

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

Date of report: June 20, 2017

Auditor Information			
Auditor name: Jennifer R. Sheahan			
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Email: sheahan_jennifer@yahoo.com			
Telephone number: 973-896-8603			
Date of facility visit: April 17-18, 2017			
Facility Information			
Facility name: Kentucky Correctional Institution for Women			
Facility physical address: 3000 Ash Avenue, Pewee Valley, KY 40056			
Facility mailing address: <i>(if different from above)</i> P O Box 337, Pewee Valley, KY 40056			
Facility telephone number: 502-241-8454			
The facility is:	<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		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Janet Conover, Warden			
Number of staff assigned to the facility in the last 12 months: 222			
Designed facility capacity: 720			
Current population of facility: 719			
Facility security levels/inmate custody levels: Minimum, medium, maximum			
Age range of the population: Adults 19-76			
Name of PREA Compliance Manager: Shannon Butrum		Title: Training Coordinator	
Email address: shannon.butrum@ky.gov		Telephone number: 502-241-8454 ext. 2612	
Agency Information			
Name of agency: Kentucky Department of Corrections			
Governing authority or parent agency: <i>(if applicable)</i> Justice and Public Safety Cabinet			
Physical address: 275 East Main Street, Frankfort, KY 40602			
Mailing address: <i>(if different from above)</i> P O Box 2400, Frankfort, KY 40602			
Telephone number: 502-564-4360			
Agency Chief Executive Officer			
Name: Rodney Ballard		Title: Commissioner	
Email address: Rodney.ballard@ky.gov		Telephone number: 502-564-4726	
Agency-Wide PREA Coordinator			
Name: Charles A. Wilkerson		Title: PREA Coordinator	
Email address: charlesa.wilkerson@ky.gov		Telephone number: 502-382-7245	

AUDIT FINDINGS

NARRATIVE

The on-site visit to conduct a Prison Rape Elimination Act (PREA) compliance audit of the Kentucky Correctional Institution for Women was performed on April 17-18, 2017, by DOJ Certified Auditor, Jennifer R. Sheahan, with the assistance of DOJ Certified PREA Auditor Leah Michele Coffin. The Prisons and Jail Standards used for this audit became effective August 20, 2012.

The pre-audit phase included reviewing the data contained in the PRE-Audit Questionnaire as well as documentation submitted to support PREA compliance. The documentation reviewed included agency policies, procedures, inmate education materials, inmate receipt for PREA information and education attendance records, forms, staff/contractor/volunteer training curriculum, staff/contractor/volunteer training acknowledgements, personnel records, medical and mental files, organizational charts, PREA posters, investigation reports, grievances and Memorandums of Understanding with local agencies to provide victim services.

In preparation for the on-site audit, the facility posted the required PREA Audit Notice March 6, 2017, which meets the required six-week posting prior to the commencement of the on-site audit. The agency provided email notification indicating the posters were displayed as required. During the on-site audit, auditors observed the notices in the following areas: facility entrance, main control, administrative areas, all inmate housing units, dining hall, visit areas, intake, medical department, mental health services and chapel. The auditor received 4 letters prior to the on-site audit. One inmate sent the same letter twice.

On April 17, 2017, an entrance meeting was conducted. Auditors met with the Janet Conover (Warden), Charles A. Wilkerson (PREA Coordinator), Harley Allen (PREA Administrator), Joe Martin (PREA Administrator), Vanessa Kennedy (Deputy Warden), Shawn Adkins (Deputy Warden), Shannon Butrum (PREA Compliance Manager) and Rebecca Denham (Captain-Internal Affairs) for introductions and to explain the audit process. Following the entrance meeting, auditors toured the facility and observed facility schematics, camera and mirror locations, staff supervision of inmates, housing unit layouts including toilet and shower areas, placement of PREA information, security monitoring and PREA audit notices. The tour was facilitated by Janet Conover (Warden). All areas of the facility were observed during the tour. These areas included: intake, medical department (including medical housing), mental health department (including a close-watch Restrictive Housing Unit), gym/indoor recreation area, outside recreation yard, education/programs building, Chapel, food service, maintenance area, laundry and all housing units. Auditors noted shower coverings are in place for privacy and toilet stalls are partitioned. Telephones in inmate housing areas were tested for access to PREA internal and external reporting hotlines and support services. All hotline numbers connected to a live operator who was able to take information related to a PREA allegation or provide support services. The PREA Coordinator received emails indicating a hotline call had been received from KCIW. The emails were provided to the auditors for review. During the tour, auditors conducted informal interviews of staff and inmates. Auditors scheduled on-site audit activities during all shifts to allow for the observation of each shift. On-site review was conducted of the following: agency protocols and procedures related to the PREA policies, inmate education materials, inmate files including receipts for PREA information and education attendance records, personnel records, including background checks and staff/contractor/volunteer training acknowledgements, medical and mental files, intake process, PREA posters, completed investigation reports, grievances, log book entries/unannounced rounds, intake process and risk assessments.

During the on-site audit, auditors were provided with office space to conduct private interviews with inmates. Auditors were also provided with office space to privately interview staff. Auditors used the PREA Compliance Audit Instrument-Interview Guides to conduct formal interviews with staff/contractors/volunteers and inmates. Auditors interviewed 39 total inmates (29 random inmates, 2 inmates identifying as LGBTI, 2 disabled or limited English proficiency inmates, 3 inmates who reported sexual abuse and 3 inmates who wrote letters to the auditors prior to the on-site visit). Inmates were chosen at random from a population list that indicated housing unit. At least one inmate from every housing unit was interviewed. LGBTI inmates were randomly selected from a list of inmates who self-identified as LGBTI during risk assessment. Auditors interviewed more than ten percent of the total population because they wanted a larger sample size to get a better understanding of the PREA practices within the facility. Inmate interviews included the following topics: knowledge of the facilities zero tolerance policy for sexual abuse and sexual harassment, receipt of PREA-related information and materials, prohibited sexual conduct and potential for disciplinary action for such conduct, their right to be free from sexual abuse/sexual harassment and retaliation for reporting an incident or cooperating with an investigation, timeliness of PREA risk assessment, knowledge of reporting options, including to an outside agency, awareness of medical, mental health and victim services available at the facility, and protection from abusers. Inmates interviewed stated they felt safe in the facility because staff takes all allegations of sexual abuse and sexual harassment seriously. Inmates stated they think allegations of sexual abuse and sexual harassment are addressed uniformly, in a timely manner and measures are in place to separate alleged victims from alleged abusers immediately.

Fifty-one (51) facility staff members, including contractors and volunteers, were interviewed (17 random staff members, 22 specialized staff, 10 volunteers and 2 contractors). Staff were randomly selected from staffing rosters provided by the facility. Staff from all shifts was interviewed. Contractors and volunteers were randomly selected from the contractor and volunteer lists provided to the auditors. Auditors interviewed the Kentucky Department of Corrections Commissioner, PREA Coordinator, Warden and PREA Compliance Manager. Specialized staff interviewed included Investigative Staff, Retaliation Monitor, First Responders, Administrative/Human Resources Staff, Intake Staff, Segregation Staff, Shift Supervisors (Captains, Lieutenants and Sergeants), Medical/Mental Health Staff, SAFE/SANE Nurse at local hospital (telephone interview) and local advocate crisis center (telephone interview). Staff interviews included the following topics:

knowledge of the agencies zero tolerance policy for sexual abuse and sexual harassment, pre-service and annual PREA training, reporting procedures for staff and inmates, including the ability to report privately, knowledge of prevention and detection procedures and first responder duties.

