

PREA Facility Audit Report: Final

Name of Facility: Blackburn Correctional Complex

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 06/24/2021

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Sharon Ray Shaver	Date of Signature: 06/24/2021

AUDITOR INFORMATION	
Auditor name:	Shaver, Sharon
Email:	sharonrshaver@gmail.com
Start Date of On-Site Audit:	04/28/2021
End Date of On-Site Audit:	04/30/2021

FACILITY INFORMATION	
Facility name:	Blackburn Correctional Complex
Facility physical address:	3111 Spurr Road, Lexington, Kentucky - 40511
Facility Phone	
Facility mailing address:	

Primary Contact	
Name:	Shannon Butrum
Email Address:	shannon.butrum@ky.gov
Telephone Number:	502-382-7245

Warden/Jail Administrator/Sheriff/Director	
Name:	Abby McIntire
Email Address:	abby.mcintire@ky.gov
Telephone Number:	859-246-2366

Facility PREA Compliance Manager	
Name:	Allyson Lambert
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Telephone Number:	O: (859) 246-2366

Facility Health Service Administrator On-site	
Name:	Jonathan Bowen
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Telephone Number:	859-246-2366

Facility Characteristics	
Designed facility capacity:	325
Current population of facility:	261
Average daily population for the past 12 months:	262
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	20-82
Facility security levels/inmate custody levels:	Community and minimum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	117
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	23
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	96

AGENCY INFORMATION	
Name of agency:	Kentucky Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	275 E Main Street, Frankfort, Kentucky - 40601
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	Cookie Crews
Email Address:	cookie.crews@ky.gov
Telephone Number:	502-782-2266

Agency-Wide PREA Coordinator Information			
Name:	Shannon Butrum	Email Address:	shannon.butrum@ky.gov

AUDIT FINDINGS

Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

The Prison Rape Elimination Act (PREA) site review of the Blackburn Correctional Complex was conducted April 28-30, 2021 by Sharon Ray Shaver, a Department of Justice (DOJ) certified PREA Auditor. Blackburn Correctional Complex is a medium/minimum facility housing adult male offenders. The prison is operated under the authority of the Kentucky Justice & Public Safety Cabinet, Department of Corrections. This facility was audited through a contractual agreement between the Kentucky Department of Corrections and the American Correctional Association (ACA). The auditor assignment was confirmed on December 30, 2020. The audit notices were emailed directly to the agency's PREA Coordinator by the ACA on March 5, 2021, to post throughout the facility. Correspondence between the auditor and the agency's PREA Coordinator, Shannon Butrum, began in the early part of January and it was mutually decided that the audit would be conducted using the Online Audits System (OAS). Once uploads were finalized by the agency the auditor began reviewing the PAQ and documents using the PREA Compliance Audit Instrument and the Checklist of Policies/Procedures and other documents to create a log of additional information to be requested of the facility. A schedule of the onsite portion of the audit was established, and travel arrangements were secured directly by the auditor. As needed, written requests by email were submitted to the facility for additional documents and/or clarification of the documents provided. All requests for additional information were responded to promptly and comprehensively. Additional correspondence occurred between the auditor and the PREA Coordinator, up to the onsite portion of the audit and then after until the issuance of the final report.

Prior to the site visit, a plan for conducting interviews and for the facility tour was Developed between the PREA Coordinator and the auditor. Further discussion included corrective action expectations for any non-compliance identified during the audit and timelines for after the site visit. Due to the COVID-19 pandemic, health and safety protocols were discussed, and it was agreed that the participants in the initial onsite in-briefing and the subsequent tour would be kept to a minimum to limit contact among participants. The week prior to the on-site portion of the audit, the auditor requested from the PREA Compliance Manager documents to be made available on the first day of the site visit which included the following: a complete roster of inmates present on day one; a list of inmates identified with disabilities; a list of inmates with limited English proficiency (LEP); a list of inmates who identify as lesbian/bisexual/gay/transgender/intersex (LGBTI); a list of inmates assigned to isolated or segregated housing; a list of inmates who have reported prior sexual abuse; a list of inmates who have reported an allegation of sexual abuse at Blackburn Correctional Complex; a list of all staff; a list of all contract employees; daily shift reports for specific dates; a list of all investigations for the audit period and up to the current date. This information was provided upon arrival to the facility along with a Welcome Book, a copy of the Inmate Handbook, and other various facility information that the auditor found helpful during the audit.

Audit notices were posted by the facility's PREA Compliance Manager on March 16, 2021. Verification was provided through email correspondence, dated photographs, interviews with inmates, and personal observation during the facility tour. Notices were printed and posted throughout the facility in all common

areas of the facility to include the building entry points both inmate living units, library, kitchen/dining area, education and programming areas, maintenance, medical, administration building, industries building, intake, staff common areas, and recreational areas. These notices, posted in both English and Spanish, provided scheduled dates of the audit, the purpose of the audit, name of the auditor, accurate contact information for the auditor, and an explicit and factually accurate statement regarding the confidentiality of any communication and limitations to that confidentiality pursuant to mandatory reporting laws, with the auditor and anyone who may respond to the notices.

Review of Documents: The auditor reviewed relevant documents provided by the facility and on the agency website in addition to the PAQ and supporting documents. Using the PREA Compliance Audit Instrument and the Checklist of Documents during the review of the PAQ, a list was prepared for review during the on-site portion of the audit. Other documents reviewed will be referenced in the narrative sections under each individual standard discussion. Throughout the audit, an extensive document review was conducted. Various policies, forms, contracts, and additional working documents were reviewed and evaluated, and then triangulated against information obtained from interviews and personal observations during the site visit. This process was instrumental in determining agency and facility compliance with the PREA Standards. Included below is the list of governing Kentucky Department of Corrections Policies and Procedures (CPP) that will be referenced throughout the audit report and are annotated throughout the report using the corresponding abbreviation. This list is not intended to be exhaustive but outlines the core policy documents used in the evaluation process. Information obtained from these policies combined with the information provided with the PAQ and the observations, documentation and general information collected from the site visit was carefully evaluated and assessed against each of the elements of the standards.

- CPP/3.6, Background Investigations of Employees and Applicants for Promotion and Employment of Ex-Offenders
- CPP/3.1, Code of Ethics/Social Media Use
- CPP/3.22, Staff Sexual Offenses
- CPP/7.1, Construction, Renovation and Expansion Guidelines
- CPP/9.8, Search Policy
- CPP/14.6, Inmate Grievance Procedure
- CPP/14.7, Sexual Abuse Prevention and Intervention Programs
- CPP/14.8, Lesbian, Gay, Bisexual, Transgender, and Intersex Offenders
- CPP/15.2, Rule Violations and Penalties
- CPP/18.1, Classification of the Inmate
- CPP/18.15, Protective Custody
- KOMS-Kentucky Offender Management System

Mandatory Reporting Laws: As documented through a memorandum from the Kentucky Department of Human Resources (KDHR) to the Kentucky Department of Corrections, KDHR has no authority to investigate complaints within the jurisdiction of the Kentucky Department of Corrections under the Adult Protection Act, KRS 209.010-209.150; complaints of this nature will fall under the referral for criminal investigation. The Cabinet for Health and Family Services must be contacted when an allegation of sexual abuse is made by someone under the age of 18.

Outreach to Advocacy Organizations and General Search: Just Detention International (JDI) was contacted via e-mail to inquire if the organization had any information of concern for the Blackburn Correctional Complex. In response, JDI stated that they had received no correspondence regarding this facility in the last 36 months. The auditor contacted Ampersand Sexual Violence Resource Center listed

as the designated rape crisis center servicing the facility who reported have had no complaints or concerns reported for this facility. Inmates have 24/7 access to the telephone hotline and through written correspondence for emotional support services; on-site counseling is available by appointment when coordinated through the inmate victim's case manager (in person or virtual); a rape crisis counselor will accompany during a forensic examination and/or investigative interviews upon request. A web search revealed no information relevant to this audit. No relevant litigation, no DOJ involvement, no federal consent decrees, nor local oversight were discovered during the search. Interviews with the PREA Coordinator and the Agency Head confirmed no consent decrees or oversight exists. Additionally, the auditor reviewed the last American Correctional Association (ACA) Standards Compliance Reaccreditation Audit report for Blackburn Correctional Complex conducted in September 2017 and found no concerns related to PREA standards. The local hospital providing SAFE/SANE services is identified as the University of Louisville. This hospital is included in the facility's coordinated response plan as the provider for forensic medical examinations. The auditor's conversation with hospital staff confirmed that any inmate victim will be treated, and a forensic exam will be performed with the consent of the victim and that the hospital has two SANE nurses on staff. In the event a SANE is not available, the exam will be performed by other trained medical staff.

Research was conducted by the auditor using the Kentucky Department of Corrections public website <https://corrections.ky.gov>. The website is intuitive and easily navigated; and includes the agency's zero-tolerance policy for sexual abuse, links to related policies, how to report abuse, annual reports, statistical reports, memorandum from Kentucky State Police regarding investigations, and final audit reports. The auditor reviewed the PREA annual reports and the facility's last Final Audit Report. All inmate mail is subject to be inspected or read. Interview with mailroom staff confirmed that inmates would be allowed to correspond with the PREA auditor and the victim advocacy group without having the mail inspected unless the outgoing mail appears to be suspicious, in which case it would be treated as Privileged Correspondence which means it would be inspected in the presence of the inmate and logged. The auditor's interview with the mailroom staff confirmed no mail has been inspected of this nature in the past 12 months. The auditor received no correspondence by mail related to this audit.

SITE VISIT: On the afternoon of April 28, 2021, the auditor arrived at Blackburn Correctional Complex (BCC) and was greeted by Warden (acting) Abby McIntire, PREA Compliance Manager Allyson Lambert, and PREA Coordinator Shannon Butrum. After a short briefing and introductions, the facility tour began. The facility tour was led by Warden (acting) McIntire and PCM Lambert. The auditor was informed that some of the normally scheduled activities were currently adjusted or suspended due to the COVID-19 pandemic, such as education, volunteer services, and some programming. Four inmates were reported to be on quarantine at the time of the audit. The Warden advised that the facility was regaining momentum after having the majority of the population testing positive for COVID-19 over the past year and that they were beginning to resume some of their normal operations that had previously been suspended because of the pandemic. In-person visitation and volunteer services had not resumed as of the site visit, although the facility's Chaplain had managed to incorporate virtual services and maintained the certified volunteer training efforts virtually during the pandemic. The facility has not been taking in their normal numbers of new arrivals but is beginning to ramp up as COVID cases continue to decrease. The facility did inform the auditor that the intake procedures had been modified over the past year to maintain COVID-19 protocols and in some cases, inmates were quarantined prior to receiving the PREA training and orientation. Regardless, each inmate interviewed indicated they had been informed of the PREA and the file reviews contained documented evidence that the inmates received the Inmate Handbook, PREA brochure, and PREA training and that a risk screening was conducted. Deviations had also been made to the normal housing procedures due to large numbers being quarantined at various times throughout the year, however, the facility continued to conduct the risk screening assessments and

worked diligently to keep inmates separate who needed to be separated.

During the facility site review, all areas within the facility were inspected for sexual safety concerns to include the use of video cameras and security mirrors and identification of any blind spots. Areas on the tour schedule included: Inmate work areas (The Thoroughbred Retirement Foundation, Horticulture, Maintenance Shop, Mattress Shop, Correctional Industries), Education, Re-Entry, GED Testing Center, Receiving and Discharge/Intake (R&D), Medical, Dorm 1, Dorm 2, Inmate Canteen, Security building, Kitchen, Gymnasium, Chapel, Administration building. It is important to note that Blackburn Correctional Complex is a minimum-security institution that houses minimum and community custody male offenders and is not a secure facility, meaning there is no fence. The Complex is campus style and multiple buildings house the operations allowing monitored free access and movement by the inmates who reside at the facility. Movement is monitored by staff presence and by CCTV cameras strategically placed throughout the facility and grounds. More information about the physical structure will be discussed in the Facility Characteristics section of this report. Bathrooms, showers, and other similar areas were inspected in the living units, inmate work areas, recreation areas, programming, and administration areas. Most buildings on the grounds are multi-level and some of the buildings on the Complex are not maintained by BCC.

The auditor observed the camera coverage throughout the Complex. Zero-tolerance posters and pamphlets were observed in the intake area (R&D) to be presented to new arrivals. There were no new intakes scheduled so no intakes occurred during the site visit to be observed, however, the Intake Officer provided a simulation of the process for the auditor which included the explanation of the facility's zero-tolerance policy for sexual abuse and sexual harassment. The R&D strip area is equipped with a curtain to afford privacy to the individual being searched. There are no cameras in the area that capture the inmate while unclothed, showering, or using the restroom. The living units are open bay style and there is a direct line of sight throughout each unit. Bathrooms are equipped with shower curtains and toilet stalls for privacy. The housing units are designed with glass so that visibility into the dormitories is unimpeded from the rotunda area. The kitchen, dining room and food service storage areas were well equipped with video cameras. Storage areas were kept locked when not in use. During the tour of the medical department, privacy screens were present in the medical examination rooms.

The auditor placed test calls while on the facility tour to the PREA hotline (internal and external) through the inmate phone system on April 28, 2021, and notifications were routed back to the PREA Coordinator shortly afterward on the same day. The auditor observed placements of PREA audit notices and found them to be posted conspicuously and prominently throughout the facility. The auditor also confirmed during inmate and staff interviews that they were aware of the audit notices and their ability to correspond with the auditor. The auditor observed the agency's zero-tolerance and PREA informational posters throughout the facility. Opposite gender announcements were made and documented each time a housing unit was entered. Area logbooks were randomly reviewed throughout the tour and the auditor observed documentation indicating supervisor rounds are made regularly. Areas toured were well-lit, clean and organized, and in good repair.

Staff Interviews: At the time of the site visit, staffing was 111 agency employees and 23 contract staff. The agency contracts with WellPath to provide medical services, Keefe to provide inmate commissary services, and Aramark to provide food services. These contract staffs have contact with the inmate population and receive the same training as the state employees. The auditor interviewed 37 staff/contractors employed at BCC and 3 Agency representatives who were interviewed prior to the site visit. A total of 51 formal interview protocols were conducted during this facility's audit. Multiple protocols were administered to certain staff due to the nature of their roles and responsibilities held at the facility.

There is no Restricted Housing Unit at the facility, no cross-gender strip or visual searches have been conducted, SANE/SAFE services are not provided by the facility, and there are no youthful inmates so no specialized interviews were conducted using either of those instruments.

Staff Interviews - By Category	# of Protocols
Agency contract administrator	1
Intermediate/higher-level staff conducting unannounced rounds	4
Medical and mental health staff	3
Human resources staff	1
Volunteers/contractors who have contact with inmates	4
Investigative staff	3
Staff who perform risk screening	4
Staff on the incident review team	2
Designated staff who monitor retaliation	2
First responders, security and non-security staff	4
Intake staff	7
Random employee questionnaire	12

Inmate Interviews: Inmate interviews were based on guidance from the PREA Auditor Handbook page 52 and from the PREA Compliance Audit Instrument, Interview Guide for Inmates. The male inmate interviews were conducted in the administration building conference room using social distancing and with both parties (inmate and auditor) wearing masks. All inmate interviews were conducted in private to ensure inmates felt comfortable expressing any concerns they may have without prison staff being present. Interviews were conducted on the second day of the site visit. The official assigned population on the first day of the site visit was 270. The overall minimum number of inmate interviews required for this population size is 26 (13 random/13 targeted). Blackburn Correctional Complex houses no inmates who meet the definition of Youthful Offender, and there were no inmates housed at the facility at the time of the site visit who were identified as having a cognitive disability, who were limited English Proficiency (LEP), who identified as transgender or intersex, who were housed in segregation for risk of sexual victimization, or who had reported sexual abuse at this facility. The auditor selected additional inmates from other targeted categories to compensate for the six categories where no inmates met the criteria. The facility provided an inmate roster and several lists of inmates identified for the targeted categories that were generated on the first day of the site visit as previously mentioned in this report. Random inmates were selected from each of the housing units listed on the roster (1-A, 1-B, 1-C, 1-D, 2-A, 2-B, 2-C, 2-D, 2-E) and from the targeted lists using a random number selection and taking into consideration

factors such as housing locations, length of incarceration, race, and work assignments.

