

Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim Final

Date of Report Click or tap here to enter text.

Auditor Information

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Company Name: American Correctional Association

Mailing Address: 206 N. Washington Street **City, State, Zip:** Alexandria, Va 22314
Suite 200

Telephone: 703-224-0000 **Date of Facility Visit:** March 19-20,2019

Agency Information

Name of Agency: Kentucky Department of Corrections **Governing Authority or Parent Agency (If Applicable):** State of Kentucky

Physical Address: 275 E. Main Street-Health Service Building **City, State, Zip:** Frankfurt, Kentucky 40601

Mailing Address: P. O. Box 2400 **City, State, Zip:** Frankfurt, Kentucky 40601

Telephone: 502-564-2400 **Is Agency accredited by any organization?** Yes No

The Agency Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input checked="" type="checkbox"/> State	<input type="checkbox"/> Federal

Agency mission: “The mission of the Commonwealth of Kentucky Department of Corrections (KDOC) is to protect the citizens of the Commonwealth and to provide a safe, secure, and humane environment for staff and offenders in carrying out the mandates of the legislative and judicial processes; and, to provide opportunities for offenders to acquire skills which facilitate non-criminal behavior.”

Agency Website with PREA Information: [https://corrections.ky.gov/About/Pages/Prison-Rape-Elimination-Act-\(PREA\).aspx](https://corrections.ky.gov/About/Pages/Prison-Rape-Elimination-Act-(PREA).aspx)

Agency Chief Executive Officer

Name: Randy White **Title:** Deputy Commissioner

Email: Randy.White@ky.gov **Telephone:** 502-564-4726

Agency-Wide PREA Coordinator

Name: Charles A. Wilkerson

Title: KDOC PREA Coordinator

Email: CharlesA.Wilkerson@ky.gov

Telephone: 502-382-7245

PREA Coordinator Reports to:
Deputy Commissioner

Number of Compliance Managers who report to the PREA Coordinator 12

Facility Information

Name of Facility: Bell County Forestry Camp

Physical Address: 560 Correctional Drive, Pineville, KY 40977

Mailing Address (if different than above): Click or tap here to enter text.

Telephone Number: 606-337-7065

The Facility Is:

Military

Private for profit

Private not for profit

Municipal

County

State

Federal

Facility Type:

Jail

Prison

Facility Mission: "The mission of the Bell County Forestry Camp (BCFC) is to operate a safe and secure male minimum-security institution. This includes providing care, housing, custody, and control. Program emphasis is directed at returning offenders to the community based upon his demonstrated conduct and performance. Offenders are encouraged to help themselves by participating in opportunities available to facilitate return to the community as a responsible citizen."

Facility Website with PREA Information: [https://corrections.ky.gov/About/Pages/Prison-Rape-Elimination-Act-\(PREA\).aspx](https://corrections.ky.gov/About/Pages/Prison-Rape-Elimination-Act-(PREA).aspx)

Warden/Superintendent

Name: Brandy Harm

Title: Warden

Email: Brandy.Harm@ky.gov

Telephone: 606-337-7065 ext 223

Facility PREA Compliance Manager

Name: Josh Hart

Title: Corrections Unit Administrator 1

Email: Josh.Hart@ky.gov

Telephone: 606-337-7065 ext 261

Facility Health Service Administrator

Name: Susan Partin

Title: Health Services Administrator

Email: SMPartin@CorrectCareSolutions.com	Telephone: 606-337-7065 ext 239
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Facility Characteristics

Designated Facility Capacity: 300	Current Population of Facility: 300
Number of inmates admitted to facility during the past 12 months	474
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:	441
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:	472
Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:	0
Age Range of Population:	Youthful Inmates Under 18: 0 Adults: 18-62
Are youthful inmates housed separately from the adult population?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Number of youthful inmates housed at this facility during the past 12 months:	0
Average length of stay or time under supervision:	37 mths
Facility security level/inmate custody levels:	Community/Minimum
Number of staff currently employed by the facility who may have contact with inmates:	51
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	8 DOC, 5 Contract
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	0

Physical Plant

Number of Buildings: 26	Number of Single Cell Housing Units: 0
Number of Multiple Occupancy Cell Housing Units:	1
Number of Open Bay/Dorm Housing Units:	1 open bay dorm/6 open bay wings
Number of Segregation Cells (Administrative and Disciplinary):	2

Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):

The facility is monitored by exterior and interior cameras. The Bell County Forestry Camp (BCFC) has limited cameras (64) and are monitored through the control center. Cameras are in all buildings and on the perimeter. The lead auditor observed the cameras and the viewing did not allow viewing of the toilets in the dorms and provided privacy for the offender. Camera viewing is accessible by desk top computers by all supervisors, so they can be monitored at any time while they are in the office. In addition, the remaining cameras can be viewed by work station. For example, the Visitation officer can monitor the Visitation building. All cameras can be monitored in the Procedures building. Recordings are maintained on the camera server drive for a maximum of sixty-four (64) days.

Medical

Type of Medical Facility:	
Type of Medical Facility:	Medical and Mental Health are contracted through Wellpath. The Medical department is staffed from 6:00 am – 7:30 pm. The HSA is on call after hours by telephone, or if needed, medical will come to the facility based on the situation. Mental Health needs are provided by Tele Tsyh weekly. Psychology also has an afterhours call schedule.
Forensic sexual assault medical exams are conducted at:	St. Joseph's Hospital, London, KY
Other	
Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:	22 Volunteers, 13 Contractors
Number of investigators the agency currently employs to investigate allegations of sexual abuse:	286

Audit Findings

Audit Narrative

Kentucky Department of Corrections operates a total of twelve (12) correctional facilities that house Kentucky's adult offender population. This is the second PREA audit for the Bell County Forestry Camp. The Kentucky Department of Corrections has a page on their website dedicated to PREA, which includes their zero-tolerance policy, agency PREA specific policies, reporting requirements, and how to report abuse. The Kentucky Department of Corrections has a law requiring mandatory reporting of sexual abuse. An extended review of the internet did not reveal any news articles of concern related to sexual abuse or sexual misconduct at Bell County Forestry Camp. There is no record of any current litigation on record of any current litigation, consent decrees, or local oversight.

ACA notified the lead auditor of the assignment on January 29, 2019. On February 11, 2019, the lead auditor submitted the Pre-Audit reporting form. The audit process began with communication between the PREA Compliance Coordinator and the lead auditor on January 30, 2019. The logistics of the audit was discussed with the lead auditor. The audit posting was sent to the facility by the American Correctional Association (ACA) on 1/30/19. The PREA Compliance Manager confirmed prior to the audit that postings were available for viewing by the offender population throughout the institution. The postings were observed on tour throughout the facility by the lead auditor in both English and Spanish. They were highly visible, and in addition, were observed in the visiting room where family and friends could access. The audit posting correctly contained the lead auditor's contact information. There was zero (0) correspondence from either the offender population, third party, or staff. This information was shared with the agency PREA Coordinator, Warden and PREA Compliance Manager.

On February 28, 2019, the lead auditor received the PREA Pre-Audit Questionnaire and supporting documents on a thumb drive provided by the facility. The thumb drive contained three parts: a master folder of supporting policy and procedures and documentation for all 43 PREA standards; folder with additional supporting documentation; and the Pre-Audit Questionnaire. The master folder contained separate files for each standard that included relevant policies and procedures and supporting documentation to demonstrate compliance. After the review of the Pre-Audit Questionnaire and documentation, on February 4 and 28, 2019 the lead auditor emailed the agency and facility requesting further documentation regarding contract requirements with community-based facilities that housed Kentucky State inmates and lists of the inmate population and staff assignments. The contracts were provided electronically, and the requested lists were provided during the audit visit. The lead auditor reviewed the previous PREA Audit Report, the agency contracts, and previous monitoring reports on contracted facilities prior to the audit.

On March 1, 2019, the Warden and PREA Compliance Manager were contacted and the audit process detailing that compliance is assessed through written policies and procedures, observed practices, and interviews with offenders and staff, as well as, confidentiality

regulations and the probationary status of the lead auditor was discussed. A tentative time schedule for the on-site audit was also discussed including the additional time added to the report completion due to the auditor's probationary status.

On March 5, 2019 the lead auditor requested the following information be provided the first day of the audit: complete offender roster, list of offenders with disabilities, list of LEP offenders, list of LGBTI offenders, list of offenders in segregation, list of any offenders who reported sexual abuse, list of any offenders who reported sexual abuse/victimization during screening, staff roster to include all departments (include title, shift, and card off days), list of staff who perform risk assessments, list of Medical/Mental health staff, list of contractors and volunteers (include times available during audit), and a list of all specialized staff. In addition, upon arrival to the facility the lead auditor requested a copy of all grievance and incident reports written in the 12 months preceding the audit, all allegations of sexual abuse and sexual harassment reported for investigation in the 12 months preceding the audit, all investigations within the past 12 months, and a listing of all hotline calls completed in the last twelve (12) months. The institution provided the requested information the first day of the audit to be used by the lead auditor for the random selection of offenders and staff to be interviewed (random and specific category). Staff was advised that this information would be utilized to establish offender and staff interviews schedules during the on-site audit and to determine compliance with the PREA standards.

The information provided included complete offender roster, list of offenders with disabilities, list of LEP offenders, list of LGBTI offenders, list of offenders in segregation, list of any offenders who reported sexual abuse, list of any offenders who reported sexual abuse/victimization during screening, staff roster to include all departments (include title, shift, and card off days), list of staff who perform risk assessments, list of Medical/Mental health staff, list of contractors and volunteers (include times available during audit), a list of all specialized staff, and copies of all investigations within the past 12 months. There were zero (0) grievances and zero (0) hotline calls made within the last twelve (12) months. This was verified by reviewing the grievance monthly reports and through discussion with hotline personnel.

Onsite Audit Phase

The Prison Rape Elimination Act (PREA) Audit of the Bell Forestry Camp (BCFC) under the operation of the Kentucky Department of Corrections (KDOC) was conducted on March 19-20, 2019 by lead auditor Sabina Kaplan as a consultant through the American Correctional Association (ACA). The audit officially began on 3/19/19 at approximately 8:00 am. Prior to the audit tour, the lead auditor met with the Warden, Assistant Warden, PREA Compliance Manager, Agency's PREA Coordinator, Health Services Administrator, and the backup PREA Compliance Manager. A detailed schedule for the audit was discussed including the facility tour, interview schedules, and review of audit documentation. The inmate population on the first day of the onsite audit was 300, with a rated bed capacity of 300. The lead auditor was provided with copies of staff rosters, offender lists, grievance monthly reports, employee personnel records, and copies of all investigations as requested. It was established that the

lead auditor would meet with the Warden and any identified staff at the close of each day to review the day's activities and prepare for the next audit day.

The lead auditor utilized the Auditor Compliance Tool, Instructions for the PREA Audit Tour, Interview Protocols, Process Map, Auditors Summary Report, and the PREA Auditor Handbook for guidance during the audit process. These documents were available through the National PREA Resource Center.

The lead auditor began the audit process with a tour of the entire facility. There is one (1) housing structure with a dorm that is divided into six sections (W1, W2, W3, W4, W5, W6) to accommodate 300 minimum security offenders. Wings 1, 2, 5, 6 hold forty-eight (48) offenders and Wings 3, 4 hold fifty-four (54) offenders. Other buildings within the prison contain education, administration, procedures office, medical building, multi-purpose building, recreation building, kitchen/dining hall, offender library, offender canteen, chapel, caustic/toxic, maintenance, training center, and a number of storage, utility, and support buildings. A water plant supplies the institution with drinking water as well as a sewage treatment plant. A K-9 Unit comprised of bloodhounds is also located on grounds. During the tour, the lead auditor made visual observations of the program areas and housing units including bathrooms, officers post sight lines, and camera locations. The lead auditor spoke to random staff and offenders regarding PREA education and facility practices. Review of the housing unit log books was conducted to verify immediate/ higher level staff rounds. The lead auditor viewed PREA posters in English, Spanish, and Braille throughout the facility. Also observed was the External Hotline Notification Call Numbers, Zero Tolerance Posters, and Third-Party Reporting Posters all in both English and Spanish, and Grievance mailboxes easily accessible by the population. The lead auditor attempted to call the hotline. The instructions were simple, and the phone was in working order. There is also a PREA power point on the housing unit as part of a loop of information played daily.

All interviewed inmates were aware of the zero-tolerance policy, the hotline and how to access it, and the availability of the rape crisis contacts. In addition, the JPAY system located on each housing unit gave the inmate the ability to confidentially contact the PREA Compliance Manager with an allegation. All offenders interviewed were aware of the JPAY system.

During the audit, the lead auditor observed a PREA screening of a newly arrived inmate. The backup PREA Compliance staff person who completed the intake and screening explained the assessment process from the receiving of the offender at the facility to the completion of the risk screening process. The process conforms to the PREA standards.

The facilities monitoring system is in the Procedures Building. The institution is monitored by exterior and interior cameras. The Bell County Forestry Camp (BCFC) has limited cameras (64) and are monitored through the control center. Cameras are located in the Academic building, Armory, Boiler housing, Segregation cells, Segregation dayroom, staff Canteen, Control Center and Control Center hall, Canteen line, Dormitory (east and west side), Dormitory Wings 1 – 6, garden, gas pumps, Horticulture 1 and 2, inmate entry to Visiting room, Kitchen prep area and stockroom, Library one and two, Maintenance (Inside and out), Medical one and two, Messhall one and two, Multi-purpose room, Operations, Perimeter, outside

visiting area, road one and two, Recreation hall one and two, and Recreation yard one two and three. Each the Segregation cells have a camera pointed toward the cell. There are no bathroom facilities in the cell. Recordings are maintained on the camera server drive for up to sixty-four (64) days. The auditor observed the cameras and the viewing did not allow viewing of the toilets in the dorms and provided privacy for the offender. Camera viewing is accessible by desk top computers by all supervisors, so they can be monitored at any time while they are in the office. In addition, the remaining cameras can be viewed by work station. For example, the Visitation officer can monitor the Visitation building. All cameras can be monitored in the Procedures Building. Recordings are maintained on the camera server drive for a maximum of 64 days.

Shower and toilet areas were observed on tour. Toilets are open but private from staff observation. Showers were individual with a curtain that covered most of the offender's body exposing only his upper body area. All offenders interviewed indicated that they were not exposed to staff during showering or using the bathroom facilities. An announcement was observed including the use of an overhead light, visible by all, with a sign that reads opposite gender staff present on unit. This light remained on during the duration of time the lead auditor (female) visited the housing unit A review of the Dorm Housing Unit logbook and interviews with staff and offenders, verified the continuous use of the overhead light and opposite gender announcement. There were two separate showers located with the two holding cells in the dorm for private showers for transgender inmates who request privacy. Security supervisors were making unannounced rounds as verified by the signing into the unit logbook at the control post in the dorm. All staff and offenders interviewed were aware of the overhead light and its meaning.

During the tour, the lead auditor identified sight line concerns regarding the Academic school, the Recreation building, Boiler room, and new Greenhouse. While on site, the Warden took immediate action by removing a desk top that blocked staff site vision and locking an offender bathroom in the Academic school. The small room in the Recreation building where the existing camera was not working was closed immediately and a camera and spare were ordered to replace the downed camera and to have a backup. In addition, a logbook was implemented and the Recreation building office was re-keyed to allow the yard officer to sign in during rounds of the building. In the Boiler room a second camera was ordered to diminish a blind spot. Security supervisors rounds in the new Greenhouse, a standalone building, were increased. The locking of the offender bathroom in the Academic building will resolve the concern of more than one offender entering the bathroom at once without staff supervision. The removal of the desktop substantially increased staff vision site, closing the room where the camera was down and adding the logbook in the recreation building will resolve the concern that offenders are not left alone without staff supervision at any time, the second camera in the boiler room will enhance the current mirror that was installed in the building, and the increased security staff rounds in the Greenhouse will resolve the concern that staff is left alone with their offender workers without supervision.

This completed the lead auditor's site review.

Inmate Interviews

All required facility staff and offender interviews were conducted on-site during the two (2) day audit. The lead auditor began the formal interviews with staff and offenders in the Procedures building which afforded privacy for the interviews. The PREA Auditor Handbook table for offender interviews indicated for offender population size of 251 - 500 offenders; a requirement of 26 offender interviews with at least 13 from the target groups and 13 random interviews. Thirty-one (31) formal offender interviews were conducted and twelve (12) offenders were informally interviewed during the institution tour, (14.5% of the 296-inmate population). The interviewees were selected randomly using a housing roster and from the lists provided for the specialized interviews by the institution. An equal number of interviewees were selected from each housing unit. All offenders spoke willingly with the lead auditor. Random offender interviews from different housing units (26): Disabled (3): Offender Who Disclosed Sexual Victimization (2) were interviewed. Interviews were not conducted for offenders who are LEP, offenders who identify as LGBTI, or offenders who reported sexual abuse as the facility did not house these categories of offenders at the time of the audit as indicated by memo provided by staff. The facility is an adult male institution only and does not house youthful offenders. There were no offenders placed or housed in segregation housing for risk during the audit period. The offenders interviewed acknowledged they had been screened during the intake process, education was provided which began at intake, and they knew how to report. Offenders also indicated they felt safe at the facility, acknowledged the zero tolerance of sexual abuse and sexual harassment, and their right to be free from retaliation for reporting.

Staff formal interviews were held in the Procedures building which allowed privacy for the interviews. A total of fourteen (14) staff was formally interviewed and additional six (6) informal staff interviews were also conducted during the facility tour (40% of the 51 staff). Staff was randomly selected from each of the three (3) shift rosters and different departments within the facility. Additionally, specialized staff were interviewed including the Warden (1), PREA Compliance Manager (1), Intermediate-Higher Level Staff (3), Medical and Mental Health (2), Human Resources (1), SAFE/SANE (1), Volunteers/Contractors (3), Investigator (1), Staff Who Perform Screening (1), Staff Who Supervise Segregated Housing (2), Incident Review Team (1), Staff Who Monitor Retaliation (1), First Responders (both security staff) (2), and Intake staff (1). Staff that perform Cross Gender Pat Searches were not interviewed as there was only one female security staff person, who although acknowledged she received training, did not perform cross gender searches. The agency PREA Coordinator designee, agency PREA Administrator, interview was also conducted on site during the audit. Interviews of the Agency Contract Administrator Designee, Agency Head Designee (1), and a Kentucky Association of Sexual Assault Programs (KASAP) employee (1) were conducted via telephone. The staff interviewed acknowledged they have received training and understood the PREA policies and procedures. They acknowledged their responsibilities to prevent, detect, report, and respond to sexual abuse and sexual harassment. They understood their roles in reporting and responding to all allegations. Through the Medical staff and SANE interview, they stated all alleged victims of sexual assault who require a forensic exam will be taken to Saint Joseph's Hospital Emergency Department for completion of the exam and emergency medical healthcare with no cost to the offender. There were no alleged victims of sexual assault who required a forensic exam. A review of the Memorandum of Understanding entered between Kentucky Department

of Corrections and the Kentucky Association of Sexual Assault Programs (Kasap) confirms that it is current. Per discussion with a (KASAP) employee it was confirmed that zero (0) offenders have used the hotline of the last twelve (12) months.