In the past 12 months, the facility reported 115 PREA incidents (12 substantiated 44 unsubstantiated, 59 unfounded). The auditors reviewed the 12 substantiated incidents, 4 of the unsubstantiated incidents and 5 of the unfounded incidents. A random sampling of unsubstantiated and unfounded incidents was selected from a list of Sexual Offense Allegations provided by the facility. The unsubstantiated and unfounded incidents were reviewed to determine the PREA protocols were initially followed and the investigation was completed according to KCIW policy.

On April 18, 2017, an exit meeting was conducted. In attendance were: Janet Conover (Warden), Charles A. Wilkerson (PREA Coordinator), Harley Allen (PREA Administrator), Joe Martin (PREA Administrator), Vanessa Kennedy (Deputy Warden), Shawn Adkins (Deputy Warden), Shannon Butrum (PREA Compliance Manager) and Rebecca Denham (Captain-Internal Affairs).

DESCRIPTION OF FACILITY CHARACTERISTICS

The Kentucky Department of Corrections Mission Statement 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 process; and, to provide opportunities for offenders to acquire skills which facilitate non-criminal behavior. The Kentucky Correctional Institution for Women (KCIW) is an 11-building complex that sits on 270 acres in Pewee Valley, Kentucky. The facility is a multi-custody facility that houses minimum through maximum security inmates. An inmate on death row is considered maximum custody. The institution is a campus-style setting with two (2) multiple housing units and two (2) dorm-style housing units. Each housing unit has a control center, recreation/day room and one bathroom area that has several toilets and shower stalls. Toilet areas are partitioned to allow for privacy. Shower stalls are partitioned to allow 1 inmate at a time to shower and shower curtains allow for privacy. Three housing units, including the Restricted Housing Unit (RHU) are equipped with wet cells. The wet cells allow for adequate privacy. RHU showers allow for inmates to shower one at a time and coverings are in place to allow for privacy. There is an on-site medical and mental health unit, including a close-watch RHU. There are a total of 251 cameras; 213 interior and 38 exterior. Concave/convex mirrors are also utilized to minimize blind spots. There are a variety of educational and therapeutic programs available to the inmates. Forensic medical exams are conducted off-site. Victim advocacy services are provided by Kentucky Association of Sexual Assault Programs. KCIW is accredited by the American Correctional Association.

During the on-site audit, the population was 719. The age range of the inmates was 19-76. During the past 12 months, the facility reported in admitted 842 inmates. There were 766 inmates whose length of stay was 72 hours or more and 574 inmates whose length of stay was 30 days or more. At the time of the on-site audit, there were 35 inmates who were admitted prior to August 20, 2012. The agency reported 101 newly hired staff within the past 12 months. The facility reported 6 contracts with contractors who may have contact with inmates. There are 166 contractors and volunteers approved to enter the facility.

SUMMARY OF AUDIT FINDINGS

Number of standards exceeded: 3

Number of standards met: 40

Number of standards not met: 0

Number of standards not applicable: 0

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.

The Kentucky Correctional Institution for Women (KCIW) has a zero tolerance policy in place that addresses all forms of sexual abuse and sexual harassment. Kentucky Department of Corrections policies include definitions of sexual abuse and sexual harassment. There is a designated agency-wide PREA Coordinator. The PREA Coordinator was appointed on November 15, 2014. The facility has a PREA Compliance Manager who oversees compliance with the zero-tolerance policy and all other PREA standards. The PREA Coordinator was interviewed. He stated he has sufficient time and authority to manage his PREA-related responsibilities. He stated he reports directly to the Deputy Commissioner. The KY DOC Commissioner was interviewed and confirmed the PREA Coordinator has the authority to develop and implement PREA related policies and procedures. The Commissioner confirmed the PREA Coordinator reports to the Deputy Commissioner. The Commissioner reported he is in close communication with the Deputy Commissioner and the PREA Coordinator about PREA-related matters. The PREA Coordinator confirmed this when he explained that if an issue arises around compliance with the PREA standards he meets with the Commissioner to discuss the issue and the appropriate corrective action plan. The PREA Compliance Manager confirmed she receives regular guidance from the PREA Coordinator through emails, telephone calls and site visits. The PREA Compliance Manager stated she has sufficient time and authority to manage all PREA-related responsibilities. The PREA Compliance Manager reports to the Warden. The Warden confirmed the PREA Compliance Manager operates with her authority on matters related to PREA. Agency and facility Tables of Organization were reviewed to confirm reporting lines and levels of authority. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 3.22; Policy 14.7; Pre-Audit Questionnaire; Agency and facility Tables of Organization; Interviews with PREA Coordinator and PREA Compliance Manager

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)

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 Kentucky Department of Corrections contracts with four (4) agencies for the confinement of inmates in the community. All of the contracts were reviewed. All of the contracts include language requiring compliance with the PREA standards. The PREA Coordinator confirmed through interview that the contracted agencies are monitored for compliance with the PREA standards. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Chrysalis SAMHSA Contract; Cumberland Hope Community Center Contract; HOPE SAMHSA Contract; Trilogy Center for Women

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)

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 Kentucky Correctional Institution for Women (KCIW) has developed and maintains a staffing plan compliant with this standard. The staffing plan reviewed was developed utilizing a formula that takes into account the total number of posts to be manned per shift as well as the amount of employees available to man them. The formula takes into consideration generally accepted correctional practices. There are two (2) twelve (12) hour shifts per day. There have been no judiciary, Federal, internal or external auditing body findings of inadequacy. The staffing plan and its review take into consideration the general layout of the facility, blindspots and camera/mirror placement and the general inmate population makeup. Also included in the staffing plan and its reviews are the amount and placement of supervisory staff on all shifts. The daily schedule delineates supervisory staff and their designated post. The scheduling of institutional programming was considered during the initial development of and subsequent reviews of the staffing plan. Lastly, the number of PREA allegations is considered. The staffing plan is reviewed on a quarterly basis and amended as needed with input from the KCIW Administrative staff, including the PREA Compliance Manager. The agency PREA Coordinator is consulted as part of the review process. As required by 115.13 (c) 1-3, the assessment includes a review of the established staffing plan, deployment of video monitoring systems and other use of technology and resources available to commit to compliance to staffing plan. The plan was predicated on an inmate population of 720. No deviations from the staffing plan were noted based on facility self-reporting and staff schedules provided documenting posts covered and the use of overtime staff to cover mandatory staffing requirements. Staffing is complemented with the deployment of 251 video cameras inside and outside of the facility. Concave/Convex mirrors are also utilized to minimize blind spots. The camera system is assessed daily to identify any inoperable equipment and the results are documented and communicated to KCIW Administrative staff. Upon review of work order provided, repairs to the camera system are completed in a timely manner. The facility provided a written plan to upgrade the camera system to enhance the safety of the staff and inmates. Supervisory staff conducts unannounced rounds that are documented in the Shift Log that covered all shifts. The on-site audit included an examination of staffing plan meeting minutes, staffing rosters, staff schedules, housing assignments and Shift Log books. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 3.22; Pre-Audit Questionnaire; Facility Tour; Interviews with facility staff and inmates; KCIW staffing plan, staff rosters, staff schedule and inmate population reports; Log books showing unannounced rounds; Post Orders; Completed work orders; Quarterly staffing plan review meeting minutes

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)

