PREA AUDIT: AUDITOR'S SUMMARY REPORT
ADULT PRISONS & JAILS

NATIONAL PREA RESOURCE CENTER

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

[Following information to be populated automatically from pre-audit questionnaire]		
Name of facility: Western Kentucky Correctional Complex		
Physical Address: 374 New Bethel Road, Fredonia, Kentucky		
Date report submitted: November 26, 2014		
Auditor Information Gary Peitz		
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Date of facility visit: November 4,5,6, 2014		
Facility Information		
Facility mailing address: (if different from above)		
Telephone number: 270-388-9781		
The facility is: ☐ Military ☐ Private for profit ☐ Private not for profit	☐ County ☐ Municipal	☐ Federal X State
Facility Type: ☐ Jail X Prison		
Name of PREA Compliance Manager: David Meeks E-Mail Address: david.meeks@ky.gov		Title: Procedures Officer Phone Number: 270-388-9781 ext. 2026
Agency Information		
Name of agency: Kentucky Department of Corrections		
Governing authority or parent agency: (if applicable) State of Kentucky		
Physical address: 275 East Main, Frankfort, Kentucky 40602		
Mailing address: (if different from above)		
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Agency Chief Executive Officer		
Name: LaDonna Thompson		Title: Commissioner
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Name: Bryan Henson		Title: KDOC PREA Coordinator
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AUDIT FINDINGS

NARRATIVE:

The audit of the Western Kentucky Correctional Complex (WKCC) was conducted on November 4-6, 2014 by Gary Peitz, Certified PREA Auditor, assisted by Dale Higgins in order to determine compliance with the Prison Rape Elimination Act (PREA) standards. An entrance meeting was held to introduce the audit team to facility staff. WKCC staff in attendance included but not limited to: Warden Steve Woodward, KDOC PREA Coordinator Bryan Henson, PREA Compliance Manager Davis Meeks, Deputy Warden DeEdra Hart, Deputy Warden Duke Pettit, KDOC Assistant PREA Coordinator Joe Martin, KCI Assistant Director CA Martin, Investigations Captain Tim Grimes, Investigations Sargent Lori Cordes, Lieutenant Jon Tangerose, UAII Mike McAlister, UAI Bobbi Jo Butts, UAI Roger Mitchell, DON Medical Robbie Beach, HAS Medical Monique Jones, UAII Chris Hatton, Mental Health Director D. Gene Reaney, UAII Steve Herring and Procedures Leann Lasters.

Following the entrance meeting, over five (5) hours was spent touring the facility. Areas included the living units to include segregation unit, inmate support building, laundry, gym/library/chapel, dining hall/kitchen, SAP/mental health building, yard, education building, health services, visiting rooms, shift supervisor areas and the minimum unit and the recycling center outside the fence. Also visited was a barn area where an allegation of an attempted staff on inmate sexual assault took place. Informal interviews were done with both staff and inmates while in the various areas throughout the facility.

An inmate roster was obtained and a random sampling of inmates was chosen. Attention was paid to special populations within the facility and those inmates who had reported sexual assault/harassment. Information in regards to zero tolerance for sexual abuse and harassment is easily accessible for the inmates. All inmates understood PREA and how to report allegations of sexual abuse and sexual harassment.

Formal staff interviews were completed with the Agency Head, PREA Coordinator, PREA Compliance Manager, Warden, Human Resources, Health Services, Shift supervisors, PREA investigators, Officers/Sergeants, Classification Treatment Officer (CTO), and Unit manager. Staff from all three shifts was interviewed. All staff is knowledgeable of KDOC/WKCC policies and their responsibilities if an allegation or incident occurs.

PREA case log/data and investigative files were made accessible for the audit team to examine prior investigations. Administrative investigations are handled by WKCC investigative staff and criminal investigations are handled by the Kentucky State Police and are done promptly, thoroughly, and attention is given to details. Investigative decisions are based upon evidence gathered.

PREA Standards and policies were reviewed for compliance. Questions were clarified and suggestions were made for procedural changes to bring WKCC into compliance with standards. WKCC staff made the appropriate changes while the auditors were on site.

