# **PREA Facility Audit Report: Final**

Name of Facility: Lee Adjustment Center

Facility Type: Prison / Jail

**Date Interim Report Submitted:** 06/05/2023 **Date Final Report Submitted:** 08/11/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	
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.	
Auditor Full Name as Signed: Bryan Pearson	Date of Signature: 08/11/ 2023

AUDITOR INFORMATION		
Auditor name:	Pearson, Bryan	
Email:	bryan@pearsongrouplic.com	
Start Date of On- Site Audit:	04/18/2023	
End Date of On-Site Audit:	04/20/2023	

FACILITY INFORMATION		
Facility name:	Lee Adjustment Center	
Facility physical address:	168 Lee County Adjustment Center, Beattyville, Kentucky - 41311	
Facility mailing address:		

<b>Primary Contact</b>		
Name:	Daniel Akers	
Email Address:	Daniel.Akers@corecivic.com	
Telephone Number:	606-464-2866	

Warden/Jail Administrator/Sheriff/Director		
Name:	Daniel Akers	
Email Address:	Daniel.Akers@corecivic.com	
Telephone Number:	606-464-2866	

Facility PREA Compliance Manager		
Name:	Mitchell Brandenburg	
Email Address:	mitchell.brandenburg@corecivic.com	
Telephone Number:	O: 606-464-2866	

Facility Health Service Administrator On-site		
Name:	Lisa Dickerson	
Email Address:	LDickerson@wellpath.us	
Telephone Number:	606-464-2866 Ext 20	

Facility Characteristics	
Designed facility capacity:	866
Current population of facility:	789
Average daily population for the past 12 months:	799
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:	21 - 71 Years
Facility security levels/inmate custody levels:	Medium
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	154
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	5
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	2

AGENCY INFORMATION		
Name of agency:	CoreCivic, Inc.	
Governing authority or parent agency (if applicable):		
Physical Address:	5501 Virginia Way, Suite 110, Brentwood, Tennessee - 37027	
Mailing Address:		
Telephone number:	6152633000	

Agency Chief Executive Officer Information:		
Name:	Damon T. Hininger	
Email Address:		
Telephone Number:	6152633000	

# **Agency-Wide PREA Coordinator Information**

Name: Eric Pierson	Email Address:	Eric.Pierson@corecivic.com
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# **Facility AUDIT FINDINGS**

# **Summary of Audit Findings**

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

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: 115.31 - Employee training 115.32 - Volunteer and contractor training Number of standards met: 43 Number of standards not met:

POST-AUDIT REPORTING INFORMATION	
GENERAL AUDIT INFORMATION	
On-site Audit Dates	
1. Start date of the onsite portion of the audit:	2023-04-18
2. End date of the onsite portion of the audit:	2023-04-20
Outreach	
10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	Yes No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Rising Center Kentucky Association of Sexual Assault Centers
AUDITED FACILITY INFORMATION	
14. Designated facility capacity:	866
15. Average daily population for the past 12 months:	799
16. Number of inmate/resident/detainee housing units:	6
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	Yes  No  Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

# **Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit** Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit **36.** Enter the total number of inmates/ 814 residents/detainees in the facility as of the first day of onsite portion of the audit: 0 38. Enter the total number of inmates/ residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit: 39. Enter the total number of inmates/ 0 residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit: 40. Enter the total number of inmates/ 0 residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit: 41. Enter the total number of inmates/ 0 residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit: 42. Enter the total number of inmates/ 1 residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit: 43. Enter the total number of inmates/ 5 residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:

44. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	11
45. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	4
46. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	1
47. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	154
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	3

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	40
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	16
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	Age
	Race
	Ethnicity (e.g., Hispanic, Non-Hispanic)
	Length of time in the facility
	Housing assignment
	Gender
	Other
	None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Inmates were chosen for random interviews from the inmate list by housing unit on the first day of the audit. Selections were made from each housing unit to ensure information was obtained for factors in each housing unit.

56. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	<ul><li>Yes</li><li>No</li></ul>
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	15
guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/ resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/ residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".	
60. Enter the total number of interviews conducted with inmates/residents/ detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.
	☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	A targeted list was provided by the facility that did not contain inmates with disabilities. None of the inmates interviewed reported having a physical disability.
61. Enter the total number of interviews conducted with inmates/residents/ detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	A targeted list was provided by the facility that did not contain inmates with disabilities.  None of the inmates interviewed reported having a cognitive or functional disability.
62. Enter the total number of interviews conducted with inmates/residents/ detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  ■ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	A targeted list was provided by the facility that did not contain inmates that were blind.  None of the inmates interviewed reported being blind of having low vision.
63. Enter the total number of interviews conducted with inmates/residents/ detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	A targeted list was provided by the facility that did not contain inmates that were deaf or hard of hearing. None of the inmates interviewed reported being deaf of hard of hearing.
64. Enter the total number of interviews conducted with inmates/residents/ detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1

65. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	3
66. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	7
67. Enter the total number of interviews conducted with inmates/residents/ detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	3
68. Enter the total number of interviews conducted with inmates/residents/ detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	1
69. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed.

At the time of the onsite audit, the facility reported no inmates being in segregated housing involuntarily for risk of sexual victimization. None of the inmates interviewed in RHU reported being placed in segregation involuntarily for risk of sexual victimization.
No text provided.
views
12
Length of tenure in the facility
■ Shift assignment
Work assignment
Rank (or equivalent)
Other (e.g., gender, race, ethnicity, languages spoken)
None
○ No
No text provided.

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Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties.  Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	11
76. Were you able to interview the Agency Head?	<ul><li>Yes</li><li>No</li></ul>
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<ul><li>Yes</li><li>No</li></ul>
78. Were you able to interview the PREA Coordinator?	
79. Were you able to interview the PREA Compliance Manager?	<ul> <li>Yes</li> <li>No</li> <li>NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</li> </ul>

80. Select which SPECIALIZED STAFF Agency contract administrator roles were interviewed as part of this audit from the list below: (select all that Intermediate or higher-level facility staff apply) responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment Line staff who supervise youthful inmates (if applicable) Education and program staff who work with youthful inmates (if applicable) Medical staff Mental health staff Non-medical staff involved in cross-gender strip or visual searches Administrative (human resources) staff Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff Investigative staff responsible for conducting administrative investigations Investigative staff responsible for conducting criminal investigations Staff who perform screening for risk of victimization and abusiveness Staff who supervise inmates in segregated housing/residents in isolation Staff on the sexual abuse incident review team Designated staff member charged with monitoring retaliation First responders, both security and nonsecurity staff Intake staff

	Other
81. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<ul> <li>Education/programming</li> <li>Medical/dental</li> <li>Mental health/counseling</li> <li>Religious</li> <li>Other</li> </ul>
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	● Yes ○ No
a. Enter the total number of CONTRACTORS who were interviewed:	4
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	Security/detention  Education/programming  Medical/dental  Food service  Maintenance/construction  Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

# SITE REVIEW AND DOCUMENTATION SAMPLING

### **Site Review**

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.	
84. Did you have access to all areas of the facility?	
Was the site review an active, inquiring proce	ess that included the following:
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, crossgender viewing and searches)?	<ul><li>Yes</li><li>No</li></ul>
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	
87. Informal conversations with inmates/ residents/detainees during the site review (encouraged, not required)?	<ul><li>Yes</li><li>No</li></ul>
88. Informal conversations with staff during the site review (encouraged, not required)?	<ul><li>Yes</li><li>No</li></ul>

89. Provide any additional comments	No text provided.
regarding the site review (e.g., access to	
areas in the facility, observations, tests	
of critical functions, or informal	
conversations).	

# **Documentation Sampling**

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<ul><li>Yes</li><li>No</li></ul>
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.

# SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

# Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

# 92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate- on- inmate sexual abuse	6	2	6	2
Staff- on- inmate sexual abuse	3	2	3	2
Total	9	4	9	4

# 93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on- inmate sexual harassment	1	0	1	0
Staff-on- inmate sexual harassment	0	0	0	0
Total	1	0	1	0

# Sexual Abuse and Sexual Harassment Investigation Outcomes

## **Sexual Abuse Investigation Outcomes**

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for "convicted.") Do not double count. Additionally, for question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

# 94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on- inmate sexual abuse	0	0	0	0	0
Staff-on- inmate sexual abuse	0	1	0	0	0
Total	0	1	0	0	0

# 95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	2	4	0
Staff-on-inmate sexual abuse	0	0	1	2
Total	0	2	5	2

### **Sexual Harassment Investigation Outcomes**

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, and detained sexual harassment investigation files, as applicable to the facility type being audited.

# 96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on- inmate sexual harassment	0	0	0	0	0
Staff-on- inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

# 97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

# Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Carriel	A b	Investigation	Eilaa	Calastad	far Davia	
Sexual	Anuse	investigation	FIIES	Selected	TOL REVIE	м

98. Enter the total n	number of SEXUAL
<b>ABUSE</b> investigation	files reviewed/
sampled:	

10

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	No NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation	files
100. Enter the total number of INMATE- ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	6
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</li> </ul>
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</li> </ul>
Staff-on-inmate sexual abuse investigation fil	es
103. Enter the total number of STAFF- ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	3
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</li> </ul>

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</li> </ul>
Sexual Harassment Investigation Files Select	ed for Review
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	1
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	Yes  No  NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investig	jation files
108. Enter the total number of INMATE- ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	Yes  No  NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	Yes  No  NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigat	ion files
111. Enter the total number of STAFF- ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	Yes  No  NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</li> </ul>
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support S	taff
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	Yes  No

Non-certified Support Staff		
116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	Yes  No	
AUDITING ARRANGEMENTS AND COMPENSATION		
121. Who paid you to conduct this audit?	<ul> <li>The audited facility or its parent agency</li> <li>My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</li> <li>A third-party auditing entity (e.g., accreditation body, consulting firm)</li> <li>Other</li> </ul>	

### **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.

# Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

### 115.11

a) KDOC policy 14.7 Sexual Abuse Prevention provides a zero tolerance policy statement that states "Any sexual act, sexual contact or sexual offense between an offender and a staff member, visitor or other offender shall be prohibited. No offender, either incarcerated or under the supervision of the Department of Corrections, can give consent to any sexual relationship with a staff member. Any acts as defined in this policy that are conducted outside of the staff member's normal duties shall be considered a violation of this policy. The Department of Corrections has zero tolerance toward all forms of sexual abuse and sexual harassment." The policy provides staff with information for preventing, detecting, and responding to sexual abuse and sexual harassment. This includes definitions for prohibited behavior and sanctions.

During interviews with both random and targeted inmates, inmates described zero

tolerance as nothing sexual was allowed between inmates and inmates or staff and inmates regardless of consent. Some said No means No and Yes means No. The zero tolerance policy was also provided in the Inmate Handbook. All staff interviewed reported the zero tolerance policy was provided during annual PREA training and could accurately describe the policy.

- b) The Core Civic Org Chart provided has the PREA Coordinator in an executive level position reporting to the Sr. Vice President of Core Services in CoreCivic. The PREA Coordinator has the title of Sr. Director. He reported having enough time to manage monitoring and improving PREA compliance in CoreCivic facilities.
- c) Lee Adjustment Center Org Chart provided indicates the facility PREA Compliance Manager reports to the Assistant Warden and has the position of Chief of Security. He reported having the time and authority to complete his duties as the PCM. The Assistant Warden and Warden reported having regular communication with the PCM regarding issues involving PREA compliance at the facility.

Findings: Based on policies and documents reviewed, interviews, and tour observations, the facility meets the standard.

# 115.12 Contracting with other entities for the confinement of inmates

**Auditor Overall Determination: Meets Standard** 

### **Auditor Discussion**

a) The Lee Adjustment Center does not contract for the confinement of inmates. The Kentucky DOC has a contract with LAC to house KDOC inmates. The contract contains the following requirements "3.17. Comply with the Prison Rape Elimination Act ("PREA") (42 U.S.C. §15601,et seq.). 3.18. Successfully attain within three years and maintain thereafter PREA accreditation throughout the term of this Agreement." The Kentucky DOC has a Contract Monitor staff that is assigned to LAC to monitor CoreCivic's compliance with the contract terms, to include PREA compliance.

KDOC Contract Administrator – The contract administrator was interviewed by an auditor at another KDOC PREA audit. Those notes were shared with this auditor. The KDOC contract administrator said all contract for confinement are reviewed in conjunction with the KDOC PREA Coordinator to ensure compliance with the PREA standards is required. PREA compliance results have been completed for each contract entered into agreement within the last 12 months. Contract facilities have submitted PREA audit reports to the PREA Coordinator.

Findings: Based on policies and documents reviewed, interviews, the facility meets

the standard.

# 115.13 Supervision and monitoring

**Auditor Overall Determination: Meets Standard** 

### **Auditor Discussion**

KDOC policy 14.7 states "Each facility shall 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 offenders from sexual abuse. Whenever necessary, but no less frequently than once each year, each facility, in consultation with the PREA Coordinator, shall assess, determine and document whether adjustments are needed to: The staffing plan established pursuant to this section; The facility's deployment of video monitoring systems and other monitoring technologies; and the resources the facility has available to commit to ensure adherence to the staffing plan." The policy requires the staffing plan to consider the eleven factors enumerated in the standard as well as the use of video monitoring technology. The 2021 and 2022 Annual Staffing Plan Review was provided for review. They were found to be a form that guides the review with the signature of the PREA Compliance Manager, Warden and CoreCivic PREA Coordinator. The facility has a requirement for 178 staff overall in the contract with Kentucky DOC. The facility reported 154 staff employed on the PAQ. At the time of the audit the facility had a low 13% vacancy rate. During the tour this auditor observed staff in all areas of the facility that inmates were present providing an appropriate level of monitoring. There were also cameras covering common areas, hallways, outside walkways, recreation areas, housing areas, the kitchen, dining hall, and the medical unit.

Warden Interview – The Warden said staffing is reviewed on an ongoing basis. He regularly meets with his HR Director, Assistant Warden and PCM to discuss current vacancies and plans to fill them. When staff are absent, mandatory posts are covered with overtime paid staff whenever possible. Usually only closes discretionary posts due to staff absences. He reviews shift rosters to monitor the use of overtime and mandatory post closings.

PCM Interview - The PCM said the staffing is discussed on an ongoing basis. It is rare that a mandatory post would be closed. It only happened twice in the last year. Most vacant posts are covered by overtime.

b) KDOC policy 14.7 states "In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the staffing plan." Two Incident Reports for mandatory posts that were closed were provided for review. Mandatory posts were closed for staff shortage on two days during the review period.