The auditor interviewed a total of 34 inmates using the Inmate Interview Questionnaire and administered a total of 18 targeted surveys. Of the 34 inmates, 19 qualified for one or more of the targeted population surveys. One inmate interviewed met the criteria for multiple targeted protocols which were administered during the interview which explains the difference in the number interviewed versus the number of protocols administered. It was evident that all inmates interviewed had a thorough understanding of the facility's zero-tolerance policy and knew multiple methods for making a report of sexual abuse or sexual harassment. All inmates knew the name of the PREA Compliance Manager. A high majority knew that there are victim advocacy services available and how to access although they didn't know many details about the services but have seen the posters on the bulletin boards. All inmates indicated they had seen the PREA video and were given a PREA pamphlet. Inmates stated they have received the PREA education several times including while at other facilities and every time they transfer, including the reception center when they first came into the Kentucky Department of Corrections. Some of the inmates who had arrived within the past 12 months expressed that they were in quarantine for a minimum of 14 days after their arrival due to COVID protocols so there may have been a departure from the normal schedule for delivery of the comprehensive education/orientation. The Unit Management staffing model allows the Unit Administrators (UA), Classification and Treatment Officers, and security staff time and access to become familiar with the inmates housed in their respective buildings. This seems to have a positive impact on the inmates' ability to access these staff members daily. Every inmate interviewed said they would feel comfortable using the hotline or telling a staff member if they needed to report sexual abuse or sexual harassment. During interviews, inmates stated that the staff take PREA very seriously and understand the zero-tolerance policy. Every inmate interviewed said they feel comfortable living at Blackburn Correctional Complex and that staff resolve any issues promptly that are brought to their attention. Interviews indicated that there is a positive reporting culture at this facility and that there is not a problem with sexual activity among the population.

Interview Type	Number Required	Number Conducted
Youthful Inmates	2	0
Inmates with Physical Disability/LEP	1	11
Inmates with Cognitive Disability	1	0
Inmates who Identify as Lesbian, Gay, or Bisexual	1	1
Inmates who Identify as Transgender or Intersex	2	0
Inmates in Segregated Housing for Risk of Sexual Victimization	1	0
Inmates who Reported Sexual Abuse	3	0
Inmates who Reported Sexual Victimization During Risk Screening	2	6

Allegations/Investigations:

Comprehensive PREA allegations data was provided to the auditor by the PREA Coordinator. One allegation was reported during the audit period and the investigation case file was reviewed by the auditor. This case was a staff on inmate sexual abuse case which was closed administratively as substantiated and forwarded to the Kentucky State Police (KSP) for criminal investigation. The response time to the allegation afforded the ability to collect forensic physical evidence and the inmate was transported to the University of Kentucky Hospital for a Forensic Medical Examination (FME) but declined upon arrival to the hospital. More details are explained in the narratives found under the specific standards within this report.

Conclusion: The auditor conducted a review of documents and interviews over the course of the three days during the visit and worked with the facility to ensure limited interruption to their operations. On the final day, the auditor conducted an out-briefing with the Warden (acting), the PREA Compliance Manager, and the PREA Coordinator. The auditor thanked the Warden (acting) and her staff for their hospitality and cooperation during the site visit and explained the next phase procedures. The facility was not provided with the compliance findings during this meeting but was told that an analysis would be conducted of all the information collected to make a final determination. The facility was advised that additional correspondence and documentation may be necessary to aid in a comprehensive compliance review. During all phases of the auditing process, the auditor experienced no barriers to completing a thorough evaluation of compliance. The auditor found agency and facility staff to be forthcoming with information and readily provided all documents requested. The staff was friendly and accommodating and it was apparent there was mutual respect between the staff and inmate population. The inmates observed on the facility walk-thru appeared to be comfortable and not guarded as is usually the case in a confined facility. The culture at this facility appears to be low and practically absent of violence and one of where each inmate is working toward release back into the community. The auditor was allowed unfettered access to all areas of the facility. All staff and inmates willingly participated in the interview process. The Warden (acting) and her team were extremely accommodating and communicated directly to the auditor the importance these audits have on the overall operations of the facility in a positive way. They were receptive to any suggestions and recommendations that can make Blackburn Correctional Complex a safer institution.

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The Blackburn Correctional Complex (BCC) is located at 3111 Spurr Road, Lexington, Kentucky in Fayette County. It is the largest minimum-security institution in the state of Kentucky, which houses minimum and community custody adult male offenders. The facility aims to provide the highest level of service with qualified and dedicated employees to accommodate offender needs while focusing on conducting business in the safest manner possible. The mission is to instill values of integrity, fairness, courtesy, and respect among staff and offenders in order to guide and alter offender behavior for a smooth and successful transition back into the community. BCC is a 320-bed institution comprised of two dormitories: Dorm 1 (96-beds) is comprised of four wings and houses general population and 52 designated beds for the Substance Abuse Program (SAP), and Dorm 2 (224-beds) is comprised of five wings and houses general population with 50 beds dedicated to the Assessment Center (for new arrivals). The age range of the population is 20-82. Dorm 1 is home to the BarkBurn, A New Leash On Life, Dog Program which is a 6-week Rescue Program. Offenders train dogs to follow basic commands and once mastered, may be adopted out. Dorm 2 predominantly houses inmates with health-related concerns, and those requiring ADA accommodations. The facility does not operate a Restricted/Segregation Housing Unit but has five temporary holding cells that are used in times when an inmate needs to be temporarily separated from the general population for medical/mental health or investigation purposes.

The physical plant consists of 44 buildings that house Academic and Technical programs, and industrial and support services on over 400 acres of land. BCC is home to a farming operation located on the grounds operated by the Kentucky Correctional Industries, as well as a Thoroughbred Retirement Foundation (TRF) program. The grounds are open for free movement between buildings, and there is a residential community just across the street. Facility visitors entering the Complex by vehicle go through a checkpoint for entry and presenting identification, although there is not a secure fence around the property.

The control center is staffed 24/7 and is located in the Security Building. The five temporary holding cells are also located in the security building, and two of the cells have cameras for inmates who need to be under observation while in temporary holding. The PREA Compliance Manager has created a PREA Response Bag which contains resource information, general supplies and forms, and evidence collection supplies to be used in the event of a sexual assault. There are a total of 220 cameras strategically located through the facility internally and externally.

The facility is operated by a staff of 111 agency employees and 23 contract employees led by the Warden. Her Administrative Support staff includes 1-PREA Compliance Manager/Lieutenant, 1-Offender Information Supervisor, 1-Offender Information Specialist, 1-Personnel Manager, 1-Personnel Tech, 1-Procedures Supervisor, 1-Fire & Safety Specialist, 1-Fiscal Manager, 1-Offender Records Supervisor, 1-IT Administrator, 1-Training Coordinator, 4-Administrative Specialists, 1-Mailroom/STG Supervisor. Facility security staff operates on three shifts: 8:00 a.m. – 4:00 p.m., 4:00 p.m. – 12:00 a.m., and 12:00 a.m. – 8:00 a.m. and consists of 2-Captains (1-Administrative/1-Internal Affairs Investigator), 6-

Lieutenants, 9-Sergeants, and 47 Officers. Additional staff positions will be listed in their respective program areas below.

Program Services: The Programs Department consists of 1-Unit Administrator II, 2- Unit Administrator I's, and 3-Classification & Treatment Officers (CTO). 1-Supervisor and 2-Counselors run the Substance Abuse Program, 1-Re-entry Specialist, 1-Education Supervisor, 4-Educators, 1-Recreation Supervisor, 2-Recreation Specialist. Under the Unit Management concept, each dormitory is a part of a larger semi-autonomous Unit. Each Unit is supervised by a Unit Administrator and is staffed by an assigned CTO. Inmates are encouraged to work with the Unit staff in achieving positive rehabilitation goals by participating in and taking advantage of available services.

The Programs Services Department focuses on the treatment aspects of incarceration and includes academic and vocational education, recreation religious services, counseling, work programs, and reception and orientation. All inmates received at BCC attend orientation and inmates with literacy problems or physical challenges may have the rules of the institution explained to them, as needed. Inmates are encouraged to participate in various available educational and work programs. The classification process is a system of providing a formal schedule for case review involving the evaluation of the inmate's needs. This process ensures the safety of the public by maintaining control of the inmate through proper custody assignment, attempts to assess the needs of the inmates toward their long-range reintegration into the community, and be aware of various departmental needs, both institutional and statewide. The Classification Committee may review an inmate when necessary, but at least twice in a twelve-month period. The responsibilities of the Unit Classification Committee are to make work assignments, program recommendations, and assignments, living quarters assignments, meritorious awards, restoration of Good Time, reduction/increase in custody levels, make recommendations for transfer to other institutions or community centers. Counseling services are provided by certified mental health professionals and qualified social service personnel.

Programs offered at Blackburn Correctional Complex include:

1. **Kentucky Correctional Industries:** KCI is maintained in 8 correctional facilities across the state and employs more than 700 inmates teaching job skills to reduce recidivism and to help make these individuals more productive members of society. At BCC, 1-Manager and 1-Staff supervise the 40 inmates employed at the plant who work constructing mattresses, constructing office panel computer work zone systems, and sign making.
2. **Farm/Cattle Farm:** BCC operates a registered Angus Cattle Farm with a herd of over 100 which is managed by 1-Supervisor. The Cattle Farm handles synchronization and assists in the artificial breeding of the herds. BCC brings heifers to sale in the spring and fall. The farm raises 6.5 acres of gardens consisting of spring and fall plantings. All produce is donated. Inmates are employed in all aspects of the farming operations.
3. **Thoroughbred Retirement Foundation (TRF):** BCC manages one of seven Second Chances Farms for TRF, which is the only one currently in Kentucky. The farm is home to 57 Thoroughbreds that have retired or have limited athletic futures. The inmates participate in horse care and farm management. They learn basic veterinary care, biology/anatomy, grooming, dental care, and training the horse. There is also classroom work and teaching that if the inmate successfully completes a written exam may earn meritorious good time toward their sentence. The program is run by a Farm Manager.
4. **Soft Skills Boot Camp:** This is a nine module/video and two-bonus program module/video program and is designed to assist inmates in getting a job upon release, The program teaches soft skills work-ready skills such as communication, problem-solving, customer service, teamwork, and

conflict resolution.

5. Governmental Services Program (GSP): This program provides an inmate workforce to state agencies or projects and provides the inmate with a realistic work experience. Details currently exist with the Kentucky Horse Park and the Kentucky Transportation Cabinet. Special details are also provided to other agencies as needed and that are approved.
6. Alcoholics Anonymous/Narcotics Anonymous (AA/NA): Self-help groups that are open to any inmate that reports a problem with alcohol or drugs which are based on the 12-step recovery principles, and are sponsored by a CTO.
7. Veterans Club: This is a voluntary membership that links civilian/military resources and incarcerated veterans of all branches of military service who have served during times of peace and ties of war. The club strives to support veterans by encouraging lifestyle management principles that contribute to success with their incarceration, community, spiritual and emotional needs.
8. Prison Fellowship Academy: Guides participants to identify the life-controlling issues that led to their incarceration and take responsibility for its impact on their community.
9. New Directions: A reentry program to help inmates with barriers they may face once released which may include money management, employment, parenting, housing, supervision, job interviewing skills. This is a 19 modules program with 10 subcategories.
10. Safety Specialist: Inmates receive two 30-hour OSHA cards for General Industry and Construction, CPR/First Aid/AED training and certification, and Forklift Certification, along with doing safety inspections and confined space training.
11. In2Work with Aramark: Designed to provide hands-on training that consists of three phases: kitchen basics, retail basics, and Serve Safe Certification.
12. Inside Out Dads: A 6-month program to help incarcerated fathers to become better dads while on the inside and for when they are released. This program encourages the family unit when the father will be released and continue their growth as dads.
13. Barkburn Dog Program – A New Leash on Life: In partnership with the Jessamine County Animal Care and Control, this program consists of 20 inmate dog handlers and 10 dogs, through an 8-week course. The program's goals are to aid the Animal Care and Control in training sheltered canines to make them more adoption-friendly while providing job skills and promoting teamwork among the inmates in the program.
14. Moral Reconciliation Therapy- Coping with Anger: Targets clients that tend to destroy themselves, their home, jobs/possessions, and health due to the inability to identify step by step the underlying issues that manifests within themselves this 6-month program teaches clients different responses to anger and assists with coping mechanisms even after the anger is triggered.
15. Moral Reconciliation Therapy- Relapse: Designed to help an individual identify thinking patterns that are skewed and require restructuring to pull out of the current situation. This 6-month program is designed to foster moral development and help clients identify how and why previous attempts to full recovery have not worked while assisting in identifying a sobriety path.

Adult Education: Adult Basic Education and General Education Diploma are available to all inmates who have yet to accomplish their secondary education requirements. A continuous adult basic education program provides training from the non-reader through the General Education Development Diploma and is provided at no cost to the inmate. Entry into the school may be made at any time, with each inmate progressing at his own pace. Post-secondary level courses are available through paper-based correspondence courses or when arranged, college-level classes are provided in the evenings. The National Career Readiness Certificate is also available.

Occupational and Vocational Programs: Vocational training is available to all eligible BCC inmates.

These programs permit students the opportunity to obtain work skills which may lead to gainful employment upon release. The Horticulture program's curriculum is governed by the National Occupational Competency Testing Institute while the Masonry and CT-Fundamentals programs utilize the National Center for Construction Education and Research curriculum. These programs are also at no cost to the inmate.

Health Care Services: The Medical Department at BCC provides medical, dental, and mental health and pharmaceutical services necessary to maintain basic health and is available on a 24/7 basis, and operates as a clinic. It is staffed through a contract with WellPath. Chronic medical care is provided at another facility, KSR. Medications administered daily, and sick calls by appointment. The Medical Department consists of 1-Nursing Supervisor, 1-Psychologist, 1-Nurse Practitioner, 9-Nurses, 1-Administrative Support along with medical providers. Medical hours run two shifts, with one nurse nightly 7 days per week from 6:00 a.m. to 6:00 p.m. Inmates are charged a \$3.00 co-payment for medical service unless it is ordered by medical staff. No inmate shall be denied health care for lack of funds at the time of the visit. BCC contracts with specialty providers in the community for inmates requiring specialized care. Emergency care is provided by the University of Kentucky Medical Center.

Work Opportunities: There are employment opportunities for inmates at BCC. The work programs offered include areas such as food service, janitors, landscape, maintenance, barber, recreation, sanitation, and library. Inmates may request a work assignment through their CTO. Some of the specialty programs listed above also employ inmates. Job vacancies are posted on the inmate TV channel and any inmate may apply.

Chaplain/Religious Services: One full-time chaplain oversees all volunteers and religious programming and is assisted by inmate clerks. The chapel is a standalone building on the complex which has a fully equipped, modern sanctuary with capabilities to stream virtual services and includes space for offices and a religious library, as well as a multi-purpose area for groups and other activities. Prior to the pandemic, chaplaincy services had 700-800 attendees per month. There are 94 Certified Volunteers on the roster currently and the Chaplain provided training to these volunteers via Zoom over the past year even though participation has been temporarily suspended. Various services and religious denominations and specialized ministries are supported through the Chaplaincy at BCC. The monthly schedule is arranged to provide worship or study time for as many church denominations as possible. Counseling is provided on an individual and group basis upon request.

Recreation Department: The Recreation Department is staffed by 1-Supervisor and 2- Recreation Leaders and is designed to provide comprehensive indoor and outdoor recreational activities to meet the needs of all inmates. Programs are developed to promote physical and mental well-being and to ensure that wholesome and healthy activities are provided. Many recreational activities are offered such as volleyball, basketball, handball, softball, weightlifting, treadmills, and workout stations. The spacious gym also offers billiards, ping-pong, and foosball, an arts and crafts room, and a music room. The basement of the gym is dedicated mainly to weightlifting and fitness equipment and houses the institutional library. Cameras are mounted plentifully in this area to assist with monitoring activity. This department supplies all of the recreation equipment and games in the dormitories and manages the barbershop.

Visitation/Correspondence: Visitation procedures are established for the inmate to maintain close family and community relationships, and to aid in his reintegration into society. Every inmate has the opportunity to receive visits in a surrounding permitting informal communication, including an opportunity for physical contact. Visits are allowed on Saturday, Sunday, and holidays from 9:00 a.m. to 2:45 p.m. Mail: Constructive correspondence is encouraged between all inmates and their families and friends. Staff will open all incoming mail to inspect it for contraband as outlined in CPP/16.2. Outgoing mail

(excluding 'Privileged') is subject to being opened, inspected, and read. E-mail messages are sent through the JPAY Kiosk that is located in each living unit. Listed staff may be contacted through e-mail at no cost to the inmate. Mailroom staff confirmed during an interview that inmate correspondence with the PREA Auditor is treated the same as privileged mail. Telephone access is available in each housing unit, and outside security, and available to all inmates. Outgoing calls are monitored by the institution as a security measure. Special communications may be completed by the Unit Administrator or designee. The Chaplain may give calls for family emergencies and death notifications.

Commissary Services: The institution provides canteen services through a contract with Keefe. The canteen is staffed with a manager and 2-employees and 2-inmate workers. The commissary is open five days per week and serves the entire population weekly. Inmate orders are placed through a kiosk. BCC commissary stocks over 900 items available for purchase.

Food Service Department: Foodservice is provided under the direction of a Director and 4-full-time staff plus an officer. Approximately 900 inmate meals and 35 staff meals are prepared each day. This department also generates income for the inmate canteen fund with Fresh Favorite Food sales to the inmate population. The In2Work program is an OJT program designed to provide inmates with food service training and practical work experience, so they may develop job skills to become more employable upon reentry. Inmates are also eligible to participate in ServeSafe Class. Every inmate who is able to work is assigned to the kitchen for the first 30 days after arrival.

