

**PREA AUDIT REPORT**     Interim     Final  
**ADULT PRISONS & JAILS**

**Date of report:** December 30, 2017

<b>Auditor Information</b>			
<b>Auditor name:</b> David Haasenritter			
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<b>Telephone number:</b> 540 903 6457			
<b>Date of facility visit:</b> June 14-16, 2017			
<b>Facility Information</b>			
<b>Facility name:</b> Green River Correctional Complex			
<b>Facility physical address:</b> 1200 River Road, Central City, KY 42330			
<b>Facility mailing address:</b> (if different from above) PO Box 9300, Central City, KY 42330			
<b>Facility telephone number:</b> 270 754-5415			
<b>The facility is:</b>	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
<b>Facility type:</b>	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
<b>Name of facility's Chief Executive Officer:</b> DeEdra Hart			
<b>Number of staff assigned to the facility in the last 12 months:</b> 228			
<b>Designed facility capacity:</b> 947			
<b>Current population of facility:</b> 965			
<b>Facility security levels/inmate custody levels:</b> Medium Security/All Custody Levels			
<b>Age range of the population:</b> 19-74			
<b>Name of PREA Compliance Manager:</b> Debra Banks		<b>Title:</b> PREA Compliance Manager	
<b>Email address:</b> debra.banks@ky.gov		<b>Telephone number:</b> 270 754-5415 ext 405	
<b>Agency Information</b>			
<b>Name of agency:</b> Kentucky Department of Corrections			
<b>Governing authority or parent agency:</b> (if applicable) Justice and Public Safety Cabinet			
<b>Physical address:</b> 275 East Main - Health Services Building			
<b>Mailing address:</b> (if different from above) P.O. Box 2400 Frankfort, Ky 40602			
<b>Telephone number:</b> 502 564-2200			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> Rodney Ballard		<b>Title:</b> Commissioner	
<b>Email address:</b> rodney.ballard@ky.gov		<b>Telephone number:</b> (502) 564-4726	
<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> Charles A. Wilkerson		<b>Title:</b> Ky. DOC PREA Coordinator	
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## AUDIT FINDINGS

### NARRATIVE

The PREA audit of the Green River Correctional Complex was conducted on June 14 - 16, 2017 by Mr. David Haasenritter. The announcement of the audit was posted in April 23, 2017. Approximately four weeks prior to the audit, the auditor received the Pre-Audit Questionnaire and additional documents through a thumb drive. Documents included examples from the past 18 months. Prior to the audit the facility provided a roster of all inmates housed at the facility; lists of inmates for specific categories to be interviewed; and a list of all staff by duty position and shifts that were used to identify inmates and staff to be interviewed (random and specialized category).

The auditor contacted Just Detention International (JDI) about any information previously submitted by inmates and inmate families at the Green River Correctional Complex and information about local Rape Crisis Centers. The auditor reviewed the Kentucky Department of Corrections website prior to the audit and conducted the interview of the agency head designee. The website includes a PREA link with Kentucky Department of Corrections PREA policy; facility PREA audit reports; and previous annual PREA Reports.

Following the entrance meeting with staff, the auditor toured the facility on June 14, 2017 and went back to certain areas in the institution on June 15 - 16, 2017. While touring, random inmates and staff were informally interviewed (not counted in interview count) and questioned about their knowledge of PREA standards, procedures for reporting, services available and their responsibilities. All staff and inmates informally interviewed during the tour acknowledged receiving training and procedures for reporting sexual abuse, sexual harassment and/or retaliation for reporting. During the tour, the auditor reviewed staffing logs; physical plant; sight lines; camera coverage; tested the inmate phone system for reporting allegations and for emotional support services; and institution operations.

Following the tour, the auditor began the formal interviews, review of investigations, checking of cameras, and random checks of personnel, medical, and training records. Some of the review of staff and inmate records were scanned for review after the on-site audit. The auditor conducted 40 staff interviews (14 random, 26 specialized). Additionally, the Kentucky Department of Corrections PREA Coordinator and Agency head representative was interviewed prior to the audit. Staff interviewed was well versed in their responsibilities in reporting sexual abuse, sexual harassment, and staff negligence; first responder duties; medical staff procedures; investigations; evidence preservation; conducting unannounced rounds; and incident review team procedures.

A total of 37 inmates were formally interviewed: 37 random interviews and 11 specialized interviews (LGBTI (4), who disclosed sexual victimization during screening (3), reported sexual assault (2); and hearing disability (2). Additionally, one inmate refused their interview. Majority of the inmates interviewed acknowledged receiving PREA training and written materials (posters, pamphlets, and inmate's handbooks) outlining the agencies zero tolerance policies towards sexual abuse; knew the reporting procedures; reported staff of the opposite gender announced when entering a housing area; and knowledge of outside confidential support services. All inmates interviewed when asked stated they felt safe at the institution. The auditors found the inmates very aware of PREA.

The auditor reviewed 11 of the 17 PREA allegations. Of the allegations reviewed two (2) were inmate-inmate allegations; three (3) were inmate-inmate consensual sexual misconduct; and six (6) were staff-inmate allegations. Of the two (2) inmate-inmate allegations reviewed: one (1) inmate-inmate sexual harassment unfounded; and one (1) inmate-inmate sexual abuse substantiated. Of the six (6) staff-inmate allegations reviewed: one (1) staff-inmate sexual harassment substantiated; one (1) staff-inmate sexual harassment unfounded; one (1) staff-inmate sexual abuses substantiated; and three (3) staff-inmate sexual abuse unfounded.

Kentucky Department of Corrections PREA Coordinator Charles A. Wilkerson was present during the audit and was very helpful during all phases of the audit. When the on-site audit was completed, the auditor conducted an exit meeting. While the auditor could not give the institution a final finding, the auditor did provide a preliminary status of his findings.

During the interim report writing and corrective action period, the auditor reviewed additional documents, modified forms, and conducted staff interviews.

## **DESCRIPTION OF FACILITY CHARACTERISTICS**

Green River Correctional Complex is a 982-bed medium/minimum security adult male facility located in Central City, Kentucky. Inmate population on June 14, 2017 was 965. The facility is designed as a direct supervision model and 444 double-bunked general population cells, 50 bed open dorm-style general population housing unit, and 44 single bunked maximum security segregation unit. The facility has a gym, canteen, and on-site medical department. Visiting opportunities include both contact and no-contact visits. Cameras are located throughout the facility.

Mission of Green River Correctional Complex is to protect the citizens of the Commonwealth and to provide a safe, secure and humane environment for staff and offenders in carrying out the mandates of the legislative and judicial processes; and, to provide opportunities for offenders to acquire skills which facilitate noncriminal behavior.

