# PREA AUDIT REPORT ☐ Interim ☒ Final ADULT PRISONS & JAILS

Date of report: December 30, 2017

Auditor Information					
Auditor name: David Haas	senritter				
Address: PO Box 1265 Mid	llothian, VA 23113				
Email: davidkhaasenritter@	gmail.com				
Telephone number: 540	903 6457				
Date of facility visit: June	e 12 – 14, 2017				
Facility Information					
Facility name: Western Ke	entucky Correctional Complex				
Facility physical address	s: 374 New Bethel Rd. Fredonia, Ky	<b>424</b> 11			
Facility mailing address	:: (if different from above) Click her	e to enter te	xt.		
Facility telephone numb	<b>Der:</b> (270) 388-9781				
The facility is:	☐ Federal	State		☐ County	
	☐ Military	☐ Municip	pal	☐ Private for profit	
	☐ Private not for profit				
Facility type:	⊠ Prison	□ Jail			
Name of facility's Chief	Executive Officer: Steve Woodw	ard			
Number of staff assigne	ed to the facility in the last 12	months: 2	69		
Designed facility capaci	<b>ty:</b> 696				
Current population of fa	acility: 669				
Facility security levels/i	inmate custody levels: Medium	and Minimu	m security		
Age range of the popula	ntion: 20-74				
Name of PREA Complian	nce Manager: David Meeks		Title: PREA Complia	nce Manager	
Email address: david.meeks@ky.gov			<b>Telephone number:</b> (270) 388-9781 ext. 2026		
Agency Information					
Name of agency: Kentuck	ky Department of Corrections				
Governing authority or	parent agency: (if applicable) Ju	stice and Pu	blic Safety Cabinet		
Physical address: 275 Eas	st Main - Health Services Building				
Mailing address: (if diffe	rentfrom above) P.O. Box 2400 Fran	nkfort, Ky 40	602		
<b>Telephone number:</b> 502 564-2200					
Agency Chief Executive Officer					
Name: Rodney Ballard Title: Commissioner					
Email address: rodney.ballard@ky.gov Telephone number: (502) 564-4726			: (502) 564-4726		
Agency-Wide PREA Coordinator					
Name: Charles A. Wilkerson	n		Title: Ky. DOC PREA	A Coordinator	
Email address: charles.wilkerson@ky.gov Telephone number: (502) 382-7245					

#### **AUDIT FINDINGS**

#### **NARRATIVE**

The PREA audit of the Western Kentucky Correctional Complex was conducted on June 12 - 14, 2017 by Mr. David Haasenritter. The announcement of the audit was posted on April 23, 2017. Approximately four weeks prior to the audit, the auditor received the Pre-Audit Questionnaire and additional documents through a thumb drive. Documents included examples from the past 12 months. Prior to the audit the facility provided a roster of all inmates housed at the institution; lists of inmates for specific categories to be interviewed; and a list of all staff by duty position and shifts that were used to identify inmates and staff to be interviewed (random and specific category).

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

Following the entrance meeting with staff, the auditor toured the facility on June 12, 2017 and went back to certain areas in the institution on June 13 - 14, 2017. While touring, random inmates and staff were informally interviewed (not counted in interview count) and questioned about their knowledge of PREA standards, procedures for reporting, services available and their responsibilities. All staff and inmates informally interviewed during the tour acknowledged receiving training and procedures for reporting sexual abuse, sexual harassment and/or retaliation for reporting. During the tour, the auditor reviewed staffing logs; physical plant; sight lines; camera coverage; tested the inmate phone system for reporting allegations and for emotional support services; and institution operations.

Following the tour, the auditor began the formal interviews, review of investigations, checking of cameras, and random checks of personnel, medical, and training records. Some of the review of staff and inmate records were scanned for review after the on-site audit. The auditor conducted 44 staff interviews (13 random, 31 specialized). Additionally, the Kentucky Department of Corrections PREA Coordinator and Agency head representative was interviewed prior to the audit. Staff interviewed was well versed in their responsibilities in reporting sexual abuse, sexual harassment, and staff negligence; first responder duties; medical staff procedures; investigations; and evidence preservation.

A total of 39 inmates were formally interviewed: 39 random interviews and 23 specialized interviews (LGBTI (13), who disclosed sexual victimization during screening (4), reported sexual assault (2); hearing disability (3), and limited English (1)). Additionally, one inmate refused their interview. Majority of the inmates interviewed acknowledged receiving PREA training and written materials (posters, pamphlets, and inmate's handbooks) in a language they understand outlining the agencies zero tolerance policies towards sexual abuse; knew the reporting procedures; and knowledge of outside confidential support services. All inmates interviewed when asked stated they felt safe at the institution. The auditors found the inmates very aware of PREA.

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

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

#### **DESCRIPTION OF FACILITY CHARACTERISTICS**

The Western Kentucky Correctional Complex is located at 374 New Bethel Road, Fredonia, Kentucky 424117 in Lyon County. It was originally constructed in 1968 as a satellite facility and work camp of the nearby Kentucky State Penitentiary (KSP). Western Kentucky Correctional Complex became a separate correctional minimum security facility in 1977. In 1989, the institution was converted to medium security with a minimum unit remaining outside the fence, at that time it was named Western Kentucky Correctional Complex. The inmate population was 669 on June 12, 2017. Western Kentucky Correctional Complex does not house youthful inmates under the age of 18.

Today it houses both male and female inmates. It is divided into two compounds; the medium compound located inside the secure perimeter and the female minimum compound outside the secure perimeter. The entire complex has 76 total buildings. The housing units consist of three (3) open bay/dorm style housing units and one (1) Restricted Housing Unit which has 46 cells inside the fence; and two (2) open bay/dorm style housing unit outside the fence. It includes a fifty-one (51) bed Assessment Center that serves the Western Region institutions. On the grounds of the Western Kentucky Correctional Complex is a regional recycling center. WKCC partners with the Ross-Cash Center and Caldwell, Crittenden, Livingston, Lyon and Trigg counties along with the Division of Forestry Service and the Army Corps of Engineers to successful recycle cardboard, paper, steel and aluminum cans, plastic bottles and jugs and glass throughout the surrounding area. Also on the grounds is the Western Regional Training Center.