Maintenance:> The Maintenance Department is staffed with a Maintenance Supervisor, 3-Maintenance Employees, and 1-Tool Room Officer. This department utilizes inmate skilled labor to provide upkeep to the facilities including plumbing, HVAC, and electrical.

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	6
Number of standards met:	39
Number of standards not met:	0

Based on the auditor's evaluation of documented evidence provided before, during, and after the site visit, interviews with a variety of staff, inmates, and service providers, and observations made during the site visit, the facility was found to meet or exceed all standards. There were two areas in the facility identified that the auditor recommended additional signage be posted which was taken care of on the first day.

Standards Met: 115.12, 115.14, 115.15, 115.17, 115.18, 115.21, 115.22, 115.32, 115.33, 115.34, 115.35, 115.41, 115.42, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.73, 115.76, 115.77, 115.78, 115.82, 115.83, 115.87, 115.88, 115.89, 115.401, 115.403

Standards Exceeded: 115.11, 115.13, 115.16, 115.31, 115.81, 115.86

Standards Not Met: None

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7, CPP/3.22; Agency Organization Chart; PREA Office Organization Chart; Facility Organization Chart; List of Facility Compliance Managers; PREA Coordinator Press Release; Information Obtained from Interviews; Review of Agency's Website; Personal Observations During On-site Visit.</p> <p>115.11(a): Agency policy mandates zero-tolerance toward all forms of sexual abuse and sexual harassment and outlines the agency's approach to preventing, detecting, and responding to allegations, and declares a zero-tolerance policy toward sexual offenses specifically for employees, provides definitions of policy applicability to include employees, contractors, volunteers, interns, students, and consultants, and definitions of prohibited behaviors and acts. The auditor's review of the related policies finds that they outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment includes definitions and sanctions, and a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates. Interviews with all levels of staff from various disciplines clearly indicated that zero tolerance for sexual abuse and sexual harassment is the standard.</p> <p>115.11(b): Kentucky Department of Corrections has designated Shannon Butrum as the Assistant Director/PREA Office Coordinator for the agency. Assistant Director (AD) Butrum was promoted to this position on November 13, 2019, and previously served as a facility PREA Compliance Manager. The agency PREA Coordinator is a full-time and dedicated position and reports to the Office of Adult Institutions Deputy Commissioner as documented by the Kentucky Department of Corrections Organizational Chart. AD Butrum has a direct line of communication to the Commissioner as evidenced by interviews with Commissioner Crews and AD Butrum. During the auditor's interview with AD Butrum, she stated that she has adequate time and authority to develop, implement, and oversee the agency's efforts to comply with the PREA standards. The Auditor's observations of the PREA Coordinator's interactions with facility leadership and staff during the on-site portion of the audit supported a high-level engagement and respect for the authority of her role within the agency in this capacity. The PREA Coordinator has two Justice Program Administrators who have been allocated to assist the PREA Coordinator in managing the agency's efforts to comply with PREA standards and to provide oversight and guidance to the Wardens and PREA Compliance Managers. This structure exceeds the requirements of this provision.</p> <p>115.11(c): Each of the 13 facilities of the Kentucky Department of Corrections has a designated PREA Compliance Manager and a backup as confirmed through an interview with the PREA Coordinator and auditor's review of the "Adult Institutions PREA Compliance Managers" Directory. The facility's designated PREA Compliance Manager is Allyson Lambert, and her backup is David Penix. The auditor's interview with the facility's PREA Compliance Manager (PCM) confirmed that she has sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. She is new in the position and this is the first PREA audit that she has prepared for, but demonstrated a high level of competency and was very open to learning as much as she could during the audit. The backup PCM is instrumental in</p>

working with PCM Lambert to oversee the PREA efforts at the facility. The facility's PCM is a direct report to the Warden as confirmed during her interview and a review of the Blackburn Correctional Complex Organizational Chart. The auditor observed positive working relationships between the PCM and facility staff. The auditor also observed conversations and interactions by the PCM with inmates during the tour informed the auditor that she is approachable and has developed a good rapport with the inmate population.

After analysis and evaluation of the stated evidence, the auditor finds the agency meets all provisions of this standard. Furthermore, the agency is found to exceed the requirements of this standard in that it designates two support staff in addition to the Coordinator to oversee the agency's PREA efforts and requires each facility to designate a back-up to the facility's PCM.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: 115.12 Amended 2021 Compliance Visit Schedule CCF; Contracts; Information Obtained from Interviews; PREA Audit Final Reports.</p> <p>115.12(a)(b): Kentucky Department of Corrections contracts with 28 separate Reentry Service Centers to provide housing for inmates transitioning from prison to the community and 1 contract with a private corporation to operate a prison. The auditor reviewed all 29 contracts and found language requiring the private entity to comply with the PREA. In addition, the contract is subject to announced or unannounced compliance monitoring that may include on-site monitoring visits. Where applicable, the contracting entity is required to be audited by a DOJ Certified PREA Auditor every three years and failure to meet these contractual requirements may result in termination of the contract. The Reentry Centers are audited, where required, under the Community Confinement Standards. The PREA Coordinator's Office tracks and monitors compliance with each facility's audit status as evidenced by the auditor's review of the 115.12 Amended 2021 Compliance Visit Schedule spreadsheet and interview with the coordinator. All facilities but one meet the criteria for auditing by a DOJ Certified PREA Auditor. As of the date of this audit, all audits are either current, scheduled, or in process of scheduling. One facility is newly under contract and is being monitored for compliance by the agency, pending a PREA audit once they are fully operational. Five facilities were due for audits in 2020 but had to postpone due to the COVID-19 pandemic. According to an interview with the PREA Coordinator and the Agency Contracts Administrator, contracted entities exempt from 115.401(a) are still held to the PREA standards and are monitored directly by the PREA Coordinator's Office and that Annual Compliance Reviews are conducted at all contracted facilities. Auditor was provided a sample of a recent compliance review conducted at one of the centers and found it to assess compliance with the PREA standards.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency meets all provisions of this standard.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7, CPP/3.22; Information Obtained from Interviews; Personal Observations During On-site Visit; Security Daily Logs and Shift Rosters; Daily Security & Safety Logs; Staff Compliment Formula Memorandum; Staffing Rosters; Activities & Programs Schedule; Staffing Deviations IRT; Quarterly PREA Meeting Minutes; PREA Coordinator’s Staffing Input/Plan Review; Camera Location List Dormitory Officer Post Order.</p> <p>115.13(a): As directed by CPP/14.7, the agency requires each facility it operates to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring to protect inmates against abuse. The Staff Compliment Formula was provided by Captain Burns which explained to the auditor how the staffing patterns are calculated. The auditor reviewed the current staffing plan and found the plan provides adequate coverage with relief-factor for inmate supervision posts. The facility runs three shifts: 8am-4pm, 4pm-12am, 12am-8am. Documented consideration was given to all elements of provision (a) of this standard in the development of the facility’s staffing plan based on the Quarterly PREA Meeting Minutes provided by the PCM. Since the facility’s last PREA audit conducted March 28-30, 2018, the average daily number of inmates was 232 and the staffing plan was predicated on an average population of 232. There are 220 cameras throughout Blackburn Correctional Complex which are placed strategically throughout the complex in high vulnerability areas. Blackburn Correctional Complex is not a secure facility and inmates move freely across the complex throughout the day. The CCTV system is instrumental in monitoring activities and in assisting with investigations when an incident occurs and is monitored by the Internal Affairs Investigator, Control Center Officer, and all Security Supervisors have access to the cameras. The facility Captain is responsible for ensuring posts are covered.</p> <p>115.13(b): When the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan. Interview with the Warden (Acting), confirmed and that the captain is required to notify her if any of the mandated posts are not filled, and that the facility uses holdovers, overtime, and assistance from administrative and programs staff when needed to ensure that designated posts are covered in accordance with the staffing plan. An Incident Report Summary (IRT) is completed if any Posts are closed, and a Post can only be closed with approval from the Captain. The auditor reviewed the current staffing plan which indicated the number of officers and supervisors required plus relief factor required for each shift. Interviews with shift supervisors verified that post closures require the captain’s approval. In cases where the designated staffing plan is not complied with the Shift Supervisor notes this in the designated section on the Shift Roster. The auditor reviewed 21 shift rosters from randomly selected dates covering all shifts and found documentation of staffing and post adjustments to ensure the staffing plan was met. In addition, the auditor reviewed an example of the Incident Report Summary (IRT) report that documents post closures and subsequent notifications of the events in accordance with the requirement to document deviations from the staffing plan. The most common reason for deviations from the staffing plan in the past 12 months is staff shortages, staff absences, and hospital post coverage. Interviews with the Warden and Captain confirmed that staffing is reviewed daily.</p>

115.13(c): The facility has documented an annual review, completed 11/24/2020, of the staffing plan which has indicated consideration of all provisions of this standard as delineated in section (a). The PREA Coordinator has documented her review of the staffing plan to include whether adjustments are needed in the staffing plan, the deployment of monitoring technology, or the allocations of resources to commit to the staffing plan to ensure compliance with the staffing plan. The review noted no judicial findings of inadequacy, no findings of inadequacy from Federal investigative agencies or internal or external oversight bodies. Minutes provided by the PCM document that the facility conducts a full review of the staffing plan on a quarterly basis and makes any necessary adjustments based on the review.

115.13(d): CPP/14.7 and CPP/3.22 require supervisors to conduct and document unannounced rounds on all shifts to identify and deter staff sexual offenses and that staff shall not alert other staff if a supervisory round occurs unless such announcement is related to the legitimate operational functions of the institution. The Warden (acting) explained that camera footage is randomly reviewed by herself, the Captain, and the Internal Affairs Investigator, and this was confirmed through the auditor's interviews with these staff. The Daily Security and Safety Logs are documented when unannounced rounds are conducted. The auditor's review of the 47 logs for randomly selected dates and for both living units indicated unannounced rounds are conducted by supervisors covering all shifts and areas to deter staff sexual abuse. Interviews with staff and inmates confirm that intermediate and higher-level staff conduct unannounced rounds on a frequent, irregular basis. The auditor reviewed the Dormitory Officer Post Order and it states "Supervisors shall conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policy and practice shall be implemented for night shifts as well as day shifts. Staff shall be prohibited from alerting other staff members that these supervisory rounds are occurring. Staff interviews confirmed knowledge of the prohibition of alerting other staff of the unannounced rounds. Requirements for rounds were modified some during the pandemic to minimize exposure and limit spread among inmates and staff. During the times of reduced supervisory rounds, non-supervisory rounds were increased, and additional electronic monitoring was utilized. Current documentation reviewed by the auditor indicates regular supervisory rounds have resumed and support compliance with requirements of this provision in areas that were previously under quarantine.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard. In addition, the facility is found to exceed this provision (c) by conducting formal staffing reviews quarterly which exceeds the annual requirement.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/18.3; 115.14 Memorandum from PCM; Information Obtained from Interviews; Inmate Roster.</p> <p>115.14(a)(b)(c): CPP/18.3 identifies specific housing locations for both male and female youthful offenders under the age of 18. The policy requires that male youthful offenders ordered committed to the Department of Corrections be housed at the Kentucky State Reformatory and female youthful offenders ordered committed to the Department of Corrections to be housed at the Kentucky Correctional Institution for Women. At both designated facilities, these youthful offenders are to be housed in a housing unit designated by the Warden that meets all requirements set forth in 28 CFR SS 115.14. Blackburn Correctional Complex is not one of the designated facilities and therefore this standard is not applicable to this facility. The PREA Compliance Manager confirmed during an interview and by memorandum that there have been no youthful offenders housed Blackburn Correctional Complex and a review of the current inmate roster indicates all inmates are at least 18 years of age.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/9.8; CPP/3.22; CPP/14.7; Body Search Techniques Training Curriculum; Strip Search Log Information Obtained from Interviews; Daily Security and Safety Logs; Memorandum Transgender/Intersex Searches; Memorandum Cross Gender Searches; Memorandum Body Cavity Searches and Employee Training Records.</p> <p>115.15(a)(c): CPP/9.8 clearly defines the terminology used in the policy related to searches and requires that except in exigent circumstances, a strip search shall be conducted by a staff member of the same gender as the inmate. All searches are to be carried out in a dignified manner and under sanitary conditions and professionally. All cross-gender strip searches shall be logged and documented in the institutional strip search logbook. Any search of an inmate which requires probing of a body cavity, x-rays, or any medical procedure shall be conducted in private by an institutional medical professional. Interview with the PCM and by written memorandum reports that no cross-gender strip searches or cross-gender visual body cavity searches were conducted of inmates within the past 12 months and that this type of search would only occur under exigent circumstances. This was further confirmed through interviews with security staff. Interviews with medical personnel also confirmed that no body cavity searches have been conducted by the medical department during the audit period. None of the inmates interviewed had been searched by a female officer at this facility. A sample of the Strip Search log was reviewed indicating all were approved by a supervisor and were conducted by a male officer.</p> <p>115.15(b): CPP/9.8 requires all cross-gender pat-down or frisk searches of female inmates to be conducted only under exigent circumstances and documented. Blackburn Correctional Complex houses male inmates only. This standard is not applicable to this facility.</p> <p>115.15(d): CPP/14.7 directs offenders shall be provided facilities that enable them to shower, perform bodily functions, and change clothing without staff of the opposite gender viewing their breasts, buttocks, or genitalia except in exigent circumstances or when such viewing is incidental due to routine cell checks. CPP/3.22 requires a staff member of the opposite gender from the offender in a housing unit to announce his or her presence before entering the unit as described by institution post orders or written guidelines. The auditor reviewed 47 Daily Security & Safety Logs for both Dorm 1 and Dorm 2 and found consistently documented cross-gender announcements. During the site visit, the auditor observed the opposite gender announcements being made each time the tour group entered a housing unit. Showers are equipped with either doors or shower curtains and toilets are enclosed and have doors for privacy. The auditor's inspection of the bathroom areas found inmates are able to shower, use the restroom, and change clothes without being observed by opposite-gender staff. All inmates interviewed indicated that they are never naked in full view of opposite-gender staff and that the female staff is very consistent with making their announcements.</p> <p>115.15(e): CPP/9.8 directs that a transgender or intersex inmate shall not be searched or physically examined for the sole purpose of determining the inmate's genital status. A medical exam may be performed as permitted by 28 CFR §115.15. Interview with the PREA Compliance Manager, supported by a memorandum, and interviews with other random staff,</p>

and medical personnel confirmed no searches have been nor ever would be conducted for the sole purpose of determining an inmate's genital status. All staff interviewed confirmed they have received training on how to conduct cross-gender searches and searches of transgender and intersex inmates in a professional and respectful manner when they attended their initial academy training and then a refresher every year during in-service.

115.15(f): The auditor reviewed the curriculum for Pre-Service and Annual Inservice and found each covered a module on search procedures. All staff receives the PREA - Prison Rape Elimination Act Module in pre-service training upon hire and during annual in-service training each year thereafter. The facility reports that 100% of the security staff has been trained on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs. Inservice training records reviewed by the auditor documented that staff has been trained. Random staff interviews confirmed they have been trained on how to conduct proper searches. There were no transgender or intersex inmates housed at this facility during the auditor's site visit.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; Brochure in Braille; Brochure in Large Print; English & Spanish Awareness Brochures; English & Spanish PREA Posters; Inmate Training Records; Information Collected During Interviews; ASL Interpreter Contract; Interpreter Memorandum from PCM; Inmate Interpreters Memorandum; Memorandum Deaf & HOH from PCM; Communicating with Deaf and Hard of Hearing Training Curriculum for Staff; Staff Training Records; 2020 Institutional Inservice Agenda.</p> <p>115.16(a): The agency has established procedures to provide disabled inmates 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. The facility provides offender education in formats accessible to all offenders including those who are deaf, visually impaired, or otherwise disabled, and for offenders who have limited reading skills. The PREA Compliance Manager works closely with the staff member designated to coordinate Americans with Disabilities Act (ADA) accommodations for the facility to ensure any special needs can be met when needed. Based on interviews with the PREA Compliance Manager and the facility ADA Coordinator, the facility has numerous devices and processes to help ensure prison staff communication with the deaf and hearing-impaired population is effective. A memorandum from the ADA Coordinator to the inmate population outlines auxiliary aids that are available for the deaf or hearing impaired which include ID and notice cards, hearing aids and amplifiers, video captioning, written materials, non-auditory alerts, telecommunications devices such as Video Relay Service (VRS)/Video Remote Interpretation (VRI) and TTY machines, and access to Qualified Interpreter Services. Any of these methods may be used to assist staff and inmates in communicating with each other. Additional resources available include access to ASL Interpreting Services at http://www.aslinterpretingservices.com or 502-594-5109. There has been no documented incident where the use of ASL services has been requested. The facility uses the “What You Need To Know” video from the PREA Resource Center website for inmate training which is available with subtitles. The facility maintains a copy of the English and Spanish Prison Rape Elimination Act Brochure published in Braille and the PREA Brochure is available in Large Print. The auditor observed the availability of all signage and brochures posted during the onsite tour. Interviews with Unit Administrators (UA) and Classification & Treatment Officers (CTO) confirmed that inmates are provided the PREA training and information in multiple formats and that any special needs of each inmate will be identified quickly upon intake and addressed as needed to ensure communication is effective between the staff and each inmate. The facility reported 24 inmates with a hearing disability and each of these inmates is provided an Inmate ID Alert Card to notify staff or others having regular contact with them they may need accommodations for their hearing impairment. The auditor interviewed 8 inmates from this list and found each inmate was able to communicate well with the use of either a hearing aid or combination of hearing and lip-reading and declined the assistance of an interpreter. The auditor also interviewed one inmate with a visual disability and one with a physical disability. All ten inmates interviewed stated they were provided the PREA information in a manner that they understood and accommodations were offered and/or made available where needed, which was further documented in their institutional file.</p>

115.16(b): The agency has established procedures to provide inmates with limited English proficiency (LEP) 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. Based on interviews with the PREA Compliance Manager the facility has not housed an inmate who is LEP within the past 12 months, however, the facility is prepared to provide interpreting services and/or translation when needed. The facility uses the "What You Need To Know" video from the PREA Resource Center website for inmate training, which is available in English, Spanish, and Hmong. The PREA posters and brochures are published in English and Spanish. The facility has access to Language Line Solutions that is currently contracted through Correct Care Solutions. The auditor observed prominent signage and brochures during the onsite tour and found the information to be readily accessible to inmates.