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 Kentucky Correctional Institution for Women (KCIW) policy addresses the housing of youthful inmates. KCIW did not house any youthful inmates at the time of the on-site audit nor did they house a youthful inmate in the 12 months prior to the audit. However, the policy includes the procedures for housing a youthful inmate to include sight and sound separation as well as preventing physical contact with adult inmates. The policy also provides for adequate programming, including education, work opportunities, telephone use, recreation and visitation. Facility policy mandates youthful offenders would be housed in the Lonnie Watson C-Wing. Observation of this area confirmed youthful inmates housed in this area would have sight and sound separation from adult inmates and would be prevented from contact with adult inmates. The PREA Compliance Manager confirmed through interview youthful inmates would have access to programming, telephone use, recreation and visitation. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 18-05-02; Interview with PREA Compliance Manager; Inmate population reports; Facility Tour

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)

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 Correctional Institution for Women (KCIW) policies prohibit cross-gender strip searches and cross-gender visual body cavity searches except in exigent circumstances or when conducted by a medical practitioner. The policies also prohibit searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. In the past 12 months, the facility has not conducted any cross-gender pat down, strip searches or visual body cavity searches. Interviews with the Warden and PREA Compliance Manager confirmed facility staff do not conduct cross-gender strip and pat searches or visual body cavity searches. Male staff announced their presence verbally prior to entering all areas where female inmates shower, change clothes or perform bodily functions during the facility tour. Control Center staff make announcements in the housing areas at the beginning of every shift if a cross gender staff person is assigned to the unit. In addition to the verbal announcements, "Male on Duty" signs were displayed each time a male employee enters a housing unit. Some inmates interviewed stated they weren't afforded privacy from male staff when showering in certain housing units. The inmates stated they thought they could be seen while showering by the staff in the control area and by the camera. Even though there were individual partitions and doors on the showers, inmates stated they thought staff in the control area and camera views could see over the door. The auditors returned to the identified housing units and re-examined the shower areas as well as the views from the control center and the camera views. One auditor stood in the showers while the other auditor looked out the control center window. The auditor in the showers could not be seen by the auditor in the control center. In addition, the auditor in the showers could not be seen on the camera by the auditor in the control area. It was determined there was no merit to the complaints the inmates made about being viewed by control center staff or the camera views while showering. During the facility tour, the auditors observed adequate privacy for showering, use of toilet and dressing in general population housing. Staff and inmates interviewed confirmed that dressing is prohibited in cells/dorms and must be done in the bathroom stall or shower area. Toilet areas are partitioned to allow for privacy. Shower stalls are partitioned to allow 1 inmate at a time to shower and shower curtains allow for privacy. Interviews with staff confirmed they receive training on cross gender pat-searches and searches of transgender and intersex inmates. The training curriculum was reviewed. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 3.22; Policy 9.8; Policy 14.7; Pre-Audit Questionnaire; Facility Tour; Interviews with facility staff and random inmates; Training curriculum; Staff training acknowledgements

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)

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 Kentucky Correctional Institution for Women (KCIW) takes appropriate steps to ensure inmates with disabilities and inmates with limited English proficiency (LEP) have an opportunity to participate in and benefit from the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Inmate handbooks, PREA handouts and PREA posters throughout the facility displayed in English and Spanish were reviewed prior to and during the on-site visit. PREA related information is also available in Braille and large print. In order for inmates to receive PREA information in a format they can understand, all of these material formats are available for staff to issue to inmates at admission. KCIW has a contract for telephone interpreter services only with Logsdon Endeavors to interpret for inmates, as needed. Logsdon Endeavors assists LEP inmates by interpreting orientation materials (inmate handbooks, PREA handouts, PREA posters) and for assistance with reporting PREA related issues to facility staff. Logsdon Endeavors Contract was reviewed to verify interpreter services are available to inmates. Logsdon Endeavors can be accessed by telephone by facility staff. A variety of languages are available for immediate translation. For the hearing impaired, KCIW has a Video Relay Interpreter. Inmates with learning disabilities or other impairments would receive assistance with orientation materials and reporting PREA related issues from staff. Random staff interviewed confirmed inmate interpreters, readers or assistants are not utilized in handling any PREA related matters. LEP inmates were chosen at random from a list provided by the facility. Inmates who were deaf/hard of hearing, in a wheelchair and low vision were interviewed. Inmate interviews confirmed staff review all PREA orientation materials to ensure they understand the information received. At the time of the audit, there were no inmates who spoke languages other than English. Auditors used the Video Relay Interpreter to interview a hearing impaired inmate. She confirmed she received PREA related materials and was assisted with any questions that arose during the intake and orientation. KCIW exceeds compliance with the standard based on PREA information available in Braille and large print and accessibility of the Video Relay Interpreter.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Facility Tour; Interviews with random facility staff; Interviews with LEP and hearing impaired inmates; Logsdon Endeavors Contract; PREA posters, handouts and inmate handbook in Spanish, Braille and large print; Video Relay Interpreter

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)

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 Kentucky Correctional Institution for Women (KCIW) policies prohibit hiring, promotion or retention of any employee and prohibit the enlistment of any contractor or volunteer as required by this standard. The facility conducts an extensive background check for all new hires. The process includes finger printing and NCIC criminal background checks conducted by the Kentucky State Police and The Federal Bureau of Investigation. The new hire process was reviewed during the interview with the Human Resources Manager. During the hiring process,

the Human Resources department makes its best efforts to contact all prior institutional employers for information regarding substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse and the results are documented on the Employment References Check form. Contractors and volunteers receive NCIC criminal background checks in accordance with this standard. Five year background checks are completed utilizing the aforementioned process for employees, contractors and volunteers who may have contact with inmates. As part of the Code of Ethics, staff is required to disclose any interaction with law enforcement immediately. PREA disclosure questions are included on the pre-employment application and background check authorization forms. Random Human Resources files were reviewed from a staffing list provided to auditors. Forms reviewed prior to and during the on-site audit included pre-employment applications, background check authorization forms, completed background checks (new hire, promotion and 5 year) for staff/contractors/volunteer, employment application and annual PREA disclosures. Interviews with the Human Resource Manager, Internal Affairs Department and a review of policy and documentation confirm KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 3.1; Policy 3.6; Code of Ethics; Pre-Audit Questionnaire; Interview with Human Resource Manager and Internal Affairs Department; Review of background checks (pre-service and 5 year) for staff, contractors, volunteers and promotion decision documents

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)

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 Kentucky Correctional Institution for Women (KCIW) policy addresses the mandates of this standard. The facility has an extensive video and visual monitoring system in place. The facility provided a written plan to upgrade the camera system to enhance the safety of the staff and inmates. There have been no substantial expansions or modifications of the facility in the last 12 months. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 7.1; Pre-Audit Questionnaire; Facility tour; Review of current camera system and upgrade plan; Interviews with Warden, PREA Coordinator and PREA Compliance Manager

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)

