14. Cornerstone Programs will maintain sexual abuse data collected pursuant to PREA Standards § 115.387 for at least ten (10) years after the date of its initial collection unless Federal, State, or local law requires otherwise. Refer to CPS Records Disposition Authority (RDA) 2993 regarding closed CPS Case Files that includes documentation of administrative investigations and activities.
15. All case records associated with claims of sexual abuse, including incident reports, investigative reports, juvenile information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are retained in accordance with an established schedule.

<115.316> Residents with disabilities and residents who are limited English proficient.

(a) Cornerstone Programs will take appropriate steps to ensure that residents with disabilities (including, for example, residents who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps will include, when necessary to ensure effective communication with residents who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, Cornerstone Programs will ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities, including residents who have intellectual disabilities, limited reading skills, or who are blind or have low vision. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164.

(b) Cornerstone Programs will take reasonable steps to ensure meaningful access to all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

(c) Cornerstone Programs will not rely on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under § 115.364, or the investigation of the resident's allegations.

115.321 Evidence protocol and forensic medical examinations.

(a) To the extent Cornerstone Programs is responsible for investigating allegations of sexual abuse; the agency will follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The Garza County Sheriff's Office will be responsible for conducting criminal investigations regarding sexual abuse allegations, as well as sexual harassment allegations. Garza County Sheriff's Office will collect all evidence related to the criminal investigation related to sexual abuse.

(b) The protocol will be developmentally appropriate for youth and, as appropriate, will be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011. 15

(c) Cornerstone Programs will offer all residents who experience sexual abuse access to forensic medical examinations whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate. Medical examinations will be conducted as immediately as possible after an incident of sexual abuse/assault.

Such examinations will be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The facility will document its efforts to provide SAFEs or SANEs. Garza County Sheriff's Office, as part of their MOU will take custody of youth victims of sexual abuse and will transport said youths to the University Medical Center for the purposes of examination by a qualified SANE or SAFE.

(d) Cornerstone Programs will attempt to make available to the victim a qualified victim advocate and licensed mental health professional from a rape crisis center, as soon after a medical examination has been completed, but within 24 hours of the incident. If a rape crisis center is not available to provide victim advocate services, the facility will make available to provide these services a qualified staff member from a community-based organization or a qualified facility staff member. Agencies will document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. Cornerstone Programs may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services. Garza County Sherriff's Office will transport youth victims of sexual abuse to the Lubbock Rape Crisis Center at UMC for mental health services.

(e) As requested by the victim, the victim advocate, qualified facility staff member, or qualified community-based organization staff member will accompany and support the victim through the forensic medical examination process and investigatory interviews and will provide emotional support, crisis intervention, information, and referrals.

(f) To the extent Cornerstone Programs itself is not responsible for investigating allegations of sexual abuse, the facility will request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section.

(g) The requirements of paragraphs (a) through (f) of this section will also apply to:

(1) Any State entity outside of Cornerstone Programs that is responsible for investigating allegations of sexual abuse in juvenile facilities; and

(2) Any Department of Justice component that is responsible for investigating allegations of sexual abuse in juvenile facilities.

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

<115.333> Resident education.

(a) During the intake process, residents will receive information explaining, in an age appropriate fashion, Cornerstone Program's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

(b) Within 10 days of intake, Cornerstone Programs will provide comprehensive age-appropriate education to residents either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding the facility's policies and procedures for responding to such incidents.

The comprehensive resident education program will include the subject of sexual abuse/assault, including recognizing inappropriate behavior, harassing, or assaultive; how to seek protection from sexual abuse/assault, right to privacy when making a report. The resident education program also encompasses the method of a resident can confidentially report sensitive issues to facility staff, BOP, the OIG and local law enforcement. Residents are also educated on their right to medical and mental health programs for victims of sexual abuse.

(c) Current residents who have not received such education will be educated within one year of the effective date of the PREA standards, and will receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility.

(d) Cornerstone Programs will provide resident education in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to residents who have limited reading skills.