WKCC complied with all applicable standards. Some practices/procedures were beyond requirements and received exceeds expectations.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Western Kentucky Correctional Complex (WKCC) is located at 374 New Bethel Road, Fredonia, Kentucky 424117. The mission is for WKCC to provide a medium security institution for the citizens of the Commonwealth of Kentucky; this is within the organizational framework of the Corrections Department, Division of Adult Institutions. This institution will provide housing, care, and safety for adult female felons while delivering resources to the inmate, staff and Commonwealth which are

designed to measurably reduce the probability of inmate re-incarceration.
The facility houses special management, medium and minimum level inmates. It is divided into two compounds; the medium compound located inside the secure perimeter and the minimum compound outside the secure perimeter. The entire complex has 76 total buildings. The housing units consist of three (3) open bay/dorm style housing units inside the fence and two outside and one (1) Special Management Unit which has forty-six (46) segregation cells. The designed facility capacity is 693 inmates. The inmate population was 653 on 11/4/14 when we started our on site audit. The age range of the population is 20-74 years of age. WKCC does not house youthful inmates under the age of 18. There is 209 staff working throughout the facility. There are 177 total cameras throughout the facility utilized to enhance the staff coverage.
All inmates that are initially admitted to WKCC will enter through the visiting building where they receive intake information to include PREA information. By law, the facility encourages appropriate behaviors through Meritorious Good Time which is based upon their programming and behavior. The facility also encourages appropriate inmate behavior by offer beauty shop availability based on inmate behavior. WKCC offers a wide variety of jobs for the inmates including off site work assignments for inmates in minimum custody. Recreational activities are available to inmates on both compounds.
All construction and redesigning of exiting units/areas have PREA considerations taken into account; this was evident during our tour when WKCC staff were able to show us the newly remodeled laundry area and the thought that went into it.

Number of standards exceeded: 3

Number of standards met: 37

Number of standards not met: 0

Number of standards not applicable: 3

115.11	ZERO TOLERANCE OF SEXUAL ABUSE AND SEXUAL HARASSMENT; PREA COORDINATOR

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

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

This is based on policies 14.7 and 3.22 and staff interviews.
The agency has written policy mandating zero tolerance towards all forms of sexual abuse and sexual harassment. (14.7 and 3.22) They have outlined prevention, detection and responding to allegations/incidents throughout the policy. (14.7, p.4, B)
The statewide PREA Coordinator has sufficient time and authority to develop and oversee compliance. He works closely with all of the facilities/institutions within the Kentucky Department of Corrections in developing policies and ensuring the proper practices and procedures are followed.
The PREA compliance manager at WKCC will coordinate efforts with the PREA Coordinator. They work with the rest of the PREA team and staff at the facility by to ensure policy is being followed appropriately.

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)

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

WKCC does not contract for beds with outside entities therefore this standard is N/A.

115.13	SUPERVISION AND MONITORING

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

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

While WKCC's staffing plan is based off budgetary allotments, consideration should be given to developing a written and well thought out staffing plan.

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)

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

This standard is not applicable as WKCC does not house youthful offenders.

115.15	LIMITS TO CROSS GENDER VIEWING AND SEARCHES

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

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

Based on policy 9.8 WKCC does meet this standard.
WKCC does not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. WKCC does not conduct cross-gender pat searches of female inmates. In the event a cross-gender search is conducted, the search must be documented explaining the deviation from policy. No incidents occurred during this time period.
WKCC does not restrict inmates from accessing programs in order to meet the requirements of this standard.
The facility requires staff to be aware of the inmate's state of undress. The presence of staff of the opposite gender shall be announced "Male officer on duty" prior to entering a housing unit where an inmate could be undressed. This procedure was witnessed during the tour of the facility as signs are posted at the Officer's stations when male staff is on duty in the dorms. During the tour of the facility and again during the interview process it was determined that supervisory staff of the opposite gender was not announcing their presence in dorms when making rounds. This issue was resolved while the auditors were on site by the Security Director issuing a memorandum to supervisory staff that they must announce "Male on the Unit" or "Male on the Walk" when entering living units.
Inmates are allowed to shower and perform bodily functions without nonmedical staff of the opposite gender viewing them, except in exigent circumstances or when the viewing would be incidental to routine security checks. The showers were single stalls with half walls so that inmates could only be seen from the shoulders up.
WKCC does not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. (9.8)
There were no noted inmates that identified as transgender or intersex in the complex.
There are two (2) observation cells in the Special management unit that have video cameras in them. The Warden assured auditors that the video feeds are not viewed live. He also agreed to issue a directive that any viewing of the video from those cameras would be by same sex staff only.