## **SUMMARY OF AUDIT FINDINGS**

On June 12 - 14, 2017, the on-site visit was completed. During the interim report writing period, five (5) standards (115.15, 115.41, 115.67, 115.81, 115.86) were identified as requiring corrective action during the interim report. On November 13, 2017, the Western Kentucky Correctional Complex was found in full compliance:

Number of standards exceeded: 1

Number of standards met: 41

Number of standards not met: 0

Number of standards not applicable: 1

Standa	rd 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)
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
that outl policies Departm	ines the a are Kenta ent of Co	ment of Corrections has written policies mandating zero tolerance towards all forms of sexual abuse and sexual harassment agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The main PREA tucky Department of Corrections Policy 14.7, Sexual Abuse Behavior Prevention and Intervention Program; and Kentucky Department of Sexual Offenses. Other agency policies supplement these main PREA policies. Kentucky Department of Corrections website.
has suffi demonst updates,	cient tim rates the and ensu	ment of Corrections employs an upper-level, agency-wide facility PREA Coordinator. The statewide PREA Coordinator e and authority to develop and oversee compliance. The Kentucky Department of Corrections organization chart PREA Coordinator is in a position of authority. He works closely with all of the facilities to coordinate changes, provide uring the proper practices and procedures are followed. Kentucky Department of Corrections PREA Coordinator Charles Aresent during the audit and were very helpful during the audit process.
was kno Complia organiza	wledgeat nce Man tional ch	is is the Western Kentucky Correctional Complex PREA Compliance Manager, who reports to the Warden for PREA. He ble of PREA standards and was actively involved in PREA activities. Staff and detainees knew he was the PREA ager based on his interaction with the detainee population. Review of Western Kentucky Correctional Complex art and interviews demonstrated he had the authority to coordinate the facility's efforts to comply with PREA, and had the ority to discuss issues with the Warden.
Standa	rd 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)
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
of PREA Departm	Coordinate of Co	ment of Corrections contracts bed space at community corrections facilities. Through a review of contracts and interview nator, new or renewed agreements require the entity's obligation to compliance with PREA standards and allows Kentucky prrections to check to ensure compliance with PREA standards. The auditor reviewed Kentucky Department of Corrections REA reviews with contracted agencies.
Standa	rd 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)			
	determ must a recomi	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion lso include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific live actions taken by the facility.			
basis with sexual all 115.13 (a) investigate plant (in placements standard staffing and Wardens basic and Kentuck documents leadership wardens basic and the landard staffing and the landard staffi	Kentucky Department of Corrections ensures each facility it operates develops document, and make its best efforts to comply on a regular assis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect immates against sexual abuse by monitoring and reviewing the staffing plans. The staffing plan is reviewed annually using the criteria found in standard 115.13 (a) to include generally accepted correctional practices; any judicial findings of inadequacy; any findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal or external oversight bodies; all components of the institution's physical plant (including 'blind-spots') or areas where staff or inmates may be isolated); composition of the inmate population; number and placement of supervisory staff; institution programs occurring on a particular shift; any applicable State or local laws, regulations, or standards; prevalence of substantiated and unsubstantiated incidents of sexual abuse; and other relevant factors to develop and review the staffing plan. The auditor reviewed the 2016 and 2017 annual review. The staffing plan is reviewed annually by the Warden, Deputy Wardens and PREA Compliance Manager at the institution. The 2017 Western Kentucky Correctional Complex annual review was very pasic and should be expanded in the future. Western Kentucky Correctional Complex has 125 cameras located throughout the facility.  Kentucky Department of Corrections Policy 14.7 requires the staffing plan be complied with and when it does not the institution shall document and justify all deviations from the plan. Through review of the staffing plan and shift documents, interview of staff and the leadership, it was determined Western Kentucky Correctional Complex had no deviations from the staffing plan in the last 12 months.  Kentucky Department of Corrections Policy 14.7 requires unannounced rounds by supervisors and prohibits staff from alerting other staff members that s				
Standa	rd 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)			
	determ must a recomi	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion lso include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.			

X Not Applicable

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

Standard 115.15 Limits to cross-gender viewing and searches

		Exceeds Standard (substantially exceeds requirement of standard)					
	$\boxtimes$	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.						
visual bo searches of femal conducte conduct	Kentucky Department of Corrections Policy 9.8, Search Policy, states facilities will not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners; will not conduct cross-gender pat searches of female inmates; and will not restrict female inmates from accessing programs due to shortage of female staff to conduct searches of female inmates. Per interviews of staff and inmates and review of documentation, Western Kentucky Correctional Complex has not conducted cross-gender strip searches or cross-gender visual body cavity searches. There is female staff on all shifts, and female staff conduct all female searches. Western Kentucky Correctional Complex has not restricted female inmates from accessing regularly available programming due to lack of female staff to conduct searches of female inmates.						
clothes v to routin Observa	Based on review of training material, and interview of staff and inmates; inmates are able to shower, perform bodily functions, and change clothes without non-medical staff observing their genitalia or buttocks, except in exigent circumstances or when such viewing is incidental to routine cell checks. Most inmates interviewed stated they could shower and change clothes without being observed by female staff. Observation during the audit identified inmates were able to shower and perform bodily functions without non-medical staff observing their genitalia or buttocks.						
Review of training records, lesson plans, and interviews of staff demonstrated staff had been trained to conduct how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates. Training provided a number of ways to conduct searches of transgender and intersex inmates, but not a specific facility method. The auditor found through interviews that staff did not know the definition of a transgender inmate and how to conduct cross-gender searches of transgender inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs (115.15 (f)). The Corrective Action Plan was to provide staff refresher training on the definition of transgender; and how to conduct searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible. The auditor should be sent a copy of the training material and staff training rosters. The auditor will then conduct some telephone interviews. Western Kentucky Correctional Complex completed the training of staff on the definition of transgender and transgender searches on October 20, 2017. The auditor was provided documents demonstrating the training was conducted. On November 3, 2017 the auditor conducted telephonic interviews of three staff who can conduct searches of inmates, those interviewed could define transgender and explain how to conduct a transgender search. On November 13, 2017 the auditor found Western Kentucky Correctional Complex compliant with the standard.							
Finding during the audit, and staff and inmate interviews confirmed that staff do not always announces themselves when they enter the housing units of opposite gender inmates (115.15 (d)). Kentucky Department of Corrections and Western Kentucky Correctional Complex disagree with the finding based on the definition of housing unit. Staff make an announcement when they enter the housing building. The housing buildings have two or more housing units separated by a wall and door. Additionally, some inmates stated announcements are made only at the beginning of the shift, other said staff does not announce opposite gender presence. The auditor contacted the PREA Resource Center to verify the definition and clarification of a housing unit in the FAQ was still correct. The auditor also provided facility diagrams. Following clarification, Western Kentucky Correctional Complex and Kentucky Department of Corrections updated their guidance and procedures. Kentucky Department of Corrections provided a memorandum to its staff on October 2, 2017 and began the announcements in accordance with the new guidance. They continued to post a sign in the building that notified staff and inmates entering the building the gender of the staff on duty. On November 3, 2017 the auditor conducted telephonic interviews of six staff, those interviewed could explain the requirement to announce opposite gender entering the housing unit and not the housing building. On November 13, 2017 the auditor found Western Kentucky Correctional Complex compliant with the standard.							
Standa	rd 115.	16 Inmates with disabilities and inmates who are limited English proficient					
	$\boxtimes$	Exceeds Standard (substantially exceeds requirement of standard)					
		Meets Standard (substantial compliance; complies in all material ways with the standard for the					