Warden interview - The Warden said any deviations would be documented on the

daily shift reports. If it is a mandatory post closing, it is documented on an incident report.

- c) KDOC policy 14.7 states "Whenever necessary, but no less frequently than once each year, each facility, in consultation with the PREA Coordinator, shall assess, determine and document whether adjustments are needed to: a. The staffing plan established pursuant to this section;
- b. The facility's deployment of video monitoring systems and other monitoring technologies; and The resources the facility has available to commit to ensure adherence to the staffing plan."

PREA Coordinator Interview – The PREA Coordinator said he reviews and signs the annual staffing plan review from the facility. He will also review staffing when there has been a significant change that would require re-evaluation of the plan.

d) CoreCivic policy 14-07-01 Sexual Abuse Prevention and Intervention states "Supervisors shall conduct unannounced facility rounds to identify and deter employee sexual abuse and sexual harassment. The occurrence of such rounds shall be documented as an unannounced round in the applicable log (e.g. ADO, post log, shift report, etc.). This practice shall be implemented for all shifts and all areas where offenders are permitted."

Intermediate Supervisor Interviews - A shift supervisor (Captain) for each shift was interviewed and asked how unannounced rounds are conducted and how staff are prevented from warning other staff they are coming. Both stated they do their rounds different each time so staff do not know where they will be going when they leave an area. Both document their rounds in the master control log book and the housing unit log book. Log book entries are completed by the staff conducting the rounds. Inmates reported seeing supervisors making rounds during interviews.

Tour - During the onsite audit tour, this auditor reviewed housing unit logs for the day and found unannounced rounds were logged for that day but not for previous days. Random dates were chosen to review the housing unit logs for documentation of unannounced rounds in July and December of 2022. Copies of the housing unit logs and the Central Control log for those dates were provided for review. Unannounced rounds were only documented on a few shifts in 3 housing units. The Central Control log had unannounced rounds documented in all shifts but one during the chosen dates. Though the interviews of staff and inmates supported rounds being completed, they are not being documented as required in the policy.

CORRECTIVE ACTION REQUIRED: The Warden must re-educate the shift supervisors on the policy's requirement for the rounds to be documented in housing unit logs. The facility will provide the communication from the Warden to Shift Supervisors and provide housing unit logs that document rounds to demonstrate compliance with the standard.

**Corrective Action Completed**: The Warden created a memorandum reminding supervisors of the requirement to conduct and document unannounced rounds once

per shift. The memo was circulated to all intermediate and higher supervisors via email. A copy of that email was provided. This auditor requested a copy of each housing unit log book for a 4 day period after the memo was sent. The log books were reviewed and contained proper documentation of rounds by shift supervisor on every shift as well as visits by unit managers.

Findings: Based on policies and documents reviewed, interviews, and tour observations, the facility meets the standard.

# Auditor Overall Determination: Meets Standard Auditor Discussion a) KDOC policy 18.3 Confinement of Youthful Offenders requires all offenders committed to the Kentucky DOC to be housed at a designated unit at the Kentucky State Reformatory. The Lee Adjustment Center reported on the PAQ the age of the population being 21 to 71 years old. The Lee Adjustment Center does not house youthful inmates.

# 115.15 Limits to cross-gender viewing and searches Auditor Overall Determination: Meets Standard **Auditor Discussion** KDOC policy 9.8 Search requires strip searches to be conducted by same gender staff. Cross gender strip searches are only allowed if exigent circumstances exist. Staff did not report conducting cross gender strip searches and knew they were not allowed except in exigent circumstances. Exigent circumstances were described as an immediate threat to safety and security. c) KDOC policy 9.8 Search requires all cross gender strip searches to be documented in an institutional strip search logbook. A copy of the log book was requested for review for randomly selected dates. No cross gender strip searches were documented on those dates. KDOC policy 14.7 Sexual Abuse Prevention states "Offenders shall be d) permitted 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." CoreCivic LAC policy 14-7-1 states "Employees of the opposite gender must

announce their presence when entering an offender housing unit."

The facility was toured on the first day of the onsite audit. The tour included all areas where inmates have access: North HU, Lower North HU, South HU, West HU, RHU, Medical, Foodservice, Recreation, Visitation/Security, and Administration. Inmates are not allowed in the maintenance building and none were observed in the building. Maintenance is fenced off from the rest of the facility with controlled movement by staff. Cameras were observed throughout the facility. None had a direct view of an area where inmates would be in a state of undress. This was verified by reviewing all camera views with the Deputy Warden. All inmate bathrooms were observed during the tour. Urinals had walls at the end of each row that blocked opposite gender staff view. Toilets in North and South housing units had no partition walls but had a cinder block wall that blocked the view of the toilets from the entrance of the bathroom. Female staff could only see an inmate on a toilet if they walked all the way into the toilet area. The facility executive staff said they were working on installing partition walls around each toilet for modesty screens. Toilets were in cells in the West housing unit. Showers in North and South were gang shower rooms with shower curtains that blocked the view of the inmates genitals and buttocks from opposite gender staff without creating a blind spot. West housing unit showers provided individual stalls in a row in the dayroom area of the cell house. All stalls had shower curtains. A wall covered the front of the showers providing inmates an additional modesty screen without creating a blind spot. Inmate restrooms in service/program areas were locked and required staff to provide access to inmates one at a time. The toilet in a suicide observation cell in RHU was observable from the officer desk in the control pod that is occupied by female staff. Opposite gender staff on the tour group were announced when entering housing units. A light was turned on that also informed inmates that staff of the opposite gender were on the unit. These lights were observed in every housing unit. Signs were observed at the entrance to housing units that reminded staff of the opposite gender announcement.

During inmate interviews, all inmates stated they felt they could use showers, urinals and toilets without opposite female staff seeing them in a state of undress. All inmates that lived in North and South housing units complained about not having partitions on the toilets. They did not like seeing each other while using the toilets. Transgender inmates also did not like having to use the toilets when other inmates could look at them. This was discussed with the Warden, PREA Coordinator and PCM as a concern. Transgender inmates are showered separately per the standards but can be seen by other inmates while using the toilets in these housing units. This doesn't follow the intent of the standards regarding transgender inmates. At least one toilet stall in each bathroom should have partition walls to allow transgender inmates to use the toilet without being seen. Inmates reported hearing female staff make announcements when entering housing units and if they entered bathrooms.

CORRECTIVE ACTION REQUIRED: One toilet in each bathroom will need a partition wall installed on North, Lower North and South housing units to allow transgender inmates access to a toilet with modesty screens. The facility will provide pictures of the stalls in each bathroom when complete.

**Corrective Action Completed:** A stall partition was installed in every Dorm bathroom that can provide a modesty screen for transgender inmates while using the

toilet. Pictures were provided by the PAM to this auditor for each bathroom to verify installation.

CORRECTIVE ACTION REQUIRED: A distortion film is recommended to block the view from the officer's desk into the observation cell to prevent female staff from seeing the inmate's buttocks and genitals while using the toilet. This should not impede the ability of floor staff to complete 15 minute security checks or the inmate suicide companion from observing the inmate on watch.

**Corrective Action Completed:** The PCM sent photos of the view from the officers station to the observation cell in the segregation unit. The film covered the area where the officer could see the inmate's genitals or buttocks while using the toilet. This correction is completed.

- e) KDOC policy 9.8 Search and CoreCivic LAC policy 14-07-01 states a transgender or intersex inmates shall not be searched or physically examined for the sole purpose of determining the inmate's genital status. Transgender inmate's genital status may be determined by medical staff through conversation or broader medical examination. During random staff interviews, all staff knew they could not strip search a transgender inmate to determine genital status. Transgender inmates stated they were not strip searched just to determine their genital status.
- f) KDOC policy 9.8 Search and CoreCivic LAC policy 14-07-01 policies provide four options for staff to follow in conducting pat searches of transgender or intersex inmates. Searches conducted by medical staff, pat searches by female staff only, inmate's preferred gender of staff, search conducted based on the inmate's gender identity.

The facility reported on the PAQ that 100 percent of the staff had received training in cross gender pat searches and transgender/intersex inmate pat searches. During Random Staff interviews, staff said they had received training for cross gender and transgender pat searches and could describe the conduct of a cross gender pat search and a transgender inmate search. Transgender inmates said they could request a female staff pat search them if the female staff were available. Transgender inmates reported being searched by both male and female staff. When male staff conducted the pat search, it was conducted in a cross gender method.

Findings: Based on the review of policies, documents reviewed, observations on the tour, interviews, and corrective actions completed, the facility meets the standard.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

a) KDOC 14.7 Sexual Abuse Prevention states "Each facility shall provide offender education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired or otherwise disabled, and for offenders who have limited reading skills." The Inmate Handbook provides inmates with information about assistance with disabilities, including the availability of TTY and CapTel equipment for hearing impaired inmates. LAC also has a braille version of the PREA brochure for inmates that are blind.

PREA Education Staff Interviews - The staff that are assigned to provide the PREA education are required to go over the materials with inmates individually. During the individual orientation they can determine if the inmate needs accommodation. If the inmate cannot read, the staff will read the materials to them. If the inmate has mental health issues, the Mental Health Director can assist with the orientation.

b) LAC provided the account information for Language Line, a language interpreter service for LEP inmates. If the inmate cannot speak English, the Case Manager would contact the PCM to use the interpreter service. LAC has a Spanish PREA Pamphlet to provide during education that was provided to this auditor. A Spanish PREA Poster was observed posted throughout the facility next to the English posters. The interpreter service would be used to translate materials if a different language is needed.

LEP Inmate Interview - The language line was used for to interview one inmate that was Limited English Proficient. Facility staff dialed the number on the information sheet and entered the facility account code. Spanish language was requested. An interpreter was connected for Spanish by the Language Line service. The inmate reported he had not been provided with an interpreter during his orientation. He was just handed the information. The PCM was asked to review the orientation documentation for the LEP inmate and found the service was not utilized. A second education utilizing the Language Line service will be required for correction.

CORRECTIVE ACTION REQUIRED: The Case Manager will be required to provide the PREA education and risk assessment interview again by using the Language Line service. The education will be documented and provided for evidence of correction.

Corrective Action Completed: After the onsite audit, a Case Manager provided another PREA education and PREA assessment for the LEP inmate using the Interpreter service.

c) CoreCivic LAC policy 14-07-01 states "Offenders will not be relied upon to provide interpretation services, act as readers, or provide other types of communication assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender safety, the performance of first-responder duties, or the investigation of the offender allegations." LAC reported on the PAQ there was no use of an inmate interpreter during the revie period.

Random Staff Interviews – All staff were asked if an inmate that could not speak English was needing to make a report, would they let another inmate that speaks their language interpret for them. Most staff said no as it would be confidential and there could be retaliation. Most staff were aware there was an interpretive service and knew there were staff that could access it.

Findings: Based on policies and documents reviewed, interviews, and tour observations, the facility meets the standard.

# 115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

a) CoreCivic LAC policy 14-07-01 Sexual Abuse Prevention states "To the extent permitted by law, CoreCivic will decline to hire or promote anyone who may have contact with offenders, and decline to enlist the services of any contractor, who may have contact with offenders, who: a. 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); b. 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 c. Has been civilly or administratively adjudicated to have engaged in the activity as outlined above in B.1.b."

HR Interview – The LAC HR Manager stated there are four required questions that are asked of all applicants. They are based on the requirements of 115.17 (a) and (b). These questions are asked of all applicants prior to the interview on the Self-Declaration of Sexual Abuse/Sexual Harassment form.

Document Review – The Self-Declaration form was requested for review on seventeen staff. All staff reviewed had answered the questions and forms were completed either on their hire date or before except for three staff that were hired prior to the release of the PREA standards. Those staff have completed the form multiple times since 2014.

b) CoreCivic LAC Policy 14-07-01 Sexual Abuse Prevention states "Any incident of sexual abuse and/or sexual harassment shall be considered in determining whether to hire or promote any individual, or to enlist the services of any contractor, who may have contact with offenders."

HR Manager Interview – The fourth question asked of applicants is "Has a substantiated allegation of sexual harassment been made against you." This is on the Self-Declaration form that is given to applicants.

Document Review – The question regarding substantiated sexual harassment was observed on Self-Declaration forms in seventeen staff records reviewed.

c) CoreCivic LAC Policy 14-07-01 Sexual Abuse Prevention states "Before hiring new employees who may have contact with offenders, CoreCivic shall: Perform a criminal background records check; Consistent with federal, state, and local law make its best effort 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 as defined by this policy. The 3-20-2B PREA Questionnaire for Prior Institutional Employers form shall be used to solicit such prior employment information."

HR Manager Interview – The HR Manager said a criminal background check is completed on all staff prior to hiring them. The CBGC is completed through the Kentucky DOC or Indentgo (a paid service). The HR Manager also asks all applicants if they had prior institutional experience and sends a PREA Questionnaire for Prior Institutional Employer via fax to document it was sent.

Document Review – Criminal background checks were requested for eighteen staff for review. The review found the date of ten CBGC's to be after the hire date by a few days or two months. The PCM was asked to review this with the HR Manager. He found there is a delay in getting the criminal background checks completed through KDOC prior to the hire date and contact with inmates.

CORRECTIVE ACTION REQUIRED: The criminal background checks must be completed prior to hire and contact with inmates. The HR Manager will need to find a more reliable way to complete the CBGC for all new hires. Criminal background checks will be reviewed for all new hires in the next 30 days.

**Corrective Action Completed:** The Warden provided a directive to the HR Manager in a memorandum to change the practice for new hire criminal background checks being completed by private services while HR waits for the CBGC to come from the KDOC. Nine CBGC's for new hires were provided for review and completed prior to working inside the facility.

d) CoreCivic LAC Policy 14-07-01 Sexual Abuse Prevention states "CoreCivic shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with offenders."

Document Review – Seven contract staff were selected at random for review of criminal background checks. Two contractors provided a memo or email to the PCM stating the criminal background check had been completed and was "clear" but refused to provide the actual criminal background check. Either the vendor must provide the criminal background check or the facility must request a new criminal background check of its own to ensure the check is done. If the vendor does not provide a copy of the CBGC to the facility, the facility will have to implement a new process of getting the CBGC for all new contract staff.

CORRECTIVE ACTION REQUIRED: The facility must provide the criminal background check for the auditor to review. An email from the contractor stating the CBGC has been completed is not sufficient to demonstrate the standard has been met. The facility can request the CBGC independently from its own source in order to provide

the CBGC to the auditor for review. Either the vendor will provide a copy of the CBGC to the facility or LAC will run its own CBGC on all new contract staff.

**Corrective Action Completed**: The Warden provided a directive to the HR Manager in a memorandum to change the practice for new contract staff criminal background checks being completed by private services and maintained in the HR office. The two CBGC's were completed and provided for review.

e) CoreCivic LAC Policy 14-07-01 Sexual Abuse Prevention states "CoreCivic shall conduct criminal background records checks at least every five (5) years of current employees and unescorted contractors who may have contact with offenders or have in place a system for otherwise capturing such information."

HR Manager Interview - The HR Manager said she requests a criminal background check on all current staff and contractors every 5 years.

Document Review – Twelve of the eighteen staff criminal background checks reviewed were for current employees and three of the seven contract staff criminal background checks reviewed were for current contractors. Five of the staff and two of the contract staff were found to be more than 5 years old.

CORRECTIVE ACTION REQUIRED: New criminal background checks will need to be completed on the five staff and two contract staff.

**Corrective Action Completed:** New Criminal Background Checks were completed on May 30, 2023 and provided for review for the two contract staff CBGC's that were over 5 years old. New Criminal background checks on the five staff were completed on May 24, 2023 and provided for review.

f-g) CoreCivic LAC Policy 14-07-01 Sexual Abuse Prevention states "The 14-7-1H Self-Declaration of Sexual Abuse/Sexual Harassment form shall be completed by current employees on an annual basis to serve as verification of an employee's fulfillment of his/her continuing affirmative duty to disclose any sexual misconduct as described in this policy, and as outlined above."

Document Review – All seventeen staff selected at random for review had completed a Self-Declaration of Sexual Abuse/Sexual Harassment form on their hire date. The forms asked the questions required in substandard a and b. The forms also included a statement regarding an affirmative duty to disclose any sexual misconduct and informs the employee providing false information and/or omitting information about misconduct is grounds for termination.

h) CoreCivic LAC Policy 14-07-01 Sexual Abuse Prevention states "Unless prohibited by law, CoreCivic shall 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."

HR Manager Interview – The HR Manager said she asks all applicants if they have had prior institutional work experience. If they have prior corrections work, she completes a PREA Reference Check form and faxes it to the former institutional employer.

Document Review - During Random staff interviews, two staff reported prior institutional work experience. Both had worked at a jail prior to working at LAC. The PREA Reference Check forms were requested for review. The form for one was provided and found to have been sent two time to the jail. The other did not have a PREA Reference Check form because the staff did not disclose prior institutional experience in the application. Now That HR is aware, a form has been sent to the prior institutional employer and will be provided for review.

Findings: Based on policies, documents reviewed, and interviews, the facility meets the standard.

## 115.18 Upgrades to facilities and technologies

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

a) CoreCivic LAC Policy 14-07-01 Sexual Abuse Prevention states "When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, CoreCivic will consider the effect of the design, acquisition, expansion, or modification on the company's ability to protect offenders from sexual abuse. Such considerations shall be documented on form 7-1B PREA Physical Plant Considerations."

The facility reported on the PAQ there were no new buildings or modifications of existing buildings during the review period.

Agency Head Designee Interview – The Vice President said the design staff consult with the PREA Coordinator for any new builds or renovations. The PREA Coordinator is involved in acquisitions of facilities to review the site for PREA issues with the physical plant.

b) CoreCivic LAC Policy 14-07-01 Sexual Abuse Prevention states "When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, CoreCivic will consider how such technology may enhance the ability to protect offenders from sexual abuse. Such considerations shall be documented on form 7-1B PREA Physical Plant Considerations."

Document Review – an expenditure report for 2022 was provided that shows 15 security cameras were purchased.

Agency Head Designee Interview – The Vice President said cameras are used to support direct and indirect supervision of inmates. Cross gender viewing is also considered in camera placement. Video technology is discussed in the annual staffing plan review with the PREA Coordinator.

Warden Interview – The Warden said there were fifteen cameras added to the video monitoring system in the last year. The PREA Compliance was involved in determining where there was a need for the cameras based on identified blind spots and areas prone to incidents.

Tour – During the tour the PCM pointed out areas where a new camera was added to improve detection and deterrence of PREA incidents through video monitoring.

Findings: Based on policies and documents reviewed, interviews, and tour observations, the facility meets the standard.

### 115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

a) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "If the abuse occurred within a time period that still allows for the collection of physical evidence, the alleged victim shall be instructed not to take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; The time frame for collection of physical evidence outlined above in L.5. and L.6. is generally ninety-six to one-hundred-twenty (96-120) hours, however, facility staff shall consult with investigators at the time of incident notification to determine local protocol and the time frame applicable for each individual incident."

KDOC policy 14.7 Sexual Abuse Prevention states " If the incident occurred within the previous ninety-six (96) hours, the alleged victim and alleged perpetrator shall not take any actions that could destroy physical evidence which includes: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating.

Random Staff Interviews – All staff were asked what their responsibilities were for protecting evidence. All knew to keep the inmate with them and don't allow them to change clothes, shower, brush teeth, drink, eat or use the restroom until evidence can be collected by investigators or a SANE.

c) KDOC policy 14.7 Sexual Abuse Prevention states " The Medical Department shall promptly make arrangements for the alleged victim to be transported to an outside facility for an examination that may include: collection of forensic evidence, testing for sexually transmitted diseases, prophylactic treatment, follow-up and mental health assessment."

Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "All victims of sexual abuse shall have access to forensic medical examinations, whether onsite or at an outside facility, without financial cost, where the exam is necessary to obtain evidence or is medically appropriate, The examination shall be performed by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE). If a SAFE or SANE provider is not available, the examination may be performed by other qualified medical practitioners."

Forensic Exam – An inmate that made a report of sexual abuse was sent to the hospital for a forensic exam during the review period. The inmate was interviewed as a targeted interview. The victim said he was not charged for the forensic exam, A victim advocate organization covered the charges. He was referred to mental health within a few days of making a report.

Medical Staff Interview – The Medical Services Director said if an inmate reports a sexual assault, the medical staff will review for emergent injuries and then arrange for a forensic exam when necessary. Forensic exams are offered through Baptist Health in Richmond or University of Kentucky Hospital in Lexington.

SANE Interview – This auditor called Baptist Health and verified they offer forensic exams to inmates are Lee Adjustment Center. A local rape crisis center is contacted for victim advocate services through the Rising Center.

d-e) KDOC policy 14.7 Sexual Abuse Prevention states "The alleged victim shall be offered victim advocate services. If requested, the advocate service shall be contacted and given the appropriate information in order to assist the victim through the forensic examination and investigation process."

Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "As requested by the victim, either the victim advocate, a qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals." LAC reported on the PAQ that qualified staff would not be used. Only victim advocates through the KASAP and Rising Center.

A Victim Advocate Memorandum of Understanding with the Kentucky Association of Sexual Assault Programs was provided for review. The scope of services KASAP agrees to provide confidential emotional support services to victims of sexual abuse in the Kentucky Department of Correction which includes the Lee Adjustment Center. This can include VA services at the forensic exam, during investigative interviews and in person visits with the victim. The contract was effective until June 30, 2024.

Victim Advocate Interview – The 800 number provided to LAC inmates was called. The call goes to the KRCC Crisis Center. The staff that answered said they gather the information from the inmate and forward it to the Rising Center. The Rising Center will then contact the facility to request an telephone conversation with the victim. This auditor called the number for the Rising Center and spoke to a supervisor as the Rising Center PREA Coordinator was unavailable. She said the Rising Center would provide victim advocate services to inmates at the Baptist Health Hospital. If the inmate had to go to Lexington, a local rape crisis center called Ampersand, would provide services.

Tour Observations – Posters were seen in inmate housing areas that provided information for the Rising Center victim advocate organization.

f) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "Criminal Investigations into allegations of Sexual Abuse will be conducted by the Kentucky State Police in accordance with the Code of Federal Regulations, Title 28, Part 115.21, Evidence Protocol and Forensic Medical Examinations. The investigating agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions."

LAC provided a letter from the Kentucky State Police Academy Commander to the KDOC Commissioner that states all KSP Troopers receive training in sexual abuse evidence collection at crime scenes, to include in a confinement setting. The training also includes the criteria and evidence to substantiate a case for prosecution. The facility contacted the Kentucky State Police in four cases of sexual abuse during the review period for potential criminal violations. In one case, the KSP determined the time frame allowed for the collection of physical evidence and ordered the inmate sent to the hospital for a forensic exam.

Findings: Based on policies, documents reviewed, and interviews, the facility meets the standard.

# 115.22 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

a) KDOC policy 14.7 Sexual Abuse Prevention states "All allegations of sexual abuse and sexual harassment shall be promptly, thoroughly and objectively investigated, including third-party and anonymous reports." CoreCivic LAC policy 14-07-01 Sexual Abuse Prevention states "The Warden shall ensure that an administrative investigation and a referral for a criminal investigation, where appropriate, are completed for all allegations of sexual abuse and sexual harassment."

Agency Head Designee Interview – The Vice President said all reports of sexual abuse that appear to be criminal are referred to an agency with the authority to conduct those investigations. CoreCivic investigators will conduct the administrative investigations. The CoreCivic investigator will work with the outside agency as requested.

Document Review – Ten investigations were reviewed. One was sexual harassment and nine were sexual abuse. Four were referred to the Kentucky State Police for investigation of possible criminal violations. Administrative investigations were completed by LAC facility investigators for all ten investigations.

b-c) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "Criminal Investigations into allegations of Sexual Abuse will be conducted by the Kentucky State Police in accordance with the Code of Federal Regulations, Title 28, Part 115.21, Evidence Protocol and Forensic Medical Examinations."

The KDOC Website and CoreCivic website both have the PREA policy that contains a section that requires allegations of sexual abuse and sexual harassment be referred for investigation to either the CoreCivic investigators or outside law enforcement.

Investigator Interview – The investigator said designated facility investigators conduct all administrative investigations of sexual abuse and sexual harassment. A potential criminal violation is referred to the Kentucky State Police for investigation. Referrals to the KSP Are documented in the administrative investigation report.

Based on policies, documents reviewed, and interviews, the facility meets the standard.

### 115.31 Employee training

**Auditor Overall Determination:** Exceeds Standard

### **Auditor Discussion**

a) KDOC 14.7 Sexual Abuse Prevention policy requires all staff to complete training annually that covers all ten components of the standard. The CoreCivic LAC 14-07-01 policy states "All CoreCivic facility employees shall receive training on the CoreCivic and Kentucky Department of Corrections zero-tolerance policy for sexual abuse and sexual harassment."

PREA Training Curriculum – The PREA training curriculum was provided for review. The ten topics required in the standard were covered in the training. The training

covers zero-tolerance, rights of inmates and staff, dynamics of abuse, staff communication with transgender inmates, avoiding inappropriate relationships, signs of abuse, victim reactions, and response to reports.

Training Records review – The training records for 18 randomly selected staff were requested and reviewed. All18 were completed in the last year and the prior year. .

Random Staff Interviews – Staff were asked what topics were covered in the PREA training. Most staff could recall most of the topics covered including: zero-tolerance, rights to be free from sexual abuse and retaliation, their responsibilities when an inmate reports an incident to them, Dynamics of sexual abuse, signs of sexual abuse, avoiding inappropriate relationships and how to protect evidence. All staff that had worked at LAC for two years or more said the training was completed annually.

b) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "In addition to the general training provided to all employees, all full and part-time Employees transferring to a facility that houses a population whose gender is different from their previously assigned facility shall receive additional training specific to the population of the newly assigned facility."

Document Review – The annual PREA training curriculum provided information to staff about the differences between working in a male or female inmate population in the event the staff were to go work at a female facility.

- c) The annual training covers the refresher information requirement in the standard. However, refresher information is provided in staff brochures, posters throughout the facility and quick reference cards are given to all staff with information about first responder duties and LGBTI terminology.
- d) KDOC 14.7 Sexual Abuse Prevention policy states "Staff members completing the training listed in C (1) and (2) shall sign a document acknowledging that they understand the training they have received."

Document Review – A PREA Training Acknowledgement form is signed by staff when they complete the PREA training. The form has a statement about receiving and understanding the training that staff are agreeing to by signing the form.

Documentation supported an annual training requirement that exceeds the annual requirement of the standard.

115.32	Volunteer and contractor training	
	Auditor Overall Determination: Exceeds Standard	
	Auditor Discussion	
	a) KDOC 14.7 Sexual Abuse Prevention policy states "As required by 28 C.F.R. § 115.32, all Volunteers and Contractors who have contact with offenders shall be	

trained annually on the following:

- a. The Department's policy of zero-tolerance regarding sexual abuse and sexual harassment and how to report such incidents.
- b. Their responsibilities under the department's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.
- c. Training shall be based on the level and amount of contact the Volunteer or Contractor has with offenders."

Volunteer Interview – A volunteer was asked to describe what information he received from PREA training. He provided an appropriate definition for zero-tolerance of sexual abuse and sexual harassment. If he received a report from an inmate, he would contact the Chaplain and tell a custody officer. He knew not to tell anyone else about the information. He said he received the training annually in a virtual format. The Chaplain goes over the training with him as well. When he completed the training, he signed an acknowledgement form.

Contract staff Interview – Two contract staff were interviewed. Each from different vendors. Both could describe an appropriate definition of zero tolerance. Both would contact their immediate supervisor and the shift supervisor if an inmate were to report an incident of sexual abuse or sexual harassment or if they had a suspicion that an inmate was a victim of sexual abuse. Both knew how to protect evidence and would write a report of what happened. Both said they complete the training every year.

b) 26.1 Citizen Involvement, Volunteer policy requires volunteers to complete all annual training. Failure to complete annual training can result in removal from the volunteer list.

Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "The level and type of training provided to civilians/volunteers/contractors shall be based on the services they provide and level of contact they have with offenders. All civilians/volunteers/contractors who have contact with offenders shall be notified of the CoreCivic zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents."

c) Volunteer and Contractor Training Records – Three contract staff and two volunteers were randomly selected for training record review. The PCM provided training records for both volunteers and the seven contract staff.

Based on policies, documents reviewed, and interviews, the facility exceeds the standard.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

a-b) KDOC 14.7 Sexual Abuse Prevention policy states "During orientation at the Assessment and Classification Center and at 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."

Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "Upon arrival at the facility, all offenders shall be provided with written information regarding sexual abuse prevention and reporting (e.g. offender handbook, CoreCivic 14-7-1AA Preventing Sexual Abuse brochure, etc.)."

PREA Education Staff Interview – The Case Managers provide inmates with a comprehensive PREA education when they arrive at the facility. One of the Case Managers was interviewed. She said she shows the PREA education video from the PRC to inmates in a group then goes over the inmate handbook and PREA brochure with them individually. She determines if the inmates have a disability or are LEP and provides accommodation based on the disability. A translator service is available for use if needed. The PREA brochure is available in Spanish or braille. She can provide TTY or Captel equipment for hearing impaired. She asks each inmate if they have any questions after going over the brochure with them. She has the inmate sign a document indicating they received the education.

Inmate Interviews – All inmates interviewed were asked if they were provided information about PREA when they arrived. Most said they were provided the information the same day they arrived or the next day. Some stated they were not given information, but signed a document that said they received and understood the PREA information. All knew there was a policy of zero-tolerance of sexual abuse and sexual harassment. All could remember more than one way to make a report of sexual abuse or sexual harassment.

d) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "In the event an offender has difficulty understanding provided information and/or procedures outlined in this policy, employees must ensure that such information is effectively communicated orally to such offenders on an individual basis. Auxiliary aids that are reasonable, effective, and appropriate to the needs of the offender shall be provided when simple written or oral communication is not effective."

Document Review - some inmate PREA education materials are translated to Spanish.

Inmate Interview – one inmate interviewed was LEP and needed the aid of a telephone interpreter for the interview. Via the interpreter – he said he was not provided an interpreter for the meeting with the Case Manager about the PREA. He was asked to sign a form and handed the material.

CORRECTIVE ACTION REQUIRED: The standard requires the staff to provide accommodations to inmates that have limited English proficiency to provide the PREA education so they can understand the information.

Corrective Action Completed: The Case Manager used a telephone interpreter to provide the PREA education to the LEP inmate again. Documentation of the reeducation with an interpreter was provided.

e) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "The facility shall maintain documentation of offender participation in educational sessions pertaining to sexual abuse and sexual harassment."

The PREA Brochure Acknowledgement forms were reviewed for thirty-seven inmates that completed the comprehensive PREA education either the same day of arrival or within the next day or two.

f) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "In addition to providing such education, the facility shall ensure that key information is continuously and readily available or visible to offenders through posters, offender handbooks, or other written formats."

The Inmate Handbook 10/21 is given to all inmates. All inmates acknowledged receiving one when they arrived during interviews. The facility has PREA posters with information on reporting sexual abuse or sexual harassment and posters providing information about victim advocate services posted throughout the facility that this auditor observed during the tour.

Based on policies, documents reviewed, tour observations, and interviews, the facility meets the standard.

# 115.34 | Specialized training: Investigations

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

a-b) KDOC 14.7 Sexual Abuse Prevention policy states "All employees who conduct sexual abuse investigations shall receive specialized training in conducting such an investigation in a confinement setting. The training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecution referral."

KDOC Specialized Investigations Training Curriculum – the investigations training curriculum was reviewed. The training included Miranda and Garrity warnings, Interviewing victims and suspects, report writing, evidence collection, investigation outcomes and prosecution referrals.

Investigator Interview – The investigator interviewed was asked to describe what the specialized investigation training covered. He said it covered evidence collection,

interviewing victims, report writing, what it takes to substantiate a case or refer for prosecution, and Miranda and Garrity warnings.

c) Training Certificates & Training Records were provided for every staff designated as a facility investigator. All staff that were involved in investigations in the last twelve months had completed the training.

Based on policies, documents reviewed, and interviews, the facility meets the standard.

## 115.35 Specialized training: Medical and mental health care

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

- a-b) KDOC 14.7 Sexual Abuse Prevention policy states "All full and part-time medical and mental health care practitioners who work regularly in the facility shall receive specialized training on the following:
- a. How to detect and assess signs of sexual abuse and sexual harassment.
- b. How to preserve physical evidence of sexual abuse.
- c. How to respond effectively and professionally to victims of sexual abuse and sexual harassment.
- d. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment."

Medical Staff Interview – The Health Care Director said the medical staff get the specialized medical training annually. The training covered how to detect signs of sexual abuse, how to protect evidence, how to respond to victims of sexual abuse, and what to do if she gets a report. She said the medical staff do not conduct forensic exams at the facility. She would arrange for a forensic exam at a hospital.

- c) Medical training transcripts were provided for the medical staff. All of the medical staff had completed the specialized training during 2022.
- d) PREA training acknowledgements were reviewed for six medical staff. All training was completed in the last year.

Based on policies, documents reviewed, and interviews, the facility meets the standard.

# 115.41 Screening for risk of victimization and abusiveness

#### **Auditor Overall Determination:** Meets Standard

#### **Auditor Discussion**

a-b) KDOC 14.7 Sexual Abuse Prevention policy states "An offender shall be assessed during intake screening within seventy-two (72) hours of arrival at the Assessment and Classification Center and upon each transfer to another facility. Each objective risk screening shall include a review of any history of sexual abuse-victimization or sexually predatory behavior. The assessment report shall be completed in the Kentucky Offender Management System (KOMS)."

Risk Screening Staff Interview – A Case Manager was interviewed that completed risk assessments on inmates at intake. She said she meets with each inmate on the same day or the next day after their arrival at the facility to conduct an interview to gather information from the inmate for completing the assessment.

Inmate Interviews – Most inmates interviewed could recall being asked questions about their gender identity, sexual orientation, prior victimization, and vulnerability in a private meeting with the Case Manager the same day or day after they arrived.

- c-d) KDOC 14.7 Sexual Abuse Prevention policy states "The intake screening shall consider, at a minimum, the following criteria to assess an inmate for risk of sexual victimization:
- a. Whether the offender has a mental, physical, or developmental disability;
- b. The age of the offender;
- c. The physical build of the offender;
- d. Whether the offender has previously been incarcerated;
- e. Whether the offender's criminal history is exclusively nonviolent;
- f. Whether the offender has prior convictions for sex offenses against an adult or child;
- g. Whether the offender is or is perceived to be lesbian, gay, bisexual, transgender, intersex, or gender nonconforming;
- h. Whether the offender has previously experienced sexual victimization; and
- i. The offender's own perception of vulnerability."

The policy requires the risk assessment to cover all factors in the standard.

Risk Screening Instrument – The risk screening instrument was reviewed for thirty-seven inmates. It contained questions about prior victimization both in an institution and in the community; mental, physical, or developmental disabilities; age; physical build; convictions for sex offense against a child or adult; LGBTI or gender nonconforming identification or perception; first incarceration; violence in criminal

convictions; and vulnerability for the risk of victimization.

Risk Screening Staff interview – The Case Manager interviewed was asked to describe the factors considered for the risk of victimization. She said there are questions about prior victimization, sexual orientation and gender identity, prior sex offense convictions, age, physical build, and vulnerability.

- e) KDOC 14.7 Sexual Abuse Prevention policy states "The intake screening shall consider, at a minimum, the following criteria to assess an offender for risk of being sexually abusive:
- a. Prior acts of sexual abuse,
- b. Prior convictions for violent offenses, and
- c. History of prior institutional violence or sexual abuse, as known to the Department of Corrections."

The policy requires the risk screening to assess for the factors required in the standard.

Risk Screening Instrument Review – the risk screening instrument was reviewed and found to have questions regarding prior perpetration of sexual abuse, institutional conduct violations for sexual conduct and violence, and prior sex offense or violent offense convictions for determining the potential for abuse.

Risk Screening Staff Interview – The Case Manager interviewed was asked what factors are considered for determining if inmates are potential abusers. She said the risk screening has questions about prior perpetration; sex offense convictions; convictions for violent offenses; conduct for sexually inappropriate behavior and violence to determine if an inmate is a potential abuser.

f) KDOC 14.7 Sexual Abuse Prevention policy states "Within 30 days of arrival to each facility, the offender's risk level shall be reassessed based upon any additional information received since the intake screening." "Reassessments shall include consultation with the inmate."

Risk Screening Staff Interview – The Case Manager interviewed said she meets with the inmate again prior to 30 days to ask follow up questions about sexual orientation, prior victim and vulnerability as part of the assessment review. I informally spoke to another Case Manager and asked if there was a meeting with the inmate for the 30 day review of the assessment. The staff said she meets with the inmate and asks if anything changed from the intake meeting.

Inmate Interview – all thirty-seven inmates were asked if anyone met with them a second time to ask questions about their sexual orientation, gender identity or if they feel vulnerable. Only a few could remember being asked these questions a second time.

Risk Screening Re-assessment – A review of the risk assessments for thirty-seven

inmates also included a review of the re-assessment or review of the intake assessment. This auditor was provided with case notes for each inmate that usually had a not that said 30 day review, no changes. There was no indication that the inmate was asked re-affirming questions to determine if there had been any change.

CORRECTIVE ACTION REQUIRED: From the interviews and document review, it doesn't appear the inmates are being asked re-affirming questions about prior victimization, sexual orientation, gender identity, or vulnerability at the 30 day review of the assessment as required by an FAQ from 2014 and revised in 2019. The staff completing the risk screening will need additional training and better documentation of the meeting with the inmate at the 30 day review.

**Corrective Action Completed:** Case Managers attended training on May 4, 2023 for completing the risk assessments that included information about conducting the 30 day review/reassessment. After the training the PCM provided additional guidance to the Case Managers regarding asking inmates reaffirming questions and documenting the questions and answers in the case notes. Case notes were provided for 30 day reviews completed after the training. All documents reviewed contained notes for questions about prior victimization, feelings of vulnerability and LGBTI identification.

g) KDOC 14.7 Sexual Abuse Prevention policy states "A reassessment shall also occur when any new information is learned that bears on an offender's propensity for sexual victimization or abusiveness, such as an incident or new disclosure of sexual abuse."

Document Review – Two PREA investigations were substantiated for sexual abuse. A risk screening re-assessment was completed within a week after the notification of outcome was provided to the victims. These were provided for review.

Risk Screening Interview - The Case Manager said she would do a new risk assessment if there were an event that would change the prior assessment information, like a substantiated PREA incident.

h) KDOC 14.7 Sexual Abuse Prevention policy states "Offenders shall not be disciplined for refusal or nondisclosure of complete information in response to questions 1, 7, 8 or 9 asked in the risk assessment."

Risk Screening Interview – The Case Manager said inmates do not have to answer questions they are asked during the risk screening process.

i) KDOC 14.7 Sexual Abuse Prevention policy states "The dissemination of information related to and resulting from the assessment shall be controlled and limited to staff necessary to inform treatment plans and make security and management decisions regarding housing, beds, work, education and program assignments."

Risk Screening Interview – The Case Manager that performs risk screenings was asked if the information from the screening can be shared with other staff. She said only

authorized staff that need to know because it is confidential information.

PREA Coordinator Interview - The PREA Coordinator said risk assessments are secured in the inmates confidential record in the records office and in a software program with limited access for staff that are authorized access.

PREA Compliance Manager Interview – The PCM said access to information from the risk assessments is limited to Case Managers, Unit Manager and other executive staff.

Based on policies, documents reviewed, and interviews, the facility meets the standard.

## 115.42 Use of screening information

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

a-b) KDOC 14.7 Sexual Abuse Prevention policy states "The dissemination of information related to and resulting from the assessment shall be controlled and limited to staff necessary to inform treatment plans and make security and management decisions regarding housing, beds, work, education and program assignments."

PCM Interview – The PCM said when bed moves are completed, KOMS will alert staff if an inmate designated at high risk of victimization is being placed in a cell or bed location with an inmate designated high risk for perpetration of sexual abuse. The PCM provided a screen shot from KOMS that shows an alert as an example. He said the staff also use a paper form to document the bed movements that requires staff to look up the PREA assessment status of the inmate being moved and the inmates in the bed location in the area. A copy of the form was provided for review. The staff also consider the PREA flags when placing inmates in work and program assignments.

Housing Relocation Form – The Housing Relocation Form is used by staff that conduct bed moves or intake housing placement to document the inmate housing assignments. The form contains PREA flag information for the inmate being moved and the inmate that will be the cellmate or bunkie that staff fill in based on the PREA flag information in KOMS. This forces staff completing the housing assignment to review compatibility.

c, d, e) KDOC Policy 14.8 Lesbian, Gay Bisexual, Transgender, and Intersex Offenders provides the procedures for determining what gender of facility a transgender or intersex inmate will be placed. The policy requires a Therapeutic Level of Care committee to review the facility assignment of transgender and intersex offenders. The review includes input from medical and mental health staff in consultation with the Classification Director. "A determination shall not be made based on genital

status." The policy requires an individual assessment that considers classification's housing decision; the offender's documented choice of whether a male or female facility is safest for him or her; the inmate's physical characteristics; whether the inmate identified as male or female; the inmates prior institutional history; prior criminal history; and relevant information obtained from security, medical or mental health staff. It also requires staff to "give serious consideration to the inmate's own views concerning his or her safety." If the transgender or intersex inmate, already housed in a facility, requests transfer to the other gender facility, an institutional treatment team will complete the individualized assessment and provide a recommendation to the TLOC committee. If the TLOC doesn't recommend the transfer, a treatment plan is developed and provided to the KDOC Commissioner. If a transfer is recommended, the TLOC will send the recommendation to an Administrative Review Team for final decision. This team consists of the Commissioner, Deputy Commissioner, General Council member, and other staff assigned by the Commissioner.

KDOC 14.7 Sexual Abuse Prevention policy states "Placement decisions regarding lesbian, gay, bisexual, transgender and intersex (LGBTI)offenders shall be individualized."

Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "In deciding whether to house a transgender or intersex offender in a male housing unit/area or a female housing unit/area, or when making other housing and programming assignments for such offenders, the facility shall consider the transgender or intersex offender own views with respect to his/her own safety and shall consider (115.42 (e)) on a case-by-case basis whether such a placement would ensure the offender health and safety. Consideration should also be given as to whether the placement would present management or security problems. Placement and programming assignments for each transgender or intersex offender shall be reassessed at least twice each year to review whether any threats to safety were experienced by the offender."

The Lee Adjustment Center role in this process is when a transgender inmate requests a transfer to a female facility. LAC would gather a treatment team to complete the above individual assessment and forward a recommendation to the KDOC TLOC.