115.16	INMATES WITH DISABILITIES AND INMATES WHO ARE LIMITED ENGLISH PROFICIENT

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

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

Policy 14.7 (p.6, D.3) outlines what is required for the facility in instances of inmates with disabilities and inmate who are limited with English. The facility shall provide offender education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired or otherwise disabled, as well as to inmates who have limited reading skills.
WKCC has access to outside telephonic interpreter services for various languages. The facility has one in-house staff member who can provide interpreter services for Spanish speaking inmates. Also any inmate that is deaf or hard of hearing or those who are blind or with limited vision or those who have intellectual, psychiatric, or speech disabilities, or limited English shall have equal opportunity to participate in and benefit from the WKCC's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.
WKCC had prominent signs posted throughout the facility in Spanish as well as English. In addition to this, WKCC provided an offender PREA orientation handout.

115.17	HIRING AND PROMOTION DECISIONS

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

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

Policy 3.6 (F) outlines that Kentucky DOC shall not hire or promote anyone who (1) has engaged in sexual abuse of inmates in an institutional setting; (2) has been convicted of engaging in sexual activity in the community facilitated by force, the threat of force, or coercion, or (3) has been civilly or administratively adjudicated to have engaged in such activity. All incidents of sexual harassment perpetrated by an applicant against inmates shall be considered in making hiring and promotional decisions.
WKCC performs criminal background checks prior to hiring, despite the policy only requiring checks to be conducted within 30 days of hire. Documentation of such checks was provided by the Human Resources Officer. WKCC also conducts checks at least every 5 years of current employees and contractors who may have contact with inmates. (3.6, p.1, A.1)
Documentation of background checks was reviewed.

115.18	UPGRADES TO FACILITIES AND TECHNOLOGY

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

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

Policy 7.1 (D, E) Construction, Renovation and Expansion Guidelines outlines expectations for any facility/institution within the Department to follow. The facility laundry area had recently been remodeled and a video monitoring system was installed based on the observation that staff would not always have direct view of the area. This area was one of the locations visited by the auditors during the facility tour.
Meeting minutes were reviewed.

115.21	EVIDENCE PROTOCOL AND FORENSIC MEDICAL EXAMINATIONS

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

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

WKCC has a coordinated response to sexual abuse and sexual harassment. (14.7, p.8, #3) Staff has the responsibility to secure and preserve any crime scene and evidence until an investigator can arrive and assume possession.
When WKCC has an allegation of sexual assault, the inmate is evaluated by medical personnel and then transported to Baptist Health Madisonville for the forensic examination. That facility employs two SANE certified nurses.
Kentucky Association of Sexual Assault Programs (KSAP) will provide support services. (MOU)
On site mental health personnel work with the victim.
WKCC has a memo from the Kentucky State Police that they will investigate all incidents of sexual harassment and sexual assault reported to them.
WKCC has not had any incidents of sexual assault during this audit period. Memos included in documentation.

115.22	POLICIES TO ENSURE REFERRALS OF ALLEGATIONS FOR INVESTIGATIONS

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

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

Policy 14.7 outlines investigation procedures and Coordinated Response to Sexual Abuse and Harassment.
WKCC will ensure that an administrative and/or criminal investigation is conducted into any allegations of staff sexual misconduct or staff sexual harassment. Investigations of offender sexual abuse or sexual harassment shall be investigated, disciplined and referred for prosecution when warranted. Kentucky State Police will conduct all criminal investigations. (14.7, p.9, #9; p.10, H.1)

115.31	EMPLOYEE TRAINING

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

WKCC has policies (14.7, p.4, C) and training curriculum for all employees for all aspects of this standard. In the interview process it was clear that staff is aware of the zero tolerance policy for sexual abuse and harassment. They receive training on their responsibilities for prevention, detection, reporting and response.
WKCC staff is trained on the proper method to conduct pat and strip searches for the gender housed at their facility. Training curriculum and records were provided and reviewed.