7

PREA Audit Report

relevant review period)

Does Not Meet Standard (requires corrective action)

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

Kentucky Department of Corrections Policy 14.7 outlines what is required for the facility to ensure inmates with disabilities and who are limited English proficient have access to PREA information and programs. Western Kentucky Correctional Complex has taken steps to ensure that inmates who are limited English proficient or disabilities are provided PREA education and information in formats accessible to all inmates; and have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Kentucky Department of Corrections does have a contract with Product Delivery Specialists Language Services Associates for language translator service for inmates who are limited English proficient. PREA handouts and inmate handbooks are in English and Spanish. Western Kentucky Correctional Complex had prominent signs posted throughout the facility in Spanish as well as English. Staff and inmates stated inmates are not used as interpreters when addressing sexual abuse and sexual harassment allegations. PREA information is also provided in Braille both in English and Spanish.

The auditor interviewed inmates with disabilities (hearing) and who are limited English proficient. They had a good knowledge of PREA and had been provided PREA information in formats that allowed them equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

# 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.

Kentucky Department of Corrections Policy 14.7 outlines policy and procedures to ensure staff and contractors are not hired or promoted who has engaged in sexual abuse in a prison, jail, lockup, community confinement institution, juvenile institution, or other institution; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or been civilly or administratively adjudicated to have engaged in sexual activity facilitated by force, overt or implied threats of force, or coercion. Kentucky Department of Corrections Policy 14.7 requires the institution to consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. Prior to the audit, the auditor reviewed one staff and one contractor application packet. During the audit, the auditor two staff application packets. Through review of personnel records and staff interviews it was determined Western Kentucky Correctional Complex staff and contractors are not hired or promoted who has engaged in sexual abuse in a prison, jail, lockup, community confinement institution, juvenile institution, or other institution; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or been civilly or administratively adjudicated to have engaged in sexual activity facilitated by force, overt or implied threats of force, or coercion.

Kentucky Department of Corrections 14.7 requires background checks for staff and contractors; and to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse, and updating background checks of staffs and contractors every five years. Interviews of Human Resource staff and a review of a staff application packet demonstrated contact with prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Prior to the audit reviewed one background check

of a staff and contractor. During the audit the auditor reviewed ten (10) additional staff and two (2) contractor records that demonstrated background checks were done prior to employment and no background checks were more than five years old. Most of those reviewed had been done in 2014.

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

# Standard 115.18 Upgrades to facilities and technologies

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

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.

Through review of Kentucky Department of Corrections Policy 7-1 Construction, Renovation, and Expansion Guidelines, and interviews of Kentucky Department of Corrections Agency Head representative, PREA Coordinator, PREA Compliance Manager, and Warden it was determined that the Kentucky Department of Corrections considers the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. During the review of the staffing plan, the video monitoring system is also reviewed to ensure coverage enhances the ability to protect inmates from sexual abuse. Western Kentucky Correctional Complex has 125 cameras throughout the facility, 25 of which was purchased in 2015. The cameras are monitored and are recorded. All construction and redesigning of exiting units/areas have PREA considerations taken into account; this was evident during the tour of the Western Kentucky Correctional Complex.

#### 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.

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

could explain the protocol for obtaining useable evidence when an inmate alleged sexual abuse. The auditor conducted interviews with the facility investigator who had a good understanding of the investigative procedures and responsibilities and evidence protocols.

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

When Western Kentucky Correctional Complex has an allegation of sexual assault, the inmate is evaluated by medical personnel and then transported to Baptist Health Madisonville for the forensic examination. That facility employs SANE certified nurses.

## 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.

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

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

The auditor reviewed 20 PREA allegations. There were five (5) inmate-inmate allegations: one (1) inmate-inmate sexual harassment substantiated; two (2) inmate-inmate sexual harassment unsubstantiated; one (1) inmate-inmate sexual harassment unfounded; and one (1) inmate-inmate sexual abuse unsubstantiated. There nine (9) staff-inmate allegations: one (1) staff-inmate sexual harassment substantiated; one (1) staff-inmate sexual harassment unfounded; one (1) staff-inmate sexual abuses substantiated; two (2) staff-inmate sexual abuses unsubstantiated; and three (3) staff-inmate sexual abuse unfounded. There were six (6) consensual sex investigations.