## **SUMMARY OF AUDIT FINDINGS**

On June 14 - 16, 2017, the on-site visit was completed. During the interim report writing period, two (2) standards (115.15 and 115.41) were identified as requiring corrective action during the interim report. On November 13, 2017, the Green River Correctional Complex was found in full compliance:

Number of standards exceeded: 3

Number of standards met: 39

Number of standards not met: 0

Number of standards not applicable: 1

**Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections has written policies mandating zero tolerance towards all forms of sexual abuse and sexual harassment that outlines the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The main PREA policies are Kentucky Department of Corrections Policy 14.7, Sexual Abuse Behavior Prevention and Intervention Program; and Kentucky Department of Corrections Policy 3.22 Staff Sexual Offenses. Other agency policies supplement these main PREA policies. Kentucky Department of Corrections Policy 14.7 is posted in the PREA section of the Kentucky Department of Corrections website.

Kentucky Department of Corrections employs an upper-level, agency-wide facility PREA Coordinator. Kentucky Department of Corrections PREA Coordinator Charles A. Wilkerson has sufficient time and authority to develop and oversee compliance. The Kentucky Department of Corrections organization chart demonstrates the PREA Coordinator is in a position of authority. He works closely with all of the facilities to coordinate changes, provide updates, and ensuring the proper practices and procedures are followed.

Mr. Debra Banks is the Green River Correctional Complex PREA Compliance Manager, who reports to the Warden for PREA. She was not present during the on-site audit, but it was evident she is actively involved in PREA activities. During her interview by phone prior to the audit, and working with the auditor during the interim report writing and corrective action period she demonstrated she was very knowledgeable of the PREA standards, the operation of her facility, and that she was she was dedicated to implementing a good PREA program to make the facility safe for staff, inmates, and visitors. Her absence demonstrated the facility had implemented a PREA program and not just one to pass the audit. All staff were confident in responding procedures and eager to share their knowledge with the auditor. Interviews with the Warden and Ms. Banks, and review of the Green River Correctional Complex organization chart demonstrated her access to the Warden.

Prior to the initial audit, Warden Hart and Ms. Banks made several changes regarding privacy and security measures in order to enhance the safety of the inmate population. Following the first audit, they continued to assess and improve the program. Throughout the tour of the facility Warden Hart discussed what physical plant actions they had done to comply with PREA or as a result of an allegation. It was evident, led by Warden Hart and Ms. Banks, PREA has become part of the culture at Green River Correctional Complex.

**Standard 115.12 Contracting with other entities for the confinement of inmates**

- 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)

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Kentucky Department of Corrections contracts bed space at community corrections facilities. New or renewed agreements require the entity's obligation to compliance with PREA standards and allows Kentucky Department of Corrections to check to ensure compliance with PREA standards. The auditor reviewed Kentucky Department of Corrections 2016 and 2017 PREA reviews with contracted agencies, and

the contract with Community Transitional Services – Russell.

### Standard 115.13 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)

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Kentucky Department of Corrections ensures each facility it operates develops document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring, to protect inmates against sexual abuse. The staffing plan is reviewed annually using the criteria found in standard 115.13 (a) to include generally accepted correctional practices; any judicial findings of inadequacy; any findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal or external oversight bodies; all components of the institution’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated); composition of the inmate population; number and placement of supervisory staff; institution programs occurring on a particular shift; any applicable State or local laws, regulations, or standards; prevalence of substantiated and unsubstantiated incidents of sexual abuse; and other relevant factors to develop and review the staffing plan.

Green River Correctional Complex complies with a staffing plan that ensures safety and security are maintained. The auditor reviewed the 2017 annual review of the staffing plan. The staffing plan is reviewed annually by the Warden, Deputy Wardens and PREA Compliance Manager at the institution. Documentation was provided showing the PREA Coordinator is actively involved in the review of staffing plans. The 2017 Green River Correctional Complex annual review was very basic and should be expanded in the future. Green River Correctional Complex has 177 cameras located throughout the facility.

Through review of the staffing plan and shift documents, interview of staff and the leadership, it was determined Green River Correctional Complex had no deviations from the staffing plan in the last 12 months. Green River Correctional Complex uses overtime to cover all posts.

Kentucky Department of Corrections Policy 14.7 requires unannounced rounds by supervisors and prohibits staff from alerting other staff members that supervisory staff rounds are occurring. Unannounced rounds by intermediate-level or higher-level supervisors are documented and are done randomly on all shifts. The auditor reviewed logs prior to the audit, and logs on site. Staff and inmate interviews and the logs confirmed the unannounced rounds by supervisors are done on all shifts and staff were not alerting other staff the unannounced rounds were being conducted. During interviews, supervisors was very knowledgeable and described what they looked for with PREA specific checks.

### Standard 115.14 Youthful inmates

- 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)

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X Not Applicable

This standard is not applicable as Green River Correctional Complex does not house youthful offenders. Youthful offenders are housed at Kentucky State Reformatory for male inmates and Kentucky Correctional Institution for Women for female inmates.

### Standard 115.15 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)

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Kentucky Department of Corrections Policy 9.8, Search Policy, states facilities will not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. A strip search log exists in the event cross gender strip or body cavity searches occur. Per interviews of staff and inmates and review of documentation, Green River Correctional Complex has not conducted cross-gender strip searches or cross-gender visual body cavity searches in 2016 and 2017.

Staff of the opposite gender are required to announce their presence upon entering a housing unit/living area. Announcements were consistently made throughout the tour. Staff demonstrated knowledge of this policy and inmates interviewed stated the announcements happen whenever female staff are posted on or enter the housing units. Green River Correctional Complex also created signs that prominently show whether a female staff is on duty in the unit. This allows inmates who are deaf or were not present during the verbal announcement to know female staff are present upon their return to the housing units.

Based on review of training material, and interview of staff and inmates; inmates are able to shower, perform bodily functions, and change clothes without non-medical staff observing their genitalia or buttocks, except in exigent circumstances or when such viewing is incidental to routine cell checks. Most inmates interviewed stated they could shower and change clothes without being observed by female staff. Observation during the audit identified inmates were unable to perform bodily functions without non-medical staff observing their genitalia or buttocks in the observation cells in the special management unit by sight in intake units (toilets) (115.15(d)). The Corrective Action Plan was to either put something that provides the inmate privacy when using the toilet so opposite gender staff could not see their groin or buttocks when using the toilet while still meeting security concerns; or designate the continuous observation posts to a male only posts. Green River Correctional Complex would then provide pictures or policy change, and the auditor would then conduct telephone interviews. The facility designated the posts as a male only posts on October 6, 2017 and implemented the change on October 9, 2017. On November 3, 2017 the auditor conducted telephonic interviews of two staff and had previously discussed with the PREA Compliance Manager reference it being a male only posts. On November 13, 2017 the auditor found Green River Correctional Complex compliant with the standard.