115.32	VOLUNTEER AND CONTRACTOR TRAINING

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

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

Based upon policy 14.7 (p.4, C.2) WKCC ensures all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.
All volunteers and contractors are notified of the zero-tolerance policy in regards to sexual abuse and harassment. They are informed on how to report any incidents of such.

115.33	INMATE EDUCATION

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

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

Based on policy 14.7.
Inmates receive education during intake and orientation. The information includes the zero tolerance policy as well as procedures for reporting threatening or assaultive behavior of a sexual or possibly sexual nature. Inmate handbooks are provided to them. Brochures (English or Spanish) shall be given to the inmate. (14.7, p.5, D)
Within 30 days of intake to WKCC, all inmates receive a comprehensive education of their rights to be free from sexual abuse and sexual harassment, and to be free from retaliation for reporting incidents. The inmates also receive an overview of WKCC policies and procedures.
Inmate education is in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled, as well as to inmates who have limited reading skills.
Signs/posters are displayed throughout the facility on bulletin boards and near inmate telephones.
Documentation is maintained for all inmates.
During interviews and tour, inmates were educated on the subject of PREA regardless of their level or status within WKCC. WKCC had done a good job educated inmates.

115.34	SPECIALIZED TRAINING: INVESTIGATIONS

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Based on policy 14.7
WKCC ensures that all investigators have received training in conducting PREA related investigations in confinement settings. They are provided techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. WKCC maintains the documentation that the investigators have completed the required training in conducting sexual abuse investigations. (14.7, p.5, C.3)
Note, Kentucky DOC brought in the MOSS Group to conduct training for trainers, thus the department has readily accessible trainers to conduct new trainings as the need arises.

115.35	SPECIALIZED TRAINING: MEDICAL AND MENTAL HEALTH CARE

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Based on policy 14.7 (p.5, C.4) medical and behavioral health staff have been trained in: how to detect and assess signs of sexual abuse and sexual harassment and 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.
WKCC maintains documentation that medical and mental health practitioners have received the training. Medical and behavioral health care practitioners shall also receive the training mandated for staff members under section 115.31 or for contractors and volunteers under section 115.32 of the PREA standards.

115.41	SCREENING FOR RISK OF VICTIMIZATION AND ABUSIVENESS

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Based upon 14.7 (p.6, F.1) all inmates at WKCC are assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually

abusive toward other inmates. Logs of inmate receipt of said training(s) was provided. Inmate interviews confirmed the assessment completion and 30 day follow-up.
The initial intake screening is completed on intake prior to being placed into multi-occupancy housing. This is done to ensure no victim or potential victim of sexual abuse is housed with a sexual aggressor or potential sexual aggressor.
The intake screening considers the ten criteria for section (d) of this standard.
The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known, in assessing inmates for risk of being sexually abusive.
Within 30 days from the inmate's arrival WKCC, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by WKCC since the intake screening.
The inmate's risk level is reassessed when warranted due to a referral, request, and incident of sexual abuse or receipt of additional information that is related to 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.
WKCC 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.
WKCC does not detain inmates for the solely for civil immigration purposes.

115.42	USE OF SCREENING INFORMATION

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

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

Based upon policy 14.7 (p.7, #7) WKCC 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.
WKCC makes individualized determinations about how to ensure the safety of each inmate by utilizing the internal classification checklist. This thorough screening tool provides collection of information and reassessment if necessary.
WKCC considers the information available when determining the best housing and programming assignments for transgender and intersex inmates. The decisions are made on a case by case basis. These individuals are reviewed/assessed at least twice per year. WKCC did not identify any transgender or intersex inmates during the audit period.
Transgender or intersex inmates would be allowed to shower separately from other inmates.
WKCC does not house lesbian, gay, bisexual, transgender or intersex inmates in a separate area based upon their status of their identification. These individuals are housed and working among other inmates within the facility.