PCM Interview – The PCM said Case Managers meet with transgender inmates every 6 months after their intake assessment to inquire about their safety in housing, programs and jobs. If the transgender inmate requests a transfer to a female facility, the Case Manager will notify him. Transgender inmates can also make the transfer request through the Mental Health Director as well. The facility treatment team would meet to do an assessment of the transgender inmate's request and record. The treatment team would then make a recommendation to the Therapeutic Level of Care committee in KDOC. He said there has been no request for a transfer by a transgender inmate during the review period.

Risk Screening Staff Interview – One of the Case Managers that completes risk screenings was interviewed. She said she meets with inmates that identify as

transgender every 6 months ore more if needed. She asks if the transgender inmate has any concerns with safety in housing, work or programs. She informs the PCM when an inmate identifies as transgender at intake.

Transgender Inmate Interviews – Eight transgender inmates were interviewed. All that had been at the facility for more than six months said they had meetings with the Case Manager to ask about any safety concerns they might have. None of the eight said they had requested a transfer to a female facility. Several described a transgender inmate support group the Mental Health Director leads.

f) PCM Interview – The PCM said inmates that identify as transgender are offered separate shower times in all housing open population housing units during count time. RHU has separate showers and inmates are only showered one at a time in segregation.

Risk Screening Staff Interview – inmates that identify as transgender at the risk screening interview are asked if they want to shower separately.

Transgender Inmate Interview – All eight transgender inmates interviewed reported being allowed to shower at separate times from the rest of the housing unit. Usually this was during count time when all inmates are on their bunks or held in their cells.

g) PCM Interview – The PCM said inmates that identify as transgender were placed in housing the same as other inmates. The facility has no housing unit dedicated to transgender inmates.

Transgender Inmate Interviews – All transgender inmates interviewed were asked if they thought their housing assignment was based on their identification as transgender. None of them thought it was based on their gender identity.

Based on policies, documents reviewed, and interviews, the facility meets the standard.

# 115.43 Protective Custody

**Auditor Overall Determination: Meets Standard** 

### **Auditor Discussion**

a) KDOC 14.7 Sexual Abuse Prevention policy states "Victims of sexual abuse or those at high risk for abuse shall not be placed in involuntary protective custody or segregation unless all available alternatives have been assessed and documented and are not available. The facility may only hold the offender for twenty –four (24) hours in involuntary segregation while completing the assessment, and if the placement has to continue, must document why there are no other available alternatives and provide access to programs, education, work and other privileges to the extent possible."

Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "Offenders at high risk for sexual victimization shall not be placed 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. If a facility cannot conduct such an assessment immediately, the facility may hold the offender in involuntary segregated housing for less than twenty-four (24) hours while completing the assessment."

The facility reported on the PAQ no inmates at risk of sexual victimization being placed in segregation during the review period.

- b) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "Offenders placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities is restricted, the facility shall document the following:
- i. The opportunities that have been limited;
- ii. The duration of the limitation; and
- iii. The reasons for such limitations"
- c) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "Segregated housing shall be used only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of thirty (30) days."

The facility reported on the PAQ no inmates at risk of sexual victimization were placed in segregation for more than 30 days during the review period.

- d) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "If involuntary segregated housing is warranted as outlined above in J.2.b., documentation of such action shall clearly specify:
- i. The basis for the facility's concern for the offender safety; and
- ii. The reason why no alternative means of separation can be arranged."
- e) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "Every thirty (30) days, a review of each offender status will be conducted to determine whether there is a continuing need for separation from the general population."

Warden Interview – The Warden said if the staff that complete the risk assessment at intake feel an inmate might be at extremely high of a risk of victimization in general population, they would review all alternatives before placing them in RHU. He has not had to place an inmate in segregation that was high risk of victimization during the revie period.

Segregation Staff Interview – The segregation housing unit (RHU) supervisor was interviewed. He said there were no inmates placed involuntarily in segregation

during the review period that were determined to be too vulnerable to sexual abuse in population. Restrictions to programs, privileges, education and work opportunities would be documented. A review of the placement is conducted every 30 days after the initial placement review.

Based on policies, documents reviewed, and interviews, the facility meets the standard.

### 115.51 Inmate reporting

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

a) KDOC 14.7 Sexual Abuse Prevention policy states "An offender may report a sexual offense to any staff member and may also report using any of the listed multiple internal and external reporting methods, whether verbally, in writing, anonymously or a via a third party."

Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "Offenders shall be encouraged to immediately report pressure, threats, or instances of sexual abuse or sexual harassment, as well as possible retaliation by other offenders or employees for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents."

LAC provides inmates several ways to make a report. To make a report Inmates can:

- · Call a posted number for the Kentucky Association of Sexual Assault Programs (KASAP) twenty-four (24) hour crisis hot-line
- · Call the posted internal reporting number for LAC
- Verbally telling any employee
- · Forward a letter, sealed and marked "confidential", to the Warden or any other employee
- · Contact a family member or individual outside of the facility who can notify facility staff
- Submit a request to meet with Health Services staff and/or reporting to a Health Services staff member during sick call
- · Forward a letter to the CoreCivic PREA Coordinator

All of these reporting methods are provided in the Inmate Handbook.

Random Staff Interviews – Staff interviewed were aware of several ways that an inmate could privately report sexual abuse and sexual harassment. All said the

inmate could come to any staff to make a verbal report or call a number on the offender phones.

Inmate Interviews – Inmates were asked how they could privately report sexual abuse or sexual harassment. All knew they could call on the inmate phones to numbers they see on posters by the phones. All said they felt like they could go to any staff to make a verbal report. Most knew they could write to staff or file a grievance. Most thought they could have their family contact the facility to make a report. Some knew they could make a report through the tablets issued to them. One inmate showed this auditor how to make that report. The inmate clicked the button to make a report on a hotline. It rang and was answered with a recorded message to leave a detailed message on a voicemail. The auditor left a message.

Tour Observations – During the tour of the facility, PREA report posters were seen on the walls next to the inmate phones in day rooms in every housing unit. The posters were large enough print and placed on the wall low enough that inmates would be able to read them. This auditor asked an inmate at random to use the inmate phone on the wall to make a report to one of the numbers on the posters. The call went through to a voice message and functioned as it should. During an inmate interview, this auditor asked the inmate to place a call to the PREA hotline on the inmate's tablet. The call went through to a voicemail and a message was left. The PCM received both voicemails and sent them to the auditor.

b) The LAC Inmate Handbook provides information about how to report to an external entity, Kentucky Justice Cabinet, by dialing a number from the inmate phones or having someone on the outside call a phone number.

PCM Interview - The PCM said external reports of sexual abuse and sexual harassment go to the Kentucky Justice Cabinet through the inmate phone system. Reports are immediately forwarded to him from the KJC.

c) KDOC 14.7 Sexual Abuse Prevention policy states "Staff members shall immediately report all knowledge, suspicions or information of an incident of a sexual offense within a Kentucky or other correctional facility."

The LAC Inmate Handbook provides information to inmates for reporting sexual abuse and sexual harassment to staff verbally, in writing, and through a third party.

Inmate Interviews – All inmates knew they could to make a PREA report to any staff verbally or in writing. When asked how to make an anonymous report, most inmates thought they could put in a written note with no name but didn't recall anyone telling them about anonymous reports. It is recommended that information about anonymous reports be added in the handbook.

Random Staff Interviews – All staff reported having a duty to accept verbal, anonymous and written reports of sexual abuse and sexual harassment from inmates and third parties like family or friends of inmates.

d) KDOC 14.7 Sexual Abuse Prevention policy "Staff can privately report

offender sexual abuse and sexual harassment directly to the warden or deputy warden of the facility, or by contacting the PREA hotline at the number posted in staff break areas."

Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "Employees may privately report sexual abuse and sexual harassment of offenders by forwarding a letter, sealed and marked "confidential", to the Warden." "CoreCivic employees may report PREA allegations involving staff on offender sexual abuse and harassment to the CoreCivic Ethics Line at 1-866-757-4448. This line is available 24 hours a day seven (7) days a week."

Core Civic policy 03-01-101AA Code of Ethics provides staff information about the Ethics Line and how to make anonymous reports that go to a facility Ethics and Compliance Officer.

Random Staff Interviews – All staff interviewed knew how to make a private report to their supervisor, the PCM or facility investigators. Many mentioned using the ethics line.

Based on policies, documents reviewed, and interviews, the facility meets the standard.

### 115.52 Exhaustion of administrative remedies

**Auditor Overall Determination:** Meets Standard

#### **Auditor Discussion**

a) KDOC 14.6 Grievances policy states "Offenders who report sexual abuse via the offender grievance system shall have their report immediately forwarded to the Warden and it shall be assigned to a designated, trained investigator for a full investigation."

KDOC 14.7 Sexual Abuse Prevention policy states "Offenders who report sexual abuse via the offender grievance system shall have their report immediately forwarded to the warden and it shall be assigned to a designated trained investigator for a full investigation. The DOC does not have administrative procedures to address offender grievances regarding sexual abuse through the grievance system."

Though LAC and KDOC have a grievance policy and procedures, LAC claims exemption from this standard. FAQ July 2022 for 115.52 allows for an agency that has a grievance policy to claim exemption if the inmates are informed grievances reporting sexual abuse will not be processed through the grievance process and will be referred for investigation instead. A review of the Inmate Handbook found there was no information about grievances reporting sexual abuse provided.

PCM Interview - The PCM said if an inmate files a grievance reporting sexual abuse, it

will not be processed through the grievance procedures and referred for investigation to facility investigators.

CORRECTIVE ACTION REQUIRED: The KDOC policy requires a grievance reporting sexual abuse to be referred for investigation without going through the grievance process. The LAC practice follows the policy but does not meet the requirements of the FAQ. LAC needs to communicate to the inmate population that grievance reporting sexual abuse will not be treated as a grievance and referred for investigation.

**Corrective Action Completed:** On May 18, 2023, the PCM issued a memorandum providing the inmate population notice of the change in the Inmate Handbook to match the KDOC grievance policy that says a grievance reporting sexual abuse will not be processed through grievance procedures and will be immediately forwarded to facility Investigators to start an investigation. This memorandum was posted on bulletin boards in inmate housing units and sent to all inmates via inmate tablets. Documentation was provided to verify the message on the tablets.

Based on policies, documents reviewed, and interviews, the facility meets the standard.

### 115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

a) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention policy states "Offenders shall be provided access to outside victim advocates for emotional support services related to sexual abuse." "Such information shall also be included in the facility Offender Handbook. The facility shall enable reasonable communication between offenders and these organizations and agencies, in as confidential a manner as possible."

Inmate Handbook – The LAC Inmate Handbook informs inmates they can get access to outside victim advocates that can provide confidential emotional support services for victims of sexual abuse.

Victim Advocate Handout – a brochure was provided for review that is given to inmates. It provides information about victim advocate services through the Rising Center. A toll free number was provided. Inmates would have to go to their Case Manager to call the number as it is not accessible from the offender phone system.

Tour Observations – During the facility, posters for the Rising Center were seen in housing unit next to the PREA posters. These posters provided information to inmates about services for victims of sexual assault. There phone numbers provided as well as the mailing address for the Rising Center. The signs were printed in bright

colors and a print large enough for inmates to see at the level of posting.

Victim Advocate Interview – This auditor called the toll free number on the handout provided to the inmates. It went to an answering service KRCC. The person that answered said they would take down the name of the victim and location, then provide that to the Rising Center. This auditor called the number for the Rising Center and spoke to a supervisor as the PREA Coordinator was unavailable. She said the Rising Center would provide victim advocate services to inmates at the Baptist Health Hospital. If the inmate had to go to Lexington, a local rape crisis center called Ampersand, would provide services. The Rising Center PREA Coordinator also comes to the facility to provide training to staff about the services they provide to inmate victims.

Random Inmate Interviews – Most inmates were aware there was an outside organization that provided services to victims of sexual assault.

Inmates that Reported Sexual Abuse Interviews – Inmates that reported sexual abuse said they offered a victim advocate either at the forensic exam or when the investigator interviewed them.

b) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention policy states "Offenders shall be informed, prior to giving them access, of the extent to which such communications shall be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws."

Rising Center Posters – the Rising Center Posters inform inmates communications with the Rising Center are Confidential and privileged. This is printed in bright yellow text on the bottom of the poster.

PCM Interview - LAC does not have inmates detained solely for immigration detainers. All of their inmates are sentenced by a Kentucky Court.

c) A copy of an MOU with the Kentucky Association of Sexual Assault Programs was provided for review. The MOU was effective until June 30 of 2024. The scope of services KASAP agrees to provide confidential emotional support services to victims of sexual abuse in the Kentucky Department of Correction which includes the Lee Adjustment Center. This can include VA services at the forensic exam, during investigative interviews and in person visits with the victim. The KASAP arranges services for LAC through the Rising Center.

Based on policies, documents reviewed, tour observations, and interviews, the facility meets the standard.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

a) The Kentucky DOC and CoreCivic have a number on their PREA webpage that people can call for third party reports. A copy of both webpages were provided in the PAO.

Tour Observations – Posters were seen in housing units and in the visiting room with the phone number a third party could call to make a report of sexual abuse or sexual harassment. The inmates could provide friends or family with the number to make a report on their behalf. The posters were easy to read and not damaged.

Inmate Handbook – The phone number for third party reports was published under Sexual Abuse Prevention and Intervention (PREA).

Inmate PREA Brochure – the phone number for third party reports is published in a brochure that is given to inmates during PREA education.

Inmate Interviews – Most Inmates were aware there was a number they could provide to their family or friends to make a report on their behalf.

Based on policies, documents reviewed, tour observations, and interviews, the facility meets the standard.

## 115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

a) KDOC 14.7 Sexual Abuse Prevention policy states "Staff members shall immediately report all knowledge, suspicions or information of an incident of a sexual offense within a Kentucky or other correctional facility. They shall also report any retaliation against someone who has reported such an incident and any knowledge of staff who neglect to report the above incidents or who, through neglect of duty or violation of responsibilities, may have contributed to an incident occurring."

Random Staff Interview – All staff interviewed said all staff must report any knowledge or suspicion of sexual abuse, sexual harassment or retaliation against a victim or witness. They all said the requirement was to report the information immediately.

b) KDOC 14.7 Sexual Abuse Prevention policy states "All information in an intake screening, incident report or investigation of a sexual offense shall be kept confidential except to the extent necessary to report to an appropriate supervisor, adequately investigate, provide treatment, or make security or management decisions."