Review of training records, lesson plans, and interviews of staff demonstrated staff had been trained to conduct how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates. Training provided a number of ways to conduct searches of transgender and intersex inmates, but not a specific facility method. Based on interviews, transgender inmates are not searched for the sole purpose of determining genital status. The auditor found through interviews that staff did not know the definition of a transgender inmate and how to conduct cross-gender searches of transgender inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs (115.15 (f)). One transgender inmate interviewed said she was searched by female staff using their palms over her breast area. The Corrective Action Plan was to provide staff refresher training on the definition of transgender; and how to conduct searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible. The auditor should be sent a copy of the training material and staff training rosters. The auditor will then conduct some telephone interviews. Green River Correctional Complex completed the training of staff on the definition of transgender and transgender searches on October 16, 2017. The auditor was provided documents demonstrating the training was conducted. On November 3, 2017 the auditor conducted telephonic interviews of two staff who can conduct searches of inmates, those interviewed could define transgender and explain how to conduct a transgender search. On November 13, 2017 the auditor found Green River Correctional Complex compliant with the standard.

Standards 115.15 b and part of c does not apply as Northwest New Mexico Correctional Center is a male only facility.

### **Standard 115.16 Inmates with disabilities and inmates 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)

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Kentucky Department of Corrections Policy 14.7 outlines what is required for the facility to ensure inmates with disabilities and who are limited English proficient have access to PREA information and programs. Green River Correctional Complex has taken steps to ensure that inmates who are limited English proficient or disabilities are provided PREA education and information in formats accessible to all inmates; and have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Interpreter lines are available for inmates who are limited English proficient. Green River Correctional Complex has access to the interpreter line Language Line Solutions 1-800-752-6096 that is currently contracted through Correct Care Solutions. There has not been any incident where inmates have requested these services or that staff has had to use this service to address any PREA issue. PREA handouts and inmate handbooks are in English and Spanish. Green River Correctional Complex had prominent signs posted throughout the facility in Spanish as well as English. Staff and inmates stated inmates are not used as interpreters when addressing sexual abuse and sexual harassment allegations. PREA information is also provided in Braille both in English and Spanish. Green River Correctional Complex uses Video Remote Interpretation (VRI) System which allows a hearing person and a Deaf person who signs, who are next to each other, to communicate with each other. The hearing person speaks into a laptop microphone and an interpreter on the other end translates the speech into sign language, which the Deaf person can see on the laptop screen. The Deaf person signs into the laptop camera, and the interpreter on the other end translates the sign language into English, which the hearing person can hear. There has not been any incident where staff had to utilize this system to address any PREA issue. The auditor used the system to conduct an interview.

The auditor interviewed two inmates with hearing disabilities. They had a good knowledge of PREA and had been provided PREA information in formats that allowed them equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Green River Correctional Complex does not rely on inmate interpreters to communicate PREA information or during PREA investigations.

### **Standard 115.17 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)

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Kentucky Department of Corrections policies 14.7, 3.6 Background Investigations of Employees and Applicants For Promotions and Employment of Ex-Offenders, 3-1 Code of Ethics, outlines policy and procedures to ensure staff and contractors are not hired or promoted who has engaged in sexual abuse in a prison, jail, lockup, community confinement institution, juvenile institution, or other institution; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or been civilly or administratively adjudicated to have engaged



in sexual activity facilitated by force, overt or implied threats of force, or coercion. Kentucky Department of Corrections Policy 3.6 requires the institution to consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. Prior to the audit reviewed an employee and contractor application packet, background checks conducted on staff and employees, and during the audit reviewed additional background checks and employee application packets. Through review of personnel records and staff interviews it was determined Green River Correctional Complex staff and contractors are not hired or promoted who has engaged in sexual abuse in a prison, jail, lockup, community confinement institution, juvenile institution, or other institution; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or been civilly or administratively adjudicated to have engaged in sexual activity facilitated by force, overt or implied threats of force, or coercion.

Kentucky Department of Corrections 14.7 requires background checks for staff and contractors; and to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse, and updating background checks of employees and contractors every five years. Interviews of Human Resource staff and a review of an employee application packet demonstrated contact with prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse; potential employees and contractors undergo a thorough background check; and potential employees are asked about any prior incidents of sexual abuse/assault with the understanding omitting or falsifying information may result in termination. Prior to the audit reviewed one background check of an employee and contractor. During the audit the auditor reviewed 28 employee and seven (7) contractor records that demonstrated background checks were done prior to employment and are completed every five years. Review of the Green River Correctional Complex background check spreadsheet demonstrated all staff and contractors had background checks done in 2016 and 2017.

Kentucky Department of Corrections and imposes upon staff a continuing affirmative duty to disclose any misconduct of engaging in sexual abuse in a prison, jail, lockup, community confinement institution, juvenile institution, or other institution; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or been civilly or administratively adjudicated to have engaged in sexual activity facilitated by force, overt or implied threats of force, or coercion.

#### **Standard 115.18 Upgrades to facilities and technologies**

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

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Through review of Kentucky Department of Corrections Policy 7.1 Construction, Renovation, and Expansion Guidelines, and interviews of Kentucky Department of Corrections Agency Head representative, PREA Coordinator, PREA Compliance Manager, and Warden it was determined that the Kentucky Department of Corrections considers the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. PREA is a component of expanding any portion of the facility and also when determining what, if any, additional video monitoring and other technology should be utilized. During the review of the staffing plan, the video monitoring system is also reviewed to ensure coverage enhances the ability to protect inmates from sexual abuse. Green River Correctional Complex has 177 cameras throughout the facility. Documentation was provided indicating requirements for additional cameras have been identified, and camera enhancements are added annually as budget allows.

#### **Standard 115.21 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)

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Kentucky Department of Corrections Policy 14-7 outline evidence protocols for administrative proceedings and criminal prosecutions; requirements for forensic medical exams; and when requested by the victim, a victim advocate to accompany and support the victim through the forensic examination, investigatory interviews, emotional support, crisis intervention, information, and referrals. Green River Correctional Complex investigator handles all the administrative proceedings regarding PREA allegations. Criminal investigations are conducted by the Kentucky State Police. There is a uniform evidence protocol that maximizes the potential for usable physical evidence for administrative and criminal prosecutions. The protocols were reviewed and found to be in line with DoJ's National Protocol for Sexual Assault Medical Forensic Examinations. Staff has the responsibility to secure and preserve any crime scene and evidence until an investigator can arrive and assume possession. Majority of the staff interviewed were very knowledgeable of the evidence protocols, and could explain the protocol for obtaining useable evidence when an inmate alleged sexual abuse. The auditor conducted interviews with the facility investigator who had a good understanding of the investigative procedures and responsibilities and evidence protocols.