115.43	PROTECTIVE CUSTODY

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

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

Based upon policy 10.2 (p.3, h) Special Management Inmates WKCC did not involuntarily segregate inmates who are at high risk for sexual victimization unless a thorough assessment determined that there was no available alternative means of separation from likely abusers.
Inmates at a high risk for sexual victimization are not placed in involuntary segregation housing unless an assessment of all available alternative have been made and a determination that there is no alternative means of separation from likely abusers.
If an assessment cannot be completed immediately, WKCC may house an inmate in segregation for less than 24 hours while the assessment is being completed.
If an inmate had to be placed into involuntary segregation, WKCC would maintain the necessary documentation as to why this was done by conducting seven day reviews.
WKCC states that there were no inmates placed in involuntary segregation due to high risk of victimization during the audit period.

115.51	INMATE REPORTING

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

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

Based on policies 14.7 (p.7, G) and 3.22 (p.4, B) staff and inmate interviews and documentation of incidents/reports.
There are multiple methods for an offender to report allegations of sexual abuse or harassment. Such allegations may be reported verbally to any staff member or in writing in addition to using confidential methods. Inmates are able to access the toll free hotline (*552) via third parties. Inmates have the opportunity to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the KDOC or WKCC. Signs and information are posted throughout the facility.
WKCC 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 KDOC PREA Coordinator.

115.52	EXHAUSTION OF ADMINISTRATIVE REMEDIES	INMATE REP

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

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

Based upon 14.6, Grievance Procedure.
There are no time limits for submission of a grievance regarding an allegation of sexual abuse. The time limits for any grievance or portion thereof that does not allege an incident of sexual abuse or imminent sexual abuse shall be with the limits specified. (14.6, p.8, #3)
WKCC does not require an inmate to attempt to resolve with staff any alleged incident of sexual abuse by a staff member, contractor, or volunteer. (14.6, p.10, #9)
A final decision on the merits of any portion of a grievance alleging sexual abuse or appeal shall be issued by the warden's office within 48 hours and within five (5) calendar days by the commissioner or designee's office. (14.6, p.14, #4)
Grievances may be filed by a third party including fellow inmates, staff, family members, attorneys and outside advocate on behalf of the inmate. The inmate pursues any subsequent steps in the administrative remedy process. If the inmate declines to have the request processed on that individual's behalf, the facility shall document the inmate's decision.
Each inmate submitting a grievance concerning imminent sexual abuse shall state "Emergency Sexual Abuse Grievance" clearly on the grievance form. Each grievance alleging that an inmate is subject to substantial risk of imminent sexual abuse shall be treated as an emergency grievance. The Warden shall provide an initial response within two calendar days and shall issue a final decision within five calendar days. The initial response and final decision shall document the determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

115.53	INMATE ACCESS TO OUTSIDE CONFIDENTIAL SUPPORT SERVICES

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

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

Based on MOU and Inmate Handbook.
Victim services will be offered to the victim at the hospital with follow up behavioral health coordination between the hospital and WKCC contract behavioral health.
Inmates are referred to behavioral health for assessment of PREA. Behavioral staff will be assigned in this capacity for at least 90 days after the initial investigation. Referrals will be made as needed.
WKCC has the information for outside sources on postings in living units. Information includes addresses and telephone numbers. Inmates are also provided the brochure on community sexual assault programs.
Baptist Health Madisonville will contact the victim advocate for the inmates while they are at the hospital. The KASAP is currently providing this service. KDOC has been in communication with the KASAP which would provide victim advocacy and emotional support services. There is established a statewide MOU which would act as a template for each of the KDOC prison facilities.

115.54	THIRD-PARY REPORTING

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

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

WKCC has a method to receive third party reports of sexual abuse and sexual harassment and does distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.
Staff shall accept reports made verbally, in writing, anonymously, or third parties. The grievance process may be used by inmate or third party to report sexual abuse or harassment.