Random Staff Interviews – Staff were asked if they could share information the inmate reports to them with anyone? All staff said they could only share that information with their immediate supervisor, investigators, the PCM, Assistant Warden or Warden. Most said it is a need-to-know rule.

- c) Medical Staff Interview The medical staff interviewed said the inmates are informed of the Duty to Report incidents of sexual abuse that occurred in an institution to facility investigators. The medical staff also inform the inmate again when they see them for medical appointments. During the tour of the facility I had an informal conversation with another medical staff about the duty to report sexual abuse. The staff was aware of their duty to report and the requirement to inform the inmates.
- d) PREA Coordinator Interview There are no inmates under 18 at LAC. If the facility were to have a Vulnerable Adult victim of sexual abuse, a notification to law enforcement and the KDOC would trigger their notification to other state agencies as required.

Warden Interview - The Warden said if a report of sexual abuse is received from an inmate that is considered a vulnerable adult, they would contact the PREA Coordinator for CoreCivic and KDOC as well as the Adult Protective Services.

State Law Research – The state of Kentucky has a vulnerable adult statute KRS 209.020. The statute requires the facility to contact the Kentucky Department for Community Based Services/Adult Protective Services to report abuse of a vulnerable adult.

e) KDOC 14.7 Sexual Abuse Prevention policy states "Notifications for the purpose of an investigation shall be immediately made to the designated facility or agency investigator. In addition, all allegations of sexual abuse that involve potentially criminal behavior shall be referred for criminal investigation to the Kentucky State Police (KSP)."

Warden Interview – The Warden said reports of sexual abuse are required to be referred to facility investigators and then Kentucky State Police if there is a potential criminal violation.

Investigation Report review – a review of the sexual abuse investigations found that reports were forwarded to facility investigators immediately. In some cases, the facility investigators referred the case to the KSP once information was gathered that appeared to be a potential criminal violation.

Based on policies, documents reviewed, and interviews, the facility meets the standard.

115.62	Agenc	y protection duties	
	Audito	r Overall Determination: Meets Standard	
	Auditor Discussion		
	a)	KDOC 14.7 Sexual Abuse Prevention policy states "Upon learning that an	

offender was sexually abused, the staff member shall immediately ensure the safety of the alleged victim while reporting the information to the shift supervisor. The shift supervisor shall activate the coordinated response plan and ensure the following steps have been taken:

a. The separation of the alleged victim and perpetrator."

LAC reported not having any incidents where an inmate was in substantial risk of imminent sexual abuse during the review period.

Agency Head Interview – The Vice President said staff are required to take immediate action to protect an inmate is in substantial risk of imminent sexual abuse by removing the inmate from the area or individuals where risks may be stemming from.

Warden Interview – The Warden said if an inmate was in substantial risk of imminent sexual abuse, they would separate the inmate from the perpetrator and move the inmate to another open population housing unit if possible or offer PC in RHU if the inmate does not feel safe in population. In the case of a staff perpetrator, staff would be removed from contact with the inmate.

Random Staff Interview – all staff said they would keep the inmate with them if there was a substantial risk of imminent sexual abuse. They would contact the shift supervisor or PCM immediately and bring the inmate to their office or another location that is safe.

Based on policies, documents reviewed, and interviews, the facility meets the standard.

## 115.63 Reporting to other confinement facilities

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

a-c) KDOC 14.7 Sexual Abuse Prevention policy states "Within seventy-two (72) hours of receiving an allegation that an offender was sexually abused while confined at another facility, the Warden shall notify the head of the facility where the alleged incident occurred. The notification shall be documented."

Warden Interview – The Warden said he has not received a report from an inmate at LAC about an incident of sexual abuse that occurred at another facility during the review period.

d) KDOC 14.7 Sexual Abuse Prevention policy states "All allegations received from other facilities shall be investigated."

Agency Head Interview - These reports are usually received by the facility. If the

PREA Coordinator receives a report, it is forwarded to the identified facility for investigation. If the facility received a report from another facility about an incident that occurred at the receiving facility, it is entered into the system and PREA protocols are followed, including assigning it for investigation.

Warden Interview – The Warden said there was one report of alleged sexual abuse that was received from another facility during the review period. The alleged incident was from 2009 and very little information was provided by the victim. The information was given to the facility investigator for investigation.

Document Review – A memorandum was provided from the PCM/Investigator to the Warden referencing a report from another facility that did not have enough information to investigate. There was no investigation report completed per the investigator.

CORRECTIVE ACTION REQUIRED: Investigations are required to be completed in accordance with 115.71, that includes documenting the investigation in a written report. The facility will need to re-investigate and write a written report of the incident that was reported during the review period by a former inmate at another facility.

**Corrective Action Completed:** The sexual abuse report was re-investigated and an investigation report was provided that documented the investigation.

Based on policies, documents reviewed, and interviews, the facility meets the standard.

### 115.64 Staff first responder duties

**Auditor Overall Determination: Meets Standard** 

### **Auditor Discussion**

- a) KDOC 14.7 Sexual Abuse Prevention policy section G Initial Reporting and Staff First Responder Duties outline the first responder policy for allegations of sexual abuse.
- a) 2-3) The policy states "Upon learning that an offender was sexually abused, the staff member shall immediately ensure the safety of the alleged victim while reporting the information to the shift supervisor. The shift supervisor shall activate the coordinated response plan and ensure the following steps have been taken:
- a. The separation of the alleged victim and perpetrator.
- b. The security and protection of any crime scene to keep potential evidence in place for examination and investigation.
- c. Notifications made to the warden, investigator, and other designated agency and

facility leadership and all required incident reporting procedures.

- d. The only persons permitted to enter a secured crime scene shall be Kentucky State Police, the assigned investigator or medical staff as needed.
- e. A log shall be maintained of anyone entering the crime scene and at what time he entered and exited. Anyone entering the crime scene shall be videotaped as additional documentation.
- f. The area shall remain secured as a crime scene until verification of a completed investigation and released by the investigating authority."
- a) 4-5) "If the incident occurred within the previous ninety-six (96) hours, the alleged victim and alleged perpetrator shall not take any actions that could destroy physical evidence which includes: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating."

Investigation Report Review - LAC investigated seven incidents of sexual abuse during the review period. In six of those incidents the first responder was a security staff member that separated the victim from the abuser. Only one of those incidents was within a time frame that allowed for the collection of physical evidence and staff security first responders were able to protect evidence as required.

One of the seven incidents the first responder was a non-security staff member. The non-security staff member could not ask the victim to not take any actions that might destroy evidence because the incident was beyond the time frame to allow for physical evidence collection. The non-security staff member notified security staff (shift supervisor) of the reported sexual abuse.

Findings: Based on policies, documents reviewed, and interviews, the facility meets the standard.

## 115.65 Coordinated response

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

The Lee Adjustment Center provided the Sexual Assault Action Plan for review. The plan was reviewed and found to contain information pertaining to the role and actions in response to incidents of sexual abuse for first responders, medical and mental health staff, investigators, Kentucky State Police, and facility executive staff. The plan describes the procedures to follow once a report of sexual abuse is received to include reporting to appropriate staff, evidence protection and collection, investigation that involves coordination between facility investigators and Kentucky State Police, and medical and mental health response and aftercare.

Findings: Based on policies, documents reviewed, the facility meets the standard.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The staff that work for CoreCivic LAC do not have a collective bargaining unit. LAC can separate staff from a victim as is necessary. Therefore this standard is not applicable.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	a) KDOC 14.7 Sexual Abuse Prevention policy states "Retaliation by or against any party, staff or offender, involved in a complaint or report of sexual abuse or sexual harassment shall be strictly prohibited. Retaliation in and of itself, shall be grounds for disciplinary action and will be investigated." "The PREA Compliance Manager at each facility shall be responsible for monitoring retaliation."
	b & e) KDOC 14.7 Sexual Abuse Prevention policy states "Emotional support services shall be provided as well as appropriate measures taken to protect any individual who expresses a fear of retaliation."
	Agency Head Interview – The Vice President said retaliation monitoring is provided for both inmates and staff with meetings every 30 days up to 90 days. Staff look for actions that can be perceived as retaliation such as housing or job changes for inmates or shift changes for staff. The victim of sexual abuse or sexual harassment, witnesses and any other individual involved in reporting the incident will be monitored for retaliation.
	Warden Interview – We keep the victim separate from the abuser and the PCM conducts retaliation monitoring. They can move inmates or staff that are retaliating against a victim. They can also do a housing change if the victim is concerned with several inmates retaliating.
	Staff Designated Retaliation Monitoring – The PCM said in cases of sexual abuse he has an initial meeting with the victim and then meets with them every 30 days up to 90 days or more if needed. He meets with the victim once a month. The inmate can contact him if there are concerns between meetings. He can move the victim if there are concerns with other inmates in the housing unit; he can offer the victim PC in RHU; move, discipline or suspend staff if there is evidence about retaliation. He can refer the victim to mental health if there are concerns with fear of retaliation.

Inmates that Reported Sexual Abuse – Two inmates that reported sexual abuse that were interviewed said they had meetings with the PCM for retaliation monitoring once a month. Neither reported any concerns.

c-d) KDOC 14.7 Sexual Abuse Prevention policy states "Monitoring shall occur for at least ninety (90) days following an allegation of sexual abuse or sexual harassment. In cases when monitoring offenders, periodic status checks shall be conducted by the PREA Compliance Manager as needed, but at least once every thirty (30) days. Status checks shall be conducted more often if concerns are expressed by the offender."

Staff designated Retaliation Monitoring – The PCM said he reviews housing assignments, jobs, discipline reports in addition to meeting with the inmate victim or witness. He also checks with the Unit Manager for concerns as well. The PCM said there were no incidents or appearances of retaliation during the review period. If the victim did report retaliation to him, he would do an investigation based on the report.

Document Review – Retaliation monitoring forms were provided for review for all incidents of sexual abuse. The forms provide the incident date and the date the monitoring begins. There is a checklist of concern the inmate may have and protection measures employed at each meeting. The protection measures include housing unit change, facility transfer, Removal of alleged abuser, emotional support services offered. The reported concerns can be disciplinary report, housing unit change, program change, work reports/assignment. There is a column for each meeting from the initial to the 90 day meeting. There were also notes provided with the form that summarize the meeting. The monitoring was well documented and started the same dat as the investigation or within a few days after.

f) KDOC 14.7 Sexual Abuse Prevention policy states "Monitoring shall cease if the investigation determines that the allegation is unfounded."

Findings: Based on policies, documents reviewed, and interviews, the facility meets the standard.

## 115.68 Post-allegation protective custody

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

a) KDOC 14.7 Sexual Abuse Prevention policy states "Victims of sexual abuse or those at high risk for abuse shall not be placed in involuntary protective custody or segregation unless all available alternatives have been assessed and documented and are not available. The facility may only hold the offender for twenty –four (24) hours in involuntary segregation while completing the assessment, and if the placement has to continue, must document why there are no other available alternatives and provide access to programs, education, work and other privileges to

the extent possible."

Warden Interview – The Warden said if an inmate that reports sexual abuse doesn't feel safe in an open population housing unit and there are no safe alternatives, the inmate can request and be reviewed for protective custody. Segregation is only used as a last choice. If the inmate cannot go back in population, we look at a possible transfer to another facility.

Segregation Staff Interview – The segregation housing unit (RHU) supervisor was interviewed. He said there were no inmates placed involuntarily in segregation during the review period that were determined to be too vulnerable to sexual abuse in population. Restrictions to programs, privileges, education and work opportunities would be documented. A review of the placement is conducted every 30 days after the initial placement review.

Document Review – No alleged victim was involuntarily placed in segregation after a report of sexual abuse in any of the sexual abuse investigations reviewed.

Findings: Based on policies, documents reviewed, and interviews, the facility meets the standard.

## 115.71 Criminal and administrative agency investigations

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

115.71

a) KDOC 14.7 Sexual Abuse Prevention policy states "All allegations of sexual abuse and sexual harassment shall be promptly, thoroughly and objectively investigated, including third-party and anonymous reports."

Investigator Interview – The Investigator said investigations can be initiated either on the same day of the report or within a few days depending on the circumstances of the incident.

b) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention policy states "Investigations into allegations of sexual abuse must be investigated by an employee who has received training in the investigation of sexual abuse cases."

Investigator Interview – The investigator interviewed was asked to describe what the specialized investigation training covered. He said it covered evidence collection, interviewing victims, report writing, what it takes to substantiate a case or refer for prosecution, and Miranda and Garrity warnings.

c) KDOC 14.7 Sexual Abuse Prevention policy states "Investigators shall:

- a. Gather and preserve all direct and circumstantial evidence, including any available physical and DNA evidence, and any available electronic monitoring data;
- b. Interview the alleged victim, suspected perpetrators, and witnesses; and
- c. Review prior complaints and reports of sexual abuse involving the suspected perpetrator."

Investigator Interview – The Investigator said he gathers the available information about the initial report to first responders and then plans to interview the victim with a pre-interview checklist. After the interview with the victim, he may review video evidence, interview potential witnesses, review the background before interviewing the alleged perpetrator.

Investigation Report Review - Ten investigations were reviewed. All provided information about interviews with the victim, witnesses, and the alleged perpetrator. There was a description of video evidence reviewed and physical evidence collected.

- d) Investigator Interview The investigator said if he discovers evidence of a possible criminal violation, he contacts the Kentucky State Police. The KSP would do compelled interviews. The KSP may consult with local prosecutors. He tries to make contact with the KSP for updates on the case.
- e) KDOC 14.7 Sexual Abuse Prevention policy states "The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the individual's status as an offender or staff member. An offender who alleges sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition to proceed with the sexual abuse investigation."

Investigator Interview – The Investigator said he sees all inmates and staff the same. Looks at their credibility on an individual basis and not based on status as an inmate or staff. He has never used a truth telling device on the victim.

f) KDOC 14.7 Sexual Abuse Prevention policy states "Administrative investigations that result in a substantiated case of sexual abuse shall include an effort to determine whether staff actions or failures to act contributed to the abuse."

Investigation File review – in the review of the ten investigation reports no statement about staff actions was found.

Investigator Interview – The Investigator said he looks at each case and determines if there was appropriate monitoring by staff and that staff responded appropriately to the report.

CORRECTIVE ACTION REQUIRED: The investigator said he was reviewing staff actions, but this was not documented in the written report. Investigators will be reminded to document reviewing staff actions in the investigation reports. Investigation reports for investigations completed in the next 30 days will be

provided for review.