(e) Cornerstone Programs will maintain documentation of resident participation in these education sessions.

(f) In addition to providing such education, Cornerstone Programs will ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats.

<115.335> Specialized training: Medical and mental health care.

(a) Cornerstone Programs will ensure that all full-and part-time medical and mental health care practitioners who work regularly in its facility have been trained in:

- (1) How to detect and assess signs of sexual abuse and sexual harassment;
- (2) How to preserve physical evidence of sexual abuse;
- (3) How to respond effectively and professionally to juvenile victims of sexual abuse and sexual harassment; and
- (4) How and to whom to report allegation or suspicions of sexual abuse and sexual harassment.

(b) If medical staff employed by the facility conduct forensic examination, such medical staff will receive the appropriate training to conduct such examinations.

(c) Medical and mental health care practitioners will also receive the training mandated for employees under <115.331> or for contractors and volunteers under

<115.332>, depending on the practitioner's status at the facility.

<115.353> Resident access to outside support services and legal representation.

- (a) Cornerstone Programs will provide residents with access to outside victim advocates for emotional support services related to sexual abuse, by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant service agencies. The facility will enable reasonable communication between residents and these organizations and agencies, in as confidential manner as possible.
- (b) The facility will inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.
- (c) The facility will maintain or attempt to enter into memoranda of understanding or other agreement with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse. The agency will maintain copies of agreement or documentation showing attempts to enter into such agreements.
- (d) The facility will also provide residents with reasonable and confidential access to their attorneys or other legal representation and reasonable access to parents or legal guardians.

<115.362> Agency protection duties.

When CORNERSTONE PROGRAMS learns that a resident is subject to a substantial

risk of imminent sexual abuse, it will take immediate action to protect the resident.

<115.364> Staff first responder duties

Upon learning of an allegation that a resident was sexually abused, the first staff member to respond to the report will be required to:

- (1) Separate the alleged victim and abuser;
 - (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;
 - (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and
 - (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- (b) If the first staff responder is not a security staff member, the responder will be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.

Garza County Sheriff's Office is the organization responsible for collecting evidence related to any criminal investigation or sexual assault allegation.

<115.365> Coordinated Response

Facility Administration will follow the reporting requirements indicated in this policy and in adherence with TAC.350 and TAC 358, as outlined in Cornerstone Policy 03-022 Abuse, Neglect and Exploitation to include the immediate notification of Garza County Sheriff's Office, the TJJD, BOP RRM, youth's placing agency and legal guardian/parent for all sexual misconduct allegations.

Additionally, immediate action will be taken to protect the alleged victim of sexual abuse, to include separating the alleged perpetrator and alleged victim as immediately as possible. This includes re-assignment or suspension (paid or unpaid) of a staff member alleged to have committed sexual abuse or sexual assault against a youth.

Facility Administration will coordinate with Garza County Sheriff's Office to allow law enforcement to collect any evidence, including all forensic evidence related to a possible sexual assault. Garza County Sheriff's Office will take custody of a youth suspected of being sexually assaulted for transport to University Medical Center in Lubbock, Texas for a SAFE or SANE exam. Garza County Sheriff's Office will also transport that alleged victim to a child advocate at the Lubbock Rape Crisis Unit for mental health purposes.

Facility medical staff will administer medical services only when it is determined necessary, to allow for preservation of all forensic evidence for the collection of DNA by the Garza County Sheriff's Office and the SANE/SAFE. Facility medical staff will coordinate with law enforcement and UMC for medical services of the youth.

<115.366> Preservation of ability to protect residents from contact with abusers

GCRJC is not part of a collective bargaining agreement or other agreement that limits the 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.

<115.368> Post-allegation protective custody

Any use of segregated housing to protect a resident who is alleged to have suffered sexual abuse will be subject to the requirements of §115.342.