115.61	STAFF AND AGENCY REPORTING DUTIES

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

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

Based on 14.7 and 3.22, staff and inmate interviews, PREA checklist and investigative case log.
All staff shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment, whether it is in regard to an offender or another staff member. (14.7, p.8, #2)
Apart from reporting to designated supervisors, staff shall 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. (3.22, p.5, F)
Any employee who becomes aware of staff sexual misconduct has a responsibility to report it.
Contract employees and volunteers who observe or become aware of sexual activity of any sort between inmates are required to report the activity to the Facility Administration.
WKCC does not house any inmate under the age of 18.
Allegations including third party and anonymous reports are forwarded to the investigators.

115.62	AGENCY PROTECTION DUTIES

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

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

Based on 14.7 (p.7, G), staff and inmate interviews and PREA case logs.
All staff and inmates are responsible for being alert to signs of potential situations in which sexual

abuse or harassment might occur. WKCC will take immediate action if they learn an inmate is at a substantial risk of imminent sexual abuse.

115.63	REPORTING TO OTHER CONFINEMENT FACILITIES

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

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

Based on 14.7 (p.9, #10) and investigation notes.
When a report is received that an inmate has been the victim of sexual abuse or harassment while incarcerated at another facility or under the supervision of another office; as soon as possible, but no later than 72 hours of receiving the report, the head of the facility that has received the allegation shall notify the head of the facility where the alleged abuse occurred. The head of the facility receiving the notification shall ensure the allegation is investigated. WKCC will document any incidents.

115.64	STAFF FIRST RESPONDER DUTIES

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

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

Based upon policy 14.7 (p.8, #3) and staff interviews.
When WKCC learns of an allegation, they will separate the inmates. They will preserve and protect any crime scene until evidence can be collected. WKCC will take the necessary steps to ensure the physical evidence isn't destroyed including evidence that may be present on the abuser.
All first responders including those individuals not in security are under the same requirements when an allegation is made.
When interviewed, all staff including supervisors, treatment, health services, officers, etc. was aware of their responsibilities and were knowledgeable of WKCC's coordinated response to sexual abuse and sexual harassment.

115.65	COORDINATED RESPONSE

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

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

Based upon institutional plan of action.
WKCC has written institutional plans 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.
The facility has a written action plan that can be used for reference when an incident or allegations are reported. It encompasses steps to follow for ensuring all areas are notified and documentation is completed.
Although incidents are all different with varying components/circumstances to them, WKCC has a very inclusive approach to responding to and managing aspects of a reported incident/allegation through their incident report form. Staff has received good training and was well versed in this area. They are prepared should they encounter an allegation or incident. The facility leadership is notified and is involved right from the start which is an essential part of their response. WKCC staff has good communication among each other.

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 comments, including corrective actions needed if does not meet standard

Kentucky DOC has no collective bargaining agreement thus this standard is N/A.

115.67	AGENCY PROTECTION AGAINST RETALIATION

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

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

Based upon 14.7 and 3.22, retaliation monitoring worksheet, staff offender relations checklist and memos.
Based on interviews the investigative department will monitor decisions and incidents regarding inmates who report sexual abuse or harassment or who cooperate with investigations. The investigator will consider and review housing, disciplinary reports, record notes, internal classification checklist designation, behavioral health level changes, behavioral health referrals, staff offender relations checklist and grievances in order to determine if retaliation has or is occurring.
The investigator will monitor retaliation twice a week for at least 90 days unless there is a concern or further information to indicate the need for further monitoring. In the case of inmates, periodic status checks are conducted.
Appropriate measures will be taken for any individual who expresses a fear of retaliation.
In inmate interviews there was cause for some concern by the auditors that retaliation monitoring

was not as comprehensive as reported. In discussions with facility leadership, auditors were assured that this was an area that would be looked at. Prior to the auditors leaving there had been follow-up conducted into concern areas.

115.68	POST-ALLEGATION PROTECTIVE CUSTODY

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

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

Based on email from the PREA Compliance Manager to shift supervisors as a reminder of information contained in policy 10.2, Inmate Segregation.
Inmates determined to be at high risk for sexual victimization or who have been determined to have suffered sexual abuse shall not be placed in involuntary segregation unless a thorough assessment determines that there is no available means of separation from likely abusers. They will only be housed in involuntary segregation until an alternative means of separation can be arranged.

115.71	CRIMINAL AND ADMINISTRATIVE INVESTIGATIONS

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

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

Based on policy 14.7 (p.10), staff interviews, PREA incident reports, investigative reports, records retention schedule, and memos.
WKCC conducts its own administrative investigations into allegations of sexual abuse and sexual harassment. Criminal investigations are conducted by the Kentucky State Police. They will conduct investigations promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.
Where sexual abuse is alleged, the Kentucky State Police has issued a memorandum that proper evidence protocols will be followed.
Kentucky State Police will not polygraph any alleged inmate victim.
WKCC will attempt to determine if there were any staff actions or failures to act that could have contributed to an incident. They will document any relevant information obtained including description of the physical and testimonial evidence. They will document any reasoning for credibility assessments, investigative facts and findings.
WKCC will cooperate with any criminal investigation or proceedings and provide any

documentation necessary. They will maintain communications on the status of the referred investigations.
All written reports will be retained for the duration of the inmate's incarceration or employment by the agency, plus 5 years.
The investigations do not terminate if the alleged abuser or victim are no longer employed or incarcerated.

115.72	EVIDENTIARY STANDARDS FOR ADMINISTRATIVE INVESTIGATIONS

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

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

Based upon policy 14.7 (p.7, F.9) and staff interviews.
Investigative staff was aware that the purpose of a formal investigation is to determine, based on the preponderance of evidence, where there are sufficient facts or evidence to substantiate, refute or dismiss allegations of criminal activity or administrative violations.

115.73	REPORTING TO INMATES

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

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

Based on policy 14.7 (p.10, H.6) and staff and inmate interviews.
WKCC will ensure that an inmate is notified as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. They will remain in contact with any outside agency in order to inform the inmate.
WKCC will inform the inmate when the staff member is no longer posted within the inmate's unit; no longer employed at the facility; indicted on a charge related to sexual abuse within the facility; or learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

115.76	DISCIPLINARY SANCTIONS FOR STAFF

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

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

Based on policy 3.22 (p.5, E) and example documentation.
Staff shall be subject to disciplinary sanctions up to and including termination for violating WKCC policy in regards to sexual abuse or sexual harassment. Termination is the presumptive disciplinary sanction for staff who engaged in sexual abuse.
All terminations for violations of the sexual abuse or sexual harassment policies or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies if found to be criminal.

115.77	CORRECTIVE ACTION FOR CONTRACTORS AND VOLUNTEERS

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

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

Based on policy 3.22 (p.5). Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies if found to be criminal, and to relevant licensing bodies.
The facility will take the appropriate remedial measures and will consider whether to prohibit further contact with inmates.

115.78	DISCIPLINARY SANCTIONS FOR INMATES

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

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

Based on policies 15.2 and 14.7, staff and inmate interviews.
WKCC holds inmates accountable and will impose disciplinary sanctions following an administrative or criminal finding that the inmate engaged in inmate-on- inmate sexual abuse.
Disciplinary sanctions will occur and will be based upon the circumstances of the incident, inmate's disciplinary history, and similar sanctions imposed on other inmates with comparable offenses.
WKCC will consider the mental health of an inmate prior to imposing discipline. (14.7, E.5)
WKCC will refer to inmates to mental health staff to address any underlying reasons or motivations for sexual abuse and will determine if the inmate's participation is a condition for access to programming or other benefits.
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.
WKCC prohibits all sexual activity between inmates. They will take the appropriate action when incidents of sexual activity that are not coerced or considered sexual abuse occur.