# 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.

Review of Kentucky Department of Corrections Policy 14.7 addresses PREA staff training requirements. Western Kentucky Correctional

Complex staff receive PREA training annually through scheduled annual training. The auditor reviewed the 2016 and 2017 PREA training lesson plan was reviewed and verified the training covered: zero-tolerance policy for sexual abuse and sexual harassment; how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; inmates' right to be free from sexual abuse and sexual harassment; the right of inmates and staffs to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment in confinement; the common reactions of sexual abuse and sexual harassment victims; how to detect and respond to signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with inmates; how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. Staff acknowledge they understood the training on Kentucky Department of Corrections Memorandum. Staff interviewed were well versed in the Kentucky Department of Corrections zero tolerance policy; their responsibilities in reporting sexual abuse, sexual harassment, and staff negligence; first responder duties; and evidence preservation. The auditor reviewed 16 acknowledgement memorandums that staff understood the PREA training received.

Standard	115.32	Volunteer	and	contra	ctor	trainin	g
----------	--------	-----------	-----	--------	------	---------	---

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

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

Kentucky Department of Corrections Policy 14.7 and the PREA training curriculum outline training requirements for volunteers and contractors who have contact with inmates. All contractors and volunteers who have contact with inmates receive the required PREA training. The auditor reviewed the training and seven (7) contractor/volunteer memorandum stating they understand the training. Interviews of the contractors and volunteers demonstrated their knowledge of PREA, their responsibilities and the agency zero tolerance policy.

# Standard 115.33 Inmate education

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

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

The auditor reviewed Kentucky Department of Corrections Policy 14.7, inmate handbook, PREA brochure, posters, inmate records and documents; observed inmates being inprocessed and provided a handbook and PREA flier; and conducted interviews of staff and inmates. Kentucky Department of Corrections Policy 14.7 requires that all inmates receive PREA information upon arrival; PREA education within 30 days of intake; and the information be provided in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. Per observation and interview of intake staff and inmates; inmates are provided PREA information and comprehensive education through an inmate handbook, Kentucky Department of Corrections PREA pamphlet, video, and discussion with staff during orientation. The auditor reviewed 20 randomly selected inmate's records; all had documentation for having received PREA information and PREA education.

Posters and inmate handbooks are provided to inmates or posted in the housing units in formats accessible to all inmates to ensure that key information is continuously and readily available or visible to inmates. Information on the posters and in the handbook, include: Kentucky Department of Corrections zero tolerance policy; how inmates can protect themselves; treatment options for victims; methods of reporting; services available for sexually assaultive or aggressive inmates; and how to contact a rape crisis center for emotional support by telephone or writing, both ways being confidential. All information presented is provided in both English and Spanish and to inmates who have low vision or hearing or with limited reading skills in a manner they can understand. Additionally, how and who to report PREA allegations are printed on the back of the inmates' ID cards.

## Standard 115.34 Specialized training: Investigations

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

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

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

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

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

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

Kentucky Department of Corrections Policy 14.7 outlines the training required for medical and mental health practitioners to include how to detect and assess signs of sexual abuse and harassment, how to preserve physical evidence, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how to report allegations of sexual abuse and harassment. The auditor reviewed seven

(7) medical and mental health staff training records and the medical training slides used to train medical and mental health staff on specific medical and mental health PREA training. Interviews of medical and mental health staff demonstrated they understood: how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. Medical staff does not conduct forensic medical examinations.

# Standard 115.41 Screening for risk of victimization and abusiveness

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

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

Kentucky Department of Corrections Policy 14.7 requires facilities to: conduct a screening for risks of sexual victimization and abusiveness within 24 hours of arrival; a follow-up screening for risks of sexual victimization and abusiveness within a set time period, not to exceed 30 days from the inmate's arrival at the facility; and reassesses inmate's risk level again when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. The initial intake screening is completed on intake prior to being placed into multi-occupancy housing. This is done to ensure no victim or potential victim of sexual abuse is housed with a sexual aggressor or potential sexual aggressor. Inmates are not disciplined for refusing to answer or disclosing information to staff when being assessed. Western Kentucky Correctional Complex does not detain inmates for the solely for civil immigration purposes.

The auditor reviewed two examples of inmate screening forms (initial screen and follow-up screen) prior to the audit, which met the PREA screening timelines. On-site the auditor reviewed 35 randomly selected inmate screening forms. All 35 initial screens were done within 24 hours of the inmate's arrival at Western Kentucky Correctional Complex. Western Kentucky Correctional Complex staff is supposed to reassess the inmate's risk of victimization or abusiveness within 30 days based upon any additional relevant information received. Of the 35 randomly selected follow-on screens 15 were done later than 30 days from the inmates initial screen at Western Kentucky Correctional Complex. Corrective Action Plan: (1) describe what policies and procedures put in place to ensure 30-day follow-on screens are conducted timely; (2) provide the auditor three examples a week following the training for eight weeks; and (3) the auditor conduct follow-up interview with screeners following at least 30 days after training. Western Kentucky Correctional Complex established a tracking system to ensure follow-up screens are done timely. The PREA Compliance Manager discussed the process with the auditor. Western Kentucky Correctional Complex provided screening forms for the time period identified in the corrective action plan. Of 35 follow-on screens, 34 were done timely, the one late one was two days late. On November 3, 2017 the auditor conducted interviews of three staff who performs screens. All the screeners interviewed discussed the process for conducting the follow-on screen NLT 30 days from initial screen. The auditor found Western Kentucky Correctional Complex compliant with the standard on November 13, 2017.