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 Kentucky Correctional Institution for Women (KCIW) conducts investigations into all allegations of sexual abuse or sexual harassment

through the Internal Affairs (IA) department using a uniform evidence protocol that assists in the collection of usable physical evidence. IA conducts administrative investigations by specially trained investigators. When a PREA allegation appears to be criminal, KCIW refers the case to the Kentucky State Police (KSP) for investigation and possible prosecution. KCIW cooperates fully with all KSP investigations. A memo from KSP indicating all KSP Troopers receive training in PREA related investigations was reviewed. Random staff interviewed was aware of the facilities' procedures to obtain usable physical evidence if sexual abuse is alleged. KCIW has a Memorandum of Understanding (MOU) with Kentucky Association of Sexual Assault Programs (KASAP) to provide support services. The PREA Compliance Manager confirmed all forensic exams take place at the University of Louisville Hospital. A telephone interview was conducted with SANE Nurse. She confirmed all forensic medical examinations are completed at the University of Louisville Hospital, without financial cost to the inmate. She stated KASAP has a staff of 227 SANE Nurses. Although the MOU with KASAP does not include SAFE/SANE, the SANE Nurse interviewed confirmed KASAP is responsible for training SAFE/SANE personnel and for maintaining an active list of SAFE/SANE practitioners. KCIW also has an MOU with KASAP to provide victim advocacy services, including hospital and investigatory interview accompaniment. In addition, victim support services include emotional support, crisis intervention, information and referrals. A telephone interview was conducted with KASAP PREA Coordinator. She confirmed victim services are available, including the advocacy services previously listed, at no cost to the inmate and are confidential. In addition, she stated KASAP is involved in the training of KCIW investigative staff. Auditors tested the posted KASAP telephone numbers for victim advocacy services and operators confirmed services were available to inmates 24 hours a day, are confidential and would be provided at the hospital upon request. Auditors reviewed emails received by the Warden and the PREA Coordinator informing them a call was received on the KASAP hotline number. No SAFE/SANE exams were conducted in the past 12 months. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; KSP Evidence Collection Guide and investigation training memo; Interviews with SANE Nurse and KASAP PREA Coordinator; Spoke with hotline operator(s) of KASAP; Interviews with IA Investigative Staff, random staff and inmates; KASAP hotline notification emails

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)

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 Kentucky Correctional Institution for Women (KCIW) conducts investigations into all allegations of sexual abuse or sexual harassment through the Internal Affairs (IA) department. Refer to 115.21 for a description of the investigation and referral process. The IA Captain was interviewed and was knowledgeable of evidence protocol and the investigation process. In the past 12 months, the facility reported 115 PREA incidents (12 substantiated 44 unsubstantiated, 59 unfounded). The auditors reviewed the 12 substantiated incidents, 4 of the unsubstantiated incidents and 5 of the unfounded incidents. A random sampling of unsubstantiated and unfounded incidents was selected from a list of Sexual Offense Allegations provided by the facility. The unsubstantiated and unfounded incidents were reviewed to determine the PREA protocols were initially followed and the investigation was completed according to KCIW policy. One allegation involving staff-on-inmate sexual abuse referred for criminal prosecution was reviewed. All investigations were completed in accordance with KCIW policy. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; KSP General Order OM-C-1; Pre-Audit Questionnaire; KSP Evidence Collection Guide and investigation training memo; Interviews with IA Captain; Investigation reports for allegations of sexual abuse and sexual harassment

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)

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 Kentucky Correctional Institution for Women (KCIW) policy requires all new employees receive training relative to their PREA responsibilities prior to assuming their duties. The Institutional Pre-Service Academy provides PREA training during week one. New employees receive facility specific PREA training upon assignment to KCIW. All current employees receive annual PREA in-service training. The training includes a review of the sexual abuse and sexual harassment policies and procedures. In addition, employees are required to complete on-line PREA training. The training curriculum and lesson plan reviewed supports compliance training on zero-tolerance for sexual abuse and sexual harassment, fulfillment of staff responsibility to prevent, detect, report and respond to allegations of sexual abuse and sexual harassment, inmate rights to be free from sexual abuse and sexual harassment, staff and inmate rights to be free from retaliation for reporting or participating in an investigation of sexual abuse and sexual harassment, dynamics and signs of and common responses to sexual abuse and sexual harassment, avoiding inappropriate relationships with inmates, effective and professional communication with LGBTI and gender non-conforming inmates and complying with relevant mandatory reporting laws. Staff transferring to KCIW from all male facilities are re-trained on PREA related topics. Training documents were reviewed to support all staff with inmate contact have been trained. All staff sign an acknowledgement they understood the training received. Interviews with staff confirmed they understood the training as it pertains to all the areas listed above. All staff carries a card outlining required actions as a first responder. KCIW exceeds compliance with the standard based on providing bi-annual training and a review of in-service and on-line training documents and annual training documents for each year following the initial certification.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Training curricula and lesson plan for content; Pre-Audit Questionnaire; Quarterly and Annual Training records; First Responder Cards; Interviews with random staff

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.

The Kentucky Correctional Institution for Women (KCIW) policy requires all contractors/volunteers who have contact with inmates receive training as to their responsibilities pertaining to PREA prior to providing services to inmates. The zero-tolerance, prevention, detection, reporting and responding requirements are covered in training. KCIW provides its contractors and volunteers with yearly in-service PREA training. Contractors are also required to complete on-line PREA training. KCIW has a contract with Aramark to provide food services. KCIW has a contract with Keefe to provide commissary. KCIW has a contract with Correct Care Solutions to provide medical/mental health services. Contract staff interviewed stated they are trained on their responsibility regarding sexual abuse and sexual harassment, steps to take when reporting (Shift Supervisor, PREA Compliance Manager or Warden) and how to separate the alleged victim and alleged perpetrator. Contract staff interviewed indicated they are trained not only by their agency but also by KCIW. Telephone interviews with ten volunteers were conducted. All the volunteers confirmed they are trained annually on PREA related topics referenced above. Samples of

PREA Training Acknowledgement receipts signed by volunteers/contractors were reviewed. KCIW exceeds compliance with the standard based on a review of bi-annual training documents and training documents for each year following the initial certification.

Policy, Interviews and Other documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Training acknowledgements; Interviews with contracted staff; Interviews with volunteers

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 Kentucky Correctional Institution for Women (KCIW) requires inmates be given PREA information in accordance with the standard. During the intake process, inmates receive information verbally and in writing (inmate handbook and pamphlet in English, Spanish) explaining the facility's zero-tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse and sexual harassment, their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents. Braille and large print information is also available. Within 30 days of admission to KCIW, inmates are given Comprehensive PREA Education which includes a video/power point presentation and additional handouts detailing the facility's PREA policies and procedures. PREA posters with hotline numbers and addresses were observed throughout the facility to call or write to report violations of PREA. Interpreter assistance is available for LEP inmates who have difficulty communicating in English through interpreters from Logsdon Endeavors. Facility staff is available to assist inmates with learning disabilities or other impairments. Hearing impaired inmates have access to a Video Relay Interpreter. Staff interviewed confirmed inmate interpreters, readers or assistants are not utilized in handling any PREA related matters. Inmates interviewed stated they received adequate education and information, such as inmate handbooks, PREA handouts and PREA posters. They reported the information contained pertinent PREA information such as zero-tolerance, procedures on how to report sexual abuse and sexual harassment, rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents. Inmates interviewed were aware of access to hotlines and methods to anonymously report. The KCIW inmate handbook, PREA pamphlets and inmate orientation curriculum were reviewed. A sample of inmate signed PREA Guide Acknowledgement Forms and PREA Comprehensive Education Acknowledgement Forms were reviewed to confirm inmate receipt of PREA education required by this standard. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; KCIW Inmate Handbook, PREA posters and PREA pamphlets; Orientation curriculum for inmate education; Interviews with intake staff and random inmates; signed acknowledgement forms

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.

The Kentucky Correctional Institution for Women (KCIW) conducts investigations into all allegations of sexual abuse or sexual harassment through the Internal Affairs (IA) department. IA conducts administrative investigations by specially trained investigators. When a PREA allegation appears to be criminal, KCIW refers the case to the Kentucky State Police (KSP) for investigation and possible prosecution. KCIW cooperates fully with all KSP investigations. A memo from KSP indicating all KSP Troopers receive training in PREA related investigations was reviewed. The IA Captain and 3 PREA Investigators were interviewed and confirmed training included 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 or prosecution referral. A telephone interview was conducted with KASAP PREA Coordinator. She stated KASAP is involved in the training of KCIW investigative staff. KCIW maintains a list of current trained PREA investigators. The KCIW Investigator training curriculum and staff training acknowledgements were verified through review prior to and during the on-site visit. A review of training documents confirmed all investigators received the required annual general PREA and specialized investigator training. KCIW is compliant with this standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; KSP Evidence Collection Guide and investigation training memo; KCIW Investigator Training Curriculum; Specialized Investigator training and annual general PREA training acknowledgement; Trained Investigator list; Interviews with investigative staff

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.