115.16(c): CPP/14.7 prohibits the use of offender interpreters or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety. Interview with the PREA Compliance Manager confirms that there have been no requests for an interpreter related to a PREA allegation, education, or responses in the past 12 months, although the service is available should a request be received.

The auditor's review of the Adult Institution In-Service 2020 Agenda found it included a 2-hour module, Communicating with Deaf and Hard of Hearing providing evidence of the agency's efforts above and beyond the requirements of this standard to ensure effective communication between the inmate population and staff. Staff interviewed were aware of the interpreting services available and were also aware that inmates cannot be used to interpret for other inmates in matters related to PREA. The auditor's interview with the Commissioner conveyed the importance of effective communication between inmates and staff and her expectation that all inmates have the ability to participate and benefit from these efforts.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard. Additionally, the agency provides specific training to staff on communicating with the deaf and hard of hearing population annually, which is found to exceed the requirements of this standard.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/3.6; CPP/3.1; Background Check Authorization Form; Employee Application; Directive on Providing Substantiated Allegations of Former Employee; Personnel File Records; Information Obtained from Interviews.</p> <p>115.17(a): CPP/3.6 prohibits hiring or promoting anyone or enlisting the services of a contractor who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who: 1) has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; 2) has 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 3) has been civilly or administratively adjudicated to have engaged in the activity described in item (2) of this provision. The Human Resources Manager confirmed during her interview that each applicant is asked these specified questions directly during the interview process and the applicant completes the required form including and signs confirming acknowledgment statement. A criminal background investigation and prior employment checks are conducted prior to being employed and no one will be hired or promoted if found to have engaged in any of the listed activities.</p> <p>115.17(b): CPP/3.6 provides consideration be given to any incident of sexual harassment in determining whether to hire or promote any employee or enlisting the services of any contractor who may have contact with offenders. Interview with the Human Resources Manager confirmed that incidents of sexual harassment require review and approval by the Warden for hiring or promoting any employee or enlisting any contractor. Interview with the agency's Contract Administrator confirmed that all contracts include PREA language requiring compliance as a condition of the agreement.</p> <p>115.17(c): CPP/3.6 requires a background investigation be conducted on all prospective employees, prior to any new employee's starting date and best effort to contact all prior confinement facility employers to obtain and consider information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. The facility reports that 65 new employees were hired who may have contact with inmates and who have had criminal records checks. The auditor reviewed personnel records for 11 randomly selected employees (2 hired or promoted within the past 12 months) as evidence that criminal history checks are conducted on all new employees prior to employment with the agency and on existing employees prior to promotion. For new hires, background checks are done through the Administrative Office of the Courts, NCIC, and FBI and are initiated locally during the application process. The Human Resources Manager also explained her process for tracking requests for all background checks to include new hires, contractors, and existing employees. Promotions are checked as an interim measure at the time of the promotion and do not change established tracking based on the original hire date of the employee. The auditor a sampling of the NCIC tracking spreadsheet provided by the Human Resources Manager and found evidence of 22 new employee backgrounds and a system for tracking when the next check is due. The Human Resources Manager confirmed</p>

that prior institutional employers are contacted directly to inquire about any prior investigations, terminations, or resignations during an investigation for prospective employees or transfers. Records were reviewed for one employee who worked at a confinement facility prior to employment at Black Correctional Complex.

115.17(d): CPP/3.6 requires a background investigation to be conducted on all contractors who may have contact with inmates before enlisting services. The facility reports there were four contracts where criminal record checks were conducted on all staff covered in the contract who might have contact with inmates. The auditor reviewed one full contractor packet and the NCIC tracking spreadsheet provided by the Human Resources Manager and found evidence of 27 contractor background checks and a system for tracking when the next check is due. These criminal history checks are conducted on contractors prior to enlisted services with the agency, although service contractors are never left unescorted while on the premises. A records review for 7 contract staff (2-WellPath, 3-Aramark, 1-Keefe, 1-Office of Adult Institutions) was conducted by the auditor confirming that background checks are completed on contract employees prior to enlisting their services at the facility.

115.17(e): CPP/3.6 requires all current employees and contractors who may have contact with inmates to have a background investigation conducted at least every five years. Interview with Human Resources (HR) Administrator informed that each month she checks her NCIC tracking spreadsheet and provides the names to the Internal Affairs Investigator who conducts the criminal history background check update on employees and contractors with who are due. Once conducted, the Warden reviews any derogatory findings. The auditor reviewed the NCIC tracking spreadsheet and found it contained recorded checks conducted annually for 24 security staff and 19 administrative staff.

115.17(f): CPP/3.1 requires an employee to report to his or her respective supervisor or facility contact as soon as possible any arrests, domestic violence orders, emergency protection orders, or pending charges. In addition, the employee is required to report any civil or administrative adjudication where he has been found to have engaged in a sexual activity facilitated by force, overt or implied threats of force, or coercion if the victim did not consent or was unable to consent or refuse. The continuing duty to report any incidents outlined in this provision is imposed upon employees and contractors and is communicated through the PREA training curriculum and as part of the attestation on the employment application. The Authorization to Conduct Criminal Records Check Form includes the three questions required to be asked of all employees. This form must be completed and signed each time a criminal records search is conducted. The auditor's review of 18 personnel records found the signed questionnaire had been completed. Employees are notified of the continuing duty to report any of the activity discussed in this standard during pre-service orientation and again annually during in-service. Interviews with random staff indicated employees and employee contractors are aware of this duty to report.

115.17(g): CPP/3.6 states that material omissions regarding misconduct described in this provision, or providing materially false information, shall be grounds for termination. and is communicated through the PREA training curriculum and as part of the employment application. The agency's standard application form contains this attestation.

115.17(h): According to the documentation provided by the PREA Coordinator and subsequent interview Kentucky State has no law prohibiting the release of information on substantiated allegations of sexual abuse or sexual harassment involving a former employee

upon receiving a request from an institutional employer for whom such employee has applied to work and is provided by the Human Resources Manager when requested. The Human Resources Manager advised she has not received a request from a prospective employer about a prior employee in the past 12 months. She further advised that if one is received, it will be answered by her with input from the Internal Affairs Investigator.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/7.1; PREA Final Report dated 04/30/2018; Memorandum from PCM; Facility Tour; Information Obtained from Interviews; Listing of Facility's Video Monitoring Cameras; Quarterly PREA Meeting Minutes.</p> <p>115.18(a): CPP/7.1 requires consideration to be given to the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities. Interview with the Warden (acting) and the PCM confirm that Blackburn Correctional Complex has had no substantial expansions or modifications since their last audit on March 28-30, 2018. The agency has acquired a new facility and conducted modifications of existing facilities in other locations across the state, and based on the auditor's interview with the PREA Coordinator, consideration is always given to the design, acquisition, expansion, or modification impact upon the agency's ability to protect inmates from sexual abuse and she is called in for a consultation in these matters. This was further confirmed during the auditor's interview with the Kentucky Department of Corrections Commissioner.</p> <p>115.18(b): CPP/7.1 requires consideration to be given to how such technology may enhance the agency's ability to protect inmates from sexual abuse when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology. Since the last audit, Blackburn Correctional Complex has made enhancements to its video monitoring systems by adding additional cameras in multiple locations to increase the facility's ability to monitor inmates for safety. Interviews with the Agency Head, PREA Coordinator, Warden (acting), and PCM determined that video monitoring enhancement is an ongoing goal as needs are identified and budget permits. A review of the staffing plan indicates the video monitoring system is reviewed at least annually to ensure coverage enhances the ability to protect inmates from sexual abuse. The facility has upgraded its CCTV equipment since the last PREA audit and currently has 220 cameras in operation. During the onsite tour, the auditor observed cameras strategically placed throughout the building in vulnerable areas. It is important to note that all grounds cannot be covered with CCTV cameras due to the fact that this is not a secure facility, although there are outside cameras that provide a good amount of coverage.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; KSP Evidence Guide; KSP Evidence Protocol Youth; Agency SAFE SANE Availability; Memorandum SAFE/SANE Exams PCM; KSAP MOU 2020-2022; KASAP Regional Map; KASAP and Institutions; Investigations of Sexual Abuse Allegations Statement of Fact.</p> <p>115.21(a)(b): The agency is responsible for conducting administrative investigations and the Kentucky State Police is responsible for conducting criminal investigations of allegations of sexual abuse. The agency follows the "Kentucky State Police Forensic Laboratory Physical Evidence Collection Guide" for evidence collection protocols which is a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions and is developmentally appropriate for youth. CPP/14.7 requires allegations of sexual abuse and sexual harassment to be promptly, thoroughly, and objectively investigated and that evidence is preserved for any sexual abuse incident that is known to have occurred within the previous 96 hours. Based on the auditor's review of these protocols find these are consistent with the Department of Justice's "A National Protocol for Sexual Assault Medical Forensic Examinations – Adults/Adolescents Second Edition". Blackburn Correctional Complex does not house youthful offenders. All case files reviewed indicated that the uniform evidence protocols were followed and well documented as part of each investigation. Auditor's interviews with random staff indicate staff is knowledgeable of the agency's protocols for obtaining usable physical evidence if an inmate alleges sexual abuse and the responsibilities of each staff member to secure and protect any evidence that could be used in an investigation until the designated investigator arrives and takes control of the evidence. The auditor's interview with the Internal Affairs Investigator and review of the one investigation case confirmed solid evidence collection and preservation practices.</p> <p>115.21(c): CPP/14.7 directs the Medical Department to promptly arrange for the alleged victim to be transported to an outside facility for an examination that may include the following: a collection of forensic evidence, testing for sexually transmitted diseases, prophylactic treatment, follow-up, and mental health assessment. In preparation for transporting the inmate to the hospital's emergency room, the staff is responsible for collecting any potential forensic evidence according to the established guidelines. In coordination with the hospital, the Medical Department shall request the forensic medical examination be performed by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) at the University of Kentucky. The examination shall be at no cost to the offender. Interview with the PREA Compliance Manager and review of the one investigation case file informs there was one incident that occurred which allowed for the collection of physical evidence; the inmate was offered a forensic examination and transported to the University of Louisville Hospital but he declined to proceed with the exam upon arrival.</p> <p>115.21(d): CPP/14.7 directs the alleged victim to be offered victim advocate services. If requested, the advocate service is to be contacted and given the appropriate information. The auditor reviewed the Memorandum of Understanding (MOU) with the Kentucky Association of</p>

Sexual Assault Programs, Inc. (KASAP) to provide confidential emotional support services to victims of sexual abuse. This agreement includes hospital accompaniment for an inmate victim during the forensic medical examination process, in-hospital investigatory interviews; referrals, and follow-up crisis counseling on request of the inmate victim. The local Rape Crisis Center for Blackburn Correctional Complex is identified as Ampersand Sexual Violence Resource Center, PO Box 1603, Lexington, KY 40588, 1-859-253-2511. Inmates are informed that these services are available during orientation and through pamphlets, posters prominently displayed on the housing units and in the facility's inmate handbook. The auditor confirmed through interviews with the Internal Affairs Investigator, PREA Compliance Manager, and review of the investigation case file that a victim advocate was offered during the initial interview with the inmate victim. The auditor found documentation where the inmate victim was provided the Ampersand Sexual Violence Resource Center flyer by the PCM after he declined an advocate so that he could reach out if he changed his mind. The auditor placed a phone call to Ampersand Sexual Violence Resource Center and confirmed that the services outlined in the MOU are in place. Counselors are available 24/7 through the hotline for victims of sexual abuse.

115.21(f): Once a case is turned over to the Kentucky State Police for criminal investigation a letter is prepared that serves as verification of the case referral and requests that the investigation be conducted in accordance with CFR §115.71/§115.21. Interview with the PREA Compliance Manager, Internal Affairs Investigator, PREA Coordinator, and Warden confirm that the facility maintains a close working relationship with the KSP and communicates regularly when a case is under investigation. There has only been one investigation at the facility that involved KSP, and the case file was documented where the KSP was contacted and assisted with the investigation, an arrest was made, and the case is still pending prosecution.

115.21(h): The established MOU provides that the facility always makes a victim advocate from a rape crisis center available to victims, therefore this provision is not applicable.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; PREA Monthly Report Sample; Investigation Case Files; KDOC Website; BCC Sexual Assault Action Plan; Agency’s Public Website; KSP General Order OM-C-1.</p> <p>115.22(a)(b): Kentucky Department of Corrections ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. CPP/14.7 directs notifications for the purpose of an investigation to be immediately made to the designated facility investigator upon having knowledge of a sexual abuse allegation and for all allegations to be promptly, thoroughly, and objectively investigated; all allegations that involve potentially criminal behavior shall be referred for a criminal investigation to the Kentucky State Police. Based on the auditor’s interview with the Internal Affairs Investigator, an administrative investigation is conducted on every allegation and those that are referred to the Kentucky State Police for criminal investigation. There are no currently pending cases with the KSP but when a case is referred to the KSP the investigation case files are documented well to indicate a criminal case has been referred and any subsequent correspondence between the agency and the facility. The Kentucky Department of Corrections publishes its policies on their public website as required which can be found at https://corrections.ky.gov/About/Pages/Prison-Rape-Elimination-Act-(PREA).aspx. Both the Commissioner and PREA Coordinator emphasized the expectation and requirement for investigation of all allegations. Interviews with random staff indicated a clear understanding that all allegations or suspicions of sexual abuse or harassment are to be immediately reported and promptly investigated. The auditor’s review of the 1 allegation reported between May 2020 and April 2021 found a prompt, thorough, and objective administrative investigation was conducted. Administratively the case was closed and substantiated. The case was referred to KSP for criminal investigation and is currently pending prosecution.</p> <p>115.22(c): CPP/14.7 and the Blackburn Correctional Complex PREA Action Plan collectively define the responsibilities of the agency and the referral of criminal activity to Kentucky State Police (KSP), to include the coordination of efforts between the two entities. The auditor reviewed the Kentucky State Police Policy, General Order OM-C-1, Criminal Investigations & Reports and found that it outlines the responsibilities of the investigating entity.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.31	Employee training
	<p data-bbox="248 170 927 203">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="248 248 523 282">Auditor Discussion</p> <p data-bbox="248 327 1442 488">Evidence Reviewed by Auditor: CPP/14.7; Annual Institutional Inservice Curriculum; Institutional Pre-Service Academy Curriculum; Gender-Responsive Strategies Training Curriculum; Gender Responsiveness Training for Transferred Employees Flyers; Employee Training Records; Information Obtained from Interviews.</p> <p data-bbox="248 533 1469 1330">115.31(a)(c): CPP/14.7 outlines the agency’s training requirements for employees Sexual Abuse Prevention and Intervention Programs. All employees must attend Pre-Service Orientation and then Annual Inservice every year thereafter. Applicability of this requirement includes full and part-time employees, interim employees, interns, students, volunteers, and contractors. The auditor’s review of the Institutional Pre-Service Academy/AIIS: PREA Module curriculum found it to include instruction on all topics delineated in this standard to include: PREA standards, the agency’s zero-tolerance policy, victims/aggressors characteristics, staff responsibilities, reporting guidelines, preventative measures, inmate rights, how to avoid inappropriate relationships with inmates, dynamics of sexual abuse/harassment in confinement, communicating effectively, and how to comply with the laws. The auditor’s interview with the Training Coordinator confirmed that all staff and contractors receive the PREA Module training initially upon hire, and annually thereafter; the facility uses a combination of computer-based training and in-person training to deliver this education. Kentucky Department of Corrections requires contracted healthcare staff, commissary staff, and food service staff to receive the same training as agency employees. The auditor reviewed training records for 30 randomly selected employees and found documented evidence training occurs as outlined in the agency policy. As the agency requires PREA training annually, this standard only requires refresher training every two years, so the facility is found to exceed the requirement.</p> <p data-bbox="248 1375 1481 1659">115.31(b): CPP/14.7 requires training to be tailored to be gender-specific to the facility of each staff member. Blackburn Correctional Complex is a male facility, and employees who transfer in from another facility housing a different gender population receive training which is documented by employee signature on the standardized acknowledgment form. The auditor reviewed the Gender Responsive Strategies Training, “PREA Implementation Male Offenders” Flyer, and found the information meets the requirement of this standard. There were no employees who transferred into the facility from a female facility during this audit period.</p> <p data-bbox="248 1704 1477 2078">115.31(d): CPP/14.7 requires staff acknowledgment that they understand the training they have received through signature. The auditor’s review of 24 randomly selected employee records (15-BCC Staff/9-Contract Staff) found signed acknowledgment forms in each file indicating this process is well implemented. Staff interviews conveyed a solid understanding of the agency’s zero-tolerance policy for sexual abuse and sexual harassment and their first responder duty requirements. They effectively recapped the topics contained in the PREA training module consistent with the curriculum reviewed by the auditor. The Training Coordinator is responsible for maintaining training records and tracks both computer-based and classroom training hours.</p> <p data-bbox="248 2123 1449 2154">After analysis and evaluation of the stated evidence, the auditor finds the agency and facility</p>