An inmate's risk level is reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. The screening instrument is objective in determining if the inmate is at risk for victimization or abusiveness. Western Kentucky Correctional Complex has appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

The auditor observed one screener conduct a PREA screen of an inmate; and had staff who conduct the screens perform the screen of the auditor to demonstrate the process of filling out the screening form. The process was done very professionally. Some information is provided through asking the inmate questions, others through review of inmate records. All the criteria referenced in the standard are on the form; and inmates are asked all of the questions required to be asked of the inmate. Per standard 115.41(d) The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming. The standard requires the person conducting the screen to make their own perception if the inmate is gender nonconforming. Observation of a screen and interviews of staff who conduct screens identified a majority did not know the definition of an offender who is gender nonconforming nor do they make their own assessment if the inmate is gender nonconforming cannot properly

make the assessment if they do not understand what gender nonconforming is. The Corrective Action Plan: (1) update the form or have staff annotate in the remarks block if they assess the inmate to be gender nonconforming; (2) train all staff who conduct screens on PREA definitions, specifically gender nonconforming, practice identifying persons who are gender nonconforming; and properly annotate if the screener identifies the inmate as gender nonconforming; (3) provide the auditor documentation of such training; (4) provide the auditor three PREA screening examples a week following the training for eight weeks; (5) and the auditor conduct follow-up interview with screeners following at least 30 days after training. Kentucky Department of Corrections decided not to modify the form but have staff annotate on the existing form in the notes section if they perceive the inmate to be gender non-conforming. Kentucky Department of Corrections and Western Kentucky Correctional Complex provided training on all PREA definitions, and procedures to identify and document an inmate who the screener is gender nonconforming. Western Kentucky Correctional Complex provided screening forms for the time period identified in the corrective action plan. Some of the screens did have inmates identified as gender nonconforming. On November 3, 2017 the auditor conducted interviews of three staff who performs screens. All the screeners interviewed could define gender nonconforming and the process for documenting whether the inmate is perceived by the screener as gender nonconforming or not. The auditor found Western Kentucky Correctional Complex compliant with the standard on November 13, 2017.

# Standard 115.42 Use of screening information

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

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

Based upon review of Kentucky Department of Corrections Policy 14.7 and interview of staff: Western Kentucky Correctional Complex uses information from the risk screening to inform housing, bed, work, education and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive; makes individualized determinations about how to ensure the safety of each inmate; consider on a case-by-case basis whether to assign a transgender or intersex inmate to an institution for male or female inmates, housing and programming assignments, based on the inmate's health and safety, inmate's own views with respect to his or her own safety, and whether the placement would present management or security problems; and do not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated institution, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.

Review of screening forms, housing and program decisions, and inmate and staff interviews, it was determined Western Kentucky Correctional Complex uses the screening information to determine housing, bed, work, education, and program assignment with the goal of keeping inmates at high risk of being sexually victimized separate from those at high risk of being sexually abusive. The decisions are made on a case-by-case basis using information from the screen, assigned PREA classification, and good correctional judgment.

Kentucky Department of Corrections and Western Kentucky Correctional Complex does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units or wings solely on the basis of such identification. Inmates who self-disclosed they were lesbian, gay, bisexual, transgender reported that they have not been placed in any special housing unit because of their sexual orientation. Based on policy, and staff and inmate interviews, transgender inmate's own views with respect to his or her own safety are given serious consideration when making housing, programs and other decisions; and transgender and intersex inmates would be given the opportunity to shower separately from other inmates. Per interview with a transgender inmate and staff, transgender inmates are offered the opportunity to shower separately from other inmates.

## Standard 115.43 Protective custody

	Exceeds	Standard	(substantially	exceeds	requirement of	f 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)
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
custody assessme	unless a tent canno	partment of Corrections Policy 10.2 inmates at high risk for sexual victimization are not involuntarily placed into protective thorough assessment determined that there was no available alternative means of separation from likely abusers. If an the completed immediately, Western Kentucky Correctional Complex may house an inmate in segregation for less than 24 seessment is being completed.
victimiz	Kentuck ation dur e custod	y Correctional Complex states that there were no inmates placed in involuntary segregation due to high risk of ing the audit period. Staff and inmate interviews and documentation verified inmates were not involuntarily placed in y.
Standa	rd 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)
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
there are video an and retal inmates may be r Correction auditor to investigation	multiple d posters iation by and staff reported v ons (dial ested the ative case	by Department of Corrections policies 14.7 and 3.22 staff and inmate interviews and documentation of incidents/reports, methods for an inmate to report allegations of sexual abuse or harassment. Inmate handbooks, PREA handouts, education throughout the facility provide specific internal and external ways for inmates to report sexual abuse, sexual harassment other inmates or staff for reporting sexual abuse and sexual harassment. Interviews of inmates and staff verified the knew of the multiple internal and external ways to report incidents of abuse or harassment, and retaliation. Allegations verbally or in writing to any staff member; telephonically contact the crime tip hotline (dial 8), Kentucky Department of 7732); write to Justice and Public Safety Investigative Branch; through a grievance; J-Pay, or through a third party. The phone numbers posted during the tour. Examples of inmate reporting through different means were reviewed when s were reviewed. Staff accepts reports made verbally, in writing, anonymously, and from third parties, and are promptly verbal reports.
able to u	se the ho	y Correctional Complex staff has the ability to privately report sexual abuse and sexual harassment of inmates. They are tline number which may remain confidential at the request of the reporting party. The calls are referred to the Kentucky prrections PREA Coordinator.
Standa	rd 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)

15

PREA Audit Report

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

Review of Kentucky Department of Corrections Policy 14.6 Inmate Grievance Procedures and Inmate Handbook Western Kentucky Correctional Complex does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse; does not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse; ensures that an inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and such grievance is not referred to a staff member who is the subject of the complaint; and issues a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. There were two PREA grievances, one for sexual abuse (voyeurism) and the other for sexual harassment. There were no emergency grievances filed pursuant to this standard.

Western Kentucky Correctional Complex may discipline an inmate for filing a grievance related to alleged sexual abuse only where the facility demonstrates that the inmate filed the grievance in bad faith.

# Standard 115.53 Inmate access to outside confidential support services

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

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

Kentucky Department of Corrections has a MOU with Kentucky Association of Sexual Assault Programs for victim advocate support. Sanctuary Inc. is the agency responsible to provide access to outside confidential support services in this district. Mailing addresses are provided to the inmate on posters in the housing units, to write for confidential emotional support. Additionally, the inmate can request through the case manager, shift supervisor or Warden to coordinate a confidential phone call to Sanctuary Inc. using a unit staff member office phone. Per the MOU they will provide up to three sessions per victim by phone, other sessions are done by in-house facility staff. There is no limit to support through written communication and the facility considered the phone call and/or written correspondence to be privileged/confidential correspondence. Inmate interviews confirmed a few inmates knew of the confidential support services provided, most knew there was a service available but not exactly what was provided based on they did not need or believed they would not need the specific information. Recommend the facility add an addendum to the inmate handbook with the information.