The Kentucky Correctional Institution for Women (KCIW) policy requires specialized training for all full-time and part-time medical and mental health staff. No forensic examinations are conducted on-site. SANE services are provided off-site at the University of Louisville Hospital. Interviews with Correct Care Solutions medical and mental health staff confirmed training is completed prior to assignment through Crimcast, an online learning system. In addition to the Crimcast online training, KCIW provides all full-time and part-time medical and mental health staff with facility specific PREA training. Medical and mental health staff are required to attend the training before assuming their duties and on an annual basis. Specialized medical and mental health staff training is in addition to the basic PREA training provided to all staff. A review of the training curriculum and medical/mental health staff interviews confirm training addresses how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, effective and professional responses to victims of sexual abuse and sexual harassment and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. A sample of staff training and attendance logs were reviewed to confirm staff receipt of general and specialized training as required by the standard. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Training Curriculum and acknowledgement of training completed; Interviews with Correct Care medical/mental health staff

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.

The Kentucky Correctional Institution for Women (KCIW) policy requires inmates receive an initial screening within 72 hours of arrival to assess for risk of victimization/abusiveness utilizing an objective screening instrument. KCIW policy requires the inmate’s risk level be reassessed within thirty days of admission based on any additional information since the initial risk assessment. The policy also allows for reassessment at any time as needed due to referral, request and reported incident of sexual abuse or receipt of additional information impacting the inmate’s risk level. The policy requires inmates may not be disciplined for refusing to answer the risk assessment questions. The risk assessment tool contained questions about the following: inmates mental, physical or developmental disabilities; inmates age and physical build; previous incarcerations and criminal history, including exclusively non-violent offenses or sexual offenses against adults or children; perception of inmates LGBTI status; previous sexual victimization; inmates own perception of vulnerability and detention solely for immigration purposes. Interviews with intake staff indicated risk assessments are conducted according the standard requirements. Interviews with intake staff confirmed they do not discipline inmates for refusing to answer the risk assessment questions. Interviews with random inmates confirmed they were asked questions relevant to their risk for victimization/abusiveness. Inmates who reported an incident of sexual abuse confirmed they were reassessed after the incident. A review of inmate records indicated risk assessments are being conducted as required by the standard. Information gained through the risk assessment is kept confidential so that sensitive information is not exploited by staff or other inmates. The information from the risk assessment is entered into the Kentucky Offender Management System (KOMS). The risk assessment information is password protected and accessible only to staff (supervisory and administrative staff) who need to know to make housing, programming, education and work assignments and have permission to access it. Permissions are specific to each staff person and related to their job responsibilities. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Review of completed initial and re-assessments for risk of victimization/abusiveness; Interviews with intake staff responsible for completing risk assessments, PREA Coordinator, PREA Compliance Manager and inmates

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.

The Kentucky Correctional Institution for Women (KCIW) policy requires information received from the risk screening required by 115.41 is used to determine housing, work, education and program needs. It is also utilized for any referrals for medical and mental health services. Inmates risk assessment information is entered into the Kentucky Offender Management System (KOMS). The risk assessment information is password protected and accessible only to staff who have permission to access it to make housing, programming, education and work assignments. Permissions are specific to each staff person and are related to their job responsibilities. The risk assessment is reviewed when housing, job assignments, education and other programs are assigned or changed. Classification documents contain a section to indicate if the PREA risk level was considered when making a change to an inmate’s housing, work, education or other program assignments. Classification documents were reviewed and confirmed PREA risk level is considered when re-classifying an inmate. Interviews with staff responsible for making housing, work, education and other program assignments confirmed an inmate’s PREA risk level is considered

whenever changes are made. A review of a LGBTI log and an interview with PREA Compliance Manager revealed there were no transgender or intersex inmates housed at KCIW in the past 12 months. However, policy indicates that decisions regarding a transgender or intersex inmate would be in accordance with 115.42 (c-f). KCIW does not have a dedicated wing or unit for inmates identifying as LGBTI which was confirmed through interviews with inmates identifying as LGBTI, review of policy and facility tour observations. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Review of screeners for risk of victimization/abusiveness and LGBTI tracking log; Interviews with staff responsible for completing risk assessments, intake staff, classification staff, PREA Coordinator, PREA Compliance Manager and inmates

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.

The Kentucky Correctional Institution for Women (KCIW) policy states inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an alternative housing assessment cannot be immediately completed. Policy requires the alternative housing assessment be completed within 24 hours. Policy requires inmates be reassessed every 7 days if they remain in segregation. A blank alternative housing assessment form was provided for review. In the past 12 months, no inmates have been placed in involuntary segregated housing that are high risk for sexual victimization. Interviews with PREA Compliance Manager and segregation staff confirmed no inmates were placed in segregated housing based on their high risk for sexual victimization. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 10.2; Pre-Audit Questionnaire; Interviews with PREA Compliance Manager and Segregation Staff

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.

The Kentucky Correctional Institution for Women (KCIW) provides inmates with multiple ways (in writing, verbally, anonymously, privately and from a third party) to report sexual abuse and sexual harassment. PREA posters, handouts and inmate handbooks (all in English and Spanish) outline the mandates of this standard and were observed prior to and during the on-site audit. Reporting information is also available in Braille and large print. Auditors tested the posted outside hotline number for KASAP and internal KY DOC hotline

telephone number for PREA related services. The operators confirmed inmates can utilize the hotlines 24 hours a day. Auditors reviewed emails received by the Warden and the PREA Coordinator informing them a call was received on the KASAP and KY DOC hotline number. A review of documentation and random inmate interviews indicated that there are multiple internal ways and at least one external way for inmates to report. Random inmate interviews confirmed PREA information is posted in the housing units and their awareness of the purpose of the posted telephone numbers. Random staff interviews confirmed their knowledge of multiple methods to privately report through an employee hotline, KY DOC and KASAP hotlines and written statements delivered to the PREA Compliance Manager or Warden via mail. Interview with random staff confirmed they are aware they must accept reports made verbally, in writing, anonymously and from third parties. Random staff interviewed acknowledged they are required to immediately document and report any verbal reports they receive. KCIW is compliant with this standard.

Policy, Interviews and Other Documentation Reviewed

Policy 3.22; Policy 14.7; Education materials-Inmate Handbook, PREA posters, PREA tri-fold brochures; Pre-Audit Questionnaire; Interviews with random staff and inmates; Memorandum Of Understanding (MOU) with Kentucky Association of Sexual Assault Programs; Hotline number tests; Facility tour

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.