One complete employee personnel folder, all investigations, training records of volunteers, contract employees, and employees, contracts with community-based facilities, and the MOU with the community-based crisis center were reviewed before, during, and after the onsite audit.

There were nine (9) allegations reported during the audit period. There was two (2) staff on offender allegations and seven (7) offender on offender allegations. Of the two (2) staff on offender allegations; there was one (1) staff on offender sexual abuse and one (1) staff on offender sexual harassment. The administrative findings of the staff on offender allegation of sexual abuse was one (1) unsubstantiated. The administrative findings of the staff on offender allegation of sexual harassment was one (1) unfounded. The Kentucky State Police did not open a case on any of the allegations. Of the seven (7) offender on offender allegations; there was five (5) offender on offender sexual abuse and two (2) offender on offender sexual harassment. The administrative findings of the offender on offender allegation of sexual abuse was one (2) unsubstantiated and three (3) unfounded. The administrative findings of the offender on offender allegation of sexual harassment was two (2) unfounded. The Kentucky State Police did not open a case on any of the allegations. All administrative investigations were made available and reviewed by the lead auditor. As there were zero (0) cases of staff on offender allegations referred for prosecution there were zero (0) Kentucky State Police investigation files available for review.

An exit meeting was conducted by the lead auditor at the completion of the on-site audit. While the lead auditor could not give the facility a final finding, the lead auditor did provide a preliminary status of her findings which included the site concerns that were immediately corrected during the audit visit.

The lead auditor shared with the Warden and the facility's administration feedback from the offender population; the offenders stated during their interviews that there has been a positive change within the agency and facility with the establishment of PREA compliance, they felt safe at the facility, and felt staff would be responsive if an allegation was made. Staff shared the positive impact of PREA compliance on the facility and the availability and responsiveness of the PREA Compliance Manager, backup PREA Compliance Manager and the facility investigators. The lead auditor thanked the Kentucky Agency PREA Administrator, Warden Harm, and the Bell County Forestry Camp (BCFC) staff for their hard work and commitment to the Prison Rape Elimination Act.

The facility was contacted after the on-site audit to obtain written documentation regarding the implementation of the Recreation building logbook procedure, camera purchase orders, and pictures of the installation of the cameras. All concerns were resolved on April 5, 2019 when the PREA Compliance Manager provided the pictures of all installed cameras. The Deputy Warden's email regarding the implementation of recreation logbook procedure and a copy of the recreation hall logbook indicating officer rounds was provided on March 28, 2019. The

lead auditor also contacted the facility during the writing of the report to clarify certain information for the report.

The lead auditor based the decision of standard compliance on: data gathering; review of documentation; observations during the tour of the facility; sampling techniques for interviews with staff, offenders, and files; interviews; the facility's policy and practices, and further documentation submitted after the onsite audit.

Post-Onsite Audit Phase

During the post-onsite audit phase, the lead auditor remained in contact with Bell County Forestry Camp staff and requested additional information regarding the staffing plan, documentation to verify that cameras were purchased and installed, rounds procedures in the recreation building were implemented, and staff monitoring for sexual abuse and sexual awareness was being done. All documentation was received prior to the lead auditor's April 19, 2019 deadline.

Facility Characteristics

A review of the agency website states, "The mission of the Commonwealth of Kentucky Department of Corrections (KDOC) is to protect the citizens of the Commonwealth and to provide a safe, secure, and humane environment for staff and offenders in carrying out the mandates of the legislative and judicial processes; and, to provide opportunities for offenders to acquire skills which facilitate non-criminal behavior." It further states, "The mission of the Bell County Forestry Camp (BCFC) is to operate a safe and secure male minimum-security institution. This includes providing care, housing, custody, and control. Program emphasis is directed at returning offenders to the community based upon his demonstrated conduct and performance. Offenders are encouraged to help themselves by participating in opportunities available to facilitate return to the community as a responsible citizen."

The Bell County Forestry Camp (BCFC) is a Kentucky Department of Corrections (KDOC) institution that is managed as a correctional prison under the oversight of a Warden. The facility is located outside of Pineville, Kentucky. The facility is in a rural setting. The facility's rated bed capacity is 300. The average daily population for the audit period was 296 with a population count during the audit of 300.

The Bell County Forestry Camp (BCFC) is a minimum-security facility providing housing and program services for 300 male offenders. It is located on approximately 15 acres of state property approximately fourteen miles southwest of Pineville, Kentucky. The Bell County Forestry Camp began operations in 1962 providing offender labor to the Division of Forestry for firefighting and fire break clearing. The average length of stay at the Bell Forestry Camp (BCFC) is fourteen (14) months. The age range of the population is 18-62 years of age.

The facility is open and there are no gates or fences. One entrance is provided and is used for pedestrians. There are twenty-six (26) buildings. There is one (1) housing structure with a

dorm that is divided into six sections (W1, W2, W3, W4, W5, W6) to accommodate 300 minimum security offenders. Wings 1, 2, 5, 6 hold forty-eight (48) offenders and Wings 3, 4 hold fifty-four (54) offenders. Other buildings within the prison contain education, administration, procedures office, medical building, multi-purpose building, recreation building, kitchen/dining hall, offender library, offender canteen, chapel, caustic/toxic, maintenance, training center, and a number of storage, utility, and support buildings. A water plant supplies the institution with drinking water as well as a sewage treatment plant. A K-9 Unit comprised of bloodhounds is also located on grounds.

The facility has fifty-one (51) total employee positions. At the time of the audit fifty-one (51) of the positions were filled. There are thirty-one (31) security positions, eighteen (18) non-security positions, and two (2) education staff positions. Education is provided by the Kentucky Department of Corrections (KDOC).

The prison offers programs and services to include food services, medical care, dental care, mental health, recreation, multi-denominational religious programs and services, work programs, academic education and vocational training, visitation, social services, library, laundry, canteen, mail and telephone access. What offender movement is required through the units is accommodated through corridors and outside walkways and is monitored by supervisors and KDOC staff members with cameras accessed through their desktop computer. After the yard is locked down in the evening, offenders are escorted by staff to and from programs or chapel services.

The institution is monitored by exterior and interior cameras. The Bell County Forestry Camp (BCFC) has limited cameras (64) and are monitored through the control center. Cameras are in all buildings and on the perimeter. The auditor observed the cameras and the viewing did not allow viewing of the toilets in the dorms and provided privacy for the offender. Camera viewing is accessible by desk top computers by all supervisors, so they can be monitored at any time while they are in the office. In addition, the remaining cameras can be viewed by work station. For example, the Visitation officer can monitor the Visitation building. All cameras can be monitored in the Procedures building. Recordings are maintained on the camera server drive for a maximum of 64 days.

Summary of Audit Findings

The PREA Audit of the Bell County Forestry Camp (BCFC) found (40) standards in compliance with three (3) of those standards exceeding the requirement of the standard. These standards are: 115.11 Zero Tolerance of Sexual Abuse and Sexual Harassment; 115.15 Limits to cross-gender viewing and searches, and 115.31 Employee Training. Two standards were found to be non-applicable 115.14 and 115.66. An explanation of the findings related to each standard showing policies, practice, observations, and interviews are provided under each standard in this report.

Auditor Note: No standard should be found to be “Not Applicable” or “NA”. A compliance determination must be made for each standard.

Number of Standards Exceeded: 3

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Number of Standards Met: 40

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Number of Standards Not Met: 0

Two standards were found to be non-applicable 115.14 and 115.66.

Summary of Corrective Action (if any)

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PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? Yes No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? Yes No

115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? Yes No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? Yes No
- 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 No

115.11 (c)

- 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 No NA
- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.11 (a) The Kentucky Department of Corrections (KDOC) has a written policy, Corrections Policy and Procedures (CPP) 14.7 Sexual Abuse Prevention and Intervention Programs, mandating zero tolerance towards all forms of sexual abuse and sexual harassment. CPP 14.7, Sexual Abuse Prevention and Intervention Programs, also outlines the agencies approach to preventing, detecting, and responding to sexual abuse and harassment. The CPP is a thirteen (13) page policy that outlines the agency's zero tolerance and the implementation of PREA compliance through the following sections: definitions, training, offender education, offender risk assessment, initial reporting and staff first responder duties, investigations, sexual abuse incident review, confidentiality, retaliation, false allegations, and sexual abuse data collection. In addition, the agency has a written policy, Corrections Policy and Procedures (CPP) 3.22 Staff Sexual Offenses, mandating zero tolerance towards all forms of sexual abuse. The CPP is a six (6) page policy that outlines the agency's zero tolerance and the implementation of PREA compliance through the following sections: definitions, prohibited behavior, staff member responsibility, supervisor responsibility, investigation, final action, confidentiality, and retaliation. The PREA compliance policies are also supplemented by the Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan, Security memorandums, and post orders. Through observation of bulletin boards, posters, educational handouts and materials, review of offender and staff handbooks, and interviews with staff and offenders it was apparent that The Kentucky Department of Corrections (KDOC) and the Bell County Forestry Camp (BCFC) are committed to zero tolerance of sexual abuse and sexual harassment. Each staff member and contractor also carry a Sexual Abuse Response Team (SART) informational card that outlines the first responder requirements and identifies the Sexual Assault Response Team (SART) members.

115.11 (b) Mr. C. A. Wilkerson is the agency's upper level, agency wide PREA Coordinator. The PREA Coordinator is supervised by the Deputy Commissioner of Adult Institutions, has direct access to the Commissioner of the Kentucky Department of Corrections (KDOC), and has the authority to develop, implement, and manage the agency's PREA compliance. The daily functions of the agency's PREA Coordinator's office is managed via support from the agency PREA Administrators. The administrators report directly to the agency PREA Coordinator. PREA compliance is also maintained at each facility by a PREA Compliance Manager. Each institution also has a backup PREA Compliance Manager. There is a total of twelve (12) PREA Compliance Managers and twelve (12) backup PREA Compliance Managers in the agency. Meetings, memos, and policy reviews are provided for direction through the PREA Coordinator's office. Further training and guidance are provided as needed. Agency updates and changes are forwarded from the PREA Coordinator's office to the facilities. The agency's PREA Administrator Designee as well as the PREA Compliance Manager, and backup PREA Compliance Manager was present during the audit.

115.11 (c) Each facility within the agency is to identify a facility compliance manager that will ensure that effective practices and procedures are in place at the facility to ensure compliance with standards. This position reports directly to the Warden. The facility has designated a Unit Administrator 1 as the PREA Compliance Manager, and a CTO1 as the backup PREA Compliance Manager. The PREA Compliance Office responsibilities include PREA policy compliance, investigations, and the audit process. The PREA Compliance Office staff starts the offender education upon arrival at the facility. The PREA Compliance Manager and backup PREA Compliance Manager provide PREA educational information to staff and offenders, offender intake interviews, and explains the PREA Compliance Office's responsibilities and availability to the offenders. The PREA Compliance Managers are required to make rounds in the housing areas to ensure the office's services are available to the offender population. Offenders were able to identify the PREA Compliance Office staff by name during the interview process which demonstrates the active role and accessibility the PREA Compliance Office staff has created at the Bell County Forestry Camp (BCFC). Numerous offenders stated during their interviews that they felt safe at the institution with the development of the PREA Compliance Office. Staff and offenders both shared the positive impact the PREA Compliance Office has had on the facility and the availability and responsiveness of the PREA Compliance Office staff. The PREA Compliance Manager and backup PREA Compliance Manager was knowledgeable of the agency's PREA policies and procedures, their responsibilities for intake screening and education, and the general responsibilities as the PREA Compliance Manager and backup PREA Compliance Manager. The PREA Compliance Manager and backup PREA Compliance Manager were present during the audit.

The agency exceeds the standard through the structure created to manage the PREA responsibilities of the agency and facilities. A PREA Compliance office is under the direction of the agency PREA Coordinator with staff to coordinate and oversee the agency compliance within the facilities. This is expanded by the agency PREA Administrators, and the twelve (12) PREA Compliance Managers, and twelve (12) backup PREA Compliance Managers that work within their respective facilities, including the PREA Compliance and backup PREA Compliance Manager.

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (a)

- 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 No NA

115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.12 (a)

Kentucky Department of Corrections has renewed thirty-four (34) contracts for the confinement of offenders. The contract language states, "The Contractor shall comply with the Prison Rape Elimination Act (PREA) and all applicable PREA National Standards", and "Contractor shall make itself familiar with and at all times shall observe and comply with all PREA regulations and Kentucky Department of Corrections PREA policies which in any manner affect performance under this contract." The contract facilities make available a copy of the report if requested.

115.12 (b) The contracts include language that states the contractor agrees to self-monitor its activities and facilities for compliance with the PREA standards and KDOC policies. Contractor

acknowledges that in addition to the self-monitoring requirement, KDOC will conduct announced or unannounced compliance monitoring that may include on-site monitoring visits. Contractor will be subject to a DOJ PREA audit once every three (3) year period with the DOJ audit cycle beginning August 20, 2013. KDOC will conduct a mock-audit prior to the Department of Justice (DOJ) PREA audit. Failure to comply with PREA standards and related KDOC policies may result in termination of the contract. The contract facilities make available a copy of the report if requested. A copy of the contract language, mock audits, and DOJ audits were provided to the Lead Auditor.

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (a)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the

need for video monitoring? Yes No

- Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? Yes No NA
- Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? Yes No

115.13 (b)

- 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 No NA

115.13 (c)

- 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 No
- 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 No
- 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 No

115.13 (d)

- 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 No

- Is this policy and practice implemented for night shifts as well as day shifts? Yes No
- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.13 (a) The Bell County Forestry Camp has developed a staffing plan that is based on the eleven (11) criteria of the standard to include generally accepted detention and correctional practices; any judicial finding of inadequacy; and findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal and external oversight bodies; all components of the facilities physical plant (including “blind spots” or areas where staff or offenders may be isolated); the composition of offender population; the number and placement of supervisory staff; institutional programs occurring on a particular shift; any applicable State, or local laws, regulations, or standards; the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and any other relevant factors. Based on the review of the staffing plan and interview with the Warden, the staffing plan was developed by the leadership of the Bell County Forestry Camp (BCFC) with input from the Warden, Deputy Warden, Captain, Lieutenants, Sergeants, PREA Compliance Manager, and unit staff in coordination with the agency PREA Coordinator. The Warden indicated in the interview that the staffing plan is reviewed daily to ensure the safety and security of staff and offenders and a formal review is conducted annually with regional staff and the agency PREA Coordinator. Copies of the staffing plan are maintained on file at the facility, as well as electronic copies maintained by the Captain. The plan was based on the facility’s population capacity of three hundred (300). The average daily population for the last twelve months was two hundred and ninety-six (296).

115.13 (b) The facility makes its best efforts to comply with the plan and no deviations have occurred during the audit period. The rosters/staffing plan are reviewed daily prior to each shift to ensure adequate staff coverage and that all mandatory posts are filled. When vacancies exist, the positions are filled by the utilization of overtime leaving no position uncovered.

115.13 (c) The 2018 annual review occurred on November 7, 2018. As a result of the facility meeting and review of the security staff allocations along with statistics presented by the PREA Coordinator, it was determined that two (2) cameras were needed in the Library, one (1) in the Parking lot, the Water Plant, the Greenhouse, and Horticulture classroom. It was further

determined when there was more than one (1) supervisor per shift, one (1) will be assigned to the dormitory, and the other one (1) to the yard to ensure the adequate security staff is available to meet the requirements of the staffing plan.

115.13 (d) Intermediate and higher-level staff conduct unannounced rounds. The rounds are documented in the housing unit logbooks. Through reviews of housing area logs and interviews with staff and offenders, it was confirmed that unannounced rounds are done randomly throughout the facility by supervisors.

The supervision staff indicated during the interviews that unannounced rounds are accomplished by staggering the round times daily, conducting rounds in different areas on different days, and using different routes and not utilizing a routine pattern. The staff indicated that the rounds are documented in the logbooks in buildings. The facility post orders prohibit staff from alerting other staff members that supervisory staff rounds are occurring. Supervisors also indicated in the interviews that if a staff member was alerting other staff, progressive discipline action would be started on the employee. Interviews with offenders indicated that supervisory staff make rounds on all shifts and are also available during main line to discuss any concerns.

Standard 115.14: Youthful inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.14 (a)

- 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].) Yes No NA

115.14 (b)

- 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].) Yes No 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].) Yes No NA

115.14 (c)

- 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].) Yes No 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].) Yes No 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].) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The Bell County Forestry Camp (BCFC) does not house youthful offenders. The institution houses only adult males. Youthful offenders are housed at Kentucky State Reformatory (males) and Kentucky State Institution for Women (females). CCP 18.3 Confinement of Youthful Offenders, covers the standard of separating youthful offenders from adult offenders.

Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.15 (a)

- 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 No

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.) Yes No 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 here for facilities with less than 50 inmates before August 20, 2017.) Yes No NA

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No
- Does the facility document all cross-gender pat-down searches of female inmates? Yes No

115.15 (d)

- Does the facility implement a policy and practice 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 No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? Yes No

115.15 (e)

- 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 No
- 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 No

115.15 (f)

- 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 No
- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.15 (a) Through the review of CPP 9.8, Search Policy and Lesson Plan Security Skills; Search, Restraint, and Transportation Review it confirms the policies and procedures address the policy requirements of the standard. Interviews with staff and offenders confirm that the Bell County Forestry Camp (BCFC) does not conduct cross gender strip searches. The policy does allow cross gender strip searches only in extraordinary circumstances and when approved by the Warden. When a cross gender strip search occurs, it will be documented on the Bell County Forestry Camp Strip Search log. CPP 9.8 Search Policy dictates that all body cavity searches are completed only by medically trained professionals. A review of the log and interviews with staff and offenders confirms that no cross-gender strip searches by nonmedical staff or cross-gender visual body cavity searches by nonmedical staff have occurred.

All pat down searches of the male offenders are conducted by male staff. The female officer interviewed indicated she had been trained on conducting cross gender pat down searches, however, she would never be called to conduct one at the institution due to the number of male staff available.

The facility has not conducted any cross-gender searches or cross gender visual body cavity searches of offenders.

115.14 (b) BCFC does not house female offenders.

115.14 (c) CPP 9.8 Search Policy does allow cross gender strip searches only in extraordinary circumstances and when approved by the Warden. When a cross gender strip search occurs, it will be documented on the Bell County Forestry Camp Strip Search log.

115.14 (d) The CPP 14.7 Sexual Abuse Prevention and Intervention Programs allows all offenders the opportunity to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing them. This was confirmed by interviews with offenders and staff. During the offender interviews, offenders indicated they received a sense of privacy for performing bodily functions. The CPP 3.22 Staff Sexual Offenses require that staff of the opposite gender announce their presence when entering offender housing areas. Offenders and staff indicated female staff announce when they enter the housing unit. Upon announcement made over an intercom. An overhead light, with a sign that reads opposite gender staff present on unit, visible by all, is displayed the entire time they are on the unit. In addition, a logbook entry is made. This was observed, along with logbook entries, during the facility tour.