## Standard 115.54 Third-party reporting

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These

recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Western Kentucky Correctional Complex has a method to receive third party reports of sexual abuse and sexual harassment and does distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate through its website. The facility provided an example of one from each 2016 and 2017. Discussion with inmates demonstrated they knew how third-party reporting could be accomplished. Staff acknowledged during interviews that inmates could use a third party method report, and they were to immediately report those allegations to their supervisors, investigators, or PREA Compliance Manager.

Standard 1	115.61	Staff	and	agency	/ re	porting	duties
------------	--------	-------	-----	--------	------	---------	--------

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

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

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

## Standard 115.62 Agency protection duties

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

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

Kentucky Department of Corrections Policy 14.7 requires staff to take immediate action to protect any inmate they learn is subject to substantial risk. Interviews with staff demonstrate they know the steps to take to protect an inmate subject to risk of imminent sexual abuse. Security staff immediately employs protection measures as separate the inmate from where or whom at risks with; pass the information to the Investigator, PREA Compliance Manager and Warden. Western Kentucky Correctional Complex Warden, PREA Compliance Manager, and investigator confirmed there have been no instances of an inmate being at substantial risk of sexual abuse in the past 18 months.

Standard 115	5.63 Reporting to other confinement facilities
	Exceeds Standard (substantially exceeds requirement of standard)
$\boxtimes$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)
deteri must : recom	or discussion, including the evidence relied upon in making the compliance or non-compliance mination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These amendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
institution, the W the allegation; th Kentucky Correc responsibilities to Complex. In 20 where another fa	tractions Policy 14.7 requires when an allegation that an inmate was sexually abused while confined at another Varden that received the allegation shall notify the Warden where the alleged abuse occurred within 72 hours after receiving at all sexual abuse allegations reported by another institution regarding any inmate that was confined at the Western ctional Complex be fully investigated. Interviews with the Warden, confirmed his knowledge of the policies and o report any allegations and investigate any allegations that may have been reported at Western Kentucky Correctional 16 and 2017 there were no inmates who alleged sexual abuse at another facility. The auditor reviewed a case from 2016 cility contacted Western Kentucky Correctional Complex of an allegation from an inmate at the other facility, the allegation and thoroughly investigated and determined to be unsubstantiated.
Standard 115	6.64 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)
deteri must : recom	or discussion, including the evidence relied upon in making the compliance or non-compliance mination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
security staff. Reknowledgeable with crime scene; security staff me and protect any callows for the cophysical evidence	tment of Corrections Policy 14.7 outlines procedures to respond to an allegation of sexual abuse for both security and non- andom interviews with security and non-security staff confirmed both security and non-security staff were very what to do upon learning an inmate was sexually abused to include separating the alleged victim and abuser; how to preserve and what actions inmates should not take in order not to destroy physical evidence. Per interviews and policy; the first mber to respond to an allegation that an inmate was sexually abused shall: separate the alleged victim and abuser; preserve crime scene until appropriate steps can be taken to collect any evidence; if the abuse occurred within a time period that still llection of physical evidence, request that the alleged victim and alleged abuser not take any actions that could destroy e, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. ers including those individuals not in security are under the same requirements when an allegation is made.
Standard 115	5.65 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)
PREA Audit Rep	port 18

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.

Western Kentucky Correctional Complex has written institutional plans to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership. The facility has a written action plan that can be used for reference when an incident or allegations are reported. It encompasses steps to follow for ensuring all areas are notified and documentation is completed. Interviews with staff (first responders, medical and mental health practitioners, investigators, and institution leadership), and investigative files confirmed staff were knowledgeable about the PREA plan and the coordinated duties and collaborative responsibilities. Though sufficient and the medical and mental health staff were very familiar with their role in the response to sexual abuse and/or harassment allegation, the auditor recommends expanding the medical and mental health section of the written institutional plan.

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

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

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

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

# Standard 115.67 Agency protection against retaliation

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

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

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

continuing need.

Western Kentucky Correctional Complex Investigations Department is responsible to conduct PREA monitoring. Kentucky Department of Corrections has a good monitoring form. Western Kentucky Correctional Complex employs multiple protection measures, mainly using removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. Based on interviews and monitoring forms; the investigator will consider and review housing, disciplinary reports, record notes, internal classification checklist designation, behavioral health level changes, behavioral health referrals, staff offender relations checklist, grievances, and periodic meetings in order to determine if retaliation has or is occurring.

Western Kentucky Correctional Complex did not meet 115.67 (c) for at least 90 days following a report of sexual abuse the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Western Kentucky Correctional Complex began the monitoring following the investigation. Corrective Action Plan: (1) Begin monitoring following a report of sexual abuse; (2) provide the auditor monitoring sheets for 90 days. The auditor reviewed seven cases of monitoring during the corrective action period. The monitoring was timely, and like previous monitoring during the audit cycle was very through using the established form. The auditor discussed the procedures with the PREA Compliance Manager to ensure continued compliance. The auditor found Western Kentucky Correctional Complex compliant with the standard on November 13, 2017.

## Standard 115.68 Post-allegation protective custody

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

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

Based on interviews and investigative documents, inmates who have alleged or suffered sexual abuse are not placed in administrative segregation. They will only be housed in involuntary segregation until an alternative means of separation can be arranged. Per review of the Pre-Audit Questionnaire and interview of the Warden and PREA Compliance Manager, no inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment or were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement.

## Standard 115.71 Criminal and administrative agency investigations

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

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

The auditor reviewed 20 PREA allegations. There were five (5) inmate-inmate allegations: one (1) inmate-inmate sexual harassment substantiated; two (2) inmate-inmate sexual harassment unsubstantiated; one (1) inmate-inmate sexual harassment unfounded; and one (1)

inmate-inmate sexual abuse unsubstantiated. There nine (9) staff-inmate allegations: one (1) staff-inmate sexual harassment substantiated; one (1) staff-inmate sexual harassment unsubstantiated; one (1) staff-inmate sexual harassment unfounded; one (1) staff-inmate sexual abuses substantiated; two (2) staff-inmate sexual abuses unsubstantiated; and three (3) staff-inmate sexual abuse unfounded. There were six (6) consensual sex investigations.