meet all provisions of this standard. The agency exceeds this standard in that refresher training is conducted annually while it is only required every two years.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP14.7; Certified Volunteer Training Curriculum; PREA Information for Non-Certified Volunteers & Service Providers; Contract Staff and Contractor Training Records; Information Obtained from Interviews.</p> <p>115.32(a)(b)(c): CPP/14.7 requires all volunteers and contractors who have contact with offenders to be trained annually on the department’s policy of zero-tolerance regarding sexual abuse and sexual harassment and how to report such incidents and their responsibilities under the department’s sexual abuse and sexual harassment prevention, detention, and response policies and procedures. The agency maintains documentation confirming that volunteers and contractors understand the training they have received through signature on the PREA Training Acknowledgement form. As noted in the standard 115.31 narrative, Keefe, WellPath, and Aramark contract staff are required to attend the same training as the KDOC employees and those training records were reviewed and documented within that standard. The Training Coordinator maintains and tracks the training records for contract staff.</p> <p>Interview with the agency’s Contract Administrator confirmed that all contracts include PREA compliance language as a condition of the agreement. Service contractors who do not have contact with inmates and who are under escort by a staff member while in the facility are provided with the 'Kentucky Department of Corrections Volunteer and Contractor Zero-Tolerance Information and Acknowledgement Form' for review and signature prior to entering the facility. The auditor reviewed the signed contractor packet for a service contractor who performed work at the facility within the past 12 months. The auditor’s review of the Volunteer Service Orientation/Citizen Involvement Training curriculum found the Orientation Module to contain the agency’s zero-tolerance policy, how to report incidents, professionalism, and facility-specific procedures. Training records were reviewed for two randomly selected volunteers and were found to meet all requirements of this standard, including documented evidence of training through signature on the PREA Training Acknowledgement form. Auditor’s interview with the Chaplain, who is the designated Volunteer Coordinator, confirmed that certified volunteers must take the Certified Volunteer Training. This training is delivered at set times throughout the year when needed based on the number of applicants and is delivered by the Chaplain and Training Coordinator. Non-certified volunteers may be approved for entry under special event circumstances, but they are always under the supervision of a staff member or a Certified Volunteer and must complete the Acknowledgement Form indicating they have been informed of the zero-tolerance policy. Due to the current pandemic, there have been no active community volunteers allowed inside the facility, however, Blackburn Correctional Complex’ Chaplain has been facilitating virtual services throughout the past year during the pandemic. In addition, he delivered the annual training to volunteers virtually to keep them current. The auditor reviewed his tracking document and found it to be very extensive and comprehensive, providing an alert if a volunteer’s training certificate is in danger of lapsing.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; Inmate Training Records/Signed Acknowledgment Forms; Information Obtained from Interviews with Inmates and Intake Staff; PREA Educational Posters; Telephone Instructions for PREA Posting; PREA Education Script; Understanding the PREA for Offenders Brochure; Inmate PREA Acknowledgement Forms; BCC Inmate Handbook Rev. 2021.</p> <p>115.33(a)(b): CPP/14.7 requires during orientation at the assessment and classification center of each institution, an offender shall receive oral and written information about the department’s zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. In addition, each facility is required to educate each offender about a) prevention of sexual abuse; b) self-protection from being abused, and c) receiving treatment and counseling. The policy requires within 30 days of intake, comprehensive education to be provided, either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents and regarding policies and procedures for responding to such incidents. Upon arrival, all inmates are provided the “Understanding the Prison Rape Elimination (PREA) for Offenders” brochure (available in English and Spanish) which includes the agency’s zero-tolerance policy and an explanation on how to report incidents or suspicions of sexual abuse or sexual harassment. In addition to the brochure, each inmate is given a facility handbook that contains written information regarding the Blackburn Correctional Complex’s zero-tolerance policy, how to report an incident, prevention of sexual abuse, self-protection, and receiving treatment and counseling. The facility reports that 116 inmates were admitted within the past 12 months, and they all received the Understanding PREA brochure upon arrival and the comprehensive education within 30 days of arrival. The comprehensive training includes showing the “PREA What You Need To Know” video and a facilitator script that is presented by the staff member. Interviews with the PREA Compliance Manager, Unit Administrators, and Classification & Treatment Officers (CTO), confirmed that the PREA education is delivered according to the requirement outlined by agency policy and is available in formats accessible to all inmates, including those who are LEP, deaf, visually impaired, or limited in their reading skills. The material is readily available in Spanish but will be translated into other languages on an as-need basis. The PREA Compliance Manager also explained that the facility is prepared to accommodate inmates with special needs, and she works closely with the facility’s ADA Coordinator to accommodate any identified needs as situations arise. Of the 34 inmates interviewed, all inmates stated they had received information about PREA.</p> <p>The auditor reviewed 32 inmate training records randomly selected and found documentation that the inmates were notified of the zero-tolerance policy upon arrival and received the comprehensive training within 30 days. The auditor observed the agency’s zero-tolerance posters displayed in the intake area as well as a supply of the Understanding PREA for Offenders brochure.</p> <p>115.33(c): All inmates were educated within 30 days of arrival, and due to the mission of</p>

Blackburn Correctional Complex, there are no inmates housed at this facility who have been there since prior to the inception of the PREA.

115.33(d): CPP/14.7 requires each facility to provide offender education in formats accessible to all offenders, including those who are LEP, deaf, visually impaired, or otherwise disabled, and for offenders who have limited reading skills. Auditor reviewed extensive literature and the tools available to the facility to ensure that any offender with special needs can be accommodated. While the facility houses 24 inmates with documented hearing impairments, none require any accommodations beyond hearing aids to communicate effectively. The PREA education video has the capacity to be displayed using a closed caption for the hearing impaired. The auditor interviewed nine inmates who were listed as having a hearing disability and all of them declined to need assistance to complete the interview. These interviews indicated that they were provided the PREA information in a manner they were able to understand. There were no inmates housed at Black Correctional Complex at the time of the audit who were identified as LEP.

115.33(e): CPP/14.7 requires each facility to maintain documentation of participation in offender education. The auditor's review of 32 inmate files found documented evidence of the inmate's receipt of the facility handbook and PREA pamphlet through the PREA acknowledgment statement and comprehensive education.

115.33(f): CPP/14.7 requires each facility to ensure that key information is continuously and readily available or visible to offenders. The auditor observed the agency's PREA posters, and victim advocacy flyers, prominently posted on bulletin boards, as well as detailed instructions beside the inmate telephones on calling both the internal and external PREA hotline. The agency publishes seven different posters to convey the message which was observed by the auditor throughout the facility and on all housing units. These posters are printed in vivid color and provide constant reminders of the zero-tolerance policy for sexual abuse and sexual harassment. Interviews with inmates confirmed their awareness of these posters and the information they contain for the prevention of sexual abuse and conveyance of the zero-tolerance message.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; PREA Investigator Training Agenda; Employee Training Records; Agency Trained Investigator Master List; KSP Training Memo; Information Obtained from Interviews.</p> <p>115.34(a)(b): CPP/14.7 requires all employees who conduct sexual abuse investigations to receive specialized training in conducting investigations in confinement settings. The auditor’s review of the “Specialized Training: Investigating Sexual Abuse in Correctional Settings” 2-day training found it to include a module on each of the required topics delineated in section (b) of this standard. The one investigation was conducted by a specially trained investigator from the approved list. This facility has an assigned Internal Affairs Investigator who is designated as the primary investigator and who has attended the specialized training.</p> <p>115.34(c): The PREA Coordinator’s office maintains a list of specially trained investigators for the agency. The list indicated there are 15 employees at Blackburn Correctional Complex who has received specialized training for conducting sexual abuse investigations in confinement settings. The auditor reviewed training records for the two investigators who conducted the investigation on the incident that occurred within the audit period and confirmed that both investigators had received the specialized training. Additionally, the auditor interviewed three employees identified as trained investigators who indicated a thorough knowledge of the investigative procedures and confirmed they received the specialized training. The auditor reviewed a memorandum issued from Kentucky State Police to the Kentucky Department of Corrections confirming that the Kentucky State Police investigates allegations of criminal sexual abuse when requested by Kentucky Department of Corrections facilities; that all Kentucky State Police troopers receive training in sexual abuse investigations during basic training at the State Policy Academy including techniques for interviewing sexual abuse victims, proper use of Miranda warnings, sexual abuse evidence collection at the crime scenes including confinement settings, and the criteria and evidence required to substantiate a case for prosecution referral. This is above and beyond the requirements of this standard. As this is a separate entity, this speaks to the working relationship between the two agencies and guarantees coordination of efforts between the two.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; PREA for Medical and MH Training Module; Training Records; Information Obtained from Interviews.</p> <p>115.35(a): CPP/14.7 requires all full and part-time medical and mental health care practitioners who work regularly in the facility to receive specialized training on 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. The auditor reviewed the computer-based Medical & Mental Health PREA training module and found it to include all elements required of this standard for specialized training; this training is an annual requirement for all healthcare staff which exceeds the requirement for this standard. The Training Coordinator provided a roster indicating 14 of 16 medical employees have completed the training so far this year and the remaining two are scheduled.</p> <p>115.35(b): This is not within the scope of services provided by the Blackburn Correctional Complex Medical Department. Medical staff interviewed confirmed that they do not conduct forensic examinations.</p> <p>115.35(c): CPP/14.7 requires staff members completing the specialized training to sign a document acknowledging that they understand the training they have received. Signed acknowledgment forms were reviewed for 13 staff indicating the training was completed. The auditor's interviews with healthcare staff confirmed they have received the specialized training for medical and mental health staff and found them to have a thorough knowledge of policies and procedures and in their responsibilities related to PREA</p> <p>115.35(d): Medical and mental health practitioners are required to receive the same basic PREA training as all employees as discussed in the auditor's narrative in 115.31; contracted providers comply with requirements of 115.32. Training curriculum for medical and mental health staff includes the basic training topics as well as specialized for this class of employees. Interviews with the Training Coordinator, the Director of Nursing, the Mental Health Provider, and other medical staff confirmed they have received this training; in addition, four randomly selected staff training records were reviewed by the auditor to confirm the basic course was documented.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; KOMS PREA Risk Assessment Blank Form; Memorandum Reassessments PCM; Samples of Completed Risk Screening Assessment Forms; Inmate Records; Investigation Case File; Information Obtained from Interviews; Observations during Facility Tour.</p> <p>115.41(a): CPP/14.7 requires the facility to assess each offender during intake screening within 72 hours of arrival at the Assessment and Classification Center and upon each transfer to a facility. Each screening is to include a review of any history of sexual abuse victimization or sexually predatory behavior and is completed using the PREA Risk Assessment tool. Housing concerns are to be documented on the screening form. The auditor’s review of 32 inmate files indicated comprehensive documentation to provide evidence the screening is conducted systematically for all inmates received at the facility. Auditor’s observations during the site visit indicated that inmates are housed appropriately according to the facility’s risk screening and classification procedures.</p> <p>115.41(b): The auditor’s review of 32 randomly selected inmate files found that the screenings were conducted for 20 inmates within 24 hours, 10 inmates within 72 hours, and 2 inmates were just over the 72 hours. Interview with the Warden (acting) and PCM, it was determined that the delay on these two was related to facility quarantine protocols. Auditor’s interviews with Unit Administrators and Classification and Treatment Officers confirmed that the risk screening is usually completed on the first day of the inmate’s arrival but no later than 72 hours under normal circumstances. Inmate interviews indicated that the risk screening was conducted shortly after their arrival, and most said it was the same or the next day.</p> <p>115.41(c)(d)(e): The auditor’s review of the PREA Risk Assessment tool found it to be objective and consistent with best practices observed within other correctional systems. Each of the first nine considerations delineated in provision (d) are included as part of the risk screening form. Kentucky Department of Corrections does not detain inmates solely for civil immigration purposes, therefore, the tenth element is not included. The instrument provides consideration of known prior acts of sexual abuse, known prior convictions for violent offenses, and known history of prior institutional violence or sexual abuse in an effort to assess an inmate’s risk of being sexually abusive. The auditor interviewed Classification and Treatment Officers and Unit Administrators from both housing units and confirmed that each of the questions listed on the Risk Assessment is evaluated through a combination of direct conversation with the inmate and review of the inmate’s prior criminal history and institutional record.</p> <p>115.41(f)(g): CPP/14.7 requires the facility to reassess the offender’s risk level based upon any additional information received since the intake screening. A reassessment may occur at any time when warranted. The assessment information is tracked within the computer-based system (KOMS). The facility reports that 116 inmates were received at the facility within the past 12 months whose length of stay was for 30 days or more and that all of them were reassessed for their risk of sexual victimization/abusiveness within 30 days after their arrival at the facility. The auditor’s interviews with Unit Administrators and Classification and Treatment</p>

Officers confirmed that reassessments are conducted within 30 days of the initial intake screening and documented in the case notes. The auditor's sample review of 32 inmate records found documentation of 30 reassessment reviews within 30 days and only two beyond. None of the reassessments indicated additional information obtained since the original screening. Interviews with the PREA Compliance Manager, Classification and Treatment Officers, and Unit Administrators confirmed that at a minimum, all inmates receive a six-month review of their risk level and then any time that new information is available including after an incident of sexual abuse. Only one sexual abuse incident was reported during the prior 12 months and the inmate was transferred to another facility within 48 hours so a reassessment was not conducted at this facility based on that incident

115.41(h): CPP/14.7 directs offenders shall not be disciplined for refusal or nondisclosure of complete information in response to questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this standard. No inmate has been disciplined for nondisclosure during the screening process. Interviews with staff who conduct risk screening assessments are aware an inmate cannot be discipline for this reason.