The Kentucky Correctional Institution for Women (KCIW) policy states inmates may file a grievance concerning allegations of sexual abuse or sexual harassment and an administrative or criminal investigation would be immediately initiated. Inmates are not required to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. Inmates are allowed to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. Policy requires there be no time frames imposed on when an inmate submits a grievance. Policy mandates a grievance must reach a final decision within 90 days unless an extension of up to 70 days is requested. Inmates must be notified of the extension and the new date the grievance is expected to reach a final decision. Third parties, including fellow inmates, staff members, family members, attorneys and outside advocates are permitted to assist inmates with filing grievances related to allegations of sexual abuse. KCIW policy allows for inmates to submit emergency grievances when there is a substantial risk of imminent sexual abuse. Immediate corrective action will be taken when an emergency grievance is filed. An initial response will be given within 48 hours and a final decision shall be reached within 5 calendar days. All responses shall include a decision of the agency's determination of whether the inmate is at substantial risk of imminent sexual abuse and the protective action taken. In the past 12 months, there were no PREA-related emergency grievances. Staff responsible for addressing grievances was interviewed and confirmed the procedure for responding to PREA related grievances. Interviews with random inmates confirmed they are aware of the grievance procedure as it relates to PREA. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.6 and 14.7; Pre-Audit Questionnaire; Inmate handbook; Documentation of submitted grievance, investigation and outcome; Interviews with staff and random inmates

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.

The Kentucky Correctional Institution for Women (KCIW) provides inmates with access to outside victim advocates for emotional support services related to sexual abuse. PREA brochures with rape crisis and emotional support service telephone numbers are provided at intake. Mailing addresses are available to contact victim support services and telephone hotline information is posted by the telephones in all inmate housing units. This information is also in the inmate handbook issued at intake. KCIW has a Memorandum of Understanding (MOU) with Kentucky Association of Sexual Assault Programs (KASAP) to provide victim support services, including advocacy. Auditors tested the KASAP hotline number from random telephones in the inmate housing units and were able to speak to live operators who confirmed services were available to inmates 24 hours, are confidential and would provide advocacy services at the hospital upon request. A telephone interview was conducted with KASAP PREA Coordinator. She confirmed victim services are available, including advocacy and emotional support services, at no cost to the inmate and are confidential. Inmates interviewed were knowledgeable of access to outside confidential support and confirmed receipt of this information through orientation materials (inmate handbook, PREA brochure, power point) and posters on the walls. Random staff interviewed also confirmed their knowledge of the availability of outside victim support services and how inmates could access them. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Education Materials-PREA posters, PREA brochures, Inmate Handbook; Memorandum Of Understanding (MOU) with Kentucky Association of Sexual Assault Programs; Interviews with random staff and inmates, PREA Compliance Manager and KASAP representative; Facility tour

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.

The Kentucky Correctional Institution for Women (KCIW) policy requires third-party allegations be accepted. Posted notifications (English and Spanish) throughout the facility, including visitation areas, were observed by the auditors. Postings include information for a third party to make a PREA report. In addition, third party reporting information is available on the Kentucky Department of Corrections website (www.corrections.ky.gov). Inmates interviewed were aware a third-party could make a PREA allegation on their behalf and confirmed information is posted throughout the facility and is located in orientation materials (inmate handbook, power point). Random staff interviews confirm their responsibility to immediately report third party allegations they receive. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Kentucky DOC website; Interviews with random staff and inmates; Facility tour

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.

The Kentucky Correctional Institution for Women (KCIW) policy requires staff immediately report knowledge, suspicion or information relevant to a PREA incident. All reports are required to be maintained in a confidential manner. KCIW policy requires staff immediately report knowledge or suspicion of retaliation against staff or inmates for reporting an incident of sexual abuse or sexual harassment and any negligent staff action or violation of responsibilities that could have contributed to an incident. Interviews with staff confirmed they are knowledgeable about their responsibility to immediately report allegations of sexual abuse, harassment or neglect relevant to PREA standards to their Shift Supervisor. Staff may report these incidents confidentially utilizing the reporting mechanisms in 115.51. Medical and mental health staff interviewed confirmed they advise the inmate of their duty to report PREA incidents to the appropriate supervisors and investigators and the limitations of confidentiality. All staff carry a first responder action card and those interviewed were able to articulate their first responder duties. Interview with PREA Compliance Manager confirmed in the past 12 months, there have been no PREA incidents where the alleged victim was under the age of 18 or considered a vulnerable adult.

Policy, Interviews and Other Documentation Reviewed

Policy 3.22; Policy 14.7; Pre-Audit Questionnaire; Staff First Responder Card; Incident Reports; Interviews with PREA Compliance Manager, random staff, medical/mental health staff and first responders

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.

The Kentucky Correctional Institution for Women (KCIW) policy requires staff to take immediate action when they become aware an inmate is at imminent risk of sexual abuse. Staff interviewed was knowledgeable of their duties and responsibilities as it relates to receiving knowledge of an inmate being at imminent risk of sexual abuse. Random staff interviews confirmed they would take immediate actions to protect the inmate to include separation of the victim/perpetrator. Staff reported they are required to immediately report an inmates imminent risk to the Shift Supervisor. Interviews with the Warden and the PREA Compliance Manager confirmed, in the past 12 months there have been no situations where the facility determined an inmate was subject to substantial risk of imminent sexual abuse. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Staff First Responder Card; Interviews with random staff, Warden and PREA Compliance Manager

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.

The Kentucky Correctional Institution for Women (KCIW) policy requires within 72 hours of receiving an allegation of sexual abuse or harassment occurring at another facility, the Warden must notify the head of the agency where the incident is alleged to have occurred. Upon receiving a PREA allegation from another facility that alleged sexual abuse occurred at KCIW, an investigation will be immediately initiated. In the past 12 months, five (5) allegations of sexual abuse that occurred at another facility were reported to KCIW staff and one (1) allegation of sexual abuse was received from another facility. Interviews with the Warden and PREA Compliance Manger confirmed that allegations received from other facilities were investigated. In addition, auditors reviewed documented emails to support PREA incidents alleged to have occurred at other facilities were reported to the agency head within 72 hours as required. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Documentation of notification to other confinement facility; Documentation of notification from another confinement facility; Interviews with Warden, PREA Coordinator and PREA Compliance Manager; Investigation Reports

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.

The Kentucky Correctional Institution for Women (KCIW) policy describes procedures for first responder duties. Random staff interviews confirmed knowledge of their first responder duties and responsibilities as it pertains to allegations of sexual abuse or sexual harassment. Random staff interviews confirmed they would take immediate action to protect the inmate to include separation of the victim/perpetrator and crime scene preservation. Interviews with non-security staff confirmed if they were the first staff to respond to a PREA incident, they would immediately separate the victim from the abuser, request evidence is preserved and immediately notify security staff. All staff carries a first responder card. A review of the employee PREA training curriculum confirms first responder duties are included in pre-service and annual training. Random staff interviews confirmed receipt of training on first responder duties and responsibilities. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; First Responder Card; Incident Reports; Employee PREA training curriculum; Interviews with random staff (security and non-security staff)

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.

The Kentucky Correctional Institution for Women (KCIW) policy and written facility PREA Action Plan outline the coordinated actions taken in response to a PREA incident among staff first responders, medical and mental health practitioners, investigators and facility leadership. Random first responders interviews (first responders, medical and mental health staff, investigators and supervisors) confirmed their knowledge of the written plan and their responsibilities for adherence to the plan. All staff carries a first responder card to utilize in response to an incident of sexual abuse or sexual harassment. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Written facility PREA Action Plan; Pre-Audit Questionnaire; First Responder Card; Interviews with random staff, supervisors, Warden and PREA Compliance Manager

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.

The Kentucky Correctional Institution for Women (KCIW) does not have a union or Collective Bargaining Agreement. However, they contract for medical and mental health services, food service and commissary. All of the contracts include language that does not limit KCIW’s ability to remove alleged contracted staff abusers from contact with inmates or to determine what disciplinary measures may be employed. KCIW is compliant with the standard.

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.

The Kentucky Correctional Institution for Women (KCIW) policy prohibits any type of retaliation of any staff member or inmate who has reported sexual abuse or sexual harassment or who has cooperated with an investigation. The PREA Coordinator and PREA Compliance Manager were interviewed and confirmed a Retaliation Monitor is assigned the responsibilities for monitoring possible retaliation. Retaliation Monitoring begins immediately after a PREA allegation is made and continues for at least 90 days thereafter. A Protection Against Retaliation Form is used to document meetings with an inmate who may have been victimized or participated in an investigation. Included in the retaliation checks are a review of housing, work, education and program assignments as well as disciplinary reports. The PREA Compliance Manager indicated if an allegation is reported by an inmate against staff, the staff member is immediately assigned to another post to prevent contact between the inmate and staff member. She also stated if the case involves a staff member allegedly retaliating against an inmate, Internal Affairs is immediately notified to investigate the matter. The Warden was interviewed and confirmed a zero tolerance policy for retaliation for making a PREA allegation or participating in a PREA related investigation. The Kentucky Department of Corrections Commissioner was interviewed and confirmed the Departments zero tolerance policy for retaliation. The Retaliation Monitor was interviewed and confirmed the retaliation monitoring procedure and required monitoring time frame. The Retaliation Monitor confirmed retaliation monitoring is ceased if the allegation is unfounded. The IA Captain is designated to monitor employee retaliation. IA Captain was interviewed and confirmed the retaliation monitoring procedure and required time frame. Protection Against Retaliation Forms were reviewed. The PREA Coordinator, Warden, PREA Compliance Manager confirmed there have been no cases of retaliation discovered or reported in the past 12 months. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 3.22; Policy 14.7; Pre-Audit Questionnaire; Interview with KY DOC Commissioner, PREA Coordinator, Warden, PREA Compliance Manager, Retaliation Monitor and IA Captain; Documentation of completed monitoring/checks

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.

The Kentucky Correctional Institution for Women (KCIW) addresses the requirements of this standard. An examination of the facility, documentation review and staff interviews indicate there are viable alternatives to placement of inmates in involuntary segregated housing for protection following a reported allegation of sexual abuse. Involuntary segregation is utilized as a last resort when separate housing for victim and perpetrator is not viable. Interviews with PREA Compliance Manager and segregation staff confirmed no inmates were placed in segregated housing following a reported allegation of sexual abuse. Policy requires inmates who remain in involuntary segregation after a reported allegation of sexual abuse are reviewed every 7 days. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; PREA Action Plan; Pre-Audit Questionnaire; Facility tour; Interviews with Segregation Staff and random staff

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 Kentucky Correctional Institution for Women (KCIW) conducts investigations into all allegations of sexual abuse or sexual harassment through the Internal Affairs (IA) department. IA conducts administrative investigations by specially trained investigators as required in 115.34. Investigations are immediately initiated. When a PREA allegation appears to be criminal, KCIW refers the case to the Kentucky State Police (KSP) for investigation and possible prosecution. KCIW cooperates fully with all KSP investigations. The IA Captain was interviewed and was knowledgeable of evidence protocols and the investigation process. She indicated all allegations, including third party and anonymous, are investigated promptly, thoroughly and objectively. The IA Captain confirmed investigations are completed even if an inmate is transferred to another facility or released or a staff member is no longer employed at the facility. She also confirmed inmates are not required to submit to a polygraph or other truth-telling examination as a condition of furthering an investigation. Staff interviewed were aware of the facility’s procedures to obtain usable physical evidence if sexual abuse is alleged. In the past 12 months, the facility reported 115 PREA incidents (12 substantiated 44 unsubstantiated, 59 unfounded). The auditors reviewed the 12 substantiated incidents, 4 of the unsubstantiated incidents and 5 of the unfounded incidents. A random sampling of unsubstantiated and unfounded incidents was selected from a list of Sexual Offense Allegations provided by the facility. The unsubstantiated and unfounded incidents were reviewed to determine the PREA protocols were initially followed and the investigation was completed according to KCIW policy. Auditors review of completed investigation reports confirmed the credibility of an alleged victim, suspect or witness is assessed on an individual basis and is not based on their status as inmate or staff. Auditor review of the completed investigations confirmed investigations were completed even when an inmate was transferred or release or a staff person was no longer employed at the facility. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Investigation reports; KSP investigation training memo; Interviews with IA Captain, investigative staff, first responders and random staff

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.

The Kentucky Correctional Institution for Women (KCIW) policy addresses the evidentiary standard requiring “a preponderance of the evidence” when determining whether allegations of sexual abuse or sexual harassment are substantiated. The Internal Affairs (IA) Captain interviewed confirmed investigations of reported PREA incidents will be initiated immediately. A review of the completed administrative investigation reports confirmed that no standard higher than a preponderance of evidence was used to substantiate the allegation. A review of the investigation reports confirms investigations are completed by a trained investigator. 3 staff investigators interviewed confirmed they were trained on preponderance of the evidence during specialized investigator training. A review of the investigator training confirmed preponderance of the evidence is covered in specialized investigator training. Staff training acknowledgements for specialized investigator training were reviewed. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Investigative reports; Interview with investigative staff; Investigator training curriculum

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.

The Kentucky Correctional Institution for Women (KCIW) policy requires inmates be notified of the outcome of an investigation and when the perpetrator is no longer posted in the inmates unit or is no longer employed at the facility. In addition, policy requires inmates are notified when the perpetrator is indicted or convicted for a sexual abuse charge. Through interviews with the investigative staff, PREA Coordinator and PREA Compliance Manager, when an allegation has been determined to be substantiated, unsubstantiated or unfounded the institution notifies the inmate who made the allegation utilizing either the Offender Notification-PREA Alleged Sexual Abuse form (inmate-on-inmate) or Offender Notification-PREA Alleged Sexual Abuse by a Staff Member form (staff-on-inmate). One allegation involving staff-on-inmate sexual abuse referred for criminal prosecution was reviewed. Notification of the outcome and the staff persons conviction were reviewed. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Completed inmate notifications; Interviews with investigative staff, PREA Coordinator and PREA Compliance Manager and inmates

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.

The Kentucky Correctional Institution for Women (KCIW) policy outlines the disciplinary sanctions employees are subject to if they engage in the sexual abuse or harassment of an inmate. Interviews with the Internal Affairs (IA) Captain and the PREA Compliance Manager confirm that IA would be notified immediately to conduct an investigation and the inmate and the staff member would not have contact during the investigation process. Four (4) staff have been terminated or resigned prior to termination in the past 12 months. There were no cases reported to a licensing body in the last 12 months. Documents related to these staff terminations were reviewed. One (1) staff person was reported to law enforcement in the past 12 months for violating the agency sexual abuse or sexual harassment policies. Documents related to this allegation, investigation and conviction were reviewed. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 3.22; Pre-Audit Questionnaire; Interview with IA Captain and PREA Compliance Manager; Termination documents

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.

The Kentucky Correctional Institution for Women (KCIW) policy outlines all required actions and reporting concerning contractors and volunteers pursuant to this standard. Interviews with the Internal Affairs (IA) Captain and PREA Coordinator described that IA would be notified immediately and the contractor/volunteer would not have contact with the inmate during the investigation. Interviews with contractors and volunteers indicated they were informed of the sanctions they will be subject to for engaging in sexual abuse or harassment of an inmate. In the past 12 months, there have not been any contractors/volunteers accused of sexual abuse or sexual harassment of an inmate. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 3.22; Pre-Audit Questionnaire; Interviews with Correct Care medical/mental health staff, Keefe staff, volunteers, Warden, IA Captain and PREA Compliance Manager

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.

The Kentucky Correctional Institution for Women (KCIW) policy outlines the sanctions for inmates who engage in sexual abuse or harassment. Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Inmates may be disciplined for sexual contact with staff only after a finding the staff did not consent and for sexual activity with other inmates. As part of the disciplinary process, KCIW may require inmates participate in therapy, counseling or other interventions designed to address the underlying reasons for the sexual abuse. A review of policy and interviews with the Warden and PREA Compliance Manager confirmed inmates cannot be disciplined for making reports in "good faith" even if the allegation is later determined to be unsubstantiated or unfounded. KCIW policy allows for the sanctioning of inmates when it can be proven a false allegation was filed in bad faith. One completed investigation and disciplinary report for making a false allegation was reviewed. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Policy 15.2; Pre-Audit Questionnaire; Incident and Investigation reports; Disciplinary Hearing Reports; Interview with IA Captain, PREA Compliance Manager

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.

The Kentucky Correctional Institution for Women (KCIW) policy addresses the requirements for medical and mental health referrals when the risk assessment reveals an inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community or has perpetrated sexual abuse, whether it occurred in an institutional setting or in the community. KCIW policy states inmates are required to be assessed by medical and mental health staff within 14 days when the risk assessment indicates prior sexual victimization. Perpetrators of sexual abuse are required to have a mental health assessment within 14 days. Interviews with the PREA Compliance Manager and medical and mental health staff confirmed any information related to sexual victimization or abusiveness in an institutional setting is strictly limited to medical/mental health staff and other staff, as needed, to inform treatment plans and security decisions, including housing, bed, work and program assignments. Interviews with medical and mental health staff confirmed medical and mental health evaluations are conducted within 14 days after the risk assessment reveals an inmate has experienced or perpetrated sexual abuse either in confinement or in the community. Medical and mental health staff interviews confirmed re-assessment and follow-up services are available. Interviews with medical and mental health staff confirm they attempt to obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. Medical and mental health evaluations were reviewed and were found to be completed within 14 days of risk assessment. Interviews with inmates who reported prior sexual abuse confirmed they were referred to medical and mental health services and seen by medical and mental health practitioners within 14 days. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Interviews with medical/mental health staff and inmates; a review of KOMS; completed medical and mental health assessments

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.

The Kentucky Correctional Institution for Women (KCIW) policy requires inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. A review of completed investigation reports and staff interviews for the past 12 months confirmed no victims were referred off-site for access to emergency medical or mental health services. Interviews with medical staff confirmed access to emergency medical and mental health services would be provided without cost to the inmate and regardless of whether the victim names the abuser or cooperates with any investigation. Interviews with medical and mental health staff confirmed inmate victims of sexual abuse while incarcerated are offered timely and unimpeded information about sexually transmitted infection prophylaxis, emergency contraception, in accordance with professional accepted standards of care and confidentiality of treatment. KCIW has a Memorandum of Understanding (MOU) with Kentucky Association of Sexual Assault Programs (KASAP) to provide support services. Interviews with the PREA Compliance Manager and KASAP representatives confirmed all forensic exams take place at the

University of Louisville Hospital. Although the MOU with KASAP does not include SAFE/SANE, the SANE Nurse interviewed confirmed KASAP is responsible for training SAFE/SANE personnel and for maintaining an active list of SAFE/SANE practitioners.

Policy, Interviews and Other Documentation Reviewed

A review of completed investigations confirmed inmates received timely an unimpeded access to emergency medical and mental health

Policy 14.7; PREA Action Plan; Pre-Audit Questionnaire; Memorandum Of Understanding with KASAP; Completed investigation reports; Interviews with Correct Care medical/mental health staff; SANE and KASAP PREA Coordinator

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.

The Kentucky Correctional Institution for Women (KCIW) policy requires medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized by sexual abuse. This treatment is without financial cost to the inmate and is consistent with the local community's level care. Medical services will include, as appropriate, pregnancy tests, timely and comprehensive access to all lawful pregnancy-related services and treatment for sexually transmitted infections. The policy requires an attempt to conduct a mental health evaluation on inmate-on-inmate sexual abusers within 60 days. Interviews with medical and mental health staff in past 12 months, there were no inmate-on-inmate abusers or pregnancies related to PREA incidents. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Interviews with Correct Care medical and mental health staff

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.

The Kentucky Correctional Institution for Women (KCIW) policy describes the procedures for sexual abuse incident reviews. KCIW policy requires the review team consist of upper-level management officials, line supervisors, investigators and medical or mental health practitioners. Interviews with the PREA Compliance Manager and members of the incident review team confirm PREA incidents are reviewed within 30 days of the conclusion of an investigation unless the outcome was unfounded. Interviews with the PREA Coordinator, Warden, PREA Compliance Manager and incident review team members indicate the team takes into consideration the items listed in section d (1-6) of the standard. Interviews with the Warden and PREA Compliance Manager confirmed the incident review team consists of appropriate staff as required by the standard. A review of completed sexual abuse incident reports confirms, in some instances,

recommendations were made and implemented as required. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Completed Sexual Abuse Incident Review Reports; Interviews with PREA Coordinator, Warden, PREA Compliance Manager and Incident Review Team members

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.

The Kentucky Correctional Institution for Women (KCIW) policy requires the maintenance, collection, aggregation and review of PREA incident data from incident reports, investigation files and sexual abuse incident reviews. KCIW collects uniform data for every allegation of sexual abuse using a standardized form. Data collected is utilized to complete the Department of Justice (DOJ) Survey of Sexual Violence, prepare an annual PREA report, monitor trends and take corrective action when appropriate. An interview with PREA Coordinator confirmed data is collected and submitted to him from all KY DOC facilities which is aggregated at least annually. A review of the KY DOC website confirms the 2015 PREA report was posted as required. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; Annual PREA Report (2015); Department of Justice (DOJ) Survey of Sexual Violence Report 2015; Interviews with PREA Coordinator; Kentucky Department of Corrections website (www.corrections.ky.gov)

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.

The Kentucky Correctional Institution for Women (KCIW) policy requires data review for the purpose of assessing and improving the effectiveness of its sexual abuse prevention, detection and response policies, practices, and training. KCIW policy requires problem areas to be identified and appropriate corrective action be taken on an on-going basis. The PREA Coordinator with the assistance of the PREA Compliance Manager collects data from all KY DOC facilities for this purpose. An annual report is prepared and approved by the Commissioner. Information may be redacted from the posted report when publication would present a clear and specific threat to the safety and security of the facility. This report is published on the Kentucky Department of Corrections website (www.corrections.ky.gov). The most recent annual report (2015) was reviewed and the PREA Coordinator was interviewed to confirm these procedures. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; 2015 PREA Annual Report (most recent); Interview with PREA Coordinator

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.

The Kentucky Correctional Institution for Women (KCIW) policy addresses storage, publication, retention and destruction of data. An annual report is prepared and approved by the Commissioner Information may be redacted from the posted report when publication would present a clear and specific threat to the safety and security of the facility. This report is published on the Kentucky Department of Corrections website (www.corrections.ky.gov). The data is retained in a secure file for over 10 years. The most recent annual report (2015) was reviewed and the PREA Coordinator was interviewed and confirmed these procedures. KCIW is compliant with the standard.

Policy, Interviews and Other Documentation Reviewed

Policy 14.7; Pre-Audit Questionnaire; 2015 PREA Annual Report (most recent); Retention Schedule; Interview with PREA Coordinator

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.

Jennifer R. Sheahan

June 20, 2017

Auditor Signature

Date