Based on review of Kentucky Department of Corrections Policy 14.7, PREA investigations; interviews of Western Kentucky Correctional Complex Warden, PREA Compliance Manager, and investigator it was determined an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Western Kentucky Correctional Complex conducts its investigations using uniform evidence protocols.

The PREA Investigators had received a two-day Kentucky Department of Corrections specialized training for PREA investigators titled "Specialized Training: Investigating Sexual Abuse in Correctional Settings". The lesson plan included nine (9) modules taught by Kentucky Department of Corrections staff, local SANE, detective, and a local prosecutor. The Modules included: PREA Update And Overview Of PREA Investigative Standards: Guidance For The Field; Legal Issues And Agency Liability; What Investigators Should Know; Investigations And Agency Culture; Trauma And Victim Response: Considerations For The Investigative Process; Role Of Medical And Mental Health Practitioners In Investigations; First Response And Evidence Collection: Foundation For Successful Investigations; Interviewing Techniques: Skills That Address The Dynamics Of Sexual Abuse; Report Writing; Prosecutorial Collaboration.

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

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

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

## Standard 115.72 Evidentiary standard for administrative investigations

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

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

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

#### Standard 115.73 Reporting to inmates

		Exceeds Standard (substantially exceeds requirement of standard)
	$\boxtimes$	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 discussions must also include corrective action recommendations where the facility does not meet standard recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.		
Kentucky Department of Corrections 14.7 requires facilities to inform the inmate as to whether the allegation of sexual abuse has been determined to be substantiated, unsubstantiated, or unfounded; if investigated by an outside agency, request the outside investigative agency inform the inmate as to whether the allegation of sexual abuse has been determined to be substantiated, unsubstantiated, or unfounded; if the allegation is against a staff member, the facility shall inform the inmate whenever the staff member is no longer posted within the inmate's unit, no longer employed at the institution, has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; and that all notifications will be documented.		
Prior to the audit, Western Kentucky Correctional Complex provided one example of notification to the inmate. During the audit, the auditor reviewed investigations in the last year and determined in all allegations of sexual abuse and harassment: inmates were informed in writing the outcome of the investigations whether the allegation had been determined to be substantiated, unsubstantiated, or unfounded; if the case had been referred for prosecution; if the abuser had been indicted; and if the staff member no longer worked at the institution. Western Kentucky Correctional Complex uses the Kentucky Department of Corrections form of notification of cases it investigated. Interview of inmate who alleged sexual abuse, confirmed they were informed of results of the investigation and any applicable action taken.		
Standa	rd 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)
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
Per Kentucky Department of Corrections Policy 14-2; and interviews with Western Kentucky Correctional Complex staff, staff are subject to disciplinary sanctions for violating agency sexual abuse or sexual harassment policies; termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse; and disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. One staff member under investigation for sexual abuse (relationship with an inmate to include sexual contact) resigned during the investigation thus no disciplinary action.		
Standa	rd 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)	
	detern must a recomi	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion is include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.	
voluntee inmates bodies. Interviev	Per Kentucky Department of Corrections Policy 3.22; and interviews with Western Kentucky Correctional Complex staff, contractors, and volunteers; contractors or volunteers are prohibited from engaging in sexual abuse, and those that do are prohibited to have contact with inmates and requires they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The Warden reported that there have been no allegations of sexual abuse by contractors or volunteers during the audit cycle. Interviews with contractors and volunteers confirmed they knew the punishment for engaging in sexual abuse or sexual harassment of inmates or staff.		
Standa	rd 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)	
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion ilso include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.	
Kentuck engaged commen compara contribu followin	y Correct in inmate surate with the offent ted to his g an adm	cky Department of Corrections policies 14.7 and 15.2 Rule Violations and Penalties, and interviews with Western tional Complex staff, inmates are subject to disciplinary sanctions following an administrative finding that the inmate e-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse; sanctions are the the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for ses by other inmates with similar histories; and considers whether an inmate's mental disabilities or mental illness or her behavior. In the past 12 months there have been no disciplinary sanctions pursuant to a formal disciplinary process inistrative finding that an inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for exexual abuse. There were no inmate substantiated findings for sexual abuse.	
Inmates may be disciplined for sexual contact with staff only upon a finding that the staff member did not consent to such contact. Reports of sexual abuse made in good faith will not constitute false reporting of an incident even if the investigation doesn't establish sufficient evidence to substantiate the allegation. Western Kentucky Correctional Complex prohibits all sexual activity between inmates. They will take the appropriate action when incidents of sexual activity that are not coerced or considered sexual abuse occurred.			
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)	
	Audito	r discussion, including the evidence relied upon in making the compliance or non-compliance	

23

PREA Audit Report

determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Kentucky Department of Corrections Policy 14.7 requires all new inmates receive a PREA screen upon arrival, and any of these identify someone as having experienced prior sexual victimization or previously perpetrated sexual abuse, whether in a prison/jail setting or in the community, they will be offered a medical and mental health follow-up meeting within 14 days.