115.41(i): CPP/14.7 requires the dissemination of information related to and resulting from the assessment to be controlled and limited to staff necessary to inform treatment plans and make security and management decisions regarding housing, beds, work, education, and program assignment. Inmates interviewed stated the risk screening was conducted in a professional manner and privately. The PREA Compliance Manager advised the auditor that weekly a list of inmates is distributed to management staff to identify those who are at risk for sexual victimization or aggressive sexual behavior so that the work area supervisor can make assignments accordingly and ensure that inmates are appropriately kept separate during programming and education and on their living units. The auditor's interviews with area supervisors confirmed that these lists are published and that they are kept confidential and used only for making work assignment decisions. The PREA Coordinator confirmed that Kentucky Offender Management System (KOMS) access rights are handled at the central office level and she must approve any requests for PREA access, thereby protecting sensitive information and ensuring it is able to be accessed only by those parties who need to know. At this facility, access is granted to the PREA Compliance Manager, Unit Administrators, Classification and Treatment Officers, and the Internal Affairs Investigator.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; CPP/14.8; Housing Program Review Forms; PREA High-Risk Inmates Report; Controlled Work Assignment Report; Kentucky Offender Management System (KOMS) Printouts; Memorandum from PCM Use of Inmate Risk Assessment; Memorandum from PCM Transgender and Intersex Housing; Housing/Program Review Form; Information Obtained from Interviews; Observations during Facility Tour.</p> <p>115.42(a)(b): CPP/14.7 directs the information gleaned from the intake screening to be used to make housing, bed, program, and work assignment decisions with the goal of keeping separate those offenders who are prone to sexual victimization from those who are prone to sexual aggression. The result of this screening is disseminated to staff necessary to inform treatment plans and in making security and management decisions regarding the individual. The PREA Compliance Manager explained that the facility uses information obtained in the risk screening for 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. When an inmate is determined to be high risk for victimization or high risk for abusiveness, it is the responsibility of the staff member conducting the screening to enter the results into the PREA Risk assessment and inform her and the inmate's Unit Administrator. An inmate that is determined to be at high risk for victimization will not be placed in the same bay of an inmate that has been determined to be at high risk for abusiveness. If there is a situation that dictates that an inmate at high risk for victimization be placed in the same bay as an inmate at high risk for abusiveness (such as participation in a program) they will be placed at a minimum of four beds apart. KOMS will generate an alert if two inmates are placed too close in proximity in the system to indicate that these inmates should be kept separate due to risk levels or prior conflicts. It is the responsibility of the Classification Committee to check each inmate being placed in a job and sign as reviewed, that has been determined as an area where there should not be known/potential victims and known/potential abusers working together unless under direct supervision (Cattle Farm, Thoroughbred Retirement Farm, Prison Industries, and Kentucky Correctional Industries). This information is documented on the Controlled Work Assignment by members of the Classification Committee. This form is also used for program assignments and has a specific section for the PREA Risk Assessment results to be entered where it can be included for consideration of the appropriateness of any assignment. Staff who supervise inmate work details or programs are informed when inmates are not to be allowed to work in unsupervised areas with certain other inmates and assists with identifying inmates who need more visual supervision. This list is updated weekly and is not disseminated any more widely among staff to the extent of managing inmate safety. Samples of the PREA High-Risk Inmates Report provided to work area managers were reviewed by the auditor and were found to be comprehensive and provides evidence of a well-established system for using the screening information to keep inmates separated.</p> <p>115.42(c): CPP/14.7 requires placement decisions regarding transgender, intersex, lesbian, gay, and bisexual offenders to be made in accordance with 28 CFR §115.42. CPP.14.8 directs that an assessment to determine the facility a transgender or intersex inmate shall be</p>

assigned to shall be made on a case-by-case basis via an individualized assessment of the inmate by the Therapeutic Level of Care (TLOC) committee, which includes input from medical and mental health staff, in consultation with the Director of Classification. A determination is not to be made on genital status alone and consideration is to be given to the inmate's health and safety and if the placement would present management or security problems. Placement considerations include a) classification's housing decision; b) the offender's documented choice of whether a male or female facility is safest for him or her; c) the inmate's physical characteristics; d) whether the inmate identified as male or female; e) the offender's prior institutional history, to include incidents and grievances; f) the offender's physical appearance, age, and physical build; h) any relevant information obtained about the offender from security, medical or mental health staff since arrival; i) the ability of security staff to house and supervise the offender to ensure his or her safety in each environment; j) any management problems that can be identified in each facility; k) any other relevant information about the offender's ability to positively or negatively manage his or herself in each type of environment. The Auditor's interviews with the Warden (acting), PREA Compliance Manager, and PREA Coordinator confirmed that no requests have been made from a transgender inmate to transfer to a facility of his/her gender identity during the audit period, but that if a request is received it will be presented to and taken into consideration by the TLOC committee in accordance with the procedures outlined in agency policy. There were no inmates at Blackburn Correctional Complex who identify as transgender or intersex at the time of the audit.

115.42(d)(e): Housing and programming reviews for transgender and intersex inmates are conducted twice per year and coincide with the inmate's classification month. The housing reviews are sent to the PREA Compliance Manager who sends them to the PREA Coordinator with her monthly PREA report. The inmate is notified by a letter delivered through the prison mail system to tell them when to attend. It is to the inmate's discretion if they want to attend. There were no transgender or intersex inmates housed at this facility at the time of the audit. The facility provided a Housing/Program Review Form for a transgender inmate who was housed at the facility within the audit period indicating a bi-annual housing and program review. Based on interviews with staff, it is apparent that the inmate's safety concerns were considered important and taken seriously by all staff.

115.42(f): Blackburn Correctional Complex is designed that every inmate is afforded the opportunity to shower separately from other inmates. The auditor observed shower curtains installed on every shower within the facility. There were no transgender or intersex inmates housed at this facility at the time of the audit but interviews with staff indicated that provisions will be made to allow inmates to shower separately should a request be made. The transgender inmate who was housed at Blackburn Correctional Complex within the audit period did not request to shower in a separate location since the dormitory showers are individual stalls and are equipped with privacy curtains.

115.42(g): Blackburn Correctional Complex has no dedicated units or wings solely for inmates identified and confirmed by observation of the auditor during the on-site tour and an analysis of the inmate roster by housing unit. Interviews with eleven Transgender/Gay/Bisexual inmates confirmed they are well integrated into the general population and expressed no safety or health problems related to their placement. Staff interviewed confirmed that transgender inmates may live anywhere on the Complex and that there are no dedicated units.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.

115.43	Protective Custody
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1442 405">Evidence Reviewed by Auditor: CPP/14.7; CPP/14.8, CPP/10.2; Memorandum High-Risk Inmates PCM; Information Obtained from Interviews; Observations During Tour.</p> <p data-bbox="252 445 1474 1375">115.43(a): The agency has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives have been made and a determination has been made that there are no available alternatives to separate from likely abusers. CPP/14.7, CPP/14.8, and CPP/10.2 allow for placement of an inmate who is presently at high risk for sexual victimization and may need separation from likely abuser pending an alternative housing assessment; however, this temporary assignment is to only occur if the assessment cannot be immediately completed and, in such cases, shall be completed within 24 hours and in accordance with 28 CFR §115.43. Interview with the PCM and written memorandum confirms that no inmates have been placed in segregated housing for means of separation for being at high risk for victimization. The Warden (acting) explained that Blackburn does not have a segregation/restricted housing unit. Due to the nature of the population of the facility segregated housing is not needed, however, the facility has a small holding area for when inmates need to be kept under observation or temporarily separated from their housing unit, or if inmates are being held temporarily pending a transfer. No inmate is housed in this building for an extended period. The inmate victim of sexual abuse was allowed to move to a temporary holding cell pending the investigation but was not on locked-down status and was able to continue access to all other activities and programs as the general population. This inmate was later transferred to another facility per his request. The Warden (acting) explained that if it is determined that an inmate cannot live in general population at this facility, arrangements are made for him to be transferred to another facility as this facility is not equipped with a staffed segregation area.</p> <p data-bbox="252 1415 1474 1532">115.43(b): CPP/10.2 directs special management programs will provide living conditions similar to those provided the general population as physical facilities and resources allow, but which maintain the degree of security and control the program and inmates concerned</p> <p data-bbox="252 1547 1474 1749">115.43(c): Blackburn Correctional Complex has not placed an inmate in involuntary segregated housing status within the audit reporting period as documented by memorandum from the PREA Compliance Manager and discussed during her interview. The auditor’s review of the one investigation case file indicated that the inmate victim was not placed in segregated housing after the incident occurred.</p> <p data-bbox="252 1789 1453 1951">115.43(d)(e): CPP/10.2 requires the facility’s Classification Committee to conduct an administrative review of an inmate assigned to administrative segregation every seven days. There were no inmates placed in involuntary segregation status for the audit period for high risk of victimization, therefore, there was no documentation for the auditor to review.</p> <p data-bbox="252 1991 1453 2069">After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; CPP/3.22; PREA Posters; Inmate PREA Brochure; PREA Notice by Phones; Investigative Files; Inmate Records; Staff Reporting Hotline Poster; Agency Memo Civil Immigration; PREA 3rd Party Reporting Poster; Inmate Handbook; Telephone Systems Test; Tour of Facility; Information Obtained During Interviews with Staff and Inmates.</p> <p>115.51(a): CPP/14.7 directs multiple ways for inmates to privately report sexual abuse, sexual harassment, staff neglect or violation of responsibility, and retaliation and outlines staff first responder duties upon receipt of a report. The auditor’s review of the inmate handbook, PREA brochures, orientation video, and posters, clearly communicate to inmates the various ways to report incidents or suspicions of incidents. Inmates are informed through the various mediums described above that they may report abuse or harassment verbally, in writing, or through a third party, by having a family member or friend report on their behalf, and that they may remain anonymous in their report if they choose to. Reports can be made from the inmate telephones to the PREA hotline using *7732 speed dial and no PIN is required. The PREA Hotline Phone Card containing instructions for accessing the internal and external hotline is printed and posted next to each inmate phone. A total of 2 calls were placed to the PREA Hotline, however, upon review of the complaint they were determined to not be sexual abuse or sexual harassment. Test calls made by the auditor to the hotline from the inmate phone system were forwarded to the agency’s PREA Coordinator promptly. Auditor confirmed during inmate interviews that inmates were clearly aware of the multiple methods that a report of sexual abuse or sexual harassment could be made and expressed the facility has a zero-tolerance for any type of sexual activity, abuse, harassment, or retaliation.</p> <p>115.51(b): Inmates may report abuse or harassment to a public entity directly to the Justice and Public Safety Cabinet, internal Investigations Branch by dialing *5532 speed dial for outside DOC or in writing at 125 Holmes Street, Frankfort, KY 40601. No PIN is required when placing these calls which means the caller may remain anonymous if he chooses. Test calls made by the auditor to the hotline from the inmate phone system were forwarded directly to the agency’s PREA Coordinator within the day and the investigator called the auditor directly at the facility to report having received the calls and confirmed that an inmate may remain anonymous if he chooses. The Kentucky Department of Corrections does not detain inmates solely for civil immigration purposes, confirmed by agency memorandum.</p> <p>115.51(c): Random staff interviewed were knowledgeable about their responsibility to accept reports of sexual abuse and harassment if made verbally, in writing, anonymously, or by a third party. Staff was also aware of the multiple ways an inmate may make a report, and this information is provided during pre-service and in-service training. No third-party reports of sexual abuse or sexual harassment were received during the past 12 months.</p> <p>115.51(d): CPP/3.22 affords staff the option of contacting the hotline listed on the department’s website established to privately report a sexual offense involving an offender 1-833-362-7732. This hotline is monitored by the Kentucky Justice & Public Safety Cabinet’s Internal Investigations Branch. Staff is provided this information during pre-service orientation</p>

and annual in-service training, in policy, and posters on staff bulletin boards throughout the facility. Interviews with staff confirmed they are aware of this hotline as a method that may be used to make a private report of misconduct. No private reporting of misconduct were received staff during the past 12 months.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.6; Statement of Fact; Grievance Activity Log; Information Obtained from Interviews.</p> <p>115.52(a-g): CPP/14.6 exempts a report of sexual abuse to be handled through the established grievance process, although inmates are not prohibited from submitting a report through the system. No time limit is imposed on when a grievant may submit a grievance of an allegation of sexual abuse. The auditor’s interview with the Grievance Coordinator confirmed that the grievance system is not utilized for processing reports of sexual abuse and sexual harassment. If an inmate submits a complaint through the grievance system the complaint is forwarded immediately upon receipt to the Warden and subsequently to the PCM to initiate an investigation. This process was further confirmed through an interview with the PREA Compliance Manager and the PREA Coordinator The auditor’s interview with the Grievance Coordinator found there were 86 grievances filed in the past 12 months and none of them involved a complaint of sexual abuse or sexual harassment.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; KASAP MOU & Regional Map; Information Obtained from Interviews; The Ampersand Sexual Violence Resource Center Poster; Facility Tour; PREA Case File.</p> <p>115.53(a)(b)(c): CPP/14.7 establishes that outside victim advocate services will be made available to inmates. The Kentucky Department of Corrections has a Memorandum of Understanding with the Kentucky Association of Sexual Assault Programs, Inc. (KASAP) to provide emotional support services to inmates. Ampersand Sexual Violence Resource Center is the local service provider for the Blackburn Correctional Complex. This agreement provides that sufficient confidentiality will be maintained according to KRS 211.608 between a counselor and inmate victims. Inmates are notified during orientation, through the facility handbook, and on signage near the inmate telephones that all calls are subject to monitoring and/or recording. Inmates are provided instructions on how to contact Ampersand Sexual Violence Resource Center in the facility handbook, during orientation as part of the PREA training, availability of KASAP flyers, and KASAP notification posters on bulletin boards in the living units. The KASAP flyer has been incorporated into the orientation lesson plan and orientation packet provided to every inmate who is newly assigned to the facility and the inmate signs for receipt of the information of how to contact advocacy services on the designated acknowledgment form. The posters explain that services are available for hospital accompaniment during a forensic medical exam and emotional support services. This information is published in both English and Spanish. Inmates can call the Local 24-Hour Help Line at 1-844-237-2331 or the National 24-Hour Help Line at 1-800-656-4673 to talk to a counselor or write to the program directly at P.O. Box 2048, Louisville, KY,40201. To access scheduled emotional support counseling, inmates are instructed to contact their case manager, shift supervisor, or facility director who will facilitate the appointment. The auditor spoke with a counselor at Ampersand Sexual Violence Resource Center who confirmed the service availability, and that there had been no complaints against Blackburn Correctional Complex brought to their attention in the past 12 months. The auditor was also informed by the PREA Coordinator that KASAP has expanded its services to include virtual sessions. This flyer has been distributed to the inmate population through notifications posted to the bulletin boards. Interviews with staff indicated most are aware these services are available for inmates. Interviews with 34 inmates confirmed that most inmates recalled having been informed about these services being available and have seen the flyers on the bulletin boards.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by the Auditor: PREA Hotline Poster for 3rd Party Reports; PREA Hotline Poster for Staff; Agency Website; Information Obtained from Interviews; Observations During Facility Tour.</p> <p>115.54(a): The agency has established a method to receive third-party reports of sexual abuse and sexual harassment by providing a toll-free PREA Hotline 1-833-362-PREA (7732) and callers may remain anonymous. This information is posted on the agency's public website. Posters containing this information are posted throughout the facility in areas where inmates and visitors have access and are published in both English and Spanish. This number is also available for staff to privately report and posted on staff bulletin boards. Interviews with inmates confirmed they are aware they can have a family member or friend make a report of sexual abuse, sexual harassment, or retaliation on their behalf.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; CPP/3.22; Investigation Case File; Interviews with Inmates and Staff; Staff Training Curriculum.</p> <p>115.61(a): CPP/14.7 establishes the requirement for all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment, or retaliation, or staff neglect or violation of responsibilities contributing to an incident, that occurred at a facility. The auditor’s interviews with all staff confirmed a clear knowledge of their duty to immediately report. There were no allegations made directly to staff during the past 12 months.</p> <p>115.61(b): CPP/3.22 directs all information in a report or investigation of a sexual offense to be kept confidential except to the extent necessary to report to an appropriate supervisor, adequately investigate the incident, provide treatment, or make security or management decisions. The policy expresses that an individual interviewed in the course of resolving the complaint shall be cautioned to treat the information as confidential. Breach of this confidentiality is grounds for disciplinary action. The auditor’s interviews with random staff indicated they understand this requirement and that they are aware of the consequences of not treating this information confidentially.</p> <p>115.61(c): Medical and mental health staff interviewed by the auditor confirmed that the mandatory reporting of incidents of sexual abuse and sexual harassment that occur during incarceration is a requirement and is not affected by any Federal, State, or local law to be withheld for confidentiality purposes. Upon arrival, inmates sign a consent form that includes notification of the limitations of confidentiality and the inmates are also advised of these limitations verbally at the time of treatment. The auditor's interviews with medical and mental health staff confirm that inmates are notified of the limitations to confidentiality related to sexual abuse in confinement.</p> <p>115.61(d): It has been determined that the Kentucky Department of Human Services (DHR) has no authority to investigate complaints within the jurisdiction of the Kentucky Department of Corrections under the Adult Protection Act, KRS 209.010-209.150, as documented by a memorandum from DHR; complaints of this nature will fall under the referral for criminal investigation. This facility is not authorized to house youthful offenders. Auditor’s interview with the PREA Coordinator confirmed that her office would provide guidance to a designated facility to ensure that The Cabinet for Health and Family Services was contacted if sexual abuse occurred involving an offender under the age of 18. There are no inmates under the age of 18 housed at the facility and the one incident that was investigated did not involve an inmate who would fall under the vulnerable adult statute.</p> <p>115.61(e): The auditor's interviews with staff, PREA Compliance Manager, Warden (acting), and the facility investigators confirmed that all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are required to be reported to the facility’s designated investigators. No third-party reports were received during this reporting period.</p>