Kentucky Department of Corrections has a MOU with Kentucky Association of Sexual Assault Programs for victim advocate support. Sanctuary Inc. Hopkinsville is the agency responsible for support of the district. They will provide up to three sessions per victim, other sessions are done by in-house facility staff.

When Green River Correctional Complex has an allegation of sexual assault, the inmate is evaluated by medical personnel and then transported to Baptist Health Madisonville for the forensic examination.

#### **Standard 115.22 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)

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KY DOC Policy 14.7 requires an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment, that all allegations of sexual abuse or sexual harassment are referred for investigation by the appropriate authority. Kentucky State Police conducts all criminal investigations. Kentucky State Police General Order OM-C-1 (Criminal Investigations and Reports describe their responsibility and the facility responsibility.

Through a review of the investigative file and interviews of the Warden and investigative staff; it was determined the Green River Correctional Complex ensures that an administrative and/or a criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Referrals of allegations are first investigated by the institution.

The auditor reviewed 11 of the 17 PREA allegations. Of the allegations reviewed two (2) were inmate-inmate allegations; three (3) were inmate-inmate consensual sexual misconduct; and six (6) were staff-inmate allegations. Of the two (2) inmate-inmate allegations reviewed: one (1) inmate-inmate sexual harassment unfounded; and one (1) inmate-inmate sexual abuse substantiated. Of the six (6) staff-inmate allegations reviewed: one (1) staff-inmate sexual harassment substantiated; one (1) staff-inmate sexual harassment unfounded; one (1) staff-inmate sexual abuses substantiated; and three (3) staff-inmate sexual abuse unfounded. The auditor also reviewed a Kentucky State Police case from 2016.

### Standard 115.31 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)

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Review of Kentucky Department of Corrections Policy 14.7 addresses PREA staff training requirements. The auditor reviewed the 2016 and 2017 PREA training lesson plan was reviewed and verified the training covered: zero-tolerance policy for sexual abuse and sexual harassment; how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; inmates' right to be free from sexual abuse and sexual harassment; the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment in confinement; the common reactions of sexual abuse and sexual harassment victims; how to detect and respond to signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with inmates; how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. Staff acknowledge they understood the training on Kentucky Department of Corrections Memorandum. The auditor reviewed two (2) training records prior to the audit and 12 during the audit, all employees acknowledged they understood the training. Note two of the 12 had documented training every other year and not annually like other staff, but still in compliance with the standard. Staff interviewed were well versed in the Kentucky Department of Corrections zero tolerance policy; their responsibilities in reporting sexual abuse, sexual harassment, and staff negligence; first responder duties; and evidence preservation. It is very evident staff are not only trained, but trained very well and in a thorough manner to ensure they understand their responsibilities regarding PREA allegations.

### Standard 115.32 Volunteer and contractor training

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections Policy 14.7 and the PREA training curriculum outline training requirements for volunteers and contractors who have contact with inmates. All contractors and volunteers who have contact with inmates receive the required PREA training. Prior to the audit, the auditor reviewed the PREA slides; and a contractor and volunteer training records. During and following the audit, the auditor reviewed nine contractor and volunteer training records, eight of nine annotated they understood the training. Contractor personnel get the same training as staff annually. Interviews of the contractors and volunteers demonstrated their knowledge of PREA, their responsibilities and the agency zero tolerance policy.

### Standard 115.33 Inmate education

- Exceeds Standard (substantially exceeds requirement of standard)

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The auditor reviewed Kentucky Department of Corrections Policy 14.7, inmate handbook, PREA brochure, posters, inmate records and documents, and conducted interviews of staff and inmates. Inmate handbook which has PREA information is provided to inmates upon arrival. PREA pamphlet is verbally covered by staff and provided to the inmate during orientation usually within the first the week. All PREA information is provided to inmates or posted in the housing units in formats accessible to all inmates. PREA information is painted directly on the walls of all housing units, making access readily available and highly visible, and cannot be destroyed or removed. PREA pamphlets are also available at the housing officer desk. PREA comprehensive video is shown to the inmates at their first Kentucky Department of Corrections facility and periodically on the housing units as an additional method of providing information.

The auditor was provided training records for two inmates prior to the audit. Thirteen random inmate files were reviewed during and following the on-site audit, 12 of 13 have documentation of receiving PREA information upon arrival; 12 of 13 had documentation of receiving a class on PREA which the staff goes over the PREA handout and provides the handout to the inmate (comprehensive education). If Green River Correctional Complex is the inmates first Kentucky Department of Corrections facility they are shown the video within 30 days; or had been incarcerated prior to the implementation of PREA at Green River Correctional Complex, they were shown the video when the video was first implemented. The video was shown previously at each facility upon intake, but comprehensive education was changed to allow to complete by going over the pamphlet verbally and providing to the inmate a copy of the pamphlet. Most inmates remember seeing the video at another facility. Inmate knowledge of services provided by outside agency was weak, and need to be emphasized during comprehensive education. The information is posted in the housing units.

#### **Standard 115.34 Specialized training: Investigations**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections Policy 14-7 requires the facility investigator receives specialized training in addition to the general education provided to all employees. The PREA Investigators had received a two-day Kentucky Department of Corrections specialized training for PREA investigators titled "Specialized Training: Investigating Sexual Abuse in Correctional Settings". The lesson plan included nine (9) modules taught by Kentucky Department of Corrections staff, local SANE, detective, and a local prosecutor. The Modules included: PREA Update And Overview Of PREA Investigative Standards: Guidance For The Field; Legal Issues And Agency Liability; What Investigators Should Know; Investigations And Agency Culture; Trauma And Victim Response: Considerations For The Investigative Process; Role Of Medical And Mental Health Practitioners In Investigations; First Response And Evidence Collection: Foundation For Successful Investigations; Interviewing Techniques: Skills That Address The Dynamics Of Sexual Abuse; Report Writing; Prosecutorial Collaboration. The auditor reviewed the specialized training for investigators, and it covered all requirements of the standard to include: techniques for interviewing sexual abuse victims; proper use of Miranda and Garrity warnings; sexual abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The agency maintains documentation that the investigator has received both the general and investigative PREA training. All current investigators have received basic PREA training annually and the investigator PREA training, five investigators having received the PREA investigator training in March 2017. The interview of the investigators demonstrated good understanding of how to conduct a sexual abuse

investigation in a confinement setting. The auditor reviewed the specialized training for investigators, and it covered all requirements of the standard to include: techniques for interviewing sexual abuse victims; proper use of Miranda and Garrity warnings; sexual abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The agency maintains documentation that the investigator has received both the general and investigative PREA training. Eight staff received the PREA investigator training in 2015. The lesson plans, slides, certificates, and sign in sheets were reviewed and interview of the investigators demonstrated good understanding of how to conduct a sexual abuse investigation in a confinement setting.