Review of random screens identified eleven (11) inmates had been identified as having experienced prior sexual victimization; but only three (3) were offered a follow-up meeting with a medical or mental health practitioner (115.81 (a)). Those who screened as a possible victim or possible being sexually abusive were offered a follow-up meeting with a medical or mental health practitioner. Only some of the inmates interviewed who previously experienced prior sexual victimization reported they were offered medical and mental health consultation. Western Kentucky Correctional Complex was offering medical and mental health consultation to Inmates who screened as a possible victim or possible being sexually abusive and not inmates having experienced prior sexual victimization or previously perpetrated sexual abuse IAW the standard. Corrective Action Plan: (1) train all staff who conduct screens to offer referral to inmates having experienced prior sexual victimization or previously perpetrated sexual abuse to medical and mental health; (2) provide the auditor documentation of such training; (3) provide the auditor three PREA screening examples a week following the training for eight weeks; (4) provide the auditor three PREA screening examples a week following the training for eight weeks; and (5) the auditor conduct follow-up interview with screeners following at least 30 days after training. Kentucky Department of Corrections and Western Kentucky Correctional Complex provided training documentation and screening documents. The auditor requested and reviewed five referral documents to mental health as required by the standard. On November 3, 2017 the auditor conducted interviews of three staff who performs screens. All the screeners interviewed could define gender nonconforming and the process for documenting whether the inmate is perceived by the screener as gender nonconforming or not. The auditor found Western Kentucky Correctional Complex compliant with the standard on November 13, 2017.

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

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

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

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

Per Kentucky Department of Corrections Policy 14.7, inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment; inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate; and qualified medical practitioners are on duty 24 hours. Upon returning from the hospital a nurse evaluates and documents the inmate's health status, and refers mental health services. The inmate is prioritized for sick call and if the emergency room complete testing sexually transmitted diseases, testing is done at the facility. Inmate victims of sexual abuse shall receive timely, unimpeded access to outside emergency medical exams without financial costs. The services at no costs are provided regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Interview with the medical staff and inmates confirmed this practice and that the requirements of this standard are adhered to. Treatment is provided to the victim without financial costs and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

#### 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)
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
docume treatment and men	entation de nt to all ir ntal health	of Kentucky Department of Corrections Policy 14.7; and interviews with staff and inmates; and medical and mental health emonstrate Western Kentucky Correctional Complex offers medical and mental health evaluations and, as appropriate, umates who have been victimized by sexual abuse. Western Kentucky Correctional Complex provides victims with medical a services consistent with the community level of care. Mental health evaluations are conducted on all known inmate on ithin 60 days of learning such abuse.
care for Kentuck Inmate are not evaluati Treatme	sexual at cy Correct victims of done at the ons are co	taff and inmates; and medical and mental health documentation demonstrate there is on-going medical and mental health buse victims and abusers. Medical and mental health conducts follow-up care for sexual abuse incidents. Western tional Complex provides victims with medical and mental health services consistent with the community level of care. If sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. If the tests he hospital it is done at the institution. Follow-up from the tests are normally done at the institution. Mental health benducted on all known inmate on inmate abusers within 60 days of learning such abuse, and treatment is offered. On costs to the inmates and regardless of whether the victim names the abuser or cooperates with any investigation arising the.
No subs	stantiated	cases of sexual assault.
Standa	ard 115	.86 Sexual abuse incident reviews
		Exceeds Standard (substantially exceeds requirement of standard)
		Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)

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

Kentucky Department of Corrections Policy 14.7 identifies the minimum members of the review team, and covers the process for sexual abuse incident reviews to include a form the review team uses that addresses whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the institution; whether physical barriers in the area may enable abuse; the adequacy of staffing levels in that area during different shifts; and whether monitoring technology should be deployed or augmented to supplement supervision by staff.

Based on interviews and review of investigations and incident reviews, Western Kentucky Correctional Complex conducts a sexual abuse incident review. The standard requires the review be conducted within 30 days of the conclusion of the investigation unless the allegation has been determined to be unfounded. Western Kentucky Correctional Complex did some reviews before the investigation was completed and in a few cases, did not do a review. Corrective Action Plan: Conduct the sexual abuse incident review for the case that was not

conducted, and conduct a sexual abuse incident review for any sexual abuse allegation that was not determined to be unfounded during the corrective action period. Provide all of these to the auditor. Western Kentucky Correctional Complex conducted an incident review for the one that was not conducted and five (5) incident reviews for PREA investigations that closed during the corrective action period. The incident reviews were timely and very good in reviewing actions and making recommendations Western Kentucky Correctional Complex could implement to have prevented the PREA incident. The auditor found Western Kentucky Correctional Complex compliant with the standard on November 13, 2017.

Incident review team members were interviewed and were knowledgeable of the process. The review team considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, stats, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at facility; and they examine the area where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in that area during different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

#### Standard 115.87 Data collection

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

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

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

#### Standard 115.88 Data review for corrective action

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

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

Kentucky Department of Corrections Policy 14.7 requires the agency to review all of the data collected from all its facilities and aggregates that data annually to assess and improve the effectiveness of its sexual abuse program and practices. Based on interviews with the PREA Compliance Manager, PREA Coordinator and review of the Kentucky Department of Corrections website, Kentucky Department of Corrections reviews the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies; and to identify problem areas and take corrective actions. An annual report is published and posted on the Kentucky Department of Corrections website. The auditor reviewed the 2014 and 2015 annual report. The 2015 annual report provided corrective measures taken

and addressed the agency progress in addressing sexual abuse, and provided statistical comparison between 2013 – 2015. The PREA section of the Kentucky Department of Corrections website is informative and easy to locate on the Kentucky Department of Corrections website. The Kentucky Department of Corrections PREA page lists general information on PREA; agency zero tolerance policy; how to report; agency wide data; and individual facility PREA reports.

Standard 115.89 Data storage, publication, and destruction			
	Exceeds Standard (substantially exceeds requirement of standard)		
	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)		
	Does Not Meet Standard (requires corrective action)		
de: mu rec	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.		
interviews of facilities is a posted on the after the date	Review of Kentucky Department of Corrections Policy 14.7, Kentucky Department of Corrections website, observation on-site, and interviews of staff it is determined data is properly stored, maintained and secured. Access to data is controlled. Aggregate data on all its facilities is available to the public through its website. All Kentucky Department of Corrections facility data is in the annual report and posted on the website. Kentucky Department of Corrections maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of the initial collection. Before making aggregated sexual abuse data publicly available, Kentucky Department of Corrections removes all personal identifiers.		
AUDITOR CERTIFICATION I certify that:			
$\boxtimes$	The contents of this report are accurate to the best of my knowledge.		
	No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and		
	I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically		
	requested in the report template.		
David K. H	December 30, 2017		

**Auditor Signature** 

Date