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; Memorandum Immediate Action PCM; Information Obtained from Interviews; Personal Observations.</p> <p>115.62(a): CPP/14.7 establishes that if at any time it is learned that an offender is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the offender. Interviews with staff at all levels in both security and non-security positions confirmed that it is within their responsibility and authority to ensure the safety of an inmate who is at substantial risk of imminent sexual abuse. In the past 12 months, there have been no cases where the facility determined that an inmate was subject to a substantial risk of imminent sexual abuse. The auditor’s interview with the Warden (acting) confirmed that upon learning that an offender is subject to substantial risk, the facility will take immediate action to protect the victim from the perpetrator, including separating them through bed moves and/or a transfer if necessary. During the interview with the Commissioner, she explained to the auditor that staff are not only authorized but are expected to take any necessary means immediately to protect an inmate who is subject to a substantial risk of imminent sexual abuse. Interviews with inmates confirmed that any concerns reported to staff are handled promptly.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; Information Obtained from Interviews; Memorandum Allegations Reporting PCM.</p> <p>115.63(a)(b)(c): CPP/14.7 requires the Warden to notify the Head of the facility where an alleged incident occurred while confined at another facility within 72 hours of receiving that allegation and to document such notification. There were no allegations received by the facility that an inmate was abused while confined at another facility during the audit period as documented through a memorandum from the PCM. The auditor's interviews with the Warden (acting), PREA Compliance Manager, and Internal Affairs Investigator confirmed that all know the protocols required when an allegation is received about an incident that occurred at another facility. The Commissioner confirmed her expectation that all Wardens follow this procedure during her interview with the auditor.</p> <p>115.63(d): CPP/14.7 requires the facility to investigate all allegations received from other facilities. There were no allegations received from another facility notifying that an incident allegedly occurred at Blackburn Correctional Complex.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; Information Obtained from Interviews; Investigation Case File.</p> <p>115.64(a)(b): CPP/14.7 requires any staff member, upon learning that an offender was sexually abused, to immediately ensure the safety of the alleged victim while reporting the information to the shift supervisor who will ensure the following steps have been taken: a) separation of the alleged victim and perpetrator; b) the crime scene has been secured and protected, or collected if the scene cannot be secured; c) if within 96 hours of the incident, instruct the alleged victim and alleged perpetrator to not take actions that could destroy physical evidence including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. Interviews with security and non-security staff confirm a thorough knowledge of the required first responder duties. All staff is provided with a first responder pocket card as a reminder of the steps to follow. The auditor asked the First Responder questions to random staff (security and non-security) during interviews, and everyone was very knowledgeable of their responsibilities as First Responders.</p> <p>In the past 12 months, the facility received one allegation that an inmate was sexually abused. The first responder was a security staff member and measures were taken to separate the victim from further contact with the perpetrator and the crime scene was preserved until evidence could be collected. The investigation case file clearly documented that the protocols were followed including providing the inmate with instructions to not destroy physical evidence, and collection of circumstantial evidence. Staff was found to follow protocols according to the established requirements.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: Blackburn Correctional Complex PREA Action Plan; Information Obtained from Interviews; Investigation Case File.</p> <p>115.65(a): The auditor was provided a copy of the Blackburn Correctional Complex Sexual Assault Plan that provides step-by-step instructions for coordinating actions among staff first responders, shift supervisors, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse at this facility. The auditor discussed the Sexual Assault Plan with the Warden (acting) during her interview and found that the plan was recently updated after a recommendation by the PREA Coordinator during the Pre-audit. The plan is based on guidance from CPP/14.7. The plan is well laid out and detailed and lists the University of Louisville Hospital as the local hospital as the designated location for the collection of forensic evidence and a medical examination by a SAFE/SANE medical professional and Ampersand Sexual Violence Resource Center in Lexington as the contact if the inmate requests an advocate, and the Kentucky State Police is listed as the agency responsible for conducting the criminal investigation. Phone numbers and specific points of contact are listed in the plan. Interviews with shift supervisors, medical and mental health staff, PCM, and investigators confirmed their understanding of the steps outlined within the coordinated response plan and they were able to explain their specific responsibilities in response to a sexual abuse incident. Auditor’s interview with the hospital confirmed their capacity to receive and treat inmate victims of sexual abuse from Blackburn Correctional Complex and that the hospital has trained sexual assault nursing examiners on staff.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/3.22; Memorandum 115.66; Information Obtained from Interviews.</p> <p>115.66(a): Kentucky Department of Corrections has no collective bargaining power and therefore, no limitations in their ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or a determination of whether and to what extent discipline is warranted. CPP/3.22 establishes that during the course of an investigation, the accused staff may be temporarily reassigned and or placed on special investigative leave. Compliance with this standard was confirmed during interviews with the Commissioner and PREA Coordinator.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14,7; CPP/3.22; Memorandum of Assignment; Completed Protection Against Retaliation Form; Investigation Case File; Information Obtained from Interviews.</p> <p>115.67(a-e): The agency has established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff through CPP/14.7 and CPP/3.22. Retaliation by or against any party involved in a complaint is strictly prohibited and is grounds for disciplinary action. The auditor’s interviews with staff confirmed that they are aware of the zero-tolerance for retaliating against anyone who reports sexual abuse/harassment or who cooperates in the investigation. Based on the Memorandum of Assignment and interview with the Warden (acting), she has directed a primary and secondary monitor for retaliation. Blackburn Correctional Complex. Interview with both the PCM/Retaliation Monitor and her backup confirmed that monitoring begins the date the allegation is reported and continues for at least 90 days following the incident. This monitoring includes periodic status checks on inmates. Monitoring efforts are documented on the “Protection Against Retaliation” form which is maintained by the PREA Compliance Manager in a separate file. Protection measures employed may include housing unit change, facility transfer, removal of alleged staff or inmate abuser from contact with the victim, emotional support services, and any other means necessary. Monitoring efforts include a review of any disciplinary reports, housing unit changes, program changes, work assignments or negative reports, and any other activity deemed relevant by the Retaliation Monitor. There were no staff members who required retaliation monitoring during the reporting period and according to the PREA Compliance Manager, any staff retaliation monitoring would be done by the Internal Affairs Investigator. The one case indicated retaliation monitoring began the day the allegation was received and continued until the inmate transferred to another facility at which time the monitoring responsibilities were forwarded to the other facility. Based on the auditor’s interview with the Commissioner, the agency has a zero-tolerance for any retaliation and when it is suspected or confirmed, appropriate and swift action will be taken.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP10.2; Memorandum for 115.68; Information Obtained from Interviews; Observations during Facility Tour; Investigation Case File.</p> <p>115.68(a): Based on an interview with the Warden (acting) and the PREA Compliance Manager, the facility does not have a segregated/restrictive housing unit and if an inmate is found to not be able to live in the general population then he will be transferred to another similar facility. If the inmate victim needs to be separated from the general population he will be housed in the Temporary Holding area until he is transferred to another facility and no access to programs, privileges, education, or work opportunities will be restricted. The auditor’s analysis of information</p> <p>as explained in the §115.43 narrative of this report along with an interview with the Warden (acting), PCM, and Internal Affairs Investigator and personal observations during the tour confirms the facility only has a Temporary Holding area, and it is never utilized for long-term housing. One inmate was placed in the holding area during the investigation of the one sexual abuse incident that occurred in the past 12 months. A review of the investigation case file indicates that the inmate requested to be removed from the general population and subsequently requested a transfer to another facility. File notes indicated no privileges were restricted while the inmate was housed in the Temporary Holding area and the inmate was transferred to another similar facility within 48 hours.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; Records Retention Schedule; Investigation Case File; Update on Pending Case; Information Obtained from Interviews; List of Trained Investigators; Staff Training Records.</p> <p>115.71(a)(c): CPP/14.7 establishes the requirement for allegations of sexual abuse and sexual harassment to be promptly, thoroughly, and objectively investigated. The auditor’s review of the one investigation case file found the investigation was conducted promptly, thoroughly, and objectively. The investigator documented detailed information related to each case to include evidence collected, information obtained during victim, perpetrator, and witness interviews, and reviews of any prior reports or complaints. During interviews conducted with the PCM and Internal Affairs Investigator, and other trained investigators, the auditor found each to be knowledgeable of sexual abuse investigation protocols, evidence collection and evaluation, and the importance of being prompt, thorough, and objective in the investigation. All investigators were aware of the importance of confidentiality, thoroughness, and acting with professionalism. The auditor confirmed through these interviews and review of the investigation case file that the quality of the investigation is not impacted based on the reporting method or the individual’s status as an inmate or staff.</p> <p>115.71(b): CPP/14.7 establishes the requirement for all investigations to be conducted by specially trained investigators as defined in §115.34. The facility has 15 trained investigators, and a review of one investigation indicated it was conducted by a specially trained investigator. Criminal investigations are conducted by the Kentucky State Police (KSP). The facility provided a Memorandum from Kentucky State Police confirming all Troopers receive training in sexual abuse investigations during basic training, which is consistent with the requirements of §115.34.</p> <p>115.71(d): Internal Affairs Investigators are trained in Garrity but only use it in consultation with the Kentucky State Police once a case has been determined criminal. This was confirmed during the auditor’s interview with the Internal Affairs Investigator and based on documentation reviewed in the investigation case files.</p> <p>115.71(e): CPP/14.7 requires the credibility of an alleged victim, suspect, or witness to be assessed on an individual basis and to not be determined by the individual’s status as an offender or staff member. An offender who alleges sexual abuse will not be required to submit to a polygraph examination or other truth-telling device as a condition to proceed with the sexual abuse investigation. The one investigation case file reviewed indicated no truth-telling device was used during the investigation, and this was further confirmed through interviews with the Internal Affairs Investigator.</p> <p>115.71(f)(g): CPP/14.7 establishes the requirement for investigations to be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Administrative investigations that result in a substantiated case of sexual abuse is to include an effort to determine whether staff actions or failures to act contributed to the abuse. The auditor’s</p>

review of the one investigation case file found it to be thoroughly documented as required by provisions (f) and (g). Interview with the Warden (acting) and the Internal Affairs Investigator confirmed that cases are reviewed to identify if any staff actions or inactions contributed to abuse findings.

115.71(h): The investigative file reviewed clearly documented evidence supporting potentially criminal acts by an employee had occurred and therefore the case was referred for criminal investigation. Referrals for prosecution will be pursued as a joint effort between the Kentucky State Police and Blackburn Correctional Complex where supporting evidence is obtained. The one case investigated in the past 12 months was deemed substantiated through the administrative investigation and was referred to the KSP, and charges were presented against the alleged perpetrator. The auditor's interviews with the Warden (acting), Internal Affairs Investigator, and PREA Coordinator confirmed this case has been presented for prosecution and is pending.

115.71(i): The auditor's review of State Agency Records Retention Schedule for PREA investigative files determined the requirement for retention to be for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. This was further confirmed through an interview with the PREA Coordinator.

115.71(j): CPP/14.7 establishes that the departure of the alleged perpetrator or victim from the employment or control of the facility or department shall not provide a basis for terminating an investigation. Interviews with the Warden (acting) and the Internal Affairs Investigator confirmed their knowledge and adherence to this requirement. One case of sexual abuse against an employee resulted in termination and arrest of the employee.

115.71(l): The auditor's review of the investigation files found clearly documented communication between Blackburn Correctional Complex and the KSP regarding the status of the pending case and further confirmation was obtained during interviews with the Warden (acting), and Internal Affairs Investigator and PCM. Auditor's interview with the PREA Coordinator confirmed that the Internal Affairs Investigator is the facility's contact person for the criminal investigator and works closely with KSP throughout that process. The PREA Coordinator's office monitors the progress of all investigations on a continuous basis.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; Information Obtained from Interviews; Investigation Case File.</p> <p>115.72(a): CPP/14.7 establishes the requirement of no standard higher than a preponderance of the evidence to be imposed in determining whether allegations of sexual abuse or sexual harassment are substantiated for administrative investigations. The auditor’s review of the one investigation case file found the investigative summary was clearly documented to support preponderance of the evidence used in determining the disposition for this investigation which was substantiated. Interviews with facility investigators confirmed this is the evidentiary standard used.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; Offender Notification and Investigation Form; Investigation Case File; Information Obtained from Interviews.</p> <p>115.73(a-e): CPP/14.7 requires that following an investigation where the alleged victim has reported a case of sexual abuse, the alleged victim shall be informed, and it shall be documented when the: a) allegation has been determined to be substantiated, unsubstantiated or unfounded; b) alleged perpetrator is no longer posted within the offender's unit; c) alleged perpetrator is no longer employed; d) alleged perpetrator has been indicted or convicted on a charge related to sexual abuse. When the case has been referred for investigation by an external entity, the facility will remain updated on the status of the case and will make required notifications as information is available from the external entity. These notifications are made using the "Offender Notification" form.</p> <p>The facility reports there has been one investigation of alleged inmate sexual abuse which was investigated in the past 12 months. The auditor's review of this case file found evidence that the inmate was notified of the disposition of the administrative investigation. One employee was terminated for a substantiated case of sexual abuse. The case was referred to KSP for criminal investigation and is pending prosecution. Since the criminal case is still pending, no further notification has been made at the time this report was published.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/3.22; Memorandum on Disciplinary Sanctions; Information Obtained from Interviews; Investigation Case File.</p> <p>115.76(a-d): CPP/3.22 establishes staff members found to have violated the staff sexual abuse policy are subject to disciplinary action up to and including dismissal, based upon the findings of the investigation. Disciplinary action will be commensurate with the nature and circumstances of the violation. Any staff member found to have engaged in sexual abuse based upon the findings of the investigation may be terminated. All terminations related to criminal activity, including resignations that would have resulted in termination if not for the resignation, shall be reported to the Kentucky State Police (KSP). Interviews with the PREA Coordinator and Internal Affairs investigator confirmed that once the investigation is turned over to the KSP, the determination for forwarding for prosecution will be at the discretion of the KSP based on the evidence obtained during the investigation and will not be deterred if the employee resigns or is terminated. The PREA Coordinator’s Office monitors substantiated cases and will provide notification to any relevant licensing body, where necessary. If the findings are inconclusive but the investigation reveals potentially problematic conduct, preventive action shall be taken. The accused shall be reminded of Corrections’ policy and further preventive measures may be taken including additional training to avoid a further recurrence or permanent reassignment. The auditor’s interview with the PREA Compliance Manager confirmed there has been one investigation within the last 12 months where an employee was terminated for sexual abuse of an inmate. Interviews with the Warden, PCM, and Human Resources Manager informed the auditor that staff at Blackburn Correctional Complex are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies and that termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/3.22; Memorandum on Corrective Action for Contractors; Information Obtained from Interviews.</p> <p>115.77(a-b): CPP/3.22 establishes the same requirements as employees documented in §115.76 narrative and any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and will be reported to the Kentucky State Police if the activity was deemed criminal. Interview with the Warden (acting) confirmed that she has the authority to remove a contractor or volunteer from contact with inmates upon cause or suspicion. Additionally, the PREA Coordinator’s Office monitors substantiated cases and will provide notification to any relevant licensing body, where necessary, as confirmed during her interview. There have been no volunteers or contractors who were found to have violated the sexual abuse/harassment policies during the past 12 months.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/4.7; CPP/15.2; Information Obtained from Interviews; Investigation Case File.</p> <p>115.78(a)(b): CPP/15.2 establishes sanctions for inmates found guilty of sexual abuse after due process through the disciplinary procedures. For this violation sanctions imposed can be loss of up to four years non-restorable good time and assignment to disciplinary segregation for a maximum of 30 days for each offense. Based review of allegations and interview with the PREA Compliance Manager there has been no inmate-on-inmate allegation of sexual abuse in the past 12 months.</p> <p>115.78(c): CPP/14.7 requires the facility to consider whether the offender’s mental disabilities or mental illness contributed to her behavior when determining what level of sanction, if any, will be imposed when pending disciplinary sanctions for sexual abuse charges. The Disciplinary Report Form includes an option for “no penalty imposed at the recommendation of mental health”, to indicate when an evaluation identifies that the offender’s mental disabilities or mental illness may have contributed to her behavior for the infraction. Interviews with the disciplinary hearing officer and Mental Health Provider confirm this consideration is weighed when sanctions are determined. Interview with the Warden (acting) further confirmed that mental health staff is consulted regarding an inmate’s ability to be held accountable for the alleged behavior. There were no cases regarding inmate-on-inmate sexual abuse during the past 12 months.</p> <p>115.78(d): Blackburn Correctional Complex offers therapy, counseling, substance abuse treatment, and other intervention programs. Inmates with a positive administrative or criminal finding that they perpetrated inmate-on-inmate sexual abuse will undergo an evaluation by a qualified mental health professional in order to determine the appropriate intervention to assist in correcting the underlying reason or motivation for the abuse. Inmate participation in and completion of these recommended treatment options is voluntary and is not a condition that would preclude involvement in other institutional programming or benefits. The auditor’s interview with the Mental Health Provider confirmed that known abusers will be evaluated and offered treatment options where indicated. Interviews with the Warden, Unit Administrators, and Case Managers confirmed that inmates are encouraged to participate in programming that will address and correct underlying reasons or motivations for abusive behavior. The facility offers many programs for inmates to work on behavior modification. There were no inmates identified who were found to have perpetrated sexual abuse of another inmate during the audit period.</p> <p>115.78(e): CPP/14.7 establishes offenders may not be disciplined for sexual abuse of a staff member if the staff member consented. Interviews with the PREA Compliance Manager and Internal Affairs Investigator confirmed that there was one case involving a staff member with an inmate in the past 12 months and a review of the inmate's file history found that he did not receive disciplinary action for sexual involvement with a staff member.</p> <p>115.78(f): CPP/14.7 establishes an offender may be disciplined for reporting a false allegation</p>

of sexual abuse or sexual harassment only where the facility can demonstrate the false allegation was knowingly made in bad faith. A report made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute a false report or lying even if an investigation does not establish evidence sufficient to substantiate the allegations.