<115.371> Criminal and administrative agency investigations

(a) Garza County Sheriff's Office and/or TJJJ OIG conducts investigations into allegations of sexual abuse and sexual harassment, it will do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

(b) Where sexual abuse is alleged, the GCSO will use investigators who have received special training in sexual abuse investigations involving juvenile victims pursuant to §115.334.

(c) Investigators will gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; will interview alleged victims, suspected perpetrators, and witnesses; and will review prior complaints and reports of sexual abuse involving the suspected perpetrator.

(d) GCSO will not terminate an investigation solely because the source of the allegation recants the allegation.

(e) When the quality of evidence appears to support criminal prosecution, the agency will conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

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

(g) TJJJ AID conducts Administrative investigations:

(1) Will include an effort to determine whether staff actions or failures to act contributed to the abuse; and

(2) Will be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

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

(i) Substantiated allegations of conduct that appears to be criminal will be referred for prosecution.

(j) GCRJC will retain all written reports referenced in paragraphs (g) and (h) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years, unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention.

(k) The departure of the alleged abuser or victim from the employment or control of the facility will not provide a basis for terminating an investigation.

(l) Any State entity or Department of Justice component that conducts such investigations will do so pursuant to the above requirements.

(m) The facility will cooperate fully with investigations of sexual abuse and sexual harassment conducted by TJJJ OIG/AID and BOP OIG/OIA.

(n) The facility will request all relevant information from TJJJ OIG/AID and BOP OIG/OIA investigators to inform residents of the outcomes of investigations of sexual abuse and sexual harassment.

(o) At the conclusion of investigations of sexual abuse and sexual harassment, the facility is responsible to inform residents on the disposition of investigations of sexual abuse and sexual harassment. Specifically, the facility will notify residents, parents/guardians, Chief Probation Officers from the resident's home county and the alleged perpetrator on whether an allegation is substantiated, unsubstantiated or unfounded. The facility will do so in writing, keeping copies of the letters of notification on file.

<115.381> Medical and mental health screenings; history of sexual abuse.

- (a) If the screening pursuant to <115.334> indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff will ensure that resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.
- (b) If the screening pursuant to <115.341> indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff will ensure that the resident is offered a follow-up meeting with a mental health professional within 14 days of the intake screening.
- (c) Any information related to the sexual victimization or abusiveness that occurred in an institutional setting will be strictly limited to medical and mental health practitioner and other staff, as necessary, to inform treatment plans and security and management decision, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.
- (d) Medical and mental health practitioners will obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18.

<115.382> Access to emergency medical and mental health services.

- (a) Resident victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.
- (b) If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, staff first responders will take preliminary steps to protect the victim pursuant to <115.362> and will immediately notify the appropriate medical and mental health practitioners.
- (c) Resident victims of sexual abuse while incarcerated will be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.
- (d) Treatment services will be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

<115.383> Ongoing medical and mental health care for sexual abuse victims and abusers.

- (a) Cornerstone Programs will offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.
- (b) The evaluation and treatment of such victims will include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.

- (c) The facility will provide such victims with medical and mental health services consistent with the community level of care.
- (d) Resident victims of sexually abusive vaginal penetration while incarcerated will be offered pregnancy tests.
- (e) If pregnancy results from conduct specified in paragraph (d) of this section, such victims will receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.
- (f) Resident victims of sexual abuse while incarcerated will be offered test for sexually transmitted infections as medically appropriate.
- (g) Treatment services will be provided to the victim without financial cost and regardless of whether the victim names the abuse or cooperates with any investigation arising out of the incident.
- (h) The facility will attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

§ 115.386 Sexual abuse incident reviews

- (a) The facility will conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.
- (b) Such review will ordinarily occur within 30 days of the conclusion of the investigation.
- (c) The review team will include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

(d) The review team will:

(1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;

(2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or, gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;

(3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;

(4) Assess the adequacy of staffing levels in that area during different shifts;

(5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and

(6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.

(e) The facility will implement the recommendations for improvement or will document its reasons for not doing so.

Approved:  Facility Director

Date: 1/05/23