115.81	MEDICAL AND MENTAL HEALTH SCREENINGS; HISTORY OF SEXUAL ABUSE

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Based on policy 14.7, case notes as well as staff and inmate interviews.
Inmates that have been identified as having been sexually victimized in an institutional setting or in the community will be offered follow up with medical or behavior health practitioners within 14 days of the intake screening. (14.7, p.7, #3)
Inmates that have been identified as previously perpetrating sexual abuse, whether it occurred in an institutional setting or in the community, shall be offered a follow up meeting with a behavioral health practitioner within 14 days of the intake screening. (14.7, p. 7, #3)
Dissemination of information to necessary facility staff shall be made after completion of the screening, as necessary to ensure that the information being used to make determinations regarding housing, bed, work, education, and program assignments and to ensure appropriate follow-up can be provided. (14.7, p.7, #4)
Medical and mental health practitioners will obtain informed consent from an inmate prior to reporting information about incidents that did not occur in the facility. (14.7, p.7, #5)

115.82	ACCESS TO EMERGENCY MEDICAL AND MENTAL HEALTH SERVICES

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Based on policy 14.7, WKCC action plan, Reporting Form and interviews.
Medical and mental health will ensure that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. (14.7, p.6, E.4)
Staff will refer inmates to medical and mental health practitioners are appropriate.
Inmate victims are offered timely information and access to emergency contraception and sexual transmitted disease prophylaxis. Inmate victims of sexually abusive vaginal penetration while incarcerated will receive a pregnancy test. (14.7, p6, E.2)
Any inmate that is requiring treatment will not incur the cost for the treatment. (14.7, p.6, E.4)

115.83	ONGOING MEDICAL AND MENTAL HEALTH CARE FOR SEXUAL ABUSE VICTIMS AND ABUSERS

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

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

Based on policy 14.7, WKCC Sexual Reporting Form.
WKCC will offer medical and mental health evaluations as appropriate. Treatment will be given to inmates who have been victimized by sexual abuse while incarcerated. (14.7, p.6, E.2)
The evaluation and treatment of victims will include any necessary follow up treatment plans and any referrals for continued care.
Inmate victims of sexually abusive vaginal penetration will be offered pregnancy tests. Inmates will receive timely and comprehensive information to all lawful pregnancy-related medical services. (14.7, p.6, E.2)
Inmate victims will also be offered tests for sexually transmitted diseases as appropriate.
Treatment will be provided without cost to the inmate.
A mental health evaluation of all known inmate-on-inmate abusers will be conducted within 60 days of learning of the abuse history and they will be offered treatment when appropriate. (14.7, p.6, E.3)

115.86	SEXUAL ABUSE INCIDENT REVIEWS

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

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

Based on policy 14.7, Sexual Incident Review Form, staff interviews.
The facility will conduct of review at the conclusion of every sexual abuse investigation that has been determined to be substantiated or unsubstantiated. This review will occur ordinarily within 30 days of the conclusion of the sexual abuse investigation. (14.7, p.10, I)
The WKCC team includes upper level management with input from supervisors, investigators medical and mental health practitioners.
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. WKCC 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. WKCC will implement recommendations and will document the reasons for not doing so.

115.87	DATA COLLECTION

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Based on policy 14.7, Kentucky Aggregate PREA Data, Kentucky DOC Website. WKCC will collect accurate, uniform date for every allegation of sexual abuse. Data shall be aggregated at least annually and shall include the data necessary to respond to all questions from the most recent Survey of Sexual Violence conducted by the DOJ. (14.7, p.12, M)

115.88	DATA REVIEW FOR CORRECTIVE ACTION

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Based on KDOC annual report and website, specialized staff interviews. WKCC management team will review all data collected in order to assess and improve the effectiveness of the sexual abuse prevention, detection, and response policies, practices and training.

115.89	DATA STORAGE, PUBLICATION, AND DESTRUCTION

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

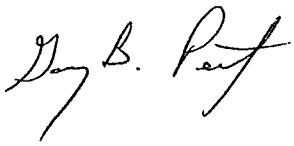
☐ Does Not Meet Standard (requires corrective action)

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

Based on policy 14.7, Data Retention Memo, and PREA information from KDOC website. KDOC will collect data and securely maintain the data for 10 years after the date of the initial collection. This data can be obtained on the website which compares the previous years. All personal identifiers have been removed and not published for the public.

AUDITOR CERTIFICATION:

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



Gary B. Peitz
Auditor Signature

November 26, 2014
Date