#### **Standard 115.35 Specialized training: Medical and mental health care**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections Policy 14.7 outlines the training required for medical and mental health practitioners to include how to detect and assess signs of sexual abuse and harassment, how to preserve physical evidence, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how to report allegations of sexual abuse and harassment. The auditor reviewed three (3) training records prior to audit and the medical training plan used to train medical and mental health staff on specific medical and mental health PREA training. The auditor requested (4) four additional medical personal training documents on-site to demonstrate they had received PREA and medical PREA training. All seven (7) medical staff had training records demonstrating PREA training annually and PREA medical training. Interviews of medical and mental health staff demonstrated they understood: how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. Medical staff does not conduct forensic medical examinations.

#### **Standard 115.41 Screening for risk of victimization and abusiveness**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections Policy 14.7 requires facilities to: conduct a screening for risks of sexual victimization and abusiveness within 24 hours of arrival; a follow-up screening for risks of sexual victimization and abusiveness within a set time period, not to exceed 30 days from the inmate's arrival at the facility; and reassesses inmate's risk level again when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Inmates are not disciplined for refusing to answer or disclosing information to staff when being assessed. Green River Correctional Complex does not detain inmates for the solely for civil immigration purposes.

The auditor reviewed three examples of inmate screening forms (initial screen and follow-up screen) prior to the audit, and 32 randomly selected (inmates interviewed) during and following the audit. Thirty-four (34) of the 35 inmates had an initial screen within 72 hours, most

within 24 hours. Within approximately 30 days from the inmate's arrival at Green River Correctional Complex, staff reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by Green River Correctional Complex since the intake screening. Thirty-three (33) of 35 inmates had their follow-on screen documented within 30 days of arrival, normally within 14 days. It should be noted five inmates who arrived at Green River Correctional Complex prior to PREA had both screens completed in 2014 when screens were implemented. Inmates interviewed acknowledged receiving the initial PREA screen, but did not acknowledge the follow-on screen. This would be due to the follow-on screen is purely based on new information, and the inmate is not asked any questions. The facility did provide an example where the follow-on screen did include new information received. An inmate's risk level is reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. One example of a new screen due to a PREA incident (sexual abuse) was provided to the auditor. The screening instrument is objective in determining if the inmate is at risk for victimization or abusiveness. Green River Correctional Complex has appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

The auditor had staff who conduct the screens perform the screen of the auditor to demonstrate the process of filling out the screening form. The process was done very professionally. Some information is provided through asking the inmate questions, others through review of inmate records. All the criteria referenced in the standard are on the form; and inmates are asked all of the questions required to be asked of the inmate. Per standard 115.41(d) The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming. The standard requires the person conducting the screen to make their own perception if the inmate is gender nonconforming. Observation of a screen and interviews of staff who conduct screens identified a majority did not know the definition of an offender who is gender nonconforming nor do they make their own assessment if the inmate is gender non-conforming. Screening staff who must make their own assessment if the offender is gender nonconforming cannot properly make the assessment if they do not understand what gender nonconforming is. The Corrective Action Plan: (1) update the form or have staff annotate in the remarks block if they assess the inmate to be gender nonconforming; (2) train all staff who conduct screens on PREA definitions, specifically gender nonconforming, practice identifying persons who are gender nonconforming; and properly annotate if the screener identifies the inmate as gender nonconforming; (3) provide the auditor documentation of such training; (4) provide the auditor three PREA screening examples a week following the training for eight weeks; (5) and the auditor conduct follow-up interview with screeners following at least 30 days after training. Kentucky Department of Corrections decided not to modify the form but have staff annotate on the existing form in the notes section if they perceive the inmate to be gender non-conforming. Kentucky Department of Corrections and Green River Correctional Complex provided training on all PREA definitions, and procedures to identify and document an inmate who the screener is gender nonconforming. Green River Correctional Complex than rescreened all current inmates to update their current screens. This is further demonstration of the Green River Correctional Complex PREA culture, wanting to ensure they had an accurate screen on all its inmates. Green River Correctional Complex provided screening forms for the time period identified in the corrective action plan and four (4) of those inmates they rescreened. There were inmates identified as gender nonconforming. On November 3, 2017 the auditor conducted interviews of two staff who performs screens. All the screeners interviewed could define gender nonconforming and the process for documenting whether the inmate is perceived by the screener as gender nonconforming or not. The auditor found Green River Correctional Complex compliant with the standard on November 13, 2017.

#### **Standard 115.42 Use of screening information**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based upon review of Kentucky Department of Corrections Policy 14.7, classification documentation, and interview of staff: Green River Correctional Complex uses information from the risk screening to inform housing, bed, work, education and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive; and makes individualized determinations about how to ensure the safety of each inmate. Green River Correctional Complex Policy 18-04-01 LGBTI, and documentation demonstrate Green River Correctional Complex consider on a case-by-case basis whether to assign a transgender or intersex inmate to an institution for male or female inmates, housing and programming assignments, based on the inmate's health and safety,

PREA Audit Report



inmate's own views with respect to his or her own safety, and whether the placement would present management or security problems; and do not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated institution, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates. There is no consent decree, legal settlement, or legal judgment to do such. If an inmate is high risk of victimization or to be abusive, work supervisors are provided a notice for their information only. Based on staff and inmate interviews, and logs, transgender or intersex inmates are allowed to shower separately from other inmates (at 7 a.m. and 12 p.m.). There is a transgender committee that meets with transgender inmates to discuss their preference, issues, and actions. Two meetings examples were reviewed by the auditor, the meeting seemed very thorough.

### **Standard 115.43 Protective custody**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Per Kentucky Department of Corrections Policy 10.2, inmates at high risk for sexual victimization are not involuntarily placed into protective custody unless a thorough assessment determined that there was no available alternative means of separation from likely abusers. If an assessment cannot be completed immediately, Green River Correctional Complex may house an inmate in segregation for less than 24 hours while the assessment is being completed. Recommend policy be modified to be clearer.

There were no inmates placed in involuntary segregation due to high risk of victimization during the audit period at Green River Correctional Complex. Inmate interviews and documentation verified inmates were not involuntarily placed in protective custody. If an inmate is involuntarily in protective custody, a review is conducted every seven (7) days to determine if there is a continued need for separation from general population.

### **Standard 115.51 Inmate reporting**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on Kentucky Department of Corrections policies 14.7 and 3.22, staff and inmate interviews, and documentation of incidents reports, there are multiple methods for an inmate to report allegations of sexual abuse or harassment. Inmate handbooks, PREA handouts, education video and posters throughout the facility provide specific internal and external ways for inmates to report sexual abuse, sexual harassment and retaliation by other inmates or staff for reporting sexual abuse and sexual harassment. Interviews of inmates and staff verified the inmates and staff knew of the multiple internal and external ways to report incidents of abuse or harassment, and retaliation. Allegations may be reported verbally or in writing to any staff member; telephonically contact the crime tip hotline (8), Kentucky Department of Corrections (7732); write to Justice and Public Safety Investigative Branch; use JPAY; or through third party. The auditor tested the phone numbers posted during the tour, and in less than an hour Kentucky Department of Corrections and Green River Correctional Complex staff

showed the auditor of the notice they received reference the phone call.

