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# PREA ANNUAL REPORT

2017

*This report was conducted in accordance with PREA Rape Elimination Act (PREA) Standard 115.288 Data review for corrective action.*

# TABLE OF CONTENTS

## Contents

PREA Standard §115.388_____	1
Key Terms and Definitions _____	1
2015-2017 Comparison of PREA Allegations_____	1
Comparative Analysis_____	2
2017 Corrective Actions _____	3
2016 Corrective Actions_____	3
2015 Corrective Actions_____	4

# PREA 2017 ANNUAL REPORT

## PREA Standard §115.388

The Prison Rape Elimination Act (PREA) was established to address sexual abuse and sexual harassment of persons confined to correctional facilities. Standard §115.388, Data Review for Correction Action of PREA, requires that all public and private institutions that house adult or juvenile offenders review data collected and aggregated on an annual basis in order to assess and enhance 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 the agency as a whole.

The Brazos Valley Council on Alcohol and Substance Abuse (BVCASA) is a TDCJ-funded Transitional Treatment Center (TTC). In 2015, BVCASA's funded capacity was 130 beds (either men or women, separated by floor). On May 18, 2016, BVCASA's funded capacity increased to 25 men and 158 women, with the men in a different building on the same campus.

## Key Terms and Definitions

**NONCONSENSUAL SEXUAL ACTS** – Unwanted contact with another inmate or any contact with staff that involve contact with the penis and the vagina or anus; contact between the mouth and the penis, vagina, or anus; penetration of the anal or vaginal opening of another person by a hand, finger, or other object; and rubbing of another person's penis or vagina by a hand.

**ABUSIVE SEXUAL CONTACT** – Unwanted contact with another inmate or any contact with staff that involved touching of the inmate's buttocks, thighs, penis, breasts, or vagina in a sexual way.

**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 inmate directed toward another.

**STAFF SEXUAL MISCONDUCT** – All incidents of willing and unwilling sexual contact with facility staff, and all incidents of sexual activity that involved oral, anal or vaginal penetration.

**STAFF SEXUAL HARASSMENT** – Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident 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.

## 2015-2017 Comparison of PREA Allegations

This report includes a comparison of calendar years 2015, 2016, and 2017 data on sexual abuse and sexual harassment allegations and provides an assessment of BVCASA's progress in preventing sexual abuse and sexual harassment of its residents. This review included a review of data from all available incident reports, grievances, investigation files, and sexual abuse incident reviews.

# PREA 2017 ANNUAL REPORT

REPORTING CRITERIA	2015	2016	2017
Number of <i>males</i> confined on December 31 <sup>st</sup>	29	21	28
Number of <i>males</i> admitted during the target year	172	125	136
Number of <i>females</i> confined on December 31 <sup>st</sup>	113	154	145
Number of <i>females</i> admitted during the target year	479	633	800
Number of <i>alleged</i> resident-on-resident NONCONSENSUAL SEXUAL ACTS	0	0	0
Number of <i>substantiated</i> resident-on-resident NONCONSENSUAL SEXUAL ACTS	0	0	0
Number of <i>alleged</i> resident-on-resident ABUSIVE SEXUAL CONTACT	0	0	0
Number of <i>substantiated</i> resident-on-resident ABUSIVE SEXUAL CONTACT	0	0	0
Number of <i>alleged</i> resident-on-resident SEXUAL HARASSMENT	0	0	0
Number of <i>substantiated</i> resident-on-resident SEXUAL HARASSMENT	0	0	0
Number of <i>alleged</i> staff-on-resident STAFF SEXUAL MISCONDUCT	0	0	1
Number of <i>substantiated</i> staff-on-resident STAFF SEXUAL MISCONDUCT	0	0	1
Number of <i>alleged</i> staff-on-resident STAFF SEXUAL HARASSMENT	0	0	1
Number of <i>substantiated</i> staff-on-resident STAFF SEXUAL HARASSMENT	0	0	0

## Comparative Analysis

BVCASA saw an increase in two of the categories of reported PREA allegations from 2016 to 2017. BVCASA will continue its efforts in ensuring that residents, staff, volunteers, and contractors are educated in the agency's Zero Tolerance policy, as well as the several methods of reporting allegations. BVCASA is committed to ensuring continued compliance with PREA Standards as well as the health and safety of the residents in our care. A comparative analysis of 2015, 2016, and 2017 data indicates the following:

- There was ***no change*** in the number of reported allegations of non-consensual resident-on-resident sexual acts. Both in 2015 and 2016, there were zero reported allegations.
- There was ***no change*** in the number of reported allegations of resident-on-resident abusive sexual contact. Both in 2015 and 2016, there were zero reported allegations.
- There was ***no change*** in the number of reported allegations of resident-on-resident sexual harassment. Both in 2015 and 2016, there were zero reported allegations.
- There was ***an increase by 1*** in the number of reported allegations of staff-on-resident sexual misconduct. Both in 2015 and 2016, there were zero reported allegations, but 2017 did have one reported allegation that was substantiated.

# PREA 2017 ANNUAL REPORT

- There was ***an increase by 1*** in the number of reported allegations of staff-on-resident sexual harassment. Both in 2015 and 2016, there were zero reported allegations, but 2017 did have one reported allegation that was substantiated.

## 2017 Corrective Actions

- BVCASA replaced its camera system in the Horizon building, and almost doubled the number of cameras in the facility. In 2016, there were 16 cameras in the facility. In 2017, all old cameras were removed and replaced by 31 high-quality cameras, as well as new cabling, in order to increase coverage and video quality.
- BVCASA added a statement to its PREA Policies/Procedures that staff are not to enter a client's room without another staff member present and/or a documented need to enter the room. All staff were trained on this procedure.
- Procedures were implemented for Shift Leaders from other areas of the facility and Direct Care Supervisors to conduct random walkthroughs of the male facility to prevent staff from feeling isolated, and to diminish the appearance of the Shift Leader coming across as "invincible" or "untouchable."
- Training was conducted on staff's "duty to report" as outlined in BVCASA Procedure 116.D.
- Mirrors were added to the facility at hallway intersections to improve visibility down hallways.

## 2016 Corrective Actions

Although there were no allegations of sexual abuse or sexual harassment in either 2015 or 2016, BVCASA took new preventative steps in 2016 toward ensuring improved safety measures for its residents. In 2016, BVCASA implemented the following actions:

- Licensed and prepared a separate building on the same campus for its male residents in order to separate female and male residents by building, rather than by floor. This move took place May 18, 2016.
- Designed and implemented a video monitoring system in the new building to ensure all hallways and the day/group room are fully covered, with no blind spots.
- Invested in high quality HD cameras, cabling, and software, as well as a dedicated server to ensure quality video monitoring and recordings.
- Implemented a podium system on the women's residential floors to ensure each hallway is continually monitored by security staff throughout the day.
- Began planning for upgrades to the camera system in the Horizon (women's) building.
- Developed and implemented a new client grievance system, with improved processes for reporting, tracking, processing/investigating, and documenting grievances. Grievances

# PREA 2017 ANNUAL REPORT

are now handled in a more secure manner by limiting staff access to grievances, and they are processed and investigated more quickly.

- Brought in the Sexual Assault Resource Center (SARC) to train staff on sexual assault and sexual harassment.

## 2015 Corrective Actions

- Hired a File Clerk to be housed in the basement located across from the elevator, mid-way on the main hall with viewing distance to the other hallway. The File Clerk's door was made into a half door so that the hallway can be viewed at all times.
- A door alarm was added to the door that is outside of the camera view to alert the File Clerk if someone enters the basement through that door way.
- The doors on all unused rooms were boarded and/or nailed shut. Any corners on the floors where residents could possibly hide, such as in the day room, were boarded off.
- Procedures were implemented to ensure that security staff escort clients throughout the building, such as to and from the laundry room in the basement, rather than residents in a structure position.
- Implemented the use of Facility Passes to be used by residents to help staff monitor their movement throughout the facility. Residents moving throughout the facility without a pass would alert a staff member to question their whereabouts.

# PREA 2017 ANNUAL REPORT

## APPROVED BY:

Signature of Agency Head: \_\_\_\_\_

Name/Title of Agency Head: Crystal Crowell, Executive Director

Date Annual Report Approved: \_\_\_\_\_