**Corrective Action Completed:** One sexual abuse investigation was completed after the onsite audit and provided for review. The investigation report documented a thorough, prompt investigation where the victim was offered a victim advocate and a review to determine if staff actions or failure to act contributed to the sexual abuse was documented.

- g) Ten investigation case files were reviewed. All contained the administrative investigation report and related documents. The facility did not have an investigation report for the criminal cases that were investigated by the Kentucky State Police. They had the administrative investigation reports for those cases.
- j) KDOC 14.7 Sexual Abuse Prevention policy states "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."

Investigator Interview – The Investigator said if the staff resign prior to completing the investigation, he would continue to conduct the investigation to include interviewing the staff.

I) KDOC 14.7 Sexual Abuse Prevention policy states "Criminal Investigations into allegations of Sexual Abuse will be conducted by the Kentucky State Police in accordance with the Code of Federal Regulations, Title 28, Part 115.21, Evidence Protocol and Forensic Medical Examinations. (115.21 (a) (b) (c) (d) (f))."

Investigator interview – The Investigator said the KSP completes all criminal investigations. He requests the investigation report but does not get a response.

PCM Interview – The PCM was asked about getting copies of the three investigations completed by the KSP. He received a letter for one of the cases from the KSP that was written by the Prosecutor's office stating the case would not be pursued. The PCM was told by the KSP the second case would not be pursued by the Prosecutor. He did not receive a letter regarding this case. He has received no response about the third case.

Findings: Based on policies, documents reviewed, and interviews, the facility meets the standard.

## 115.72 Evidentiary standard for administrative investigations

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

a) KDOC 14.7 Sexual Abuse Prevention policy states "No standard higher than a preponderance of the evidence shall be imposed in determining whether allegations of sexual abuse or sexual harassment are substantiated for administrative

investigations."

Investigator Interview – The Investigator interviewed said he uses the evidence standard of preponderance of the evidence to determine the outcome for administrative investigations. Criminal investigations are conducted by the Kentucky State Police

Document Review - Ten investigations that occurred during the review period were provided for review. The outcome of the investigations was found to be based on a preponderance of evidence in all cases.

Findings: Based on policies, documents reviewed, and interviews, the facility meets the standard.

### 115.73 Reporting to inmates

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

- a & c,d) KDOC 14.7 Sexual Abuse Prevention policy states "Following an investigation where the alleged victim has reported the case of sexual abuse, the alleged victim shall be informed within thirty (30) days of the conclusion of the investigation. 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."

Warden Interview – The Warden said the Facility Investigator will notify the inmate of the outcome of investigations. Outcomes can be substantiated, unsubstantiated or unfounded.

Investigator Interview – The Investigator said the PCM notifies the victim of the outcome for sexual abuse investigations. Outcomes are either substantiated, unsubstantiated or unfounded. He provides the investigation report to the PCM that has the outcome in the findings.

Inmate Interviews – Three inmates were interviewed that reported sexual abuse while at the LAC. All three were provided with the outcome of the investigation.

Document Review – a KDOC Offender Notification form was provided in 8 of the 10 investigations that were reviewed. One investigation was an anonymous report,

therefore there was no identified victim to notify. The other case was for a report of sexual harassment and notification of outcome is not required. The PCM signed all notifications indicating he had provided the inmate the notice of outcome.

b) KDOC 14.7 Sexual Abuse Prevention policy states "Criminal Investigations into allegations of Sexual Abuse will be conducted by the Kentucky State Police in accordance with the Code of Federal Regulations, Title 28, Part 115.21, Evidence Protocol and Forensic Medical Examinations. (115.21 (a) (b) (c) (d) (f))."

Investigator interview – The Investigator said the KSP completes all criminal investigations. He requests the investigation report but does not get a response.

PCM Interview – The PCM was asked about getting copies of the three investigations completed by the KSP. He received a letter for one of the cases from the KSP that was written by the Prosecutor's office stating the case would not be pursued. The PCM was told by the KSP the second case would not be pursued by the Prosecutor. He did not receive a letter regarding this case. He has received no response about the third case.

e) Document Review – a KDOC Offender Notification form was provided in 8 of the 10 investigations that were reviewed. One investigation was an anonymous report, therefore there was no identified victim to notify. The other case was for a report of sexual harassment and notification of outcome is not required. The PCM signed all notifications indicating he had provided the inmate the notice of outcome.

Findings: Based on policies, documents reviewed, and interviews, the facility meets the standard.

## 115.76 Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

a) KDOC 3.22 Staff Sexual Offenses policy contains the definition for sexual abuse and sexual harassment of an inmate by staff, contractor or volunteer. The policy provides the prohibited behaviors for staff and the "final action" for those behaviors. Staff found to have violated the policy "shall be subject to disciplinary action up to and including dismissal, based upon the findings of the investigation." "Any staff member found to have engaged in sexual abuse based upon the findings of the investigation may be terminated."

Document Review - There were two substantiated administrative investigations for staff sexual misconduct that resulted in termination of staff.

b) CoreCivic LAC 3-36 Employee Corrective Action policy states "CoreCivic reserves the right to effect immediate termination as warranted by the conduct at

issue and circumstances." Two investigation case files involved staff sexual misconduct during the review period. Both investigations had a substantiated outcome resulting in the staff being terminated.

c) CoreCivic LAC 3-36 Employee Corrective Action policy states "Corrective Action normally will be taken in a progressive sequence according to the following schedule." The schedule is Documented verbal Counseling, Level 1 to Level 3 Corrective Action, and Termination.

Document review – there were no cases of staff sexual misconduct or staff sexual harassment that were substantiated resulting in less than termination sanctions.

d) Document Review – Both staff sexual misconduct cases were referred to the Kentucky State Police for criminal investigation. One case was not filed for prosecution due to failure of evidence and the other criminal case has not concluded.

Findings: Based on policies, documents reviewed, and interviews, the facility meets the standard.

### 115.77 Corrective action for contractors and volunteers

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

a-b) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention policy states "Any civilian or contractor who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to law enforcement agencies and to any relevant licensing body. Any other violation of CoreCivic sexual abuse or sexual harassment policies by a civilian or contractor will result in further prohibitions."

Document Review - There were no contract staff involved in sexual abuse or sexual harassment in any of the investigation case files reviewed.

Warden Interview – The Warden said he would use a gate closure on a contract staff suspected of sexual abuse of an inmate to prevent entry into the facility while it is being investigated. If there was a substantiated sexual abuse involving a contract staff, they would be referred to the prosecutor and licensing board when applicable.

Findings: Based on policies, documents reviewed, and interviews, the facility meets the standard.

# 115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

a) KDOC 14.7 Sexual Abuse Prevention policy states "Offenders may be disciplined for substantiated incidents of offender-on-offender sexual abuse according to CPP 15.2."

KDOC 15.2 Rules Violations and Penalties policy provides a definition for sexual assault and sexual behavior. Sexual behavior is a Category IV major violation and sexual assault is a Category VII major violation.

Core Civic LAC policy 14-07-01 Sexual Abuse Prevention policy states "All offenders found guilty of sexual abuse shall be institutionally disciplined in accordance with the facility disciplinary procedures." "Because the burden of proof is substantially easier to prove in an offender disciplinary case than in a criminal prosecution, an offender may be institutionally disciplined even though law enforcement officials decline to prosecute."

b) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention policy states "Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories."

Warden Interview – The Warden said sanctions for perpetrators of sexual abuse are the circumstances of the case, the inmate's prior discipline history and sanctions given for similar offenses to other inmates.

Document Review – there were no substantiated inmate on inmate sexual abuse cases found in the investigation files for the review period.

c) KDOC 14.7 Sexual Abuse Prevention policy states "If an offender has pending disciplinary sanctions for alleged offender-on-offender sexual abuse, consideration shall be given as to whether the offender's mental disabilities or mental illness contributed to his or her behavior when determining what level of sanction, if any, will be imposed."

Core Civic LAC policy 14-07-01 Sexual Abuse Prevention policy states "The disciplinary process shall consider whether an offender mental disabilities or mental illness contributed to his/her behavior when determining what type of sanction, if any, should be imposed."

Warden Interview – The Warden said the inmate's mental health and other mitigating factors can be taken into account when considering discipline.

d) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention policy states "The If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the alleged perpetrator to participate in such interventions as a condition of access to programming or other benefits."

Mental Health Staff interview - The Mental Health Director said she provides therapy

for abusers. She does an assessment and reviews the incident details. She tries to determine what the triggers are for the abusive behavior. The follow up services are not required for participation in other programs.

e) KDOC 14.7 Sexual Abuse Prevention policy states "Offenders may not be disciplined for sexual abuse of a staff member if the staff member consented."

The PCM reported no incidents of sexual abuse of a staff member by an inmate during the review period.

Document Review – in the two investigations involving staff sexual misconduct, the inmates were not disciplined.

- f) KDOC 14.7 Sexual Abuse Prevention policy states "An offender may be disciplined for reporting a false allegation 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 allegation."
- g) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention policy states "Sexual activity between offenders is prohibited in all CoreCivic facilities, and offenders may be disciplined for such activity. Such activity shall not be deemed sexual abuse if it is determined that the activity is not coerced."

Document Review – The facility reported 6 incidents of discipline for consensual sexual activity between inmates in the review period. Three of those cases were reviewed and appeared to be consensual with no coercion. The behavior violated the KDOC policy 15.2. Conduct reports and disciplinary hearing documents were provided and reviewed. Both inmates in all three incidents were found guilty of Inappropriate Sexual Behavior and sanctioned.

Findings: Based on policies, documents reviewed, and interviews, the facility meets the standard.

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

Auditor Overall Determination: Meets Standard

# **Auditor Discussion**

a-b) KDOC 14.7 Sexual Abuse Prevention policy states "When an 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 fourteen (14) days of the assessment."

Inmate Interviews - Inmates that disclosed being a prior victim of sexual abuse were

interviewed. All reported being seen by mental health within a few days after the risk assessment interview.

Risk Screening Staff Interview – The Case Manager reported making referrals to mental health for inmates that say they were a prior victim of sexual abuse either in the community or in an institution. She also refers inmates to mental health that have a record of being a prior perpetrator of sexual abuse.

Document Review – Of the Thirty-seven risk screenings randomly selected and reviewed, fourteen inmates reported being a prior victim of sexual abuse.

Documentation of mental health referrals were requested for the fourteen inmates. None of the screenings reviewed scored an inmate for prior perpetration of sexual abuse. All Fourteen had mental health referrals documented within 14 days of arricval.

d) KDOC 14.7 Sexual Abuse Prevention policy states "The dissemination of information related to and resulting from the assessment shall be controlled and limited to staff necessary to inform treatment plans and make security and management decisions regarding housing, beds, work, education and program assignments."

Tour Observation – Paper mental health and medical records are retained in locked cabinets and a locked office in medical and mental health areas. The electronic records are in a system that is limited to mental health and medical personnel by login access. The risk screening information is retained in a login access electronic system that is restricted to authorized staff.

e) KDOC 14.7 Sexual Abuse Prevention policy states "Medical and mental health professionals shall obtain informed consent from the offender prior to reporting information related to a prior sexual victimization that did not occur in a facility, unless the offender is under 18 years old."

Medical Staff Interview – there were no informed consents completed for a report of sexual abuse outside of an institution.

Mental Health Interview - There were no informed consents completed during the review period for a report of sexual abuse outside of an institution.

115.82	Access	s to emergency medical and mental health services
	Audito	r Overall Determination: Meets Standard
	Audito	r Discussion
	a)	KDOC 14.7 Sexual Abuse Prevention policy states "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) or other qualified medical practitioner. The efforts to provide SAFEs or SANEs shall be documented."

Medical Staff Interview – The medical staff interviewed said she would arrange for the victim of a sexual assault to be provided with a forensic exam at a local hospital that had a SANE on shift at the time. Medical staff at LAC can check for emergent medical issues resulting from injuries during the assault.

SANE Interview – This auditor called Baptist Health and verified they offer forensic exams to inmates are Lee Adjustment Center. A local rape crisis center is contacted for victim advocate services through the Rising Center.

Document Review – One incident of sexual abuse required the victim to be sent to the hospital for a forensic exam. Documentation was provided that verified the inmate was provided the exam. The investigation report indicates facility medical staff evaluated the victim within 2 hours of the report and arranged for the exam.

Inmate Interview – The inmate that received the forensic exam was interviewed and verified receiving the forensic exam.

- b) First Responder Interviews All staff are designated as first responders. Staff were asked how they were trained to protect physical evidence. Both security and non-security staff properly explained how to protect potential DNA evidence on the victim, perpetrator, and scene.
- c) Medical staff interview Medical staff said victims of sexual assault would be provided follow up treatment for STI. If the inmate chooses not to go to the forensic exam, the facility medical staff can provide the STI testing and treatment.

Inmate Interview - The inmate that reported sexual abuse said they received follow up medical services from the facility.

d) KDOC 14.7 Sexual Abuse Prevention policy states "The examination shall be at no cost to the offender."

Inmate Interview – The inmate that received the forensic exam was interviewed and said they was not charged for the exam. A local rape crisis center paid for the exam.

Findings: Based on policies, documents reviewed, and interviews, the facility meets the standard.

# Ongoing medical and mental health care for sexual abuse victims and abusers Auditor Overall Determination: Meets Standard

# **Auditor Discussion**

a-c) KDOC 14.7 Sexual Abuse Prevention policy states "All offenders who have been victims of sexual abuse in any correctional facility shall be offered medical and mental health evaluations and as deemed appropriate, any necessary treatment related to the sexual abuse. This includes timely and 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."

Medical Staff Interview – Medical staff said all inmates that have been a victim of sexual abuse would be provided medical and mental health follow up services.

Medical staff will do a mental health referral.

Mental Health Staff Interview - Mental health staff said treatment for victims of sexual abuse are developed based on symptoms presented.

Document review – medical records were reviewed that indicate follow up services were provided to a victim of sexual abuse.

- f) KDOC 14.7 Sexual Abuse Prevention policy states "This also includes timely and comprehensive information about emergency contraception, pregnancy testing, sexually transmitted infection testing and prophylaxis, and lawful pregnancy-related medical services deemed appropriate by the medical practitioner."
- g) KDOC 14.7 Sexual Abuse Prevention policy states "Current and previous victims of sexual abuse shall receive any medical and mental health services related to the sexual abuse at no cost to the offender."
- h) KDOC 14.7 Sexual Abuse Prevention policy states "Mental health practitioners shall attempt to conduct an evaluation on all known offender-on-offender perpetrators within sixty (60) days of learning of such abuse and provide treatment as deemed appropriate."