Green River Correctional Complex staff has the ability to privately report sexual abuse and sexual harassment of inmates. They are able to use the hotline number which may remain confidential at the request of the reporting party. The calls are referred to the Kentucky Department of Corrections PREA Coordinator.

#### **Standard 115.52 Exhaustion of administrative remedies**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Review of Kentucky Department of Corrections Policy 14.6 Inmate Grievance Procedures and Inmate Handbook Green River Correctional Complex does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse; does not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse; ensures that an inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and such grievance is not referred to a staff member who is the subject of the complaint; and issues 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. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. Of the investigations the auditor reviewed, there was one PREA grievances for sexual harassment. There were no emergency grievances filed pursuant to this standard.

Kentucky Department of Corrections Policy 14.7 addresses disciplining an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith. Green River Correctional Complex may discipline an inmate for filing a grievance related to alleged sexual abuse only where the facility demonstrates that the inmate filed the grievance in bad faith.

#### **Standard 115.53 Inmate access to outside confidential support services**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections has a MOU with Kentucky Association of Sexual Assault Programs for victim advocate support. Sanctuary Inc. is the agency responsible to provide access to outside confidential support services in this district. Mailing addresses are provided to the inmate on posters in the housing units, to write for confidential emotional support. Additionally, the inmate can request through the case manager, shift supervisor or Warden to coordinate a confidential phone call to Sanctuary Inc. using a unit staff member office phone. Per the MOU they will provide up to three sessions per victim by phone, other sessions are done by in-house facility staff. There is no limit to support through written communication and the facility considered privileged correspondence. Inmate interviews



confirmed a few inmates knew of the confidential support services provided, most knew there was a service available but not exactly what was provided based on they did not need or believed they would not need the specific information. Recommend the facility add an addendum to the inmate handbook with the information.

#### **Standard 115.54 Third-party reporting**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Green River Correctional Complex has a method to receive third party reports of sexual abuse and sexual harassment. How to do a third-party report of sexual abuse and sexual harassment on behalf of an inmate is posted on the Kentucky Department of Corrections website, and posted in the facility in areas visitors and inmates have access to the information. Discussion with inmates demonstrated they knew how third-party reporting could be accomplished.

#### **Standard 115.61 Staff and agency reporting duties**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections policies 14.7 and 3.22 require all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and for staff not to reveal any information related to a sexual abuse report to anyone other than extent necessary. Health practitioners are required to report sexual abuse and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. Health practitioners during interviews stated they are required and would report sexual abuse. Review of investigative files; and interviews of staff verified staff immediately report to the facility's designated investigator any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and that staff does not reveal information related to a sexual abuse report other than to people authorize to discuss the report. Interviews with inmates and staff did not reveal any incident of sexual abuse or harassment not reported to the facility's designated investigator, and that staff do not reveal any information related to sexual abuse reports to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

#### **Standard 115.62 Agency protection duties**

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

relevant review period)

- Does Not Meet Standard (requires corrective action)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections Policy 14.7 requires staff to take immediate action to protect any inmate they learn is subject to substantial risk. Interviews with staff demonstrate they know the steps to take to protect an inmate subject to risk of imminent sexual abuse. Security staff immediately employs protection measures as separate the inmate from where or whom at risks with; pass the information to the Investigator, PREA Compliance Manager and Warden. Green Rivers Correctional Complex Warden, PREA Compliance Manager, and investigator confirmed there have been no instances of an inmate being at substantial risk of sexual abuse during the audit cycle.

### **Standard 115.63 Reporting to other confinement facilities**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections Policy 14.7 requires when an allegation that an inmate was sexually abused while confined at another institution, the Warden that received the allegation shall notify the Warden where the alleged abuse occurred within 72 hours after receiving the allegation; that all sexual abuse allegations reported by another institution regarding any inmate that was confined at the Green River Correctional Complex be fully investigated. Interviews with the Warden, confirmed her knowledge of the policies and responsibilities to report any allegations and investigate any allegations that may have been reported at Green River Correctional Complex. In 2016 and 2017 there were no inmates who alleged sexual abuse at another facility. The auditor reviewed a case from 2015 where Green River Correctional Complex contacted a jail of an allegation from an inmate at Green River Correctional Complex. At that time the PREA Compliance Manager contacted the jail. New FAQ now allows a Warden designee to make the notification, which was not the case in 2015. Recommend the Warden designate the PREA Compliance Manager in writing to contact other facilities when an inmate at Green River Correctional Complex makes a PREA allegation at another facility.

### **Standard 115.64 Staff first responder duties**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections Policy 14.7 outlines procedures to respond to an allegation of sexual abuse. Random interviews with security and non-security staff confirmed both security and non-security staff were very knowledgeable what to do upon learning an inmate was sexually abused to include separating the alleged victim and abuser; preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim and alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. All staff regardless security and non-security have the same requirements when an allegation is made.

#### **Standard 115.65 Coordinated response**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Green River Correctional Complex has a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership. Interviews with staff (first responders, medical and mental health practitioners, investigators, and institution leadership), and review of investigative files confirmed staff were knowledgeable about the PREA plan and the coordinated duties and collaborative responsibilities. Though sufficient and the medical and mental health staff were very familiar with their role in the response to sexual abuse and/or harassment allegation, the auditor recommends expanding the medical and mental health section of the written institutional plan.

#### **Standard 115.66 Preservation of ability to protect inmates from contact with abusers**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections has no collective bargaining agreement. Nothing limit Kentucky Department of Corrections ability to remove alleged staff sexual abusers from contact with any alleged inmate victims pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted up to and including termination. Based on investigative files and interviews, alleged abusers whether staff or inmates are separated from alleged victim during the investigation, and further if necessary. The auditor reviewed documentation of staff being moved to a non-contact posts.

#### **Standard 115.67 Agency protection against retaliation**

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

relevant review period)

- Does Not Meet Standard (requires corrective action)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections policies 14.7 and 3.22 require a staff member be designated to monitor for retaliation against staff or detainees who reported or had been sexually abused or harassed; provided multiple protection measures for detainees or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations; monitoring the conduct and treatment of detainees or staff who reported the sexual abuse and of detainees who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by detainees or staff; and conducting periodic status checks through interviews at least every seven days; monitoring will occur for at least 90 days following the report of the allegation; and may go beyond the 90 days if the monitoring indicates a continuing need. Kentucky Department of Corrections has a good monitoring form.

The auditor reviewed the monitoring of inmates for the allegations reviewed. The PREA Compliance Manager is responsible for monitoring retaliation. The PREA Compliance Manager does an excellent job of completing all aspects of retaliation monitoring, which was articulated during her interview and in the monitoring documentation reviewed. Multiple protection measures are employed to ensure inmates and staff are not subjected to retaliation. Staff and inmates are monitored for a minimum of 90 days but will be extended if necessary. Green River Correctional Complex reports zero retaliations have occurred.

#### **Standard 115.68 Post-allegation protective custody**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on interviews and investigative documents, inmates who have alleged or suffered sexual abuse are not placed in involuntary administrative segregation. They will only be housed in involuntary administrative segregation until an alternative means of separation can be arranged. If placed in segregated housing involuntarily they shall have access to programs, privileges, education, and work opportunities to the extent possible; and that Green River Correctional Complex shall document any access to programs, privileges, education, or work opportunities that was restricted and that every 30 days, the institution shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population. There were no inmates who have alleged to have suffered sexual abuse in protective custody during the audit. Per interviews of the Warden, and segregation staff, there were no instances of using segregation housing to protect inmates who had alleged to have been sexually abused since at least December 2015.

#### **Standard 115.71 Criminal and administrative agency investigations**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The auditor reviewed 11 of the 17 PREA allegations. Of the allegations reviewed two (2) were inmate-inmate allegations; three (3) were inmate-inmate consensual sexual misconduct; and six (6) were staff-inmate allegations. Of the two (2) inmate-inmate allegations reviewed: one (1) inmate-inmate sexual harassment unfounded; and one (1) inmate-inmate sexual abuse substantiated. Of the six (6) staff-inmate allegations reviewed: one (1) staff-inmate sexual harassment substantiated; one (1) staff-inmate sexual harassment unfounded; one (1) staff-inmate sexual abuses substantiated; and three (3) staff-inmate sexual abuse unfounded.

The auditor also reviewed a Kentucky State Police case from 2016. The investigative packets were organized and very thorough.

Based on review of Kentucky Department of Corrections Policy 14.7, PREA investigations; interviews of Green River Correctional Complex Warden, PREA Compliance Manager, and investigator it was determined an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Green River Correctional Complex conducts its investigations using uniform evidence protocols. The PREA Investigators had received a two-day Kentucky Department of Corrections specialized training for PREA investigators titled “Specialized Training: Investigating Sexual Abuse in Correctional Settings”. The lesson plan included nine (9) modules taught by Kentucky Department of Corrections staff, local SANE, detective, and a local prosecutor. The Modules included: PREA Update And Overview Of PREA Investigative Standards: Guidance For The Field; Legal Issues And Agency Liability; What Investigators Should Know; Investigations And Agency Culture; Trauma And Victim Response: Considerations For The Investigative Process; Role Of Medical And Mental Health Practitioners In Investigations; First Response And Evidence Collection: Foundation For Successful Investigations; Interviewing Techniques: Skills That Address The Dynamics Of Sexual Abuse; Report Writing; Prosecutorial Collaboration. Eight investigators received the PREA investigator training in 2015.

The Green River Correctional Complex investigators conducts an investigation immediately when notified of an allegation of sexual abuse and sexual harassment. They do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. If appropriate, it is referred to Kentucky State Police. Green River Correctional Complex conducts its investigations using uniform evidence protocols. Administrative investigations include efforts to determine whether staff actions or failures to act contributed to the abuse; and are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

The investigators stated that they collect the appropriate direct and circumstantial evidence, reviews the video tapes, interviews the alleged victim, suspected perpetrators, and witnesses; reviews prior complaints and reports of sexual abuse involving the suspected perpetrator. All investigations are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. The credibility of the victim, suspect, or witness is always assessed on an individual basis. Polygraphs are not used in PREA investigations. When conducting administrative investigations, the investigator always decides whether staff actions or failures to act contributed to the abuse. The departure of the alleged abuser or victim from the employment or control of Kentucky Department of Corrections or Green River Correctional Complex does not provide a basis for terminating an investigation.

Written reports are maintained as long as the alleged abuser is incarcerated or employed by the Kentucky Department of Corrections, plus ten years under Kentucky Department of Corrections Policy.

#### **Standard 115.72 Evidentiary standard for administrative investigations**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

A review of Kentucky Department of Corrections Policy 14.7 and investigations; and interviews with the investigators confirmed the has no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

#### **Standard 115.73 Reporting to inmates**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections 14.7 requires facilities to inform the inmate as to whether the allegation of sexual abuse has been determined to be substantiated, unsubstantiated, or unfounded; if investigated by an outside agency, request the outside investigative agency inform the inmate as to whether the allegation of sexual abuse has been determined to be substantiated, unsubstantiated, or unfounded; if the allegation is against a staff member, the facility shall inform the inmate whenever the staff member is no longer posted within the inmate's unit, no longer employed at the institution, has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; if the inmate allegation is against an inmate be whenever the alleged abuser has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; and that all notifications will be documented.

Prior to the audit, Green River Correctional Complex provided two (2) examples of notification to the inmate. During the audit, the auditor reviewed nine (9) notifications to the inmate. The notifications included the outcome of the investigations whether the allegation had been determined to be substantiated, unsubstantiated, or unfounded; in one case the staff no longer worked at the facility (resigned), and one inmate was charged and convicted by the institution of assault. Green River Correctional Complex uses the Kentucky Department of Corrections form of notification of cases it investigated. Interview of inmate who alleged sexual abuse, confirmed they were informed of results of the investigation and any applicable action taken.

#### **Standard 115.76 Disciplinary sanctions for staff**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Per Kentucky Department of Corrections Policy 14-2; and interviews with Green River Correctional Complex staff, staff are subject to disciplinary sanctions for violating agency sexual abuse or sexual harassment policies; termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse; and disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. The auditor reviewed an investigation where the staff member resigned during the investigation of sexual harassment.

#### **Standard 115.77 Corrective action for contractors and volunteers**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Per Kentucky Department of Corrections Policy 3.22; and interviews with Green River Correctional Complex staff, contractors, and volunteers; contractors or volunteers are prohibited from engaging in sexual abuse, and those that do are prohibited to have contact with inmates and requires they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The Warden reported there have been no allegations of sexual abuse by contractors or volunteers during the audit cycle. Interviews with contractors and volunteers confirmed they knew the punishment for engaging in sexual abuse or sexual harassment of inmates or staff.

#### **Standard 115.78 Disciplinary sanctions for inmates**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Per review Kentucky Department of Corrections policies 15.2 and 14.7, and interviews with Green River Correctional Complex staff, inmates are subject to disciplinary sanctions following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse; sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories; and considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior. The auditor reviewed the investigation and disciplinary hearing and action for a sexual abuse case, the sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history.