115.14 (e) CPP 9.8 Search Policy prohibits staff from frisking transgender and intersex offenders for the purpose of determining genitalia status. During interviews with staff they were aware of the policy and indicated only medical could conduct such search. No searches have occurred in the audit period.

115.14 (f) All staff received training in conducting pat down searches, cross gender pat down searches and searches of transgender and intersex offenders in a professional and respectful manner. The training is annual. This is supported by Kentucky Department of Corrections Division of Corrections Training Lesson Plan 2018. Interviews with staff confirmed these practices and were able to explain how a search was to occur.

The agency exceeds the standard through the procedures that are in place requiring staff of the opposite gender to announce their presence when entering an inmate housing area which consists of an overhead light, visible by all, with a sign that reads opposite gender staff present on unit, and the requirement that when an staff of the opposite gender is on the housing unit it will be recorded in the housing unit log.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.16 (a)

- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No

- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? Yes No
- 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 No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? Yes No
- 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 No
- 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 No

115.16 (b)

- 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 No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No

115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.16 (a) CPP policy 14.7 Sexual Abuse Prevention and Intervention Programs provides disabled offenders equal opportunity to participate in and benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. During the audit, three (3) interviews were conducted with disabled offenders. There were no LEP inmates at the facility at the time of the audit. One (1) offender was interviewed that was on the mental health caseload. This offender indicated he received education in a manner he could understand including the video, handbook, and posters. This offender indicated he has received the PREA information and knew how to report if needed. One (1) offender, who was legally blind, and one (1) offender, who was hard of hearing, received their education through the handbook, script of the video, by staff reading the information to them, and the information posted throughout the facility.

115.16 (b) CPP policy 14.7 Sexual Abuse Prevention and Intervention Programs provides disabled offenders, including limited English Proficiency, equal opportunity to participate in and benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. A master agreement for translation services, including telephone and written services was reviewed.

The Bell County Forestry Camp (BCFC) utilizes translation services through agreement with Language Service Associates. Per contract these services are offered 24 hours a day 7 days a week. The contract covers Spanish, Arabic, Mandarin, Vietnamese, French, Cantonese, Russian, Portuguese, Korean, Polish, Somali, Haitian Creole, Nepali, Burmese, Punjabi, Bengali, Italian, Japanese, German, Farsi, and Turkish. PREA handouts and the offender handbook are available both in English and Spanish. The PREA posters are posted in English and Spanish throughout the facility. The facility also makes available the information in Braille. Posters and large print handouts.

There were zero (0) limited English proficient inmates assigned to Bell County Forestry Camp during the audit.

115.16 (c) CPP policy 14.7 Sexual Abuse Prevention and Intervention, prohibits the use of offender interpreters or other types of offender assistants except in limited circumstances where there may be delay in obtaining an effective interpreter. There were no instances where an offender interpreter was utilized. If an offender interpreter was used in a limited circumstance it would be documented. During the staff interviews, staff were aware of the policy and indicated that an offender interpreter would be used only if there may be a delay in obtaining an effective interpreter.

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No
- 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 No
- 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 No
- 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 question immediately above? Yes No

115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates? Yes No

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check? Yes No
- 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 No

115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? Yes No

115.17 (e)

- 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 No

115.17 (f)

- 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 No
- 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 No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? Yes No

115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? Yes No

115.17 (h)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.17 (a) Through a review of CPP policy 3.6 Background Investigations of Employees and Applicants for Promotion and Employment of Ex-Offenders, Correctional Officer Commonwealth of Kentucky Job Class Specification, and inter-departmental memorandums it was determined that the agency has established a system of conducting criminal background checks for new employees and contractors who have contact with offenders to ensure they do

not hire or promote anyone who engaged in sexual abuse in a prison or other confinement setting; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, coercion, or if the victim did not consent or was unable to consent to refuse; or had civilly or administratively adjudicated to have engaged in sexual activity in the community facilitated by force, coercion, or if the victim did not consent. The Interview Questionnaire Worksheet, Prison Rape Eliminate Act Disclosure form, and Authorization to Conduct Criminal Records Check, Driving History Records Check, and Credit Reports Check require the employee to answer questions of: have not engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution and have not been civilly or administratively adjudicated or 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 refuse. These forms are utilized for new hires and promotions. There were eighty (8) criminal background checks for the facility completed during this audit timeframe for new hires and five (5) for contract of services.

115.17 (b) Through a review of CPP policy 3.6 Background Investigations of Employees and Applicants for Promotion and Employment of Ex-Offenders and interviews with the Warden and Human Resource Manager, it was determined that the agency has established a system of conducting checks for new employees and contractors who have contact with offenders to ensure they take into consideration any allegations of sexual harassment before they hire or promote anyone who engaged in an incident of sexual harassment.

115.17 (c) Through a review of CPP policy 3.6 Background Investigations of Employees and Applicants for Promotion and Employment of Ex-Offenders, CPP Policy 3.1 Code of Ethics/Social Media Use, Correctional Officer Commonwealth of Kentucky Job Class Specification, and inter-departmental memorandums it was determined that the agency has established a system of conducting criminal background checks for new employees and contractors who have contact with offenders to ensure they do not hire or promote anyone who engaged in sexual abuse in a prison or other confinement setting; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, coercion, or if the victim did not consent or was unable to consent to refuse; or had civilly or administratively adjudicated to have engaged in sexual activity in the community facilitated by force, coercion, or if the victim did not consent. The Interview Questionnaire Worksheet, Prison Rape Eliminate Act Disclosure form, and Authorization to Conduct Criminal Records Check, Driving History Records Check, and Credit Reports Check require the employee to answer questions of: have not engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution and have not been civilly or administratively adjudicated or 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 refuse. These forms are utilized for new hires and promotions. There were eighty (8) criminal background checks for the facility completed during this audit timeframe for new hires and five (5) for contract of services.

The background check process is conducted by the designated staff of the Office of Adult Institutions and the Office of Community Services and Facilities. During the initial job interview, a prospective employee, contractor, or volunteer is informed of the background check and investigation and that this may include being fingerprinted for submission to the Kentucky State Police and Federal Bureau of Investigation. The Bell County Forestry Camp (BCFC) Internal Affairs Lieutenant conducts annual NCIC checks on all Bell County Forestry Camp (BCFC) Department of Corrections employees, contract employees and volunteers using their name, social security number and date of birth. A log is maintained of all current Department of Corrections employees and volunteers. In addition, the Personal Cabinet for the Commonwealth of Kentucky conducts a background check for all Promotional employees and maintains a log.

115.17 (d) Through a review of CPP policy 3.6 Background Investigations of Employees and Applicants for Promotion and Employment of Ex-Offenders and interviews with Contract employees it was determined that the agency has established a system of conducting criminal background checks for new contractors who have contact with offenders to ensure they do not hire or promote anyone who engaged in sexual abuse in a prison or other confinement setting; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, coercion, or if the victim did not consent or was unable to consent to refuse; or had civilly or administratively adjudicated to have engaged in sexual activity in the community facilitated by force, coercion, or if the victim did not consent.

115.17 (e) The background check process is conducted by the designated staff of the Office of Adult Institutions and the Office of Community Services and Facilities. During the initial job interview, a prospective employee, contractor, or volunteer is informed of the background check and investigation and that this may include being fingerprinted for submission to the Kentucky State Police and Federal Bureau of Investigation. The Bell County Forestry Camp (BCFC) Internal Affairs Lieutenant conducts annual NCIC checks on all Bell County Forestry Camp (BCFC) Department of Corrections employees, contract employees and volunteers using their name, social security number and date of birth. A log is maintained of all current Department of Corrections employees and volunteers. In addition, the Personal Cabinet for the Commonwealth of Kentucky conducts a background check for all Promotional employees and maintains a log.

115.17 (f) The background check process is conducted by the designated staff of the Office of Adult Institutions and the Office of Community Services and Facilities. During the initial job interview, a prospective employee, contractor, or volunteer is informed of the background check and investigation and that this may include being fingerprinted for submission to the Kentucky State Police and Federal Bureau of Investigation. The Bell County Forestry Camp (BCFC) Internal Affairs Lieutenant conducts annual NCIC checks on all Bell County Forestry Camp (BCFC) Department of Corrections employees, contract employees and volunteers using their name, social security number and date of birth. A log is maintained of all current Department of Corrections employees and volunteers. In addition, the Personal Cabinet for

the Commonwealth of Kentucky conducts a background check for all Promotional employees and maintains a log.

115.17 (g) The CPP policy 3.6 Background Investigations of Employees and Applicants for Promotion and Employment of Ex-Offenders and Employee Application states an applicant who provides false or inaccurate information or documentation in the application process shall not be considered for employment. Current employees may be dismissed, disqualified from future merit employment, and may be criminally punished pursuant to federal law, including 18 U.S.C. An interview with the Human Resource Manager confirmed this policy.

115.17 (h) Through a review of the statewide policy email from agency PREA Coordinator to Facility PREA Compliance Managers which states, “Unless prohibited by law, the agency shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request form an institutional employer for whom such employee has applied to work”, and interview with the Human Resource Manager it was determined that the agency has established a system of notification of previous substantiated allegations of sexual abuse or sexual harassment involving a former employee who is attempting to gain employment.

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)
 Yes No NA

115.18 (b)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.18 (a) CPP 7.1 Construction, Renovation, and Expansion Guidelines directs when installing or updating a video monitoring system, or other monitoring technology, consideration shall be given to how such technology may enhance the agency's ability to protect inmates from sexual abuse. Meeting minutes from PREA Staff Supervision & Monitoring meeting confirms collaboration with the facility's Warden and PREA Compliance Manager prior to the deleting, installing, or relocating video surveillance equipment.

The Bell County Forestry Camp (BCFC) has added a Greenhouse and Horticulture building and a Visitation/Inmate Canteen Building. Cameras were placed to show who enter and exit the Greenhouse from the outside. Two cameras were placed in the Horticulture Program building. One camera gives an entire view of the classroom and one camera gives a complete view of the instructor's office. Four cameras were added to the inside of the building for the visitation room and three cameras were added to the outside of the building. The facility is monitored by exterior and interior cameras. The Bell County Forestry Camp (BCFC) is monitored by exterior and interior cameras. The facility has cameras (64) and are monitored through by desk top computers by all supervisors and staff assigned to various work stations. All cameras can be monitored in the Procedures building. In addition, an additional camera was added in the Boiler room during the audit. Recordings are maintained on the camera server drive for a maximum of sixty-four (64) days.

Cameras are located in the Academic building, Armory, Boiler housing, Segregation cells, Segregation dayroom, staff Canteen, Control Center and Control Center hall, Canteen line, Dormitory (east and west side), Dormitory Wings 1 – 6, garden, gas pumps, Horticulture 1 and 2, inmate entry to Visiting room, Kitchen prep area and stockroom, Library one and two, Maintenance (Inside and out), Medical one and two, Messhall one and two, Multi-purpose room, Operations, Perimeter, outside visiting area, road one and two, Recreation hall one and two, and Recreation yard one two and three. Each the Segregation cells have a camera pointed toward the cell. There are no bathroom facilities in the cell. Recordings are maintained on the camera server drive for up to sixty-four (64) days.

115.18 (b) The Bell County Forestry Camp (BCFC) has added a Greenhouse and Horticulture building and a Visitation/Inmate Canteen Building. Cameras were placed to show who enter and exit the Greenhouse from the outside. Two cameras were placed in the Horticulture Program building. One camera gives an entire view of the classroom and one camera gives a complete view of the instructor's office. Four cameras were added to the inside of the building for the visitation room and three cameras were added to the outside of the building. The facility is monitored by exterior and interior cameras. The Bell County Forestry Camp (BCFC) is monitored by exterior and interior cameras. The facility has cameras (64) and are monitored through by desk top computers by all supervisors and staff assigned to various work stations. All cameras can be monitored in the Procedures building. In addition, an additional camera

was added in the Boiler room during the audit. Recordings are maintained on the camera server drive for a maximum of sixty-four (64) days.

Cameras are located in the Academic building, Armory, Boiler housing, Segregation cells, Segregation dayroom, staff Canteen, Control Center and Control Center hall, Canteen line, Dormitory (east and west side), Dormitory Wings 1 – 6, garden, gas pumps, Horticulture 1 and 2, inmate entry to Visiting room, Kitchen prep area and stockroom, Library one and two, Maintenance (Inside and out), Medical one and two, Messhall one and two, Multi-purpose room, Operations, Perimeter, outside visiting area, road one and two, Recreation hall one and two, and Recreation yard one two and three. Each the Segregation cells have a camera pointed toward the cell. There are no bathroom facilities in the cell. Recordings are maintained on the camera server drive for up to sixty-four (64) days.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.21 (a)

- 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 No NA

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No 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 No NA

115.21 (c)

- 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 No

- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? Yes No
- 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 No
- Has the agency documented its efforts to provide SAFEs or SANEs? Yes No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? Yes No
- 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? Yes No
- Has the agency documented its efforts to secure services from rape crisis centers? Yes No

115.21 (e)

- 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 No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? Yes No

115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity 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 No NA

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- 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 attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.] Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.21 (a) Kentucky Department of Criminal Justice is responsible for administrative investigations and the Kentucky State Police conducts all criminal investigations. Both investigations start immediately following an allegation. CPP 14.7 Sexual Abuse Prevention and Interview Programs, Kentucky State Police Forensic Laboratory Physical Collection Guide evidence protocols for administrative proceeding and criminal prosecutions; Bell County Forestry Camp (BCFC) Prison Rape Elimination Act (PREA) Sexual Assault Plan dictates the requirements for Medical staff to request forensic exams be performed by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) or another qualified medical practitioner. An interview was conducted with the Sexual Assault Response Team (SART) Investigator who conducts offender on offender and staff on offender administrative investigations. The interview confirmed the practices for PREA investigations, and all investigators were knowledgeable of the investigation process and the uniformed evidence protocol.

115.21 (b) Bell County Forestry Camp does not house Youthful Offenders

115.21 (c) A review of the Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan dictates that if it is determined by the Medical and/or Mental Health Provider, the inmate be transported to St. Joseph's Hospital in London, KY for collection of forensic evidence and medical examination by a SAFE/SANE Medical Professional. CPP 14.7 Sexual Abuse Prevention and Intervention Programs 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 evidence, testing for sexually transmitted diseases, prophylactic treatment, follow-up and Mental Health services." If it is determined that the sexual assault occurred within ninety-six (96) hours and the offender/victim consents to a sexual assault examination, then the collection of evidence must follow local criminal justice guidelines as outlined in Kentucky State Police Forensic Laboratory Physical Evidence Collection Guide. If it is determined that the assault took place more than 96 hours prior to the examination, use of the sexual assault evidence collection kit should be jointly discussed between the health care staff assigned to perform the sexual assault examination and the Kentucky State Police. However, the final decision as to whether to conduct the sexual assault exam rests with the Kentucky State Police. If a sexual assault kit is required, then the physical examination and collection of evidence are accomplished by a qualified medical practitioner (provider, Sexual Assault Nurse Examiner, or Sexual Assault Forensic Examiner) exactly

according to instructions provided in the standard rape kit. In the event a “qualified medical practitioner” is not available at the facility where the offender is assigned, the offender will be taken to Saint Joseph’s Hospital in London, KY. Regardless of the location of the exam, the kit with collected evidence must be claimed by a Kentucky State Police for processing.” The interview conducted with Sexual Assault Response Team (SART) Investigator confirmed the practices for sexual abuse investigations and was very knowledgeable of the Sexual Abuse Response Plan steps.

Through the Medical staff and SANE interview, they stated all alleged victims of sexual assault who require a forensic exam will be taken to Saint Joseph’s Hospital Emergency Department for completion of the exam and emergency medical healthcare with no cost to the offender. There were no alleged victims of sexual assault who required a forensic exam.

115.21 (d) The Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan states “Medical staff will contact the Bell County Forestry Camp (BCFC) Medical Physician for Mental Health Treatment. Victim Advocate Services (Cumberland River Behavioral Health Rape Victim Services) will be offered. The agency has an MOU with Kentucky Association of Sexual Assault Programs (KASAP). The agreement states “the Contractor shall respond to requests from any and all Commonwealth facilities and contracted private prison facilities located in the same area development district to provide support services related to sexual violence including but not limited to: hospital accompaniment for an inmate-victim during the forensic medical exam, in-hospital the crisis line 24 hours per day, referrals, and follow-crisis counseling on request of the inmate-victim.

The facility provides a map of the different Kentucky Association of Sexual Assault Program (KASAP) locations throughout the state which is posted on the dormitory bulletin board. Information for the local Rape Advocacy Center is in the inmate handbook. It is also posted on the PREA signs throughout the institution. These are available in both English and Spanish. The facility does provide a list of Kentucky Regional Rape Crisis Centers through the PREA Compliance Office. There are also postings in the housing areas that notify the offender of the availability of the Rape Crisis Centers and the Rape Crisis Hotline 24-hour toll-free number posted next to the offender telephones throughout the facility. Postings were observed by the auditor on tour. In addition, the auditor interviewed a staff member from the Kentucky Association of Sexual Assault Programs (KASAP) and called the hotline to verify it was in working order.

115.21 (e) The Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan states “Medical staff will contact the Bell County Forestry Camp (BCFC) Medical Physician for Mental Health Treatment. Victim Advocate Services (Cumberland River Behavioral Health Rape Victim Services) will be offered. The agency has an MOU with Kentucky Association of Sexual Assault Programs (KASAP). The agreement states “the Contractor shall respond to requests from any and all Commonwealth facilities and contracted private prison facilities located in the same area development district to provide support services related to sexual violence including but not limited to: hospital accompaniment for an inmate-victim during the forensic medical exam, in-hospital the crisis line 24 hours per day, referrals, and follow-crisis counseling on request of the inmate-victim.

The facility provides a map of the different Kentucky Association of Sexual Assault Program (KASAP) locations throughout the state which is posted on the dormitory bulletin board.

Information for the local Rape Advocacy Center is in the inmate handbook. It is also posted on the PREA signs throughout the institution. These are available in both English and Spanish. The facility does provide a list of Kentucky Regional Rape Crisis Centers through the PREA Compliance Office. There are also postings in the housing areas that notify the offender of the availability of the Rape Crisis Centers and the Rape Crisis Hotline 24-hour toll-free number posted next to the offender telephones throughout the facility. Postings were observed by the auditor on tour. In addition, the auditor interviewed a staff member from the Kentucky Association of Sexual Assault Programs (KASAP) and called the hotline to verify it was in working order.

The MOU requires the Contractor to provide support services related to sexual violence as needed. Anytime an offender is the victim of a sexual assault, and if Kentucky State Police requests a forensic examination, a Contractor must be offered to the offender to be present during the examination. They are also available to respond when requested by the victim to provide services. It will be documented whether the offender refused the offender victim representative or accepted the representative with the representative's name provided. No offenders during the audit period was referred for a Forensic Exam, and according to the Kentucky Association of Sexual Assault Programs (KASAP) who was interviewed by the lead auditor, no offender from Bell County Forestry Camp (BCFC) called the hotline or requested services during the audit process.

115.21 (f) (h) Kentucky Department of Criminal Justice is responsible for administrative investigations and the Kentucky State Police conducts all criminal investigations. Both investigations start immediately following an allegation. An interview was conducted with the Sexual Assault Response Team (SART) Investigator who conducts offender on offender and staff on offender administrative investigations. The interview confirmed the practices for PREA investigations, and all investigators were knowledgeable of the investigation process and the uniformed evidence protocol.

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? Yes No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? Yes No

115.22 (b)

- 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 No

- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? Yes No
- Does the agency document all such referrals? Yes No

115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does such publication 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 No NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.22 (a) The Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan, CPP 14.7 Sexual Abuse Prevention and Intervention Programs and Kentucky State Police General Order OM-C-1, Criminal Investigations & Reports, and Kentucky State Police Policy Statement directs that all allegations of sexual abuse and sexual harassment be referred for investigation. The facility completes the administrative investigation and Kentucky State Police completes the criminal investigation. The agency's policy describes the responsibilities of the agency and the Kentucky State Police. The allegations are investigated and reported with findings. Documentation of the administrative investigations is maintained in the PREA Compliance Manager's Office and the Warden's Administrative office. Documentation of the Kentucky State Police investigation is maintained at the Criminal Identification and Records Branch, Uniform Crime Reporting Section. Outcomes are shared with the agency and facility administration. An Interview was conducted with a Bell County Forestry Camp (BCFC) Sexual Assault Response Team (SART) investigator. The investigator demonstrated the knowledge of facility's investigation responsibilities and the responsibilities of

the Kentucky State Police. The roles and responsibilities of each agency was clearly defined and understood. The Warden indicated that an investigation is initiated immediately when reported or information received. The offender on offender allegations are started by the available Sexual Assault Response Team (SART) Investigator on shift.

115.22 (b) The Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan, CPP 14.7 Sexual Abuse Prevention and Intervention Programs and Kentucky State Police General Order OM-C-1, Criminal Investigations & Reports, and Kentucky State Police Policy Statement directs that all allegations of sexual abuse and sexual harassment be referred for investigation. The facility completes the administrative investigation and Kentucky State Police completes the criminal investigation. The agency's policy describes the responsibilities of the agency and the Kentucky State Police. The allegations are investigated and reported with findings. Documentation of the administrative investigations is maintained in the PREA Compliance Manager's Office and the Warden's Administrative office. Documentation of the Kentucky State Police investigation is maintained at the Criminal Identification and Records Branch, Uniform Crime Reporting Section. Outcomes are shared with the agency and facility administration. An Interview was conducted with a Bell County Forestry Camp (BCFC) Sexual Assault Response Team (SART) investigator. The investigator demonstrated the knowledge of facility's investigation responsibilities and the responsibilities of the Kentucky State Police. The roles and responsibilities of each agency was clearly defined and understood. The Warden indicated that an investigation is initiated immediately when reported or information received. The offender on offender allegations are started by the available Sexual Assault Response Team (SART) Investigator on shift.

115.22 (c) The Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan, CPP 14.7 Sexual Abuse Prevention and Intervention Programs and Kentucky State Police General Order OM-C-1, Criminal Investigations & Reports, and Kentucky State Police Policy Statement directs that all allegations of sexual abuse and sexual harassment be referred for investigation. The facility completes the administrative investigation and Kentucky State Police completes the criminal investigation. The agency's policy describes the responsibilities of the agency and the Kentucky State Police. The allegations are investigated and reported with findings. Documentation of the administrative investigations is maintained in the PREA Compliance Manager's Office and the Warden's Administrative office. Documentation of the Kentucky State Police investigation is maintained at the Criminal Identification and Records Branch, Uniform Crime Reporting Section. Outcomes are shared with the agency and facility administration. An Interview was conducted with a Bell County Forestry Camp (BCFC) Sexual Assault Response Team (SART) investigator. The investigator demonstrated the knowledge of facility's investigation responsibilities and the responsibilities of the Kentucky State Police. The roles and responsibilities of each agency was clearly defined and understood. The Warden indicated that an investigation is initiated immediately when reported or information received. The offender on offender allegations are started by the available Sexual Assault Response Team (SART) Investigator on shift.

There were nine (9) allegations reported during the audit period. There was two (2) staff on offender allegations and seven (7) offender on offender allegations. Of the two (2) staff on offender allegations; there was one (1) staff on offender sexual abuse and one (1) staff on offender sexual harassment. The administrative findings of the staff on offender allegation of sexual abuse was one (1) unsubstantiated. The administrative findings of the staff on offender allegation of sexual harassment was one (1) unfounded. The Kentucky State Police did not open a case on either of the allegations. Of the seven (7) offender on offender allegations; there was five (5) offender on offender sexual abuse and two (2) offender on offender sexual harassment. The administrative findings of the offender on offender allegation of sexual abuse was one (2) unsubstantiated and three (3) unfounded. The administrative findings of the offender on offender allegation of sexual harassment was two (2) unfounded. The Kentucky State Police did not open a case on any of the allegations. A review of all the administrative investigations was conducted by the lead auditor. As there were zero (0) cases referred for Criminal Prosecution there were zero (0) Kentucky State Police investigation files available for review.

TRAINING AND EDUCATION

Standard 115.31: Employee training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? Yes No
- 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 No
- 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 No
- 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 No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? Yes No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? Yes No
- 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 No

- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? Yes No
- 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 No
- 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 No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? Yes No
- 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 No

115.31 (c)

- Have all current employees who may have contact with inmates received such training? Yes No
- 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 No
- 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 No

115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.31 (a) 115.22 (e) CPP policy 14.7 Sexual Abuse Prevention and Intervention Programs, Kentucky Department of Corrections Division of Corrections Training Institutional Pre-Service Academy 2018 Program CPP policy 14.7 Sexual Abuse Prevention and Intervention Programs, Kentucky Department of Corrections Division of Corrections Training Institutional Pre-Service Academy 2018 Program Summary new employee orientation, and the Kentucky Department of Corrections Division of Corrections Training Lesson Plan 2018 address all the PREA requirements and outline the training requirements. Training records, staff interviews, and training curriculum review indicated the training included the zero tolerance policy; the agency policy and procedures for prevention; reporting and response to a sexual assault or sexual harassment incident, and the dynamics of sexual abuse and harassment in a confinement setting; common reactions of sexual abuse and sexual harassment victims; how to detect and respond to signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with offenders; how to communicate effectively and professionally with offenders; and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

The initial training occurs at pre-service through the training curriculum Kentucky Department of Corrections Division of Corrections Training Institutional Pre-Service Academy 2018 Program Summary new employee orientation. Each staff member attends pre-service prior to being assigned to the unit. The training is also provided annually through the annual in-service training for all staff. Each employee is required to attend in-service each fiscal year and generally scheduled for the same month each year. If an employee cannot attend in-service at the scheduled time, they are rescheduled in the first available class upon return to work. Staff during interviews acknowledged the numerous methods they received training including Pre-Service and annual in-service. The Pre-Audit Questionnaire indicated all staff members have completed training. The facility provided documentation of the training. A selection of training records was reviewed for facility staff; all had completed the pre-service training. Annual in-service training was being held.

CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires staff to complete the training annually as part of in-service as a refresher instead of every two years as required by the standard; this exceeds the requirement. New employees receive the training as part of the pre-service training within thirty (30) days of employment. Training is documented through the signature of the employee on the Kentucky Department of Corrections (KDOC) PREA Acknowledgement Form. All training is maintained in the Department's Training Database for each employee. Documentation of training is directed through CPP 14.7 Sexual Abuse Prevention and Intervention Programs.

Interviews of random staff and general questions asked during the tour clearly indicate each staff member is very knowledgeable on how to perform their responsibilities in detention, reporting and responding to sexual abuse and sexual harassment. The wide knowledge of PREA policies and procedures by staff confirm the continuous training that occurs through monthly training. A pocket informational card is provided to each employee that indicates who is a member of the Bell County Forestry Camp (BCFC) Sexual Assault Response Team (SART) and outlines steps to take if a sexual assault occurs.

115.31 (b) Gender specific information is provided through the PREA training power point 2018. Staff complete the gender specific training at pre-service and annual in-service.

115.31 (c) CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires staff to complete the training annually as part of in-service as a refresher instead of every two years as required by the standard; this exceeds the requirement. New employees receive the training as part of the pre-service training within thirty (30) days of employment. Training is documented through the signature of the employee on the Kentucky Department of Corrections (KDOC) PREA Acknowledgement Form. All training is maintained in the Department's Training Database for each employee. Documentation of training is directed through CPP 14.7 Sexual Abuse Prevention and Intervention Programs.

Interviews of random staff and general questions asked during the tour clearly indicate each staff member is very knowledgeable on how to perform their responsibilities in detention, reporting and responding to sexual abuse and sexual harassment. The wide knowledge of PREA policies and procedures by staff confirm the continuous training that occurs through monthly training. A pocket informational card is provided to each employee that indicates who is a member of the Bell County Forestry Camp (BCFC) Sexual Assault Response Team (SART) and outlines steps to take if a sexual assault occurs.

115.31 (d) All training is maintained in the Department's Training Database for each employee. Documentation of training is directed through CPP 14.7 Sexual Abuse Prevention and Intervention Programs.

Interviews of random staff and general questions asked during the tour clearly indicate each staff member is very knowledgeable on how to perform their responsibilities in detention, reporting and responding to sexual abuse and sexual harassment. The wide knowledge of PREA policies and procedures by staff confirm the continuous training that occurs through monthly training. A pocket informational card is provided to each employee that indicates who is a member of the Bell County Forestry Camp (BCFC) Sexual Assault Response Team (SART) and outlines steps to take if a sexual assault occurs.

The agency exceeds the standard with employee training annually as part of in-service as a refresher instead of every two years as required by the standard and the pocket informational card provided to each employee.

Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.32 (a)

- 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 No

115.32 (b)

- 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 No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.32 (a) All contractors and volunteers who have contact with offenders in the Bell County Forestry Camp (BCFC) receive PREA training prior to assuming their responsibilities. The facility has 22 volunteers and 13 contractors. The volunteers and contractors must complete the required training prior to being approved for services. CPP 14.7 Sexual Abuse Prevention and Intervention Programs, CPP 26.1 Citizen involvement and Volunteer Service Program, and The Kentucky Department of Corrections Division of Corrections Training Volunteer Services Orientation covers the PREA training requirements of volunteers and contractors. This training includes the agency's policy and procedures regarding sexual abuse and sexual harassment prevention, detention, and response. Volunteers and contract employees sign an acknowledgement of training.

The Medical and Mental Health staff contractors have annual training on-line through the Kentucky Department of Corrections (KDOC). This training consists of a nine (9) computer-based training slides/videos.

115.32 (b) Training records were reviewed, and the files demonstrated the contractors and volunteers received training and documented they understood the training through a signature on the Acknowledgement of Volunteer Training/Orientation Form. Volunteers and contractors are required to attend the classroom training annually to maintain their approval process. Each facility trains their own volunteers on an ongoing basis to guarantee that they receive the training. The agency and facility also provide updated information as needed to the volunteers

and contractors. Although volunteers and contractors are not provided the pocket informational card, the agency plans to implement the process in the future.

Interviews were conducted with one (1) volunteer and two (2) contractors. They all indicated they had received training. They were knowledgeable on PREA, their responsibilities for reporting, the reporting process, who to report to, and the agency's zero tolerance policy. They indicated they would report to the shift security supervisor immediately.

115.32 (c) All contract employees and volunteers who have contact with offenders in the Bell County Forestry Camp (BCFC) receive PREA training prior to assuming their responsibilities. The facility has 22 volunteers and 13 contractors. The volunteers and contractors must complete the required training prior to being approved for services. CPP 26.1 Citizen involvement and Volunteer Service Program requires that volunteers and contractors receive PREA training and sign an acknowledgement of training.

Training records were reviewed, and the files demonstrated the contractors and volunteers received training and documented they understood the training through a signature on the Acknowledgement of Volunteer Training/Orientation Form.

Interviews were conducted with four (1) volunteer and two (2) contractors. They all indicated they had received training. They were knowledgeable on PREA, their responsibilities for reporting, the reporting process, who to report to, and the agency's zero tolerance policy. They indicated they would report to the shift security supervisor immediately.

The agency exceeds the standard by providing training annually with the requirement of training every two years and the on-line refresher course. Also, the monthly training provided to the contractors through the PREA Compliance office as needed.

Standard 115.33: Inmate education

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? Yes No

115.33 (b)

- 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 No
- 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 No

- 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 No

115.33 (c)

- Have all inmates received such education? Yes No
- 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 No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? Yes No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions?
 Yes No

115.33 (f)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

115.33 (a)

Standard 115.34: Specialized training: Investigations

115.33 (a) CPP policy 14.7 Sexual Abuse Prevention and Intervention Programs, Offender Orientation, and Bell County Forestry Camp (BCFC) Offender Handbook, address the PREA education for offenders at intake. At intake into the facility, the PREA Compliance Office staff provide offenders information through a PREA pamphlet and offender assessment process. During facility orientation, within a week of arriving, offenders receive Sexual Abuse Awareness Education through a video and classroom information which expands on previous information provided in the handbook and pamphlet. The training is documented through a signature of each offender on PREA new inmate training documentation form. Pre-Audit Questionnaire indicated that four hundred forty-one (441) offenders remained passed 30 days and thus received comprehensive education. The training was confirmed through the interviews with the offenders and the review of the training sheets. There were zero (0) offenders that indicated they had not received training.

Through random offender interviews and discussions with offenders on the facility tour, offenders acknowledged they have received PREA information upon arrival at the facility, reinforced daily through staff interaction, offender handbook, and through information posted in the housing areas. Informational PREA Posters were posted in the housing areas, dayrooms, programs, and work areas. Offenders were able to explain how to report an incident and were aware of the zero-tolerance policy. The intake process was observed demonstrating the sharing of the PREA information with incoming offenders.

115.33 (b) CPP policy 14.7 Sexual Abuse Prevention and Intervention Programs, Offender Orientation, and Bell County Forestry Camp (BCFC) Offender Handbook, address the PREA education for offenders at intake. At intake into the facility, the PREA Compliance Office staff provide offenders information through a PREA pamphlet and offender assessment process. During facility orientation, within a week of arriving, offenders receive Sexual Abuse Awareness Education through a video and classroom information which expands on previous information provided in the handbook and pamphlet. The training is documented through a signature of each offender on PREA new inmate training documentation form.

The facility's practice is to play a power point on the housing unit as part of a loop of information. The offenders interviewed confirmed that the PREA information is on the loop. The offenders also indicated that PREA information is posted throughout the institution. The numerous postings throughout the facility were observed by the lead auditor.

Through random offender interviews and discussions with offenders on the facility tour, offenders acknowledged they have received PREA information upon arrival at the facility, reinforced daily through staff interaction, offender handbook, and through information posted in the housing areas. Informational PREA Posters were posted in the housing areas, dayrooms, programs, and work areas. Offenders were able to explain how to report, who to report to, and maintaining appropriate professional relationships with staff and other offenders.

115.33 (c) Pre-Audit Questionnaire indicated that four hundred forty-one (441) offenders remained passed 30 days and thus received comprehensive education. The training was confirmed through the interviews with the offenders and the review of the training sheets. There were zero (0) offenders that indicated they had not received training. Offenders further indicated that they have received the training at other facilities after being transferred.

115.33 (d) The facility provides offender education in formats accessible to all offenders. This is accomplished through written handbooks, pamphlets, and posters; verbally through video; and staff interaction. Information is provided in English and Spanish, Braille, and other languages are available through the Qualified Interpreter Services. Policies AD 6.25 Qualified Interpreter Services - American Sign Language, G-51.1 Offenders with Special Needs, SM 5.50 Qualified Spanish Interpreter Services, G-51.5 and Certified American Sign Language (ASL) Interpreter Services outlines this process and accessibility of services.

115.33 (e) At intake into the facility, the PREA Compliance Office staff provide offenders information through a PREA pamphlet and offender assessment process. During facility orientation, within a week of arriving, offenders receive Sexual Abuse Awareness Education through a video and classroom information which expands on previous information provided in the handbook and pamphlet. The training is documented through a signature of each offender on PREA new inmate training documentation form.

115,33 (f) The facility's practice is to play a power point on the housing unit as part of a loop of information. The offenders interviewed confirmed that the PREA information is on the loop. The offenders also indicated that PREA information is posted throughout the institution. The numerous postings throughout the facility were observed by the lead auditor. The numerous postings throughout the facility were observed by the lead auditor.

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.34 (a)

- 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 have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA

115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes No NA

- Does this specialized training include proper use of Miranda and Garrity warnings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes No NA
- 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 No NA
- 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 No NA

115.34 (c)

- 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 No NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.34 (a) CPP 14.7 Sexual Abuse Prevention and Intervention Programs, Kentucky State Police policy statement, Training Agendas, Training Lesson Plans, and Training Schedules reflects that investigators are to be trained in conducting sexual abuse investigations in confinement settings. The specialized training curriculums PREA Update and Investigative Standards Overview: Guidance for the Field, 2013 ERTC Specialized Training: Investigating Sexual Abuse in Correctional Settings, and 2015 PREA Investigators Training includes techniques for interviewing sexual abuse victims, proper use of the Miranda and Garrity warnings, sexual abuse evidence collection in confinement setting, and the criteria and evidence to substantiate a case for administrative action or prosecution referral. The agency's two hundred eighty-six (286) state wide administrator investigators and five (5) Bell County Forestry Camp (BCFC) administrative investigators have completed the general PREA training

and the required specialized training for investigators. The specialty training was verified through the investigator interviews and review of the training records.

115.34 (b) The specialized training curriculums PREA Update and Investigative Standards Overview: Guidance for the Field, 2013 ERTC Specialized Training: Investigating Sexual Abuse in Correctional Settings, and 2015 PREA Investigators Training includes techniques for interviewing sexual abuse victims, proper use of the Miranda and Garrity warnings, sexual abuse evidence collection in confinement setting, and the criteria and evidence to substantiate a case for administrative action or prosecution referral. The agency's two hundred eighty-six (286) state wide administrator investigators and five (5) Bell County Forestry Camp (BCFC) administrative investigators have completed the general PREA training and the required specialized training for investigators. The specialty training was verified through the investigator interviews and review of the training records.

115.34 (c) The agency's two hundred eighty-six (286) state wide administrator investigators and five (5) Bell County Forestry Camp (BCFC) administrative investigators have completed the general PREA training and the required specialized training for investigators. The documentation of specialty training was verified through the investigator interviews and review of the training records.

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.35 (a)

- 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? Yes No
- 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? Yes No
- 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? Yes No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? Yes No

115.35 (b)

- 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.) Yes No NA

115.35 (c)

- 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? Yes No

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? Yes No
- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.35 (a) (d) The four (4) Medical staff of Bell County Forestry Camp (BCFC) are contracted through Wellpath. Mental Health needs are provided by Tele Tsyh weekly. CPP 14.7 Sexual Abuse Prevention and Intervention Programs and Kentucky Department of Corrections PREA for Institutional Mental Health Medical Professionals – Online direct specialized PREA training and continuing education for all medical and mental health staff. The training curriculum includes how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and who to report allegations or suspicions of sexual abuse and sexual harassment. The Pre-Audit Questionnaire indicated zero (0) staff members had not completed training. All staff have completed their required training. The Health Care department provided verification that training was completed by all staff. The Medical and Mental Health staff contractors have annual training on-line through the Kentucky Department of Corrections (KDOC). This training consists of a nine (9) computer-based training slides/videos.

Bell County Forestry Camp (BCFC) maintains records showing that medical and mental health practitioners have completed the required training. An employee training form was submitted for documentation that verified training through the signatures of healthcare staff. Interviews with the healthcare staff demonstrated they understood how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and who to report allegations or suspicions of sexual abuse and sexual harassment.

115.35 (b) The facility's staff are not trained on conducting forensic exams. All offenders requiring a forensic exam are transported to Saint Joseph's Hospital located in London, KY. CPP 14.7 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..." and 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 evidence collected evidence collected must be claimed by the Kentucky State Police.

115.35 (c) Bell County Forestry Camp (BCFC) maintains records showing that medical and mental health practitioners have completed the required training. An employee training form was submitted for documentation that verified training through the signatures of healthcare staff. Interviews with the healthcare staff demonstrated they understood how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and who to report allegations or suspicions of sexual abuse and sexual harassment.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41 (a)

- 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 No

- 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 No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
 Yes No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?
 Yes No

115.41 (d)

- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? Yes No
- 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 No
- 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 No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? Yes No

115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? Yes No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? Yes No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse? Yes No

115.41 (f)

- 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 No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a: Request? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? Yes No

115.41 (h)

- 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 No

115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.41 (a) The screening process for the risk of victimization and abusiveness are outlined in CPP 14.7 Sexual Abuse Prevention and Intervention Programs and Kentucky Department of Corrections (KDOC) Screening for Risk of Sexual Victimization and Abusiveness. The policies and Kentucky Department of Corrections (KDOC) Screening for Risk of Sexual Victimization and Abusiveness Form were reviewed. An assessment is conducted with offenders during receiving at the facility by the PREA Compliance Manager, or backup Manager. This assessment assists with determining an offender's vulnerability or tendencies of acting out with sexually aggressive behavior. Offenders identified as high risk with a history of sexually assaultive behavior or vulnerability will be identified, classified appropriately, and monitored.

115.41 (b) The policy requires the screening should occur within 24 hours but no longer than 72 hours of arrival. The Lead auditor observed a screening and had the backup PREA Compliance staff person who completed the intake and screening to explain the assessment process from the receiving of the offender at the facility to the completion of the risk screening process. The process conforms to the PREA standards. The facility on the PRE-Audit Questionnaire indicated four hundred seventy-two offenders (472) were screened within 72 hours of their intake; which was 100% of the offenders entering the complex admitted to the facility in the past twelve (12) months whose length of stay was for 72 hours or more. The facility has three (3) staff members trained who can perform the risk assessments. All risk assessors are Classification staff. Two (2) staff members are PREA Compliance staff. During the offender interviews, most offenders indicated they remember being asked these questions on the day of their arrival and usually immediately upon arriving and others indicated by the next day.

115.41 (c) The facility staff reviews the offender information within the agency database from the initial screening to determine if there are any PREA classifications or flags prior to the intake. Upon receiving at the facility, the trained staff utilize the Kentucky Department of Corrections (KDOC) Screening for Risk of Sexual Victimization and Abusiveness Form to ask the offender: age; height; weight; prior to incarceration have you ever experienced sexual

victimization as a child or adult; since your last unit of assignment have you experienced sexual victimization by staff or offender; do you feel at risk from sexual assault, sexual harassment, or other victimization by staff or offender; do you wish to identify yourself as lesbian, gay, bisexual, or heterosexual; and do you wish it identify yourself as transgender or intersex.

115.41 (d) The facility staff reviews the offender information within the agency database from the initial screening to determine if there are any PREA classifications or flags prior to the intake. Upon receiving at the facility, the trained staff utilize the Kentucky Department of Corrections (KDOC) Screening for Risk of Sexual Victimization and Abusiveness Form to ask the offender: age; height; weight; prior to incarceration have you ever experienced sexual victimization as a child or adult; since your last unit of assignment have you experienced sexual victimization by staff or offender; do you feel at risk from sexual assault, sexual harassment, or other victimization by staff or offender; do you wish to identify yourself as lesbian, gay, bisexual, or heterosexual; and do you wish it identify yourself as transgender or intersex.

The forms are usually completed within one day of arrival at the facility.

Kentucky Department of Corrections (KDOC) does not house offenders detained solely for civil immigration purposes.

115.41 (e) The facility staff reviews the offender information within the agency database from the initial screening to determine if there are any PREA classifications or flags prior to the intake. Upon receiving at the facility, the trained staff utilize the Kentucky Department of Corrections (KDOC) Screening for Risk of Sexual Victimization and Abusiveness Form to ask the offender: age; height; weight; prior to incarceration have you ever experienced sexual victimization as a child or adult; since your last unit of assignment have you experienced sexual victimization by staff or offender; do you feel at risk from sexual assault, sexual harassment, or other victimization by staff or offender; do you wish to identify yourself as lesbian, gay, bisexual, or heterosexual; and do you wish it identify yourself as transgender or intersex.

The forms are usually completed within one day of arrival at the facility.

115.41 (f) (g) The classification committee reassesses the offender's risks of victimization and abusiveness. CPP 14.7 Sexual Abuse Prevention and Intervention Programs addresses the reassessment of offender's risk level when warranted by a referral, request, incident of sexual abuse, or receipt of additional information that bears on the offender's risk of sexual victimization. The reassessment is to be completed within 30 days of the offender's intake into the facility. In the audit period, four hundred forty-one (441) offenders were reassessed for risk of victimization or abusiveness based upon any additional, relevant, information received since intake. These reassessments are generated through the Kentucky Offender Management System (KOMS). A review of individual inmate case notes confirms the reassessments were completed within 30 days of the offender's intake into the facility.

115.41 (h) Through policy review of CPP 14.7 Sexual Abuse Prevention and Intervention Programs and confirmed through staff interviews, offenders may not be disciplined for refusing to answer or disclosing information during the risk assessment process.

115.41 (i) The staff interviews and review of the Kentucky Offender Management System (KOMS) confirmed appropriate controls have been implemented to ensure that sensitive information is not exploited by staff or other offenders. The screening tools are maintained on an electronic Database, Kentucky Offender Management System (KOMS). The only staff that has access to the system, can see the actual screening, and how the questions are answered are the three Classification staff who perform the risk assessments. If an inmate is noted to be of high risk the appropriate staff is notified; security supervisors, medical, work supervisor, and classification staff so that appropriate housing, work, bed, education, program assignments and mental health and medical referrals are made. The protection of information is outlined in CPP 14.7 Sexual Abuse Prevention and Intervention Programs.

Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.42 (a)

- 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 No
- 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 No
- 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 No
- 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 No
- 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 No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? Yes No

115.42 (c)

- 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 No
- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? Yes No

115.42 (d)

- 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 No

115.42 (e)

- 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 No

115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? Yes No

115.42 (g)

- 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? Yes No
- 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? Yes No
- 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? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.42 (a) If an inmate screens for high risk of sexual victimization or high risk of being sexually abusive staff immediately inform the PREA Compliance Manager. Bed moves are conducted Monday through Friday by the Unit Administrator on a as needed basis. If a move must occur in the evening or on the weekend the facility contacts the PREA Compliance Manager, or backup PREA Compliance Manager, via telephone to approve the bed move. If an inmate screens for high risk of sexual victimization or high risk of being sexually abusive staff immediately inform the PREA Compliance Manager. Bed moves are conducted Monday through Friday by the Unit Administrator on a as needed basis. If a move must occur in the evening or on the weekend the facility contacts the PREA Compliance Manager, or backup PREA Compliance Manager, via telephone to approve the bed move.

Through offender and staff interviews, it was determined that the facility addresses the needs of the offender consistent with the security and safety of the individual offender through the classification committee review.

114.42 (b) It is the responsibility of the classification committee to check each inmate being placed in a job that has been determined as an area where victims and abusers should not be working together. This includes jobs on outside detail that are not supervised by the Department of Corrections Staff, Water Plant, Waste Water Plant and the K-9 Bloodhound program. The housing and program assignments are made on a case by case basis. Through offender and staff interviews, it was determined that the facility addresses the needs of the offender consistent with the security and safety of the individual offender through the classification committee review.

114.42 (c) CPP 14.8 Lesbian, Gay, Bisexual, Transgender, and Intersex Offenders indicate that the facility makes housing and program assignments for transgender or intersex inmates in the facility on a case-by-case basis. At the time of the audit there were zero (0) transgender offenders housed at the facility.

115.42 (d) By CPP 14.8 Lesbian, Gay, Bisexual, Transgender, and Intersex Offenders all transgender and intersex offenders shall be reassessed at least twice each year to review any threats of safety experienced by the offender if the complex housed a transgender offender.

The PREA Compliance Manager confirmed during the interview that a special population review would be conducted with each transgender offender at least twice a year.

At the time of the audit there were zero (0) transgender offenders housed at the facility.

115.42 (e) CPP 14.8 Lesbian, Gay, Transgender, and Intersex Offenders classification staff shall give serious consideration to the inmate's own view considering his/her safety.

At the time of the audit there were zero (0) transgender offenders housed at the facility.

115.42 (f) CPP 14.8 Lesbian, Gay, Bisexual, Transgender, and Intersex Offenders states offenders identified as transgender or intersex shall be given the opportunity to shower separately from other offenders. A separate shower area was observed by the lead auditor during the facility tour.

At the time of the audit there were zero (0) transgender offenders housed at the facility.

115.42 (g) CPP 14.7 Sexual Abuse Prevention and Intervention Programs and CPP 14.8 Lesbian, Gay, Bisexual, Transgender, and Intersex Offenders dictates that not place lesbian, gay, bisexual, transgender, or intersex offenders in dedicated facilities, units, or wings solely based on such identification or status.

At the time of the audit there were zero (0) transgender offenders housed at the facility.

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.43 (a)

- 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 No
- 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 No

115.43 (b)

- 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 No
- 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 No
- 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 No

- 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 No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? Yes No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? Yes No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? Yes No

115.43 (c)

- 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 No
- Does such an assignment not ordinarily exceed a period of 30 days? Yes No

115.43 (d)

- 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 No
- 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 No

115.43 (e)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.43 (a) CPP 10.2 Special Management Inmates prohibits the placement of offenders at high risk for sexual victimization in alternative 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.

A review of the Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan indicates that the alleged victim inmate upon return from medical treatment can be returned to general population utilizing housing methods to keep alleged victim and alleged abuser separated. If the alleged victim must be placed into temporary holding cell, it will be documented in the detention order and case notes as “The alleged victim was placed into temporary holding cell for his own protection pending completion of an investigation. No other alternative means of housing were available to ensure his safety.”

Bell County Forestry Camp does not have involuntary segregated housing. If an offender would be placed in alternative housing, temporary holding cell, the offender would have a review conducted within 24 hours and, if need be, transferred to another facility within seventy-two (72) hours. The Warden indicated that placement would be based on a case by case basis and that all other alternatives would be considered including housing changes and unit transfers.

115.43 (b) CPP 10.2 Special Management Inmates further directs that if an offender is placed in alternative segregation housing for protective custody, the offender would have access to programs, privileges, educations, and work opportunities to the extent possible, and that if a restriction occurs, a report shall be made to the appropriate Deputy Warden listing the item or activity denied and the reason. The report will be reviewed by the Warden or his/her designee.

Bell County Forestry Camp does not have involuntary segregated housing. If an offender would be placed in alternative housing, temporary holding cell, the offender would have a review conducted within 24 hours and, if need be, transferred to another facility within seventy-two (72) hours.

115.43 (c) The facility does not have involuntary segregated housing. If an offender would be placed in alternative housing, temporary holding cell, the offender would have a review conducted within 24 hours and, if need be, transferred to another facility within seventy-two (72) hours. The Warden indicated that placement would be based on a case by case basis and that all other alternatives would be considered including housing changes and unit transfers.

From the interviews with staff and offenders and review of housing placements, the lead auditor determined that the facility was addressing individual housing and program needs consistent with the security and safety of the offender.

115.43 (d) A review of the Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan indicates that the alleged victim inmate upon return from medical treatment can be returned to general population utilizing housing methods to keep alleged victim and alleged abuser separated. If the alleged victim must be placed into temporary

holding cell, it will be documented in the detention order and case notes as “The alleged victim was placed into temporary holding cell for his own protection pending completion of an investigation. No other alternative means of housing were available to ensure his safety.” The facility does not have involuntary segregated housing. If an offender would be placed in alternative housing, temporary holding cell, the offender would have a review conducted within 24 hours and, if need be, transferred to another facility within seventy-two (72) hours. The Warden indicated that placement would be based on a case by case basis and that all other alternatives would be considered including housing changes and unit transfers.

114.43 (e) CPP 10.2 Special Management Inmates dictates that an inmate assigned to administrative segregation shall be administratively reviewed every seven (7) days by the appropriate Classification Committee and that the inmate will be present at the review. The facility does not have involuntary segregated housing. If an offender would be placed in alternative housing, temporary holding cell, the offender would have a review conducted within 24 hours and, if need be, transferred to another facility within seventy-two (72) hours. The Warden indicated that placement would be based on a case by case basis and that all other alternatives would be considered including housing changes and unit transfers. From the interviews with staff and offenders and review of housing placements, the lead auditor determined that the facility was addressing individual housing and program needs consistent with the security and safety of the offender.

REPORTING

Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? Yes No
- 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 No
- 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 No

115.51 (b)

- 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 No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? Yes No

- Does that private entity or office allow the inmate to remain anonymous upon request?
 Yes No
- 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? Yes No

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? Yes No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment?
 Yes No

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.51 (a) The Kentucky Department of Corrections (KDOC) established procedures allowing for multiple internal and external ways for offenders to report sexual abuse, sexual harassment, and retaliation. PREA reporting methods are shared with offenders at intake, during orientation, in the PREA brochure, offender handbook, and on posters throughout the facility. Offenders can report verbally and in writing to staff, via the 24/7 confidential PREA hotline, report through the grievance system, utilize third party reporting, through JPAY to the PREA Compliance Manager, or send an anonymous note. victim's name unless the victim has requested to stay anonymous. There were no allegations during this audit period reported outside of the complex. These reporting systems were demonstrated through review of policies and procedures, offender handbook, posters throughout the facility, investigations, and interviews with offenders and staff.

115.51 (b) The Kentucky Department of Corrections (KDOC) established procedures allowing for multiple internal and external ways for offenders to report sexual abuse, sexual harassment, and retaliation. PREA reporting methods are shared with offenders at intake,

during orientation, in the PREA brochure, offender handbook, and on posters throughout the facility. Offenders can report verbally and in writing to staff, via the 24/7 confidential PREA hotline, report through the grievance system, utilize third party reporting, through JPAY to the PREA Compliance Manager, or send an anonymous note. victim's name unless the victim has requested to stay anonymous. There were no allegations during this audit period reported outside of the complex. These reporting systems were demonstrated through review of policies and procedures, offender handbook, posters throughout the facility, investigations, and interviews with offenders and staff.

During the formal offender interviews, and informal offender interviews during the tour, offenders indicated they knew the reporting process and felt comfortable reporting sexual abuse or sexual harassment to a staff member. They were also able to identify other options available to them for reporting including telling a staff member, writing a grievance, calling the PREA hotline, going through JPAY, and/or contacting their family members or friends. Upon reviewing the reporting methods of the nine (9) allegations reported within the facility; eight (8) were anonymous notes put into the institutional mail and addressed to a staff member and one (1) was verbally reported to staff.

Bell County Forestry Camp does not detain offenders solely for civil immigration purposes.

115.51 (c) CPP 3.22 Staff Sexual Offenses dictates that staff immediately report and document all contacts, observations, reports received, suspicions and knowledge of a sexual offense directed towards or by an offender; retaliation against an offender or staff member who reported an incident; and any staff member neglect or violation of responsibilities that may have contributed to an incident or retaliation received verbally. Staff were knowledgeable on the ways offenders could report to staff and their responsibility in the process. Staff acknowledged through interviews that they would report immediately any allegation and document it immediately.

115.51 (d) CPP 3.2 Staff Sexual Offenses indicates that staff may contact the PREA hotline listed on the department's website established to privately report a sexual offense involving an offender.

Staff indicated through interviews they were aware of the methods available to them to report sexual abuse and sexual harassment of offenders. They were aware they could privately report an incident to the shift supervisor, using the hotline, or Sexual Assault Response Team (SART).

Standard 115.52: Exhaustion of administrative remedies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This

does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. Yes No NA

115.52 (b)

- 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.) Yes No 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.) Yes No NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (d)

- 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.) Yes No 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.) Yes No 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.) Yes No NA

115.52 (e)

- 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.) Yes No 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.) Yes No 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.) Yes No NA

115.52 (f)

- 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.) Yes No 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.) Yes No 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.) Yes No 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.) Yes No 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.) Yes No 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.) Yes No 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.) Yes No NA

115.52 (g)

- 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.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.52 (a) CPP 14.6 Inmate Grievance Procedure addresses administrative procedure for offender grievances regarding sexual abuse and the agency's policies and procedures for filing emergency grievances when an offender is subject to a substantial risk of imminent sexual abuse.

There were zero (0) grievances that alleged sexual abuse. The Pre-Audit Questionnaire indicated that there was zero (0) grievances alleged substantial risk of imminent sexual abuse. A review of Grievance Monthly Reports for the audit period confirmed zero (0) grievances.

115.52 (b) CPP 14.6 Inmate Grievance Procedure addresses administrative procedure for offender grievances regarding sexual abuse and the agency's policies and procedures for filing emergency grievances when an offender is subject to a substantial risk of imminent sexual abuse. The Department does not impose a time limit for the submission of a grievance regarding an allegation of sexual abuse or requires an offender to use an informal grievance process or otherwise to attempt to resolve with staff. Grievances are submitted to the Grievance Coordinator.

There were zero (0) grievances that alleged sexual abuse. The Pre-Audit Questionnaire indicated that there was zero (0) grievances alleged substantial risk of imminent sexual. A review of Grievance Monthly Reports for the audit period confirmed zero (0) grievances.

115.52 (c) CPP 14.6 Inmate Grievance Procedure requires that a grievance involving allegations of a sexual offense shall not go through informal resolution or the Grievance Committee, but instead shall go directly to Step 3 after filing and be reviewed by the Warden. In addition, a grievance involving allegations that may place the grievant or other inmates in physical danger shall not go through informal resolution or the Grievance Committee, but instead shall go directly to Step 3, appeal to the Warden.

There were zero (0) grievances that alleged sexual abuse. The Pre-Audit Questionnaire indicated that there was zero (0) grievances alleged substantial risk of imminent sexual abuse. A review of Grievance Monthly Reports for the audit period confirmed zero (0) grievances.

115.52 (d) CPP 14.6 Inmate Grievance Procedure requires for a grievance related to sexual abuse that the inmate shall be provided written notification of any extension with the revised date in which a decision will be made stated. In addition, if an inmate maintains that a grievance is of an emergency nature, the Grievance Aide shall take it directly to the Grievance Coordinator. If, in the view of the Grievance Coordinator or designee, the grievance is an

emergency, it shall be forwarded directly to the Warden or his designee. The Warden shall decide or call a special meeting of the Grievance Committee. In either event, action on the grievance related to sexual abuse: a response at the Warden's level shall be made within 48 hours; and a final decision by the Commissioner or designee shall be issued in five (5) working days.

There were zero (0) grievances that alleged sexual abuse. The Pre-Audit Questionnaire indicated that there was zero (0) grievances alleged substantial risk of imminent sexual abuse. A review of Grievance Monthly Reports for the audit period confirmed zero (0) grievances.

115.52 (e) CPP 14.6 Inmate Grievance Procedures allows for the use of Grievance Aides; an inmate appointed to assist an inmate with filing a grievance. Interview with the PREA Compliance Manager confirms that an offender may file a grievance through third party means. There were zero (0) grievances that alleged sexual abuse. The Pre-Audit Questionnaire indicated that there was zero (0) grievances alleged substantial risk of imminent sexual abuse. A review of Grievance Monthly Reports for the audit period confirmed zero (0) grievances.

115.52 (f) CPP 14.6 Inmate Grievance Procedure addresses administrative procedure for offender grievances regarding sexual abuse and the agency's policies and procedures for filing emergency grievances when an offender is subject to a substantial risk of imminent sexual abuse.

Grievances alleging sexual abuse are handled as emergency grievances. They are coordinated immediately with the Warden who shall decide or call a special meeting of the Grievance Committee. When the emergency grievance alleges the substantial risk of imminent sexual abuse, it is forwarded to the Warden for review for immediate corrective action. A response at the Warden's level shall be made within 48 hours. CPP 14.6 Inmate Grievance Procedure requires that a final decision by the Commissioner, or designee, shall be issued within five (5) calendar days.

There were zero (0) grievances that alleged sexual abuse. The Pre-Audit Questionnaire indicated that there was zero (0) grievances alleged substantial risk of imminent sexual abuse. A review of Grievance Monthly Reports for the audit period confirmed zero (0) grievances.

115.52 (g) CPP 14.7 Sexual Abuse Prevention and Intervention Programs states an offender may be disciplined for filing a grievance related to sexual abuse only when the investigation determines the offender filed the grievance in bad faith. The Bell County Forestry Camp (BCFC) had no disciplinary actions against an offender for having filed a grievance in bad faith.

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.53 (a)

- 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 No

- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? Yes No
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? Yes No

115.53 (b)

- 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 No

115.53 (c)

- 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 No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.53 (a) The Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan, CPP 14.7 Sexual Abuse Prevention and Intervention Programs, offender's handbook, facility wide postings, PREA brochure, new inmate PREA orientation, and MOU between the Kentucky Department of Corrections (KDOC) and the Kentucky Association of Assault Programs Correspondence indicates that offenders shall be provided access to victim advocates for emotional support services related to sexual abuse by access to victim offender representatives, giving offenders mailing addresses and telephone numbers, including the toll-free 24/7 PREA hotline number. There is a list of outside confidential support services

available to the offender population through the PREA Compliance Manager's office and posted on the housing bulletin boards.

The facility provides a map of the different Kentucky Association of Sexual Assault Program locations throughout the state which is posted on the dormitory bulletin board. Information for the local Rape Advocacy Center is in the inmate handbook. It is also posted on the PREA signs throughout the institution. These are available in both English and Spanish. The facility does provide a list of Kentucky Regional Rape Crisis Centers through the PREA Compliance Office. There are also postings in the housing areas that notify the offender of the availability of the Rape Crisis Centers and the Rape Crisis Hotline 24-hour toll-free number posted next to the offender telephones throughout the facility. Postings were observed by the auditor on tour. In addition, the auditor interviewed a staff member from the Kentucky Association of Sexual Assault Programs and called the hotline to verify it was in working order.

All the offenders interviewed indicated they were aware of the availability of the outside support services. The facility provides this information in multiple ways to the offenders: during the education process, in the PREA brochure, directory on the housing bulletin boards, and on posters within the facility. This information is also available through the PREA Compliance Manager's office.

MOU between the Kentucky Department of Corrections (KDOC) and the Kentucky Association of Assault Programs requires the Contractor to provide offenders with confidential emotional support services related to sexual violence as required by the Prison Rape Elimination Act (PREA). The Contractor shall, respond to requests from any Commonwealth or private prison facilities to provide support services related to sexual violence including but not limited to: hospital accompaniment for an inmate-victim during the forensic medical examination process; in-hospital investigatory interviews; emotional support services, referrals, follow-up crisis counseling on request of the inmate-victim; provide no more than three in-person sessions to each inmate-victim, referral for subsequent request for counseling, obtain appropriate release from inmate-victim, provide crisis counseling through the crisis line 24 hours per day seven days per week. Anytime an offender is the victim of a sexual assault, and if Kentucky State Police requests a forensic examination, a Contractor must be offered to the offender to be present. A review of the Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan further dictates that Victim Advocate Services (Cumberland River Behavioral Health Rape Victim Service) will be offered.

115.53 (b) Information for the local Rape Advocacy Center is in the inmate handbook. It is also posted on the PREA signs throughout the institution. All the offenders interviewed indicated they were aware of the availability of the outside support services and most offenders were familiar with the confidentiality guidelines.

Bell County Forestry Camp does not detain offenders solely for civil immigration purposes.

115.53 (c) MOU between the Kentucky Department of Corrections (KDOC) and the Kentucky Association of Assault Programs requires the Contractor to provide offenders with confidential emotional support services related to sexual violence as required by the Prison Rape

Elimination Act (PREA). The Contractor shall, respond to requests from any Commonwealth or private prison facilities to provide support services related to sexual violence including but not limited to: hospital accompaniment for an inmate-victim during the forensic medical examination process; in-hospital investigatory interviews; emotional support services, referrals, follow-up crisis counseling on request of the inmate-victim; provide no more than three in-person sessions to each inmate-victim, referral for subsequent request for counseling, obtain appropriate release from inmate-victim, provide crisis counseling through the crisis line 24 hours per day seven days per week. Anytime an offender is the victim of a sexual assault, and if Kentucky State Police requests a forensic examination, a Contractor must be offered to the offender to be present. A review of the Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan further dictates that Victim Advocate Services (Cumberland River Behavioral Health Rape Victim Service) will be offered.

Standard 115.54: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? Yes No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.54 (a) PREA posters throughout the facility establishes guidelines and procedures for responding to complaints or inquires dealing with Sexual Abuse and Sexual Harassment. The Department's website provides information for third party reporting of sexual abuse and sexual harassment. The link encourages family members and the general public to report allegations of sexual assault to the PREA hotline. Third party reporting information is shared through the agency's website, brochures, pamphlets, and handouts.

Sexual assault allegations are forwarded immediately to the investigator who will be assigned to the case. The investigator indicated that third party reporting would be handled like any other investigation.

During the formal offender interviews and informal offender interviews during the tour, offenders were able to identify staff, the Sexual Assault Response Team (SART) investigators, another offender, and contacting family as methods for third party reporting. Staff were also able to identify these reporting methods during their interviews. These reporting systems were outlined through review of policies and procedures, offender handbook, and posters throughout the facility. There were zero (0) third-party reported allegations within the audit period.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.61 (a)

- 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 No
- 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 No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? Yes No

115.61 (b)

- 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 No

115.61 (c)

- 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 No

- 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 No

115.61 (d)

- 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 No

115.61 (e)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.61 (a) CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires that all staff must report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment; retaliation against offenders or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Specialized and random staff interviews confirm that staff are knowledgeable in their reporting duties, the process of reporting, and to whom to report. Staff acknowledged through interviews that they would report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to a shift supervisor and document it immediately per memo.

CPP 14.7 Sexual Abuse Prevention and Intervention Programs addresses the medical and mental health staff reporting requirements for sexual abuse. Medical and mental health staff must report incidents that occurred in a correctional setting without consent only in the interest of treatment, security, and management issues. If the sexual assault/abuse occurred in the community setting previously, the staff may only report to Kentucky State Police if the offender provides consent. The facility does not house juveniles.

All allegations are reported to the shift supervisor. Staff indicated through interviews they were aware of the methods available to them to report sexual abuse and sexual harassment of offenders including third-party and anonymous reports. Staff acknowledged through interviews that they would report and document any allegations immediately. They were aware they could privately report an incident. They identified the shift supervisor, Kentucky State Police,

Sexual Assault Response Team (SART), and the PREA Compliance office as the investigators they could contact by phone or in writing.

115.61 (b) CPP 3.22 Staff Sexual Offenses states that staff are not to reveal any information related to a sexual abuse report to anyone other than necessary. This is covered in the annual in-service training and pre-service training.

115.61 (c) CPP 14.7 Sexual Abuse Prevention and Intervention Programs addresses the medical and mental health staff reporting requirements for sexual abuse. Medical and mental health staff must report incidents that occurred in a correctional setting without consent only in the interest of treatment, security, and management issues. If the sexual assault/abuse occurred in the community setting previously, the staff may only report to Kentucky State Police if the offender provides consent.

115.61 (d) Bell County Forestry Camp does not house juveniles.

115.61 (e) CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires that all staff must report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment; retaliation against offenders or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. CPP 3.22 Staff Sexual Offenses states that staff are not to reveal any information related to a sexual abuse report to anyone other than extent necessary. This is covered in the annual in-service training and pre-service training. Specialized and random staff interviews confirm that staff are knowledgeable in their reporting duties, the process of reporting, and to whom to report. Staff acknowledged through interviews that they would report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to a shift supervisor and document it immediately per memo.

All allegations are reported to the shift supervisor. Staff indicated through interviews they were aware of the methods available to them to report sexual abuse and sexual harassment of offenders including third-party and anonymous reports. Staff acknowledged through interviews that they would report and document any allegations immediately. They were aware they could privately report an incident. They identified the shift supervisor, Kentucky State Police, Sexual Assault Response Team (SART), and the PREA Compliance office as the investigators they could contact by phone or in writing.

Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.62 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.62 (a) The Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan, and CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires staff to take immediate action to protect any offender subject to substantial risk of sexual abuse and the immediate action that is to be taken to protect offenders who are in substantial risk of sexual abuse by removing the offender immediately from the area to a safe location. All staff interviewed knew the steps to take to protect an offender at risk for sexual abuse; to immediately separate the offender from the area to keep the offender safe and contact the shift supervisor. Line and supervisory staff work simultaneous to take protective measures as information is reported. The two (2) first responders interviewed outlined the process taken to ensure the safety of the offender. This information is also provided to staff through training, employee policies, and located on the informational card provided to the employee. In the audit period, the Pre-Audit Questionnaire reported zero (0) offenders were subject to substantial risk of imminent sexual abuse. During the Warden’s interview, she outlined the steps that would be taken to ensure the safety of the offender determined to be at substantial risk of imminent sexual abuse by removing the offender from the area and placing the offenders in safe housing during the investigation process. The classification committee would review the offender’s housing and classification plan.

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.63 (a)

- 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 No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? Yes No

115.63 (c)

- Does the agency document that it has provided such notification? Yes No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.63 (a) CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires upon receiving an allegation that an offender was sexually abused while confined at another facility, that the Warden of the facility that received the offender must immediately notify the facility where the sexual abuse is alleged to have occurred and start the investigation process.

In the audit period, there was one (1) allegation reported to the facility that an offender was abused while confined at Bell County Forestry Camp (BCFC). The proper notifications were made, and the allegations referred for investigation. The allegation was unfounded. There were zero (0) allegations sent to another facility that an offender was abused while confined there.

115.63 (b) (c) The facility must document and report as soon as possible but no later than seventy-two (72) hours the offender's allegation by submitting a priority email via the Department's mainframe followed by a phone call to alert of the allegation and impending email. The facility will print and retain a copy of the email in the appropriate PREA compliance folder. The reporting facility must also notify the agency PREA administrator. The facility staff is also responsible for notifying the head of the facility or appropriate office of the agency where the alleged incident occurred as soon as possible, but no later than seventy-two (72) hours after receiving the allegation. A letter in writing is prepared and faxed within seventy-two (72) hours, usually within twenty-four (24) hours from the time the facility becomes aware of the incident. This process was confirmed through the interviews with the Warden, PREA Compliance Manager, and the Agency Head.

115.63 (d) CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires upon receiving an allegation that an offender was sexually abused while confined at another facility the reporting facility must notify the agency PREA administrator. process was confirmed through the interviews with the Warden, PREA Compliance Manager, and the Agency Head. In the audit period, there was one (1) allegation reported to the facility that an offender was abused while confined at Bell County Forestry Camp (BCFC). The proper notifications were made, and the allegations referred for investigation. The allegation was unfounded. There were zero (0) allegations sent to another facility that an offender was abused while confined there.

Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.64 (a)

- 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 No
- 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 No
- 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 No
- 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 No

115.64 (b)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.64 (a) The Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan and CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires that all staff must report immediately any knowledge, suspicion, or information regarding an

incident of sexual abuse. The policies also clearly specify the detailed procedures for security and non-security staff when responding to an allegation of sexual abuse. The first security staff member to respond to the report is required to separate the alleged victim and abuser; preserve and protect the crime scene; and request the alleged victim and alleged abuser to take no action to destroy evidence. Policy also outlines that staff are to notify the shift supervisor. The Shift Supervisor will make all necessary notifications: PREA investigator, Internal Affairs, the Warden, the Institutional Day Officer (if after hours). The shift supervisor will also complete the EOR notification email. The responder responsibilities to separate the alleged victim and abuser, instruct not to take any actions that could destroy physical evidence, and ensure the crime scene is secure is covered in the PREA pre-service training and annual in-service training. Each staff member is provided an informational card identifying the members of (SART) and steps to take as a first responder.

Through interviews with investigative staff, higher and intermediate level supervisors, first responders, and random staff it was demonstrated that staff was knowledgeable in the steps as a first responder: to separate the alleged victim and abuser; preserve and protect the crime scene; and request the alleged victim and alleged abuser to take no action to destroy evidence, and contact supervisor. The two (2) first responders interviewed outlined the process that was taken to ensure the safety of the offender including separating the alleged victim from the abuser, place the offenders in safe secure area, secure the area as a crime scene, preserve the evidence, notify shift supervisor, notify medical, and document the allegation. In the audit period, there were four (4) allegations reported within the facility that an offender was sexually abused in the facility. A security staff member was the first responder for four (4) of the allegations. No allegations were within a time frame that still allowed for the collection of physical evidence.

At the time of the audit, there were zero (0) offenders who claimed being sexually abused while housed at Bell County Forestry Camp.

115.64 (b) The Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan and CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires that all staff must report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse. The policies also clearly specify the detailed procedures for security and non-security staff when responding to an allegation of sexual abuse. Each staff member is provided an informational card identifying the members of (SART) and steps to take as a first responder.

Through interviews with investigative staff, higher and intermediate level supervisors, first responders, and random staff it was demonstrated that staff was knowledgeable in the steps as a first responder. In the audit period, there were four (4) allegations reported within the facility that an offender was sexually abused in the facility. A security staff member was the first responder for four (4) of the allegations. No allegations were within a time frame that still allowed for the collection of physical evidence.

At the time of the audit, there were zero (0) offenders who claimed being sexually abused while housed at Bell County Forestry Camp (BCFC).

Standard 115.65: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.65 (a) The Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan outlines the coordinated effort between security staff, Kentucky State Police, medical and mental health services, and victim advocate/offender victim representative. The procedures provide a systemic notification and response following a reported sexual abuse incident. A checklist, PREA Allegation CHECKLIST, is provided to assist with the documentation of the completion of each part of the notification and response process. The Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan coordinates actions taken in response to an incident of sexual abuse among first responders, medical and mental health practitioners, investigators, Kentucky State Police, and facility leadership. The PREA Allegation CHECKLIST is utilized to ensure all process steps are completed and notifications are made. During staff interviews, each department detailed their responsibilities in their coordinated efforts during an incident. Interviews with the Warden and higher-level staff indicated a commitment by the facility leadership for handling a coordinated response. The Warden indicated the supervisors utilize the checklist for the investigation process to ensure all departments and activities are coordinated.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.66 (a)

- 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 limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? Yes No

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.66 (a) The Kentucky Department of Corrections reported there is no collective bargaining agreement entered into or renewed since August 2012. The facility can remove alleged staff sexual abusers for contact with any offenders or place an employee on administrative leave pending outcome of an investigation. The agency head designee confirmed that the agency has not entered any collective bargaining or other agreements sin August 2012.

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.67 (a)

- 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 No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? Yes No

115.67 (b)

- 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 No

115.67 (c)

- 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 No
- 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 No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? Yes No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? Yes No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?
 Yes No

115.67 (e)

- 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 No

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.67 (a) CPP 14.7 Sexual Abuse Prevention and Intervention Programs and CPP 3.22 Staff Sexual Offenses outlines protection of all offenders and staff who report sexual abuse or sexual harassment, cooperates with sexual abuse or sexual harassment investigations, and from retaliation by staff or offenders. The Warden has designated the PREA Compliance Manager as the staff member to monitor retaliation.

The PREA Compliance Manager monitors the offenders for retaliation. The PREA Compliance Manager completes at a minimum thirty (30) day reviews for retaliation. A file is maintained with the completed investigation, Offender 90 Day Monitoring Form, and case notes for each offender that is being monitored. As part of the monitoring, a review of the offender files for changes that may reflect retaliation concerns including housing changes, program changes, job assignment changes, disciplinary findings, and other information. The documentation included detailed information including notes on all changes, including why a housing, job or program change was made. This provided the documentation to ensure the changes were not made for retaliation. Further contact is made with the offender while making housing unit rounds. The PREA Compliance Manager is knowledgeable of the monitoring responsibilities. There is a ninety (90) day monitoring time period for retaliation review, however the time frame can be extended if warranted. The PREA Compliance Manager monitored all the offenders that were alleged victims. There were no monitoring cases extended beyond the 90 days for this audit period. The auditors reviewed the monitoring forms for the audit period. There were no offenders being monitored at the time of the audit.

The PREA Compliance Manager also monitors the staff sexual abuse retaliation. During this audit time period, there were no staff monitored for instances of retaliation. The process is to complete monitoring reviews at a minimum every thirty (30) days for retaliation. A file is maintained with a completed investigation, Protection Against Retaliation – Staff Form, and case notes for each staff that is being monitored. As part of the review, performance reviews,

reassignments of staff, discipline, and staff information are reviewed to determine if retaliation is occurring. The monitoring includes periodic in-person status checks every thirty (30) days. There is a ninety (90) day monitoring time period for retaliation review, however the time frame can be extended if warranted. When evidence suggests the staff member is experiencing or expresses fear of retaliation for reporting and cooperating with sexual abuse and/or harassment investigations, the PREA Compliance Manager will discuss the case with the Warden, and the staff member will be advised of the availability of emotional support services. Different measures to protect the staff may include different job position, shift, and/or work hours while the investigation of retaliation is in progress. During the interview with the PREA Compliance Manager the process was outlined to be taken that matched the policy and procedures.

115.67 (b) CPP 14.7 Sexual Abuse Prevention and Intervention Program dictates that retaliation by or against any party involved in a complaint shall be strictly prohibited. Emotional support services shall be provided as well as appropriate measures taken to protect any individual who expresses a fear of retaliation.

As part of the monitoring, a review of the offender files for changes that may reflect retaliation concerns including housing changes, program changes, job assignment changes, disciplinary findings, and other information. The documentation included detailed information including notes on all changes, including why a housing, job or program change was made. This provided the documentation to ensure the changes were not made for retaliation. Further contact is made with the offender while making housing unit rounds. The PREA Compliance Manager is knowledgeable of the monitoring responsibilities.

115.67 (c) The PREA Compliance Manager monitors the offenders for retaliation. The PREA Compliance Manager completes at a minimum thirty (30) day reviews for retaliation. A file is maintained with the completed investigation, Offender 90 Day Monitoring Form, and case notes for each offender that is being monitored. As part of the monitoring, a review of the offender files for changes that may reflect retaliation concerns including housing changes, program changes, job assignment changes, disciplinary findings, and other information. The documentation included detailed information including notes on all changes, including why a housing, job or program change was made. This provided the documentation to ensure the changes were not made for retaliation. Further contact is made with the offender while making housing unit rounds. The PREA Compliance Manager is knowledgeable of the monitoring responsibilities. There is a ninety (90) day monitoring time period for retaliation review, however the time frame can be extended if warranted. The PREA Compliance Manager monitored all the offenders that were alleged victims. There were no monitoring cases extended beyond the 90 days for this audit period. The auditors reviewed the monitoring forms for the audit period. There were no offenders being monitored at the time of the audit.

115.67 (d) The PREA Compliance Manager monitors the offenders for retaliation. The PREA Compliance Manager completes at a minimum thirty (30) day reviews for retaliation. Further contact is made with the offender while making housing unit rounds. A review of monitoring forms, inmate case records, and an interview with the PREA Compliance Manager confirm compliance with this standard.

115.67 (e) If a staff member or offender who reported sexual abuse or cooperated with an investigation expresses a fear of retaliation, the facility and agency will take appropriate measures to protect that individual against retaliation. Protection can be through housing change, program changes, staff assignment changes, and unit transfers. There were zero (0) allegations of retaliation made by staff during the audit period.

Standard 115.68: Post-allegation protective custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.68 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.68 (a) CPP 10.2 Special Management Inmates and The Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan prohibits the placement of offenders who alleged to have suffered sexual abuse in involuntary segregated housing (special housing) unless an assessment of all available alternatives have been made and a determination has been made that there is no available alternative means of separation from likely abusers. The Bell County Forestry Camp does not have involuntary segregated housing. If an offender would be placed in alternative housing, temporary holding cell, the offender would have a review conducted within 24 hours and, if need be, transferred to another facility within seventy-two (72) hours. The Warden indicated that placement would be based on a case by case basis and that all other alternatives would be considered including housing changes and unit transfers.

There were no offenders who suffered sexual abuse held in alternative housing, temporary holding cell, in the audit period. From the interviews with staff and offenders, the auditor determined that the facility was addressing individual housing and program needs consistent with the security and safety of the offender. CPP 10.2 Special Management Inmates direct that if an offender is placed in segregation housing for protective custody, the offender would have access to programs, privileges, educations, and work opportunities to the extent possible. The PREA Compliance Manager indicated the offender would receive the same privileges as

general population for recreation time, law library, shower, visiting, and phone calls and any restrictions will be documented and forwarded to the Deputy Warden for review.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA
- 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 No NA

115.71 (b)

- 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 No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? Yes No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?
 Yes No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? Yes No

115.71 (d)

- 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 No

115.71 (e)

- 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 No

- 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 No

115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? Yes No
- 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 No

115.71 (g)

- 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 No

115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? Yes No

115.71 (i)

- 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 No

115.71 (j)

- 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 No

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (l)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.71 (a) The PREA standard is met through the agency's policy 14.7 Sexual Abuse Prevention and Intervention Programs, PREA Update and Investigative Standards Overview Guidance for the Field lesson plan, training schedules, Kentucky State Police General Policy Statement and agency list of Kentucky Department of Corrections trained PREA Investigators. These policies address conducting the sexual abuse and sexual harassment investigations including third-party and anonymous reports.

The agency follows a uniform evidence protocol to investigate sexual abuse and sexual harassment. The sexual investigations will be conducted promptly, early, and objectively including third party and anonymous reports, by investigators who have been specially trained in sexual abuse investigations. Through the review of investigation reports, the investigations were initiated immediately. This was also confirmed through the interviews with the unit investigators who conducts the administrative investigations. If the incident occurs after hours, the shift supervisor will begin the investigation process by completing Section 1 of the "Sexual offense Allegation Reporting Form" and notifying the Institutional Duty Officer, PREA Investigator, Internal Affairs, the Warden, and PREA Compliance Manager. Once on site, the trained Sexual Assault Response Team (SART) investigator and/or Kentucky State Police will take over the investigation and evidence collection. Once an offender protective investigation is initiated, notifications are made through email to the Warden.

Based on the review of the investigations, the agency's policies, and interviews with a facility staff, investigators, and offenders it was determined investigations into allegations of sexual abuse and sexual harassment are done promptly, thoroughly and objectively for all allegations. When an allegation is reported, the facility's investigator begins an administrative investigation immediately.

There were nine (9) allegations reported during the audit period. There was two (2) staff on offender allegations and seven (7) offender on offender allegations. Of the two (2) staff on offender allegations; there was one (1) staff on offender sexual abuse and one (1) staff on offender sexual harassment. The administrative findings of the staff on offender allegation of sexual abuse was one (1) unsubstantiated. The administrative findings of the staff on offender allegation of sexual harassment was one (1) unfounded. The Kentucky State Police did not open a case on either of the allegations. Of the seven (7) offender on offender allegations; there was five (5) offender on offender sexual abuse and two (2) offender on offender sexual harassment. The administrative findings of the offender on offender allegation of sexual abuse was one (2) unsubstantiated and three (3) unfounded. The administrative findings of the

offender on offender allegation of sexual harassment was two (2) unfounded. The Kentucky State Police did not open a case on any of the allegations. A review of all the administrative investigations was conducted by the lead auditor. As there were zero (0) allegations referred for criminal prosecution there were zero (0) Kentucky State Police investigation files available to review.

115.71 (b) In the review of the training records, all investigators have received special training in sexual abuse investigations. The specialized training curriculum, ERTC Specialized Training: Investigating Sexual Abuse in Correctional Settings and PREA Update and Investigative Standards Overview: Guidance for the Field, are utilized for the specialized training of investigators and reflect that investigators are being trained in conducting sexual abuse investigations in confinement settings. The specialized training curriculums PREA Update and Investigative Standards Overview: Guidance for the Field, 2013 ERTC Specialized Training: Investigating Sexual Abuse in Correctional Settings, and 2015 PREA Investigators Training includes techniques for interviewing sexual abuse victims, proper use of the Miranda and Garrity warnings, sexual abuse evidence collection in confinement setting, and the criteria and evidence to substantiate a case for administrative action or prosecution referral. The agency's two hundred eighty-six (286) state wide administrator investigators and five (5) Bell County Forestry Camp (BCFC) administrative investigators have completed the general PREA training and the required specialized training for investigators. The specialty training was verified through the investigator interviews and review of the training records.

115.71 (c) (f) (g) The investigators complete a written report with investigation findings. The report format contains the persons involved; a thorough summary of the incident including the physical, testimonial, and documentary evidence; notifications made with timeline; what action or inaction was taken; attachments from the investigation; administrative review and summary; and the Warden's comments. All investigation cases were reviewed. All contained the required information. The investigation reports were very detailed, well written, and easy to follow the reasoning of the findings.

115.71 (d) If the Sexual Assault Response Team (SART) investigator determines a crime has been committed, the case is referred to the Kentucky State Police for prosecution. There were zero (0) cases opened by the investigator that were referred for prosecution.

115.71 (e) The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as an offender or staff. Neither the agency nor the Kentucky State Police require an offender who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. All administrative and criminal investigations will be completed on all allegations even if the alleged abuser or victim transfers or departs employment with the agency.

115.71 (h) If the Sexual Assault Response Team (SART) investigator determines a crime has been committed, the case is referred to the Kentucky State Police for prosecution. There were zero (0) cases opened by the investigator that were referred for prosecution.

115.71 (i) The criminal and administrative investigation reports involving any sexual abuse assault must be retained for as long as the alleged abuser(s) is incarcerated or employed within the Kentucky Department of Corrections, plus five years. This process is supported by the Kentucky Department of Corrections Records Retention Schedule.

115.71 (j) Bell County Forestry Camp ensures compliance by starting, or continuing, an administrative PREA investigation just as it would if the employee was still employed at the facility. If the allegation appears to be criminal, the facility will refer the case to the Kentucky State Police for a criminal investigation.

115.71 (l) If the Sexual Assault Response Team (SART) investigator determines a crime has been committed, the case is referred to the Kentucky State Police for prosecution. There were zero (0) cases opened by the investigator that were referred for prosecution.

Kentucky State Police will provide updates on criminal investigations when requested. This was supported through interviews with the Sexual Assault Response Team (SART) Investigator and the Warden.

Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.72 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.72 (a) The PREA standard is met through the agency's policy 14.7 Sexual Abuse Prevention and Intervention Programs, PREA Update and Investigative Standards Overview Guidance for the Field lesson plan, training schedules, Kentucky State Police General Policy Statement and agency list of Kentucky Department of Corrections trained PREA Investigators. These policies address conducting the sexual abuse and sexual harassment investigations including third-party and anonymous reports.

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.73 (a)

- 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 No

115.73 (b)

- 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 No NA

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer posted within the inmate's unit? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer employed at the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (d)

- 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 No

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?
 Yes No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? Yes No

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.73 (a) CPP 14.7 Sexual Abuse Prevention and Intervention Programs, Bell County Forestry Camp Prison Rape Elimination Act (PREA) Sexual Assault Plan, and Specialized Investigation Training lesson requires that all offenders who make allegations of sexual abuse shall be informed of the investigation outcome whether the finding was substantiated, unsubstantiated, or unfounded. The process outlines that the offender will be notified and it shall be documented. If an offender is transferred prior to notification the offender is notified in writing. This process was confirmed during interviews with staff.

Kentucky State Police will provide updates on criminal investigations when requested. This was supported through interviews with the Sexual Assault Response Team (SART) investigator and the Warden. The investigation updates to offenders of prosecution cases are made through the PREA Compliance Manager.

Whether the allegation of sexual abuse was by a staff member or inmate, the PREA Compliance Manager informs the offender of the status of the staff member to include whether the staff member is no longer posted within the offender's unit, the staff member is no longer employed at the facility, the agency's learns that the staff member has been indicted on a charge related to sexual abuse within the facility, and/or the agency learns the staff member has been convicted on a charge related to sexual abuse within the facility. This notification is documented in writing and it is placed in a file.

The Pre-Audit Questionnaire indicated that zero (0) outcome notifications were made on the six (6) allegations. The six notifications were not made due to all allegations being anonymous.

115.73 (b) Kentucky State Police will provide updates on criminal investigations when requested. This was supported through interviews with the Sexual Assault Response Team (SART) investigator and the Warden. The investigation updates to offenders of prosecution cases are made through the PREA Compliance Manager.

115.73 (c) (d) (e) Whether the allegation of sexual abuse was by a staff member or inmate, the PREA Compliance Manager informs the offender of the status of the staff member to include whether the staff member is no longer posted within the offender's unit, the staff member is no longer employed at the facility, the agency's learns that the staff member has been indicted on a charge related to sexual abuse within the facility, and/or the agency learns the staff member has been convicted on a charge related to sexual abuse within the facility. This notification is documented in writing and it is placed in a file.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? Yes No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? Yes No

115.76 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than 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 No

115.76 (d)

- 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 No

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.76 (a) (b) (c) CPP 3.22 Staff Sexual Offenses states “staff members found to have violated this policy shall be subject to disciplinary sanctions up to and including termination, based upon the findings of the investigation. Depending on the nature of the complaint, the Division of Personnel Services, the Office of Legal Services and the appropriate Deputy Commissioner shall determine whether the investigation shall be conducted at the district or institutional level or by an outside investigator. During the investigation, the accused may be temporarily reassigned. The accused may be placed on special instigative leave.

There were zero (0) employees that violated the agency sexual abuse or sexual harassment policies. There were zero (0) employees terminated or resigned prior to termination. When a staff member resigns during an investigation, the facility continues the investigation as if the employee was still working at the facility, including referring the case to the Kentucky State Police for a criminal investigation when it is deemed the allegation could be a criminal offense.

115.76 (d) CPP 3.22 Staff Sexual Offenses states “Depending on the nature of the complaint, the Division of Personnel Services, the Office of Legal Services and the appropriate Deputy Commissioner shall determine whether the investigation shall be conducted at the district or institutional level or by an outside investigator.”

There were zero (0) employees that violated the agency sexual abuse or sexual harassment policies. There were zero (0) employees terminated or resigned prior to termination. When a staff member resigns during an investigation, the facility continues the investigation as if the employee was still working at the facility, including referring the case to the Kentucky State Police for a criminal investigation when it is deemed the allegation could be a criminal offense.

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? Yes No

115.77 (b)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.77 (a) CPP 3.22 Staff Sexual Offenses prohibit contractors or volunteers who engaged in sexual abuse to have contact with offenders and require they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. This was supported by the volunteer and contractor training and orientation manual. Interviews with three (3) contractors and volunteers confirmed they were aware of the policies and the remedial measures that could occur for engaging in sexual abuse or sexual harassment of offenders. The Warden stated during the interview that the volunteer/contractor would be suspended from entering the facility during the investigation. Also, she indicated that any licensing body would be notified upon completion of the investigation. If the sexual abuse case is substantiated, the volunteer/contractor would be prohibited from entering an agency facility and may be turned over for prosecution if warranted.

In the audit period, there have been zero (0) contractors or volunteers who have violated the agency sexual abuse or sexual harassment policies.

115.77 (b) CPP 3.22 Staff Sexual Offenses prohibit contractors or volunteers who engaged in sexual abuse to have contact with offenders and require they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The contractor/volunteer will also be prohibited from further contact with offenders. This was supported by the volunteer and contractor training and orientation manual. Interviews with

three (3) contractors and volunteers confirmed they were aware of the policies and the remedial measures that could occur for engaging in sexual abuse or sexual harassment of offenders. The Warden stated during the interview that the volunteer/contractor would be suspended from entering the facility during the investigation. Also, she indicated that any licensing body would be notified upon completion of the investigation. If the sexual abuse case is substantiated, the volunteer/contractor would be prohibited from entering an agency facility and may be turned over for prosecution if warranted. The facility would take appropriate remedial measures for any violation of agency sexual abuse or sexual harassment policies and would consider whether to prohibit further contact with offenders.

In the audit period, there have been zero (0) contractors or volunteers who have violated the agency sexual abuse or sexual harassment policies.

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.78 (a)

- 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 No

115.78 (b)

- 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 No

115.78 (c)

- 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 No

115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? Yes No

115.78 (e)

- 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 No

115.78 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? Yes No

115.78 (g)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.78 (a) CPP 15.2 Rule Violations and Penalties he agency's policies outline disciplinary sanctions for offenders for sexual abuse and sexual harassment. The offenders are subject to disciplinary sanctions following an administrative finding that the offender engaged in offender-on-offender sexual abuse or following a criminal finding of guilt for offender-on-offender sexual abuse.

There were zero (0) administrative findings of offender-offender sexual behavior. There were zero (0) criminal findings of guilt for offender-on-offender sexual assault.

115.78 (b) (c) The Warden indicated in the interview that disciplinary sanctions could include restriction of privileges, extra duty assignment, restitution, loss of privileged housing, assignment to disciplinary segregation, and loss of good time. The policy and the Warden stated the sanctions would be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories; and consider whether an offender's mental disabilities or mental illness contributed to his behavior.

115.78 (d) CPP 13.13 Behavioral Health Services and Mental Health Policy statement outlines the program to address the needs of sex offenders including providing need specific rehabilitative interventions designed to limit an offender's risk to reoffend. An offender can be referred to programming based on the mental health assessment of the offender abuser. During the interviews with medical and mental health staff, they indicated that an offender's

participation is not required as a condition of access to programming or other benefits. This supports the answer provided by the facility on the Pre-Audit Questionnaire.

115.78 (e) CPP 15.2 Rule Violations and Penalties describes Sexual Behavior as seductive or obscene acts including masturbation, unwelcome touching, intimate touching, penetration of another's body cavity and homosexual and heterosexual activity and is not considered Sexual Assault.

115.78 (f) CPP 14.7 Sexual Abuse Prevention and Intervention Programs 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 of lying even if an investigation does not establish evidence sufficient to substantiate the allegation.

115.78 (g) CPP 15.2 Rule Violations and Penalties describes Sexual Behavior as seductive or obscene acts including masturbation, unwelcome touching, intimate touching, penetration of another's body cavity and homosexual and heterosexual activity and is not considered Sexual Assault.

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexual abuse

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.81 (a)

- 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 No NA

115.81 (b)

- 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 No NA

115.81 (c)

- 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? Yes No

115.81 (d)

- 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 No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.81 (a) CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires medical and mental health follow-up within fourteen (14) business days for those offenders who disclosed during screening prior sexual victimization or previously perpetrated sexual abuse whether it occurred in an institutional setting or in the community. At intake screening, if the offender has disclosed prior sexual victimization and/or previously perpetrated sexual abuse the offender is referred for medical and mental health services. If deemed as an emergency or a serious nature, the offender is seen immediately by medical and mental health. All other follow-ups from referrals will be seen by medical and mental health within fourteen (14) days. During interviews with medical and mental health staff, they outlined the screening process and confirmed that follow-ups are conducted within the proper time frames.

Two (2) offenders were interviewed that disclosed victimization during the screening process. Both offenders interviewed acknowledged they were offered medical and mental health services the same day as screening. One (1) offender indicated that he turned down the referral. The other offender indicated he was seen the next day.

115.81 (b) (c) CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires medical and mental health follow-up within fourteen (14) business days for those offenders who disclosed during screening prior sexual victimization or previously perpetrated sexual abuse whether it occurred in an institutional setting or in the community. At intake screening, if the offender has disclosed prior sexual victimization and/or previously perpetrated sexual abuse the offender is referred for medical and mental health services. If deemed as an emergency or a serious nature, the offender is seen immediately by medical and mental health. All other follow-ups from referrals will be seen by medical and mental health within fourteen (14) days.

During interviews with medical and mental health staff, they outlined the screening process and confirmed that follow-ups are conducted within the proper time frames.

115.81 (d) Information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners, and other staff as required; CPP 14.7 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.” Information is shared with appropriate staff including the Warden, Assistant Wardens, Majors, Captains, Classification, and the PREA Compliance Managers as needed to make housing, bed, work, education, and program assignments. The medical and mental health staff obtain informed consent before reporting prior sexual victimization that did not occur in an institutional setting. This process was confirmed through interviews with medical and mental health staff, the Warden, and the PREA Compliance Manager.

115.81 (e) CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires medical and mental health professionals to obtain informed consent from the offender prior to reporting information related to a prior sexual victimization that did not occur in a facility. This process was confirmed through interview with Medical and Mental Health staff.

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.82 (a)

- 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 No

115.82 (b)

- 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 No

- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Yes No

115.82 (c)

- 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 No

115.82 (d)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.82 (a) CPP 14.7 Sexual Abuse Prevention and Intervention Programs and Bell County Forestry Camp (BCFC) Prison Rape Elimination Act (PREA) Sexual Assault Plan indicate that offenders who are victims of sexual abuse shall be afforded access to forensic medical examinations at an outside facility without financial cost where evidentiary or medically appropriate. The policies also indicate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. Emergency medical attention is provided through the facility's medical department. Medical and Mental Health are contracted through Wellpath. The Medical department is staffed from 6:00 am – 7:30 pm. The HSA is on call after hours by telephone, or if needed, medical will come to the facility based on the situation. Mental Health needs are provided by Tele Tsyh weekly. Psychology also has an afterhours call schedule. There were zero (0) alleged victims of sexual assault who required forensic exam.

115.82 (b) Per Bell County Forestry Camp (BCFC) Prison Rape Elimination Act (PREA) Sexual Assault Plan, upon Initial Notification, the Staff First Responder shall separate the inmate from the location for their safety and the security of the institution and at no time shall the inmate be left alone. Until further notification and investigation, the inmates involved should not be allowed to shower, remove clothing, use the restroom, eat, drink or brush their teeth. The Frist Responder shall immediately notify the Shift Supervisor who will insure the

victim is immediately escorted by a Supervisor to the BCFC Medical Department for the necessary examination, treatment and evaluation by Medical Staff. Interviews with staff first responders confirmed they understood the role of the first responder including taking actions to protect the victim and then notifying the shift supervisor.

115.82 (c) CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires offenders receive timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis at St. Joseph's Hospital. Additional education and follow-up treatment, and testing are provided as needed. The interview with medical staff confirmed this process.

115.82 (d) CPP 14.7 Sexual Abuse Prevention and Intervention Programs indicates that current and previous victims of sexual abuse shall receive any medical and mental health services related to sexual abuse at no cost to the offender.

Interviews with staff first responders confirmed they understood the role of the first responder including taking actions to protect the victim and then notifying the shift supervisor. Upon an allegation of sexual abuse, the shift supervisor begins the notifications which include medical and mental health services as outlined in the Bell County Forestry Camp (BCFC) Prison Rape Elimination Act (PREA) Sexual Assault Plan. This process was verified through interviews with staff and medical and mental health practitioners.

CPP 14.7 Sexual Abuse Prevention and Intervention Programs requires offenders receive timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis at St. Joseph's Hospital. Additional education and follow-up treatment, and testing are provided as needed. The interview with medical staff confirmed this process.

CPP 14.7 indicates that current and previous victims of sexual abuse shall receive any medical and mental health services related to sexual abuse at no cost to the offender. There were zero (0) offenders that reported sexual abuse while housed at Bell County Forestry Camp (BCFC).

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.83 (a)

- 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 No

115.83 (b)

- 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 No

115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? Yes No

115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) Yes No NA

115.83 (e)

- 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.) Yes No NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? Yes No

115.83 (g)

- 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 No

115.83 (h)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.83 (a) CPP 14.7 Sexual Abuse Prevention and Intervention Programs, Bell County Forestry Camp (BCFC) Prison Rape Elimination Act (PREA) Sexual Assault Plan, and the Kentucky Department of Corrections Memorandum of Understanding entered with the Kentucky Association of Sexual Assault Programs (Kasap) outline medical and mental treatment including evaluations, on-going care, and treatment to all offenders that have been victims and abusers.

115.83 (b) Additional education, follow-up treatment, and testing are provided as needed. Per Kentucky Department of Corrections Memorandum of Understanding entered with the Kentucky Association of Sexual Assault Programs in the event that an inmate-victim exhausts his, her, or their three allotted in-person sessions, refer subsequent requests for counseling to Commonwealth mental health staff by submitting a mental health referral form to the appropriate Commonwealth facility's or contracted private prison facility's medical department detailing the reasons for the referral.

115.83 (c) Medical and Mental Health treatment including evaluations, on-going care, and treatment is offered to all offenders that have been victims and abusers. The services and treatment are at no cost to the offenders and are consistent with the community level of care. The Medical and Mental Health staff during their interviews indicated that the healthcare services are consistent with the community level of care and in most cases better than the community since services are provided immediately.

115.83 (d) (e) Per CPP 14.7 Sexual Abuse Prevention and Intervention, all offenders who have been victims of sexual abuse in any correctional facility shall be offered any necessary treatment related to the sexual abuse, to include timely and comprehensive information about lawful pregnancy related medical services.

Bell County Forestry Camp does not house female offenders.

115.83 (f) Per CPP 14.7 Sexual Abuse Prevention and Intervention Programs and interviews with medical staff indicate that prophylactic treatment of venereal diseases is offered to victims of sexual abuse and the offender is scheduled for testing and education. These services are immediately offered through St. Joseph's Hospital.

115.83 (g) Per CPP 14.7 Sexual Abuse Prevention and Intervention Programs, and interviews with medical staff, all 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.

115.83 (h) CPP 14.7 Sexual Abuse Prevention and Intervention Programs require that Mental Health practitioners shall attempt to conduct an evaluation on all known offender-on-offender perpetrators within 60 days of learning of such abuse and provide treatment as deemed appropriate. Interviews with Mental Health staff indicate that a mental health evaluation of all known offender-on-offender abusers shall be attempted within sixty (60) days of learning of the

abuse and treatment shall be offered when deemed appropriate in accordance with Kentucky Department of Corrections policy. Mental health staff further indicated that the offender is seen within seventy-two (72) hours of the referral.

There were zero (0) confirmed offender on offender abuses in the audit period.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.86 (a)

- 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 No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? Yes No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? Yes No

115.86 (d)

- 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 No
- 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 No
- 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 No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? Yes No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes No

- 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 No

115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.86 (a) CPP 14.7 Sexual Abuse Prevention and Intervention Programs that a team that consists of upper-level management officials with input from line supervisor, investigators, and medical and mental health practitioners shall conduct a review ordinarily within 30 days of the conclusion of every sexual abuse investigation unless the allegation was determined to be unfounded. The Warden and the Incident Review Team complete an administrative review for all alleged sexual abuse and staff sexual harassment incidents. The Administrative Incident Review must be forwarded to the Department of Corrections PREA Administrator.

The Warden indicated that the review team includes the Warden, Assistant Wardens, Majors, Captain, Safe Prisons/PREA Managers, Medical, Mental Health, and as needed input from department heads, line supervisors, and investigators.

115.86 (b) CPP 14.7 Sexual Abuse Prevention and Intervention Programs that a team that consists of upper-level management officials with input from line supervisor, investigators, and medical and mental health practitioners shall conduct a review ordinarily within 30 days of the conclusion of every sexual abuse investigation unless the allegation was determined to be unfounded. The Warden and the Incident Review Team complete an administrative review for all alleged sexual abuse and staff sexual harassment incidents. The Administrative Incident Review must be forwarded to the Department of Corrections PREA Administrator.

115.86 (c) CPP 14.7 Sexual Abuse Prevention and Intervention Programs dictates that a team that consists of upper-level management officials with input from line supervisor, investigators, and medical and mental health practitioners shall conduct a review ordinarily within 30 days of the conclusion of every sexual abuse investigation unless the allegation was determined to be unfounded. The Warden and the Incident Review Team complete an administrative review for

all alleged sexual abuse and staff sexual harassment incidents. The Administrative Incident Review must be forwarded to the Department of Corrections PREA Administrator.

The facility's Warden obtains input from security supervisors, investigators, and medical and/or mental health practitioners when completing the review.

115.86 (d) The review shall be conducted in accordance with CPP 14.7 Sexual Abuse Prevention and Intervention Programs and shall include a review of the circumstances of the incident; the name(s) of the person(s) involved; events leading up to and following the incident; a consideration of whether the actions taken were consistent with agency policies and procedures; consider whether the allegation or investigation indicates a need to change policy or practice to better detect, or respond to sexual abuse; 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 affliction, or was motivated or otherwise caused by other group dynamics at the facility; an examination of the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; an assessment of the adequacy of staffing levels in that area during different shifts; an assessment as to whether monitoring technology should be deployed or augmented to supplement supervision by staff; recommendations to the facility administrator and Unit Safe Prisons/PREA Manager for improvements based on the above assessments; a review of whether lesser alternative means of managing the situation were available; an identification of actions, if any, that could be taken to avoid future incidents of a similar nature and identification of training needs; a determination of whether substandard employee conduct was a factor in the incident; and corrective actions taken: or document the reasons for not doing so.

115.86 (e) CPP 14.7 Sexual Abuse Prevention and Intervention Programs dictates that the facility will implement recommendations that result from the review; or document the reasons for not doing so. Sexual abuse incident reviews were completed on three (3) cases determined unsubstantiated and substantiated. The administrative incident review team reports were included in the investigation files for review. An interview with an Incident Review Team member indicated they review all five elements blind spots, review the incident area, building schedule, and whether cameras would supplement supervision in the area. The Warden indicated the review also includes whether protocol was followed, was the response appropriate, monitor staff compliance with rounds, staffing, whether priority I positions were manned, identifying unit vulnerabilities, are cameras in good positions or need adjustments, and what proactive actions can be taken to better the system. The Warden also stated the administrative team is responsible for monitoring for compliance. The review of the files and interviews with the Warden, Incident Review Team member, and PREA Compliance Manager demonstrates compliance with the standard.

Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.87 (a)

- 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 No

115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually? Yes No

115.87 (c)

- 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 No

115.87 (d)

- 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 No

115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) Yes No NA

115.87 (f)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.87 (a) CPP 14.7 Sexual Abuse Prevention and Intervention Programs the sexual abuse data shall be collected for every allegation of sexual abuse using the Sexual Offense Reporting

Form and a set of definitions that contains data necessary to answer all questions form the Survey of Sexual Violence requested annually form the Department of Justice. The annual report was reviewed by the lead auditor.

115.87 (b) CPP 14.7 Sexual Abuse Prevention and Intervention Programs the sexual abuse data shall be collected for every allegation of sexual abuse using the Sexual Offense Reporting Form and a set of definitions that contains data necessary to answer all questions form the Survey of Sexual Violence requested annually form the Department of Justice. The agency and the PREA Coordinator aggregate this incident based sexual abuse data at least annually. The 2017 Annual Report is available for review on the agency's website, as well as 2016 and 2015. The annual report was reviewed as part of the audit process.

115.87 (c) CPP 14.7 Sexual Abuse Prevention and Intervention Programs the sexual abuse data shall be collected for every allegation of sexual abuse using the Sexual Offense Reporting Form and a set of definitions that contains data necessary to answer all questions form the Survey of Sexual Violence requested annually form the Department of Justice. The lead auditor reviewed Surveys of Sexual Victimization during the audit.

115.87 (d) CPP 14.7 Sexual Abuse Prevention and Intervention Programs the sexual abuse data shall be collected for every allegation of sexual abuse using the Sexual Offense Reporting Form and a set of definitions that contains data necessary to answer all questions form the Survey of Sexual Violence requested annually form the Department of Justice. CPP 14.7 Sexual Abuse Prevention and Intervention Programs further dictates that all data collected be securely retained, be gathered from private institutions, and that the aggregated data collected be made annually to the public. The agency PREA Coordinator works closely with the PREA Compliance Managers to maintain, review, and collect all necessary data. This data is stored electronically by the Kentucky Department of Corrections (KDOC) PREA Coordinator. Information is gathered through the Kentucky Offender Management System (KMOS) on all alleged sexual abuse incidents that occur. The statistics are gathered per PREA Grant Counting Rules. The agency and the PREA Coordinator aggregate this incident based sexual abuse data at least annually. The 2017 Annual Report is available for review on the agency's website, as well as 2016 and 2015. The annual report was reviewed as part of the audit process.

Department policy that outlines the data collection process is per PREA Grant Counting rules.

115.87 (e) CPP 14.7 Sexual Abuse Prevention and Intervention Programs the sexual abuse data shall be collected for every allegation of sexual abuse using the Sexual Offense Reporting Form and a set of definitions that contains data necessary to answer all questions form the Survey of Sexual Violence requested annually form the Department of Justice. CPP 14.7 Sexual Abuse Prevention and Intervention Programs further dictates that all data collected be securely retained, be gathered from private institutions, and that the aggregated data collected be made annually to the public. The agency PREA Coordinator works closely with the PREA Compliance Managers to maintain, review, and collect all necessary data. This data is stored electronically by the Kentucky Department of Corrections (KDOC) PREA Coordinator. Information is gathered through the Kentucky Offender Management System (KMOS) on all alleged sexual abuse incidents that occur.

115.87 (f) The agency and the PREA Coordinator aggregate this incident based sexual abuse data at least annually. The 2017 Annual Report is available for review on the agency's website, as well as 2016 and 2015. The annual report was reviewed as part of the audit process.

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? Yes No

115.88 (b)

- 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 No

115.88 (c)

- 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 No

115.88 (d)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.88 (a) The PREA Grant Counting Rules outlines the what, and how, statistics are collected regarding allegations of sexual assault, sexual contact, and staff sexual misconduct from each correctional facility.

The agency PREA Coordinator works closely with the PREA Compliance Managers to maintain, review, and collect all necessary data. The report provides data evaluation, policies and program changes, camera improvements, training, and statistical information for yearly comparisons. The agency and facility utilize the monthly and annual reports to improve the effectiveness of its sexual abuse prevention, detection, and training, including identifying problem areas and taking corrective action on an ongoing basis. Through interviews with the PREA Compliance Manager, PREA Coordinator, and Warden and review of the facility's monthly reports it documents the data collection process and corrective actions taken by the facility.

115.88 (b) The PREA statistical report provided a comparison of allegations of sexual abuse and sexual harassment for calendar years 2013-2017 on all correctional facilities and private facilities that contract with the Kentucky Department of Corrections (KDOC) for community confinement offenders. The lead auditor reviewed the annual reports for 2015, 2016, and 2017.

115.88 (c) Before publishing the annual report, all personal identifiers are removed. The annual report is approved by the Kentucky Department of Corrections Commissioner then the report is published on the Kentucky Department of Corrections (KDOC) website. An interview with the Department Agency Head confirmed this practice.

115.88 (d) Before publishing the annual report, all personal identifiers are removed. The annual report is approved by the Kentucky Department of Corrections Commissioner then the report is published on the Kentucky Department of Corrections (KDOC) website. The 2017 PREA Annual Report is available on the website for review, as well as, 2016 and 2015. The report was reviewed as part of the audit process.

Standard 115.89: Data storage, publication, and destruction

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?
 Yes No

115.89 (b)

- 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 No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? Yes No

115.89 (d)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.89 (a) CPP 14.7 Sexual Abuse Prevention and Intervention Programs and Kentucky Department of Corrections (KDOC) Record Retention Schedule, direct how the incident-based information and aggregate data is collected, properly stored, and securely retained. The PREA Coordinator's responsibilities include collecting statistics regarding allegations of sexual assault, sexual contact, and staff sexual misconduct from each correctional facility including contracted facilities; preparing annual activity reports for distribution. Access to the data is controlled.

115.89 (b) The agency's aggregate data is available to the public through the agency's website <https://corrections.ky.gov/communityinforr/Pages/PREA.aspx>. The lead auditor reviewed an annual aggregated data report over four years of Kentucky Department of Correctional Facilities and Community Confinement Facilities sexual abuse and sexual harassment allegations. The lead auditor also reviewed the Kentucky Department of Corrections statistical report on sexual staff on inmate and inmate on inmate sexual abuse in the correctional facilities and community confinement facilities.

115.89 (c) Before publishing the annual report on the Kentucky Department of Correction's website, all personal identifiers are removed. Interview with the Agency PREA Coordinator and review of the 2017 annual report confirm compliance.

115.89 (d) The Kentucky Department of Corrections Records Retention Schedule prepared by the State Records Branch Archives and Records Management Division and approved by the State Archives and Records Commission outlines basic retention procedures for data collection, review, storage, and reporting of sexual abuse data which shall be retained and maintained for at least 10 years.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.401 (a)

- During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (*Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.*) Yes No

115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a "no" response does not impact overall compliance with this standard.*) Yes No
- If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is **not** the *second* year of the current audit cycle.) Yes No NA
- If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is **not** the *third* year of the current audit cycle.) Yes No NA

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility? Yes No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Yes No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?
 Yes No

115.401 (n)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

115.401 (a) (b) During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency did ensure that each facility operated by the agency was audited at least once and at least one-third of each facility type operated by the agency was audited.

115.401 (c) The Kentucky Department of Corrections has entered into agreements with private organizations for community confinement of inmates. Each contract permits contract monitoring and requires the program to achieve and maintain PREA compliance, and to arrange for the facilities to complete PREA Audits.

115.401 (h) During the on-site visit the facility provided the lead auditor access to, and the ability to observe, all areas of the facility. The lead auditor was permitted to observe all areas of the facility including, restricted housing units, medical, housing units, program areas, recreational areas, cafeteria area, classrooms, law library and administrative building.

115.401 (i) The lead auditor received all information requested of the facility to complete the PREA audit.

115.401 (m) The lead auditor conducted interviews with offenders and staff in private areas that supported the confidentiality of the conversations. The lead auditor was able to meet the recommended number of staff and offender interviews.

115.401 (n) The lead auditor observed posted signs advising how inmates could send confidential information or correspondence to the lead auditor like legal counsel.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility’s last audit report was published. 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 that there has never been a Final Audit Report issued.) Yes No NA

115.403 (f) All Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility’s last audit report was published.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The Lead Auditor reviewed the Department’s website and observed on the agency’s website all Final PREA Audit Reports. Kentucky Department of Corrections website <http://corrections.ky/communityinfo/Pages/PREA.aspx> confirms that the agency ensures that the auditor’s final report is published on the agency’s website. A review of the website found the Final Audit Reports for 12 PREA Audits for all 12 Kentucky Correctional Facilities in the first three-year cycle (2013-2016) and eight (9) PREA Audits for eight (9) Kentucky Correctional Facilities in the second three- year cycle (2016-2019).

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Sabina A. Kaplan

May 8, 2019

Auditor Signature

Date

¹ See additional instructions here: <https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110>.

² See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.