Mental Health Staff interview – The Mental Health Director said she provides therapy for abusers. She does an assessment and reviews the incident details. She tries to determine what the triggers are for the abusive behavior.

•	115.86	Sexua	l abuse incident reviews
		Audito	r Overall Determination: Meets Standard
		Audito	r Discussion
		a-b)	KDOC 14.7 Sexual Abuse Prevention policy states "All facilities shall conduct

a review, ordinarily within thirty (30) days, of the conclusion of every sexual abuse investigation unless the allegation was determined to be unfounded."

Document Review – LAC completed seven sexual abuse investigations that had outcomes of either substantiated or unsubstantiated during the review period and required an incident review. Seven Sexual Abuse Incident Review forms were provided for review. All reviews had been completed within 30 days of closing the investigation.

c) KDOC 14.7 Sexual Abuse Prevention policy states "The review team shall consist of upper-level management officials with input from line supervisors, investigators, and medical or mental health practitioners."

Warden Interview – The Warden said each sexual abuse investigation is reviewed by a team that consists of the investigator, PCM, Assistant Warden, medical, mental health, Unit Manager. The Warden said he sits in on the review team when he can be.

Document Review – All seven reviews documented a review team that consisted of the PCM, Upper Level management, Line Supervisors, Investigator, and medical or mental health.

- d-e) KDOC 14.7 Sexual Abuse Prevention policy states "The review team shall:
- 1. Consider whether the allegation or investigation indicated a need to revise policies or practices to better prevent, detect or respond to sexual abuse.
- 2. 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 was motivated or otherwise caused by other group dynamics at the facility.
- 3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.
- 4. Assess the adequacy of staffing levels in that area during different shifts.
- 5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

Prepare a report of its findings, including determinations made from sections 1-5 and any recommendations for improvement and submit the report to the facility head and PREA compliance manager. The facility shall implement the recommendations for improvement or shall document its reasons for not doing so.""

Warden Interview – The Warden said the review teams looks at that may have contributed to the incident, staffing patterns, video camera availability, and who was involved.

PCM Interview – The PCM said the incident review team reviews the investigation to see that it was prompt, thorough and properly documented. They review all evidence such as video, interviews, staffing, whether the victim was transgender, gay, bisexual

or gender non-conforming. The review is documented on a form and provided to the Warden.

Incident Review Team Interview – An Assistant Warden was one member of the incident review team interviewed. He said the review team reviews all information involved in the investigation. They look at video evidence, staffing patterns, classification history of inmates involved, the history of the perp and victim. They also review the retaliation monitoring, notice of outcome and referral to mental health. The review is documented on a form and sent to the Warden.

Document review - The seven Sexual Abuse Incident Reviews covered all five areas separately required by the standard on a form that is signed by all members. The form includes any recommendations from the review team and approval or denial by the Warden. If the recommendation is not approved, a space is provided for the Warden to document the reason for not implementing the recommendation.

Findings: Based on policies, documents reviewed, and interviews, the facility meets the standard.

# 115.87 Data collection

**Auditor Overall Determination: Meets Standard** 

# **Auditor Discussion**

- a) KDOC 14.7 Sexual Abuse Prevention policy states "Data shall be collected for every allegation of sexual abuse using the PREA investigating screens in KOMS designed to contain the data necessary to answer all questions for the Survey of Sexual Violence requested annually from the Department of Justice for the set of definitions established in 28 C.F.R.§115.5 and 28 C.F.R.§115.6. All data collected shall be securely retained."
- b) KDOC 14.7 Sexual Abuse Prevention policy states "Each facility shall document the number of allegations, completed investigations, Sexual Abuse Incident Reviews, offender notifications and outside SANE or SAFE exams on a monthly report. The monthly report shall be submitted monthly to the central office PREA Coordinator along with the facilities tracking spreadsheet."

The PCM provided the Kentucky DOC 2022 and 2021 PREA Annual Report for review. The PREA incident data is summarized in these reports for all facilities within the KDOC, to include the private contract facility Lee Adjustment Center. A review of the KDOC website PREA page found these annual reports going back to 2013.

c-d) KDOC 14.7 Sexual Abuse Prevention policy states "All data from available incident-based documents related to allegations of sexual abuse shall be collected, reviewed, and maintained as needed."

The incident based data is collected in KOMS investigations. An example was provided by the PREA Coordinator for KDOC. The data collected was found to be the same as the data necessary to complete the annual SSV incident forms.

- e) KDOC 14.7 Sexual Abuse Prevention policy states "Data shall be obtained from each private facility which contracts for the confinement of Department of Corrections offenders." Data for the Lee Adjustment Center was included in the KDOC PREA Annual Report.
- f) The 2021 SSV Summary report for Lee Adjustment Center was provided for review. BJS makes a direct request for the annual SSV report from the Lee Adjustment Center. LAC data would not be included in the KDOC SSV report.

Findings: Based on policies, documents reviewed, the facility meets the standard.

# 115.88 Data review for corrective action

Auditor Overall Determination: Meets Standard

# **Auditor Discussion**

- a) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "The FSC PREA Coordinator shall review all aggregated sexual abuse data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, to include:
- i. Identifying problem areas;
- ii. Taking corrective action on an ongoing basis; and
- iii. Preparing an annual report of findings and corrective actions for each facility, as well as CoreCivic as a whole."

Document Review - The 2021 & 2022 KDOC PREA Annual Report were reviewed. The reports summarized identified problem areas with PREA compliance, agency corrective actions to improve compliance and corrective actions for each facility that included Lee Adjustment Center. Both were found posted on the KDOC PREA webpage. The CoreCivic PREA Annual Report for 2021 was found on the CoreCivic website. The report summarized data collected for all CoreCivic facilities including lee Adjustment Center.

Agency Head Interview – The Vice President said the PREA data is reviewed daily, monthly and on an annual basis. Facilities can is the data to identify where sexual abuse may be occurring and if changes need to be made to physical plant, staffing or video technology.

PREA Coordinator Interview - CoreCivic has an annual PREA report that he prepares. The Vice President reviews and approves the report. It is posted on the CoreCivic

website. The KDOC PREA Coordinator said the PREA data is gathered in KOMS and she creates an annual report from the KOMS data and incident review corrective actions for each facility. The report is approved by the Commissioner.

PREA Compliance Manger Interview – He said he collects data on PREA incidents and corrective actions, then send the information to the Core Civic PREA Coordinator where it is used for the annual report. He also enters the information in KOMS where KDOC uses it for their annual report.

b-c) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of CoreCivic's progress in addressing sexual abuse."

KDOC policy 14.7 Sexual Abuse Prevention states "Aggregated data collected shall be made available to the public annually through the Department of Corrections website."

Document Review – the KDOC annual reports provide a comparison of current year PREA data with the last four years. The report is approved and signed by the Commissioner. The CoreCivic annual report compares the current year data with the previous two years. It was approved and signed by the Vice President and Chief Operating Officer. All reports assessed progress toward addressing sexual abuse and sexual harassment.

Agency Head Interview – The Vice President of CoreCivic said he reviews and signs the annual report prior to posting it on the website.

d) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "Specific material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of a facility, but the nature of the material redacted must be indicated."

PREA Coordinator Interview – The PREA coordinator said the annual report does not contain the identity or personal and medical information belonging to inmates or staff.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	a) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "All case records associated with claims of sexual abuse, including incident reports,

investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling shall be retained in accordance with CoreCivic Policy 1-15 Retention of Records and the Kentucky Department of Corrections Record Retention Schedule." "Data collected for this purpose shall be securely stored and retained in accordance with CoreCivic Policy 1-15 Retention of Records."

PREA Coordinator Interview – The PREA Coordinator said all records included in an incident case file are retained in a secure database on a secure server with limited access. Hard copies are secured at the facility in locked cabinets in a locked office.

Tour Observation – During the tour of the administration office area, the PREA Compliance Manager's office was visited. A locked filing cabinet was observed that contained the records for PREA incidents.

b) KDOC policy 14.7 Sexual Abuse Prevention states "Data shall be obtained from each private facility which contracts for the confinement of Department of Corrections offenders. Aggregated data collected shall be made available to the public annually through the Department of Corrections website."

Document Review – The 2021 & 2022 KDOC PREA Annual Report were reviewed. The reports summarized identified problem areas with PREA compliance, agency corrective actions to improve compliance and corrective actions for each facility that included Lee Adjustment Center. Both were found posted on the KDOC PREA webpage. The CoreCivic PREA Annual Report for 2021 was found on the CoreCivic website. The report summarized data collected for all CoreCivic facilities including lee Adjustment Center.

c) Core Civic LAC policy 14-07-01 Sexual Abuse Prevention states "Specific material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of a facility, but the nature of the material redacted must be indicated." The reports reviewed did not contain personal identifying information.

PREA Coordinator Interview – The PREA coordinator said the annual report does not contain the identity or personal and medical information belonging to inmates or staff.

d) KDOC policy 14.7 Sexual Abuse Prevention states "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, shall be retained in accordance with the records retention schedule."

Document Review - The KDOC PREA webpage contains annual reports and PREA statistical reports every year starting in 2013.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	a) A review of the KDOC PREA webpage found PREA audit reports for all KDOC facilities, to include the Lee Adjustment Center, in the last audit cycle.
	b) This is year one of audit cycle four.
	h) This auditor was given access to all areas of the facility during the tour.
	i) This auditor was given either a hard copy or electronic copy of all documents requested.
	m) This auditor was given a private area to interview inmates. The area allowed staff to observe the interview for safety reasons, but did not allow facility staff to hear the conversations.
	n) This auditor received two letters from inmates at the Lee Adjustment Center prior to the onsite audit. Postings were observed in the housing units during the tours. Some inmates interviewed said they saw the audit notices posted several weeks before the audit.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	f) Three audit reports were found posted on the KDOC website for this year of the audit cycle that were completed in the three months prior to this audit.
	https://corrections.ky.gov/About/Documents/PREA/2022/GRCC%20Final%2 02022.pdf
	https://corrections.ky.gov/About/Documents/PREA/2022/KCIW%20Final%2 02022.pdf
	https://corrections.ky.gov/About/Documents/PREA/2022/LLCC%20Final%2 02023.pdf
	The audits for the last three audit cycles can be found at this link: https://corrections.ky.gov/About/Pages/Prison-Rape-Elimination-Act-(PR EA).aspx

Appendix:	Provision Findings	
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment coordinator	nt; PREA
	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 coordinator	nt; PREA
	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 coordinator	nt; PREA
	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 o	f 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 o	f inmates
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	yes

	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.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	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	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	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	na

	facility does not have female inmates.)	
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 proficient	l English
	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 abuse and sexual harassment, including: inmates who are blind or have low vision?	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 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	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	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 proficient	l English
	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 proficient	l English
115.16 (c)		yes
115.16 (c) 115.17 (a)	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?	
	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?	
	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?  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	yes
	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?  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)?  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	yes

		1
	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?	
	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.)	na
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.)	na
	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 investig	ations	

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
Policies to ensure referrals of allegations for investig	ations
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
Policies to ensure referrals of allegations for investig	ations
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
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
	investigation is completed for all allegations of sexual abuse?  Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?  Policies to ensure referrals of allegations for investig 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?  Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  Does the agency document all such referrals?  Policies to ensure referrals of allegations for investig 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).)  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?  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?  Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment  Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?  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?

	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)	lumete education	
TT3:33 (I)	Inmate education	
113.33 (1)	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
	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	yes
	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)	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?  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	
115.34 (a)	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?  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).)	

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	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

	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.)	
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.)	na
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.)	na
	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	yes

	screening instrument?	
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 nonconforming 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)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
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	yes

	information is not exploited to the inmate's detriment by staff or other inmates?		
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	yes	

	present management or security problems?		
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)	5.42 (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 degree, 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 degree, 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	yes	

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
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
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	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	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.	no
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	na

	this standard.)	
	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,	na	

		,
	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.)	
	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 service	es
	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 service	es
	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	yes

	abuse or sexual harassment or retaliation?	
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?	no
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	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact abusers	ct with
	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?	no
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	yes
	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?	

	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?	
	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	yes

	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).)	
	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 (I)	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	yes

	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?	
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?	no
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	yes

	evidence sufficient to substantiate the allegation?	
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 sex	ual 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 sex	ual 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 sex	ual 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 sex	ual 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 sex	ual abuse
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health serv	ices
	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 serv	ices
	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 serv	ices
	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 serv	ices
	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 a victims and abusers	buse
	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 a victims and abusers	buse
	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 a	buse

	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 al victims and abusers	buse	
	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 al victims and abusers	buse	
	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 al victims and abusers	buse	
	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 al victims and abusers	buse	
	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.)	na
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	yes
	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?	
	sexual abuse prevention, detection, and response policies,	yes

	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?	
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.)  115.401    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.)  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, 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 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.)  115.401  Frequency and scope of audits  Did the auditor have access to, and the ability to observe, all areas of the audited facility?  115.401  Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?  115.401  Frequency and scope of audits  Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?  Frequency and scope of audits  Was the auditor permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?		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	yes
response does not impact overall compliance with this standard.)  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, 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? (N/A if this is not the third year of the current audit cycle.)  115.401  Frequency and scope of audits  Did the auditor have access to, and the ability to observe, all areas of the audited facility?  Frequency and scope of audits  Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?  Frequency and scope of audits  Was the auditor permitted to conduct private interviews with imates, residents, and detainees?  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?		Frequency and scope of audits	
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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.)  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?  Frequency and scope of audits  Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?  Frequency and scope of audits  Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?  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?		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	na
(h)  Frequency and scope of audits  Did the auditor have access to, and the ability to observe, all areas of the audited facility?  Frequency and scope of audits  Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?  Frequency and scope of audits  Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?  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?		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?	na
areas of the audited facility?  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)?  115.401 (m)  Frequency and scope of audits  Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?  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?		Frequency and scope of audits	
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relevant documents (including electronically stored information)?  115.401 (m)  Frequency and scope of audits  Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?  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?		Frequency and scope of audits	
Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?    115.401   Frequency and scope of audits		·	yes
inmates, residents, and detainees?  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?		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
correspondence to the auditor in the same manner as if they were communicating with legal counsel?		Frequency and scope of audits	
115.403 Audit contents and findings		correspondence to the auditor in the same manner as if they were	yes
	115.403	Audit contents and findings	

(f)		
	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