Green River Correctional Complex does prohibit consensual sexual contact/activities between inmates. The auditor reviewed the investigation and disciplinary hearing and action for a consensual sex case, the sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history. Mental health staff provide input to the disciplinary hearing, it is documented in the hearing documents. Inmates may be disciplined for sexual contact with staff only upon a finding that the staff member did not consent to such contact. Reports of sexual abuse made in good faith will not constitute false reporting of an incident even if the investigation doesn't establish sufficient evidence to substantiate the allegation.

#### **Standard 115.81 Medical and mental health screenings; history of sexual abuse**

- Exceeds Standard (substantially exceeds requirement of standard)



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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections Policy 14.7 requires all new inmates receive a PREA screen upon arrival, and any of these identify someone as having experienced prior sexual victimization or previously perpetrated sexual abuse, whether in a prison/jail setting or in the community, they will be offered a medical and mental health follow-up meeting within 14 days. Information is kept as confidential as possible, with information shared for the purpose of housing/living, programming, and work assignments. Medical and mental health staff interviewed stated informed consent is obtained prior to reporting information about prior sexual victimization that did not occur in an institutional setting.

Review of screens provided by the facility (3) and random screens (32) selected by the auditor identified 14 inmates had been identified as having experienced prior sexual victimization or previously perpetrated sexual abuse; 13 were offered a follow-up meeting with a medical or mental health practitioner. One of the inmates interviewed who previously experienced prior sexual victimization states he was not offered medical and mental health consultation.

Interviews of medical and mental health staff confirmed any information related to sexual victimization or abusiveness that occurred in the institution is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments.

#### **Standard 115.82 Access to emergency medical and mental health services**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Per Kentucky Department of Corrections Policy 14.7, inmate victims of sexual abuse shall 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; inmate victims of sexual abuse while incarcerated shall 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; and qualified medical practitioners are on duty 24 hours. Upon returning from the hospital a registered nurse evaluates and documents the inmate's health status, and refers mental health services. The inmate is prioritized for sick call and if the emergency room did not complete testing and begin treatment for sexually transmitted diseases; information for, testing and treatment is done at the facility. Inmate victims of sexual abuse shall receive timely, unimpeded access to outside emergency medical exams without financial costs. The services at no costs are provided regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Interview with the medical staff and inmates, and documentation confirmed this practice and that the requirements of this standard are adhered to.

#### **Standard 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers**

- Exceeds Standard (substantially exceeds requirement of standard)



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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on review of Kentucky Department of Corrections Policy 14.7; and interviews with staff and inmates; and medical and mental health documentation demonstrate Green River Correctional Complex offers medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized by sexual abuse or perpetrated sexually abuse. Green River Correctional Complex provides victims with medical and mental health services consistent with the community level of care. Mental health evaluations are conducted on all known inmate on inmate abusers within 60 days of learning such abuse. Mental health counseling is provided, there is no sex offender treatment program at Green River Correctional Complex.

Standards 115.83 (d) and (e) are non-applicable as Green River Correctional Complex is a male only facility.

#### **Standard 115.86 Sexual abuse incident reviews**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections Policy 14.7 identifies the minimum members of the review team, and covers the process for sexual abuse incident reviews. The auditor reviewed eleven (11) PREA allegation investigations and applicable incident reviews. The review team considers if there is a need to change policy or practice to better prevent, detect or respond to sexual abuse. They examine if there are any underlying issues or factors as outlined in the standard. Green River Correctional Complex will look at where the incident occurred, staffing levels, monitoring technology, and other relevant information. They will document their findings and make recommendations as appropriate. The report will be submitted to the Warden and PREA Compliance Manager. Green River Correctional Complex will implement recommendations and will document the reasons for not doing so. The review occurs within 30 days of the conclusion of the investigation. The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

Incident review team members were interviewed and were knowledgeable of the process. The team members interviewed knew what items they were looking for during the review to change policy or practice to better prevent, detect, respond to sexual abuse. One member interviewed remembered two recommendations from reviews he was a part: cameras and shower curtains.

#### **Standard 115.87 Data collection**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Kentucky Department of Corrections Policy 14.7 requires the collection of uniform data that provides the minimum data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The agency collects accurate uniform data for every allegation of sexual abuse at facilities under its control using a standardized instrument. Kentucky Department of Corrections collects accurate uniform data for every allegation of sexual abuse at facilities under its control using standardized instruments. Per conversation with Kentucky Department of Corrections staff the data is aggregated. Upon request from DoJ, Kentucky Department of Corrections provides the data. Review of 2014, 2015, and 2016 annual agency PREA reports, and data submitted by the facility demonstrated the agency collects uniform data to be used by Kentucky Department of Corrections.

#### **Standard 115.88 Data review for corrective action**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on interviews with the PREA Compliance Manager, PREA Coordinator and review of the Kentucky Department of Corrections website, Kentucky Department of Corrections reviews the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies; to identify problem areas, and take corrective actions. An annual report is published and posted on the Kentucky Department of Corrections website. The auditor reviewed the 2014, 2015, and 2016 annual reports. Collected data is reviewed to identify problem areas and make corrective action plans when needed. The data is used in annual reports for individual facilities and the agency. Data is compared from the previous year in order to assess progress and concerns. These reports are approved by the Commissioner and are available on the Kentucky Department of Corrections website. There are no names or identifying information listed in the reports. The 2015 and 2016 annual reports provided corrective measures taken and addressed the agency progress in addressing sexual abuse, and provided statistical comparison between 2013 – 2016. The PREA section of the Kentucky Department of Corrections website is informative and easy to locate on the Kentucky Department of Corrections website. The Kentucky Department of Corrections PREA page lists general information on PREA; agency zero tolerance policy; how to report; agency wide data; and individual facility PREA reports.

#### **Standard 115.89 Data storage, publication, and destruction**

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

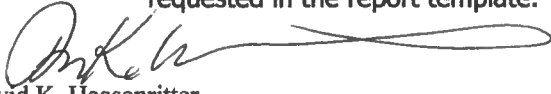
**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Review of Kentucky Department of Corrections Policy 14.7, Kentucky Department of Corrections website, observation on-site, and interviews of staff it is determined data is properly stored, maintained and secured. Access to data is controlled. Aggregate data on all its facilities is available to the public through its website. All Kentucky Department of Corrections facility data is in the annual report and posted on the website. Kentucky Department of Corrections maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of the initial collection. Before making aggregated sexual abuse data publicly available, Kentucky Department of Corrections removes all personal identifiers.

**AUDITOR CERTIFICATION**

I certify that:

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



David K. Haaseneritter

December 30, 2017

Auditor Signature

Date