115.78(g): Consensual sex between inmates is prohibited at Blackburn Correctional Complex and both parties are subject to disciplinary action if found to engage in this activity. There have been no incidents of consensual sex between inmates within the past 12 months.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; Medical and Mental Health Recommendation Form; Risk Assessments; Informed Consent Forms; Information Obtained from Interviews.</p> <p>115.81(a)(b): CPP/14.7 requires when a risk assessment indicates an offender has experienced victimization or previously been a perpetrator, staff shall ensure the offender has been offered a follow-up for counseling and monitoring with the appropriate medical or mental health professional within 14 days of the assessment. The facility developed a form “Medical and Mental Health Recommendation Form” that is completed when a referral is indicated as a result of information provided during the risk screening. This form advises the inmate of the referral and captures the inmate’s signature and allows him to accept or decline the referral. This form allows the PREA Compliance Manager a systematic method to monitor compliance with referrals on an ongoing basis with this standard and is above and beyond the requirements of this standard. The auditor reviewed documented referrals to the mental health practitioner for an inmate who reported prior sexual abuse and one who was listed as a prior sexual perpetrator; a referral to mental health was made and the inmates received an appraisal by the mental health provider within a period not exceeding 14 days. Interview with the Mental Health Provider confirmed inmates are seen as soon as possible, but no later than within 14 days at which time their mental health needs will be appraised and then scheduled for a follow-up with the Psychologist if treatment is indicated. The auditor interviewed four inmates who were listed as having reported prior victimization during screening who confirmed that they were offered mental health services at the time of the screening.</p> <p>115.81(c): Blackburn Correctional Complex is a prison therefore this provision is not applicable.</p> <p>115.81(d): CPP/14.7 requires the dissemination of information related to and resulting from the assessment to be controlled and limited to staff necessary to inform treatment plans and to make security and management decisions regarding housing, beds, work, education, and program assignments. This policy further directs that all information in an intake screening, incident report, or investigation of a sexual offense is to be kept confidential except to the extent necessary to report to an appropriate supervisor, adequately investigate, provide treatment, or make security or management decisions. The information collected for the risk assessment is entered into the inmate management database system which is restricted to those employees who participate in classification and security management decisions. User access is granted through a need-to-know access basis and is controlled by position-level rights. This information was confirmed through interviews with the Warden (acting) and PREA Coordinator. Information obtained during an assessment or delivery of treatment by mental health or medical practitioner related to sexual abuse or sexual harassment will be shared with other staff only to the extent of meeting reporting requirements and to inform treatment plans, housing, bed, work, education, and program assignments. The auditor’s interview with the Mental Health Provider, Director of Nursing, and other medical staff confirmed strict confidentiality is observed in accordance with the requirements of this policy except for the mandatory requirement to report an incident.</p>

115.81(e): CPP/14.7 requires medical and mental health professionals to obtain informed consent from the offender prior to reporting information related to prior sexual victimization that did not occur in a facility. The auditor's interview with the Mental Health Provider, Director of Nursing, and other medical staff confirmed that informed consent from inmates is required and obtained before disclosing information about prior sexual victimization that did not occur in an institutional setting. The facility obtains a signed Informed Consent form from each inmate upon arrival to the facility; in addition, the provider notifies the inmate verbally of the extent of confidentiality at the onset of an interview.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard. In addition, the facility is found to exceed the requirements of this standard for the implementation of a streamlined process for capturing the referrals for mental health evaluations based on the risk screening.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; Information Obtained from Interviews; Medical Assessment Forms; Investigation Case File.</p> <p>115.82(a): CPP/14.7 requires inmate victims of sexual abuse to receive timely, unimpeded access to emergency medical treatment and crisis intervention services. In accordance with the Sexual Assault Action Plan, discussed in §115.65, inmate victims of sexual assault will be immediately escorted by a supervisor to the Blackburn Correctional Complex Medical Department for the necessary examination, treatment, and evaluation by medical and mental health staff. If mental health staff are not on institutional grounds, the shift supervisor shall contact the on-call Psychologist. If it is determined by the medical and/or mental health provider, the inmate will be transported to the University of Kentucky Hospital for collection of forensic evidence and medical examination by a SAFE/SANE medical professional. Interviews with the Director of Nursing and medical staff confirmed that these services will be provided immediately and in a manner consistent with community standards of care. They further confirmed that the decision on whether an inmate needs to be referred to the hospital is made by the Medical Department. Medical staff indicated that they call ahead to inform the hospital that a forensic exam is needed so the on-call person can be dispatched if there are none on shift at the time. The auditor's review of the one investigation case file indicated the inmate was taken to medical immediately after the incident. The case file clearly documented that the inmate was evaluated by medical and mental health. All actions were recorded in the case file as a timeline which documented a prompt and immediate response by facility staff.</p> <p>115.82(b): Blackburn Correctional Complex has 24/7 medical coverage. In the event of a sexual abuse incident, inmate victims are separated from the alleged perpetrator and all inmates involved in the incident will be kept under constant observation and a psychological referral will be submitted to the mental health provider by the shift supervisor with details of the incident. The auditor interviewed random staff and found they were all knowledgeable of the requirement to separate the victim and perpetrator and to ensure the appropriate medical and mental health practitioners are notified in the event of a sexual abuse incident. The auditor's review of the one investigation case file documents immediate separation of the alleged victim from the perpetrator.</p> <p>115.82(c): CPP/14.7 requires inmate victims of sexual abuse to be offered timely information about and access to sexually transmitted infections prophylaxis as deemed appropriate by the medical practitioner. Of the investigation case files reviewed, nine required access to emergency medical treatment, crisis intervention, emergency contraception, or sexually transmitted infection prophylaxis during the audit period. The auditor reviewed documentation in the case file which indicated the inmate was offered information about and timely access to emergency sexually transmitted infections prophylaxis.</p> <p>115.82(d): CPP/14.7 requires current and previous victims of sexual abuse to receive any medical and mental health services related to the sexual abuse at no cost to the offender. The Director of Nursing confirmed inmates are not charged for treatment services related to an incident of sexual abuse. Auditor reviewed the record of the inmate who received an</p>

evaluation after the incident and found that he was not charged a fee for the visit.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; Information Obtained from Interviews; Medical and Mental Health Follow-up Records; Investigation Case File; Inmate Records.</p> <p>115.83(a)(b)(c)(f): CPP/14.7 requires the facility to offer medical and mental health evaluation and treatment as deemed appropriate, for all offenders who have been victims of sexual abuse in any correctional facility. This treatment includes follow-up services, treatment plans, and when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. Victims of sexual assault will be offered testing for sexually transmitted infections as deemed appropriate by the medical practitioner. All services provided by the Blackburn Correctional Complex Medical Department are consistent with the community level of care. Interviews with the Mental Health Provider, Director of Nursing, and medical staff confirms that treatment is offered to all offenders who have been victims of sexual abuse in any facility; the inmate has the right to participate or refuse treatment. If an inmate is transferred or released after an incident of sexual abuse, they will be provided with a treatment plan that follows to their next facility or they will be provided community information for continuation of care. Inmates are released with a 30-day supply of medication and resources for follow-up care in the community. The auditor reviewed the one sexual abuse case file that occurred in the past 12 months and found that both medical and mental health evaluations were conducted immediately upon notification of the incident and follow-up care was provided once the inmate returned from the University of Louisville Hospital. This inmate was transferred within 48 hours and based on case file notes and interviews with the medical and mental health providers, the receiving facility was made aware of the situation and the treatment plan was provided so the inmate would have no interruption in services.</p> <p>115.83(d)(e): CPP/14.7 requires that all offenders who have been victims of sexual abuse in any correctional facility shall be offered any necessary treatment related to the sexual abuse, to include timely and comprehensive information about lawful pregnancy-related medical services. Blackburn Correctional Complex is a male facility therefore these provisions are not applicable.</p> <p>115.83(g): CPP/14.7 requires current and previous victims of sexual abuse to receive any medical and mental health treatment services related to the sexual abuse at no cost to the offender. After an inmate victim returns from the hospital for an examination and/or treatment he is cleared by the Medical Department before returning to the general population at which time an assessment of continuation of care is evaluated and discussed with the inmate. In addition to services provided by the facility staff, inmates are eligible to receive follow-up crisis counseling by phone and three in-person sessions with the Ampersand Sexual Violence Resource Center under the MOU established with KASAP. The inmate involved in the incident was not charged for medical or mental health services related to the incident.</p> <p>115.83(h): CPP/14.7 requires mental health practitioners to attempt to conduct an evaluation of all known offender-on-offender perpetrators within 60 days of learning of such abuse and provide treatment as deemed appropriate. The auditor's interview with the Mental Health</p>

Provider confirmed that there have been no substantiated incidents in the past 12 months to initiate an evaluation of an inmate perpetrator, however, she explained that an evaluation would be conducted, and treatment offered if indicated.

After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14,7; Investigation Case File; Memorandum on Incident Reviews; Sexual Abuse Incident Review (SAIR) Report; Information Obtained from Interviews; Personal Observations.</p> <p>115.86(a)(b): CPP/14.7 directs all facilities to conduct a review within 30 days of the conclusion of every sexual abuse investigation unless the allegation was determined to be unfounded. The PREA Compliance Manager is relatively new in her role and has only initiated one incident review since she assumed her duties. The auditor’s review of the closed case file found it to be thoroughly reviewed, documented well, and completed within 30 days.</p> <p>115.86(c): Blackburn Correctional Complex review team consists of the PREA Compliance Manager, Captain, Line Supervisors, Internal Affairs Investigator, Medical/Mental Health Practitioner, and other relevant staff. The auditor interviewed three staff who participated in the incident review process and the PREA Compliance Manager who said that they had only conducted a review on one incident because Blackburn has only had one within the audit period. The review team made recommendations based on the recent review to relocate the library and to install additional cameras and these recommendations were approved and implemented.</p> <p>115.86(d)(e): Considerations of the review include: a) whether the allegation or investigation indicated a need to revise policies or practices to better prevent, detect or respond to sexual abuse; b) whether the incident or allegation was motivated by race, ethnicity, gender identity, LGBTI identification, gang affiliation, or was motivated or otherwise caused by other group dynamics at the facility; c) examination of the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; d) assessment of the adequacy of staffing levels in that area during different shifts; e) assessment of monitoring technology deployment or as staff augmentation. The incident review is documented on the Sexual Abuse Incident Review Report form, CPP14.7, Attachment III and lists any recommended improvements. As noted in provision (c) above, the recommendations made by the incident review team from the recent incident were approved by the Warden (acting) and implemented. The form is submitted to the agency’s PREA Coordinator upon completion.</p> <p>The standardization of the process by the agency’s PREA Coordinator’s Office through the implementation of the Sexual Abuse Incident Review Report form, CPP14.7, Attachment III is above the requirements of this standard; in addition, the PREA Coordinator’s Office tracks the due date for completion of each incident review and requires the facility to provide a copy of the form upon completion for their review. After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard. In addition, the agency is determined to exceed based on the implementation of the standardized SAIR reporting process.</p>

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: CPP/14.7; KOMS Screenshot; Facility Monthly Report; 2019 PREA Statistical Report; 2019 SSV-2.</p> <p>115.87(a): The agency collects accurate, uniform data for every allegation of sexual abuse at all facilities using a standardized instrument and a set of definitions using their computer-based offender management system (KOMS). CPP/14.7 requires each facility to provide allegations and dispositions of sexual offenses on a monthly report. The PREA Compliance Manager provided the auditor a copy of the March 2021 report submitted to the PREA Coordinator’s office as a sample.</p> <p>115.87(b)(d)(e): The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews, to include those from private facilities with which it contracts. The agency aggregates the incident-based sexual abuse data at least annually and publishes an annual report. The last published report available is 2019.</p> <p>115.87(c)(f): The incident-based data includes the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice (DOJ). Information is provided to the DOJ upon request. The last data requested was in 2019. The agency’s PREA Coordinator is responsible for collecting and managing this data and publishing the related reports. She confirmed during an interview with the auditor that the PREA data collected is maintained in a network drive that has limited access and that she is very knowledgeable about the data collection requirements and has a good system in place for incident reviews.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: 2019 PREA Annual Report; 2019 PREA Statistical Report; Agency Website; Information Obtained During Interviews with Agency Head, PREA Coordinator, and PREA Compliance Manager.</p> <p>115.88(a): The agency’s PREA Coordinator is responsible for reviewing data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies practices and training by identifying problem areas, taking corrective action on an ongoing basis, and preparing an annual report of findings and corrective actions for each facility as well as the agency. Interview with the PREA Coordinator confirms that she and her team make regular use of the incidence data collected and are in constant motion for improving the agency’s PREA programs. She meets with the PREA Compliance Managers as needed both in person and virtually, to discuss any problem areas and to provide ongoing training. The KOMS provides a mechanism for regular data analysis from multiple perspectives on a micro and macro basis.</p> <p>115.88(b)(c)(d): The PREA Coordinator compiles and publishes an annual report for the agency which includes a comparison of the current year’s data and corrective actions with those from prior years and provides an assessment of the agency’s progress in addressing sexual abuse. The most current report published is for 2019. The Kentucky Department of Corrections Commissioner approves the annual report. This report is published on the agency’s public website. This public report contains no information that would present a clear and specific threat to the safety and security of a facility therefore, redacting is unnecessary.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed: CPP/14.7; 2019 PREA Annual Report; Website; 2019 PREA Statistical Report; Records Retention Schedule, Information Obtained from Interviews; Facility Tour.</p> <p>115.89(a): CPP/14.7 requires all case records associated with claims of sexual offenses, including incident reports, investigation reports, offender information, case disposition, and medical and counseling evaluation findings and recommendations for post-release treatment or counseling, to be retained securely and in accordance with the records retention schedule. User access to KOMS database is highly restricted and access is issued by approval of the PREA Coordinator.</p> <p>115.89(b)(c): Aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts, is made readily available to the public annually through its public website. The PREA Coordinator compiles and publishes this annual report, as noted in §115.88. The most current report published is 2019. This report is published on the agency’s public website. This public report contains no information that requires redacting.</p> <p>115.89(d): The agency maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of the initial collection as required by the State Agency Records Retention Schedule for Corrections/Adult Institutions.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed by Auditor: Observations During Site Visit; Interview with PREA Coordinator; Interview with Mailroom Supervisor; Interviews with Inmates; Amended 2021 Compliance Visit Schedule.</p> <p>115.401(a): Kentucky Department of Corrections ensures that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once. The KDOC operates 13 facilities and contracts with private organizations for 29 facilities.</p> <p>115.401(b): Kentucky Department of Corrections is in the second year of the current audit cycle. During an interview with the agency’s PREA Coordinator, the auditor confirmed that audits were scheduled in accordance with the requirements of §115.401, to include those entities under contract with the agency. However, due to the COVID-19 pandemic over the past year, some of those audits that were scheduled were unable to be conducted. The PREA Coordinator continues to monitor PREA compliance in all facilities and is working to secure the scheduling of these audits at their earliest possible date. The audit schedule provided to the auditor indicates by end of year two the agency projects to be back on track, having two-thirds of the facilities audited. A review of the agency’s website and prior PREA audit reports found the agency to be consistent and systematic with ensuring audits are completed and posted to their public website timely.</p> <p>115.401(h)(i): The auditor was allowed access to all areas of the facility and had the ability to observe all processes. There were no limitations beyond restrictions implemented for COVID-19 safety protocols and none of these protocols inhibited the auditor’s ability to conduct a thorough and comprehensive audit of the Blackburn Correctional Complex. All documentation and information requested were promptly provided to the auditor in either paper or electronic format.</p> <p>115.401(m): The auditor selected all inmates to be interviewed and all were permitted to interview. The facility provided the auditor with a private and comfortable conference room to conduct interviews. Some interviews with staff were conducted in their respective work areas privately as well.</p> <p>115.401(n): During the on-site tour the auditor observed the required notifications posted prominently and conspicuously in areas accessed by inmates and staff. Mailroom staff interviewed confirmed that outgoing mail to the PREA Auditor or ACA would be treated as privileged correspondence and would not be opened, unless in the presence of the inmate, and only if it appears suspicious. No correspondence was received by the auditor. Inmates interviewed indicated they were aware of the PREA audit and that they were permitted to correspond with the auditor.</p> <p>After analysis and evaluation of the stated evidence, the auditor finds the agency and facility meet all provisions of this standard.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor's review of the agency's public website finds the Final Audit Reports have been published in accordance with §115.403.

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for	yes

	adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes

115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities 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, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual	yes

	abuse and sexual harassment, including: inmates who are blind or have low vision?	
	Does the agency take appropriate steps to ensure that inmates with disabilities 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, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities 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, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities 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, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities 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, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes

115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has 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?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has 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?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes

115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts 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?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening 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 facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	no

115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented 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?	yes

115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes

115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	na
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	na
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure 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? (N/A if agency is exempt from this standard.)	na
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue 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? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	na
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	na

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	na
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	na
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	na

115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	na
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	na

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, 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?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment 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?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes

115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) 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?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes

115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse 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?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse 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?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	no
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes