

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



[Following information to be populated automatically from pre-audit questionnaire]	
Name of facility: Bell County Forestry Camp (BCFC)	
Physical Address: 560 Correctional Drive, Pineville, Kentucky 40977	
Date report submitted: 10/09/2014	
Auditor Information	
Address: 801 West Prospector Place, Lincoln, NE 68522	
E-Mail: levi.bennett@nebraska.gov	
Telephone number: (402) 479-5890	
Date of facility visit: September 23 – 25, 2014	
Facility Information	
Facility mailing address: (if different from above) Same as above	
Telephone number: (606) 337-7065	
The facility is:	
<input type="checkbox"/> Military <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Private for profit <input type="checkbox"/> Municipal <input checked="" type="checkbox"/> State <input type="checkbox"/> Private not for profit	
Facility Type: <input type="checkbox"/> Jail <input checked="" type="checkbox"/> Prison	
Name of PREA Compliance Manager: Josh Hart Title: PREA Compliance Manager	
E-Mail Address: josh.hart@ky.gov Phone Number: (606) 337-7065	
Agency Information	
Name of agency: Kentucky Department of Corrections	
Governing authority or parent agency: (if applicable) Justice and Public Safety Cabinet	
Physical address: 275 East Main, Frankfort, KY 40602	
Mailing address: (if different from above) P.O. Box 2400, Frankfort, KY 40602	
Telephone Number: (502) 564-2200	
Agency Chief Executive Officer	
Name: LaDonna Thompson Title: Commissioner	
E-Mail Address: LaDonna.Thompson@KY.gov Telephone Number: (502) 564-4726	
Agency-Wide PREA Coordinator	
Name: Bryan K. Henson Title: PREA Coordinator	
E-Mail Address: bryan.henson@ky.gov Telephone Number: (270) 388-0241 ext. 206	

AUDIT FINDINGS

NARRATIVE:

A PREA Audit was conducted at the Bell County Forestry Camp (BCFC) September 23 – 25, 2014. The audit team consisted of three certified PREA Auditors (Certified by the Department of Justice to conduct PREA Audits) from the Nebraska Department of Correctional Services. Levi Bennett served as the chairperson, with Matt Heckman and Sarah Nelson rounding out the team. Prior to the physical on-site audit of the BCFC facility telephone interviews were conducted with the Kentucky Association of Sexual Assault Programming (KASAP). Telephone and email communication were used between the chairperson and the Bryan Hensen (KY-PREA Coordinator) and Josh Hart (BCFC – PREA Compliance Manager) to receive information while reviewing Agency and Facility policy and procedures.

The audit team would like to thank Warden Kathy Litteral, PREA Coordinator Bryan Henson, and PREA Compliance Manager Josh Hart for the warm hospitality shown prior to and during the audit. The work done by both Bryan Henson and Josh Hart is to be commended, the electronic files received prior to the audit were well organized which made reviewing of compliance with PREA standards regarding policy go in a very efficient manner. The open and responsive communication provided prior to the audit by both Bryan and Josh facilitated timely answers to auditor questions which enabled auditors to advance in reviewing of documentation.

On September 23, 2014 the audit team arrived at the BCFC and began the day meeting with the Agency PREA Coordinator (Bryan Hensen) and the BCFC Compliance Manager (Josh Hart). After a short audit team meeting the team was introduced to the BCFC Administrative Staff. After introductions Warden Litteral lead a tour of the entire BCFC.

Prior to the audit team arriving at the BCFC the chairperson had requested a roster of all inmates by unit and any inmates identified as being disabled, limited English proficient, transgender, intersex, gay, bisexual, who had reported sexual abuse, disclosed sexual victimization, or who had been or was being held in segregated housing due to risk of sexual victimization. It was also requested to have rosters of staff assignments ready for each shift to enable selection of staff to be interviewed upon arrival to the facility.

The audit team selected random inmates with at least one being selected from each unit and also an inmate who is limited English speaking. Note: there were no inmates who are identified as being gay, bisexual, transgender or intersex currently assigned to the BCFC. In all 12 inmates were identified and agreed to be interviewed. The audit team also selected 10 random staff, 3 from each shift and 1 day shift employee. Specialized staff interviewed on-site include the Warden, PREA Coordinator, PREA Compliance Manager, PREA Investigators (2), Intermediate/Higher Level (Deputy Warden & Captain), Medical, Volunteer Coordinator (Chaplain) & a Volunteer via telephone, Classification Treatment Officer II (performs screening for risk of victimization/abusiveness), two members of the incident review team, first responders and Intake staff. The Agency Head, Contract Administrator, as well as a representative of KASAP were interviewed telephonically prior to the on-site audit.

The BCFC provide the audit team with 3 private locations to conduct interviews with both staff and inmates. Interviews were conducted during all three shifts on-site and with inmates assigned to jobs both inside the facility and outside the facility.

The audit team was extremely pleased with responses of the correctional officers and other staff interviewed. The impression given was one of understanding of the training they had received regarding PREA and the importance of their interactions with the inmate population.

During the first day of the on-site audit it was discovered there were the unintended potential for employees to gain access to sensitive data; specifically, computer user profiles allowing all staff at the BCFC access to the Risk Assessments through KOMS. The Warden, PREA Coordinator, and PREA compliance manager were notified immediately the audit team found this to effect the meeting of two standards (115.41 (i.) & 115.81 (d.)). Bryan Hensen contacted the Agency's information systems department and was able to have the user profiles changed prior to the end of the on-site audit. Two audit team members went to three different locations and verified staff that had previous access no longer had access to the Risk Assessments.

The audit team commends the BCFC Warden and Administration for taking the actions which prevents the potential for inmates to be sexually abused by contractors. Upon the review of a May 2013 incident (PREA Investigation) which involved an contract employee from the previous canteen vender it was decided to change the contract with potential canteen vendors to include that of no longer allowing inmates to provide labor for the contract vendor. In doing so this prevented inmates from entering an area which may allow for the inmate(s) to be out of view of staff and or cameras. Taking such actions demonstrates the commitment by the BCFC Administration and the KDOC to protect inmates from possible future abuses.

Upon completion of the interviews and review on documentation the audit team conducted an audit "exit-meeting." The audit team explained their findings which were 39 standards met, 2 standards found to be non-applicable, and 2 standards exceeded. The audit team also took the opportunity to acknowledge specific staff who demonstrated exemplary knowledge of PREA and showed genuine concern for those entrusted in their care.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Bell County Forestry Camp (BCFC) is located on approximately 15 acres in rural southeastern Kentucky. The BCFC is approximately fourteen miles southwest of Pineville, Kentucky. The BCFC is a minimum-security facility housing 300 adult male felons and employs 49 full time staff and 1 part time employee. This facility opened in October of 1962, initially as a satellite of the Kentucky State Reformatory in LaGrange, Kentucky, with a population of 27 inmates. The facility reached its current population of 300 inmates on August 1, 2007. The institution is accredited by the Commission on Accreditation for Corrections, American Correctional Association, and first obtaining accreditation in 1990.

The BCFC provides inmate labor to the Division of Forestry for fire suppression in Bell and surrounding counties during fire seasons. In addition to forest fire suppression, inmate labor is also supplied to the Transportation Cabinet (4 road crew details), Bell County State Highway Garage, Harlan County State Highway Garage, Knox County State Highway Garage, Bell County fiscal court, City of Middlesboro, City of Pineville, Bell County School System (Frakes School Center and Page School Center) and special details for State Parks and Henderson Settlement. The average inmate labor count for outside crews is 70 inmates daily.

Programs available at the BCFC include literacy and GED, Microsoft Office and C-Tech Technical classes, college classes, religious services, organized sports and various forms of recreation, on the job training, psychological/psychiatric services (outside referrals), Alcoholic and Narcotics Anonymous, Parenting and individual counseling as well as a cognitive behavior modification program (Moral Resonance Therapy). Additional services and support includes medical, library, legal aide services, mail services, visitation and access to telephones. Two Classification Treatment Officers (CTO I) and a CTO II assists inmates with preparation for parole appearances and pre-release counseling as well as provides risk assessments for the Parole Board.

The Department of Corrections' K-9 Pilot Program was established at BCFC February 26, 2005. The K-9 Unit now consists of eleven bloodhounds, a lieutenant and 5 officers. Initially, two officers were trained at the Louisiana State Penitentiary (LSP) at Angola in "Man Tracking" and K-9 Individual Tracking with the Bloodhounds. LSP donated four Bloodhounds to establish the K-9 program at BCFC for the Kentucky Department of Corrections. BCFC supplies tracking dogs for the remaining DOC facilities as well as rescue squads, search and rescue, and other law enforcement agencies.

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: **2**

Number of standards met: **39**

Number of standards not met: **0**

Number of standards Non-applicable: **2**

115.11	ZERO TOLERANCE OF SEXUAL ABUSE AND SEXUAL HARASSMENT; PREA COORDINATOR
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>The Kentucky Department of Corrections (KDOC) has clear policy (CPP 14.7) outlining their zero tolerance standard, outlines the agency’s approach to preventing, detecting, and responding to any and all forms of sexual abuse or sexual harassment. CPP 14.7 provides definitions for terms regarding sexual assault and sexual abuse. The Agency has establishment of an agency-wide PREA Coordinator (Bryan Hensen) and PREA Compliance Managers for each facility it operates. Mr. Hensen is a certified PREA auditor. Mr. Hensen was appointed as the Agency PREA Coordinator November 1, 2012. Josh Hart was appointed as the PREA Compliance Manager for the BCFC effective October 1, 2013.</p>	

115.12	CONTRACTING WITH OTHER ENTITIES FOR THE CONFINEMENT OF INMATES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>The BCFC does not contract with any entities to house inmates; however, the KDOC does contract with Kentucky Community Services Centers which the BCFC does transfer inmates to. The KDOC contracts with 34 entities which house inmates. The Agency Contract Administrator has been working with the KDOC PREA Coordinator in the development of a checklist to be utilized during inspections for compliance. Initial inspections were completed in Spring of 2014. Each contracted entity will be inspected this fall (began September 2014). The PREA KDOC 12 page “Inspection Tool” was reviewed by the audit team. Contract between KDOC and Pathways/Morehead Inspiration Center was reviewed, and clearly indicates the “contract shall comply with the Prison Rape Elimination Act (PREA) (42 U.S.C. § 15601, et seq.) and with all applicable PREA National Standards (28 C.F.R. Part 115)...”</p>	

115.13	SUPERVISION AND MONITORING
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>The BCFC complies with a staffing plan that ensures safety and security of all is maintained. No deviations of the staffing plan have occurred. According to all interviewed overtime is and will be assigned. Should there ever be any deviation from the staffing plan it will be documented. The BCFC provided documentation (July 31, 2014 PREA Staff Supervision & Monitoring Meeting</p>	

minutes, camera maps, daily shift rosters, workload formula, staffing pattern memo, memo from the agency PREA Coordinator demonstrating input, supervisor post orders and logs showing unannounced rounds) showing the BCFC keeps PREA standard considerations in mind when determining the need for additional staff and video monitoring. Logbooks and interviews clearly demonstrate Supervisors conduct unannounced rounds on all shifts throughout the facility.

115.14 **YOUTHFUL INMATES**

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

Auditor comments, including corrective actions needed if does not meet standard

The BCFC does not house youthful inmates; KDOC policy (CPP 18.3) is for all male youthful inmates to be housed at the Kentucky State Reformatory.

115.15 **LIMITS TO CROSS GENDER VIEWING AND SEARCHES**

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

Auditor comments, including corrective actions needed if does not meet standard

The BCFC employees do not conduct cross gender strip searches per KDOC policy CPP 9.8. Note: BCFC is an all-male facility and does not house female inmates making 115.15 (b) non-applicable. When cross gender staff are on the housing units, there is an announcement made over the intercom of opposite gender staff being on the unit. It was evident from the tour and offender and staff interviews these announcements are being made routinely. Such announcements are logged in log books on the housing units. All staff are trained to conduct all pat searches in a professional manner. The BCFC also uses a light w/sign opposite gender staff present on the unit, once the announcement is made the light is turned on next to the sign and remains on until all opposite gender employees have left the unit. KDOC policy CPP 14.7 provides for inmates to be able to shower, perform bodily functions and change clothing without opposite gender staff viewing their buttocks or genitalia. The training lesson plan for "Security Procedures – Body Search Techniques" was reviewed which does contain information regarding searches of LGBTI inmates. A sample of training records for BCFC employees was reviewed to confirm training was attended.

115.16 **INMATES WITH DISABILITIES AND INMATES WHO ARE LIMITED ENGLISH PROFICIENT**

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

Auditor comments, including corrective actions needed if does not meet standard

BCFC has PREA information in both English and Spanish posted throughout the facility. The BCFC Handbook is available in both Spanish and English. PREA brochures are offered in Spanish, English, as well as in large print for both Spanish and English. The KDOC also offers a PREA brochure in Braille. Staff interpreters are used when necessary to communicate with Spanish speaking inmates. During the on-site audit an inmate who spoke limited English was interviewed with the assistance of a facility interpreter.

115.17 | **HIRING AND PROMOTION DECISIONS**

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

Auditor comments, including corrective actions needed if does not meet standard

KDOC has clear policy (CCP 3.6 Background Investigations of Employees and Applicants for Promotion and Employment) outlining the agency’s hiring and promotion practices. Thorough background checks are conducted on all potential applicants, as well as contractors who may have contact with inmates. BCFC exceeds this standard as they conduct annual NCIC and Operator (Driver) License checks annually, auditors were provided the opportunity to review annual checks to include a log verifying who conduct these checks. The agency provides two opportunities for applicants/employees to describe any misconduct as described in 115.17 (a); first at the time of application for promotion or hiring and then at the time of the interview through means written self-evaluations. Internally all information is shared and externally information will be shared once the contacting agency’s identification is verified.

115.18 | **UPGRADES TO FACILITIES AND TECHNOLOGY**

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

Auditor comments, including corrective actions needed if does not meet standard

The KDOC exceeds this standard as the agency has policy (CCP 7.1 Construction, Renovation & Expansion Guidelines) requiring the agency/facility to consider the effect of design, modifications, or expansion on the agency’s ability to protect inmates from sexual abuse. This standard does not require an agency to have policy. The BCFC has not acquired or substantially modified any existing facilities/buildings since August 20, 2012. Documentation was provided showing discussions where held regarding acquiring additional cameras and camera placement.

115.21 | **EVIDENCE PROTOCOL AND FORENSIC MEDICAL EXAMINATIONS**

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

Auditor comments, including corrective actions needed if does not meet standard

KDOC has policy and procedures outlining evidence protocols and requirements for forensic exams by medical professionals. KDOC/BCFC refers all allegations of sexual abuse at a/the institution to the Kentucky State Police (KSP) for investigation (CPP 14.7). No youthful inmates are housed at the BCFC. The St. Joseph's – London Hospital is the facility used by BCFC for forensic exams. KDOC has established with the community victim advocacy organization (Kentucky Regional Rape Crisis Centers) to provide services to offender victims of sexual abuse. One inmate was taken to the London Hospital (St. Joseph's) for a forensic exam; documentation demonstrates the exam was done by a SANE Nurse at no cost to the offender.

115.22 POLICIES TO ENSURE REFERRALS OF ALLEGATIONS FOR INVESTIGATIONS

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

Auditor comments, including corrective actions needed if does not meet standard

KDOC policy (CPP 14.7) dictates all Allegations of sexual abuse and sexual harassment shall be promptly, thoroughly and objectively investigated. The BCFC has two trained PREA investigators on-site who conduct administrative investigations. Allegations of sexual abuse which involve potential criminal behavior are referred to the Kentucky State Police (KSP) for investigation. Information regarding their policy can be found on their website (<http://corrections.ky.gov/communityinfo/Pages/PREA.aspx>).

115.31 EMPLOYEE TRAINING

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

Auditor comments, including corrective actions needed if does not meet standard

Review of KDOC Division of Corrections Training Lesson Plan and Power Point presentation along with review of training transcripts for BCFC staff demonstrates BCFC employees have received an initial 3 hour course of training in all required elements regarding PREA. Annually each KDOC/BCFC employee receives .5 hours of computer based training regarding PREA and 1.5 hours of face-to-face training regarding PREA for a total of 2 training hours each year. A random review of training records demonstrated employees have attended PREA training. Interviews with staff demonstrated all were aware and understood the zero tolerance policy.

115.32 VOLUNTEER AND CONTRACTOR TRAINING

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

Auditor comments, including corrective actions needed if does not meet standard

Volunteers and contractors who have contact with inmates have received training on their

responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Review of the contractor and volunteer training records demonstrates each have to sign a PREA Training Acknowledgement form. Note: the auditors were extremely impressed with the state of the training records and acknowledgement forms for contractors and volunteers. Interviews conducted with the volunteer coordinator, one volunteer, and one contractor demonstrated their knowledge of PREA and their responsibilities and agency zero tolerance policy.

115.33

INMATE EDUCATION

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

Auditor comments, including corrective actions needed if does not meet standard

During the tour of the BCFC and subsequent walks through areas auditors saw PREA information in the housing units was in both English and Spanish, posters located throughout the facility in general areas were also in both English and Spanish. Inmates are provided with a PREA pamphlet/brochure during intake, there is PREA information located in the BCFC Inmate Handbook which is printed in both English and Spanish. It was clear from the interviews conducted with inmates they definitely knew the KDOC has a zero tolerance policy regarding sexual abuse/harassment. The inmates knew they had a right to be free from sexual harassment; however, all were not clear as to how much confidentiality would be provided to them. The inmates interviewed were aware of the availability of a free phone number to call and report anonymously; however again were concerned they may still be listened to if they were to use the phone. Auditors with the assistance of a willing inmate called two numbers to numbers which are being advertised to the inmates as being confidential for reporting of sexual abuse/harassment and then with the assistance one of the on-site PREA investigators reviewed the Inmate Calling System. Neither the inmate's name, PIN, appeared to have made any calls during the times the calls were placed, indicating to the auditors the calls are confidential and employees are not able to listen to calls being placed to the 800 reporting number.

115.34

SPECIALIZED TRAINING: INVESTIGATIONS

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

Auditor comments, including corrective actions needed if does not meet standard

All KDOC PREA investigators are required specialized PREA training and documentation is maintained demonstrating they have received the training. Both BCFC PREA Investigators have received the ERTC SPECIALIZED TRAINING: INVESTIGATING SEXUAL ABUSE IN CORRECTIONA SETTINGS. The Kentucky State Police (KSP) require all KSP sworn personnel to attend PREA training to include investigations of criminal sexual abuse in confinement settings.

115.35	SPECIALIZED TRAINING: MEDICAL AND MENTAL HEALTH CARE
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
KDOC/BCFC medical staff do not conduct forensic medical examinations. Training records for medical personnel demonstrated the attended training. Inmates are transported to the St. Joseph's hospital in London, Kentucky for forensic medical examinations.	

115.41	SCREENING FOR RISK OF VICTIMIZATION AND ABUSIVENESS
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
All inmates are assessed during intake screening for their risks of being sexually abused by other inmates or sexually abusive towards other inmates. All assessments are conducted within 24 hours of arriving. Auditors reviewed documentation of the screenings and the instrument used. All questions required on the screening instrument are utilized, with the exception of whether an offender is housed solely for civil immigration purposes, as BCFC does not house this type of offender. Note: Initial review of controls on the dissemination within the facility of responses demonstrated all BCFC employees had access to this sensitive information. The BCFC Warden, KDOC PREA Coordinator, and PREA compliance manager were notified immediately the audit team found this level of access not in compliance with 115.41 (i.). The PREA Coordinator contacted the agency IT department to make the appropriate changes to user profiles. On the final day of the audit, auditors received word the user profiles had been changed to limit access to this sensitive information. Auditors along with the BCFC Compliance Manager watched three staff at three different locations login and found these individuals' user profiles no longer had access, thus correcting the deficiency.	

115.42	USE OF SCREENING INFORMATION
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
The BCFC uses the screening information to determine housing, bed, work, education, and program assignment with the goal of keeping inmates at high risks of being sexually victimized separate from those at high risks of being sexually abusive. At the time of the audit there were no inmates identified as being gay, transgender, or intersex being housed at the BCFC.	

115.43	PROTECTIVE CUSTODY
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
KDOC has policy in place ensuring inmates would only be placed in a segregation unit if no other safe options were available and would be assessed within 24 hours of placement. During the previous 12 months, there have been no inmates housed at the BCFC which were assessed to be at high risk for sexual victimization that would require protective custody. No inmates have been placed in segregated housing for this purpose during this audit period.	

115.51	INMATE REPORTING
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
Inmates being housed at the BCFC have multiple ways to report allegations, including verbally to staff, in writing through formal inmate correspondence or grievances or by calling one or both anonymous reporting hotlines (one for internal KDOC and one external); staff and third parties may also utilize a hotline to report an allegation privately. Interviews with staff indicate they are well aware to accept all reports and they are responsible for reporting them promptly. Note: The BCFC is a minimum/community custody prison without a segregation unit; however, the BCFC does have two holding cells to provide for immediate protection if necessary.	

115.52	EXHAUSTION OF ADMINISTRATIVE REMEDIES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
The KDOC does not impose time limits on when an offender may file a grievance regarding an allegation of sexual abuse (CPP 14.6), nor does it dictate they have to give the grievance to the staff member they are making the allegation against. All aspects of this standard in regards to timelines, who can file and proper procedures are met. Interviews with inmates indicated some were aware they could grieve sexual abuse and others were not sure but thought they may be able to do so. At the time of the Audit the BCFC had not received any grievances regarding sexual abuse during the previous 12 months.	

115.53	INMATE ACCESS TO OUTSIDE CONFIDENTIAL SUPPORT SERVICES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>The KDOC and the Kentucky Association of Sexual Assault Programs (KASAP) have developed an MOU to assure a unified effort to provide inmates with confidential emotional support service related to sexual violence. The BCFC community victim service provider is Cumberland River Comprehensive Care, Corbin which provides for confidential reporting and outside confidential support services to include hospital accompaniment for a Sexual Assault Forensic Exam. Inmates may contact them via phone or mail. Interviews with inmates indicated some were aware of these outside support services were available and some did not know.</p>	

115.54	THIRD-PARY REPORTING
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>The BCFC/KDOC provides a PREA Hotline toll free at 1-855-700-PREA (7732) for third parties to report allegations of sexual abuse and harassment, as is available on the KDOC website (http://corrections.ky.gov/communityinfo/Pages/PREA.aspx). Reporting options include on the signage located throughout the facility include encouraging not only the inmate to report sexual abuse but also that of using a third party to report "Have a family/friend report on your behalf." This signage is posted throughout the facility to include the visiting areas where family and friends may view the signs. This information is also disseminated to the staff and inmates by means of pamphlets and handbooks.</p>	

115.61	STAFF AND AGENCY REPORTING DUTIES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>KDOC policy (CPP 14.7) requires all staff to report immediately all knowledge, suspicion or information of an incident of a sexual offense within the KDOC or other correctional facility. All staff interviewed were familiar with their responsibilities and reporting procedures. Staff are issued a plastic "SART" (Sexual Assault Response Team) card identify initial steps and contact staff including the PREA Compliance Manager, Internal Affairs Investigator, PREA Investigator, and SART Medical Staff to include phone numbers for each.</p>	

115.62	AGENCY PROTECTION DUTIES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
KDOC policy (CPP 14.7) requires all staff to take immediate action to protect any inmate(s) which they learn is a subject to or is at substantial risk of imminent sexual abuse. Interviews with employees demonstrated they are familiar with their required actions and obligation to keep inmates safe.	

115.63	REPORTING TO OTHER CONFINEMENT FACILITIES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
KDOC policy (CPP 14.7) meets the requirements of this standard. Email dated 2/17/2014 documents the notification by the BCFC PREA Compliance Manager of allegations being made by an inmate during a time when he was assigned to a different KDOC facility. Memo from BCFC Compliance Manager indicates no notifications have been received from another facility of sexual abuse that occurred to an inmate while housed at the BCFC.	

115.64	STAFF FIRST RESPONDER DUTIES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
Although not required by this standard the KDOC does have policy (CPP 14.7) requiring staff to take specific steps to insure the safety of alleged victims. These procedures are outlined on a plastic "SART" (Sexual Assault Response Team) card which is issued to each BCFC employee. Auditors saw several employees have this card attached to their KDOC ID. The SART card identifies both initial steps and contact staff including the PREA Compliance Manager, Internal Affairs Investigator, PREA Investigator, and SART Medical Staff to include phone numbers for each. Employees who were interviewed appear to be well trained and knowledgeable about the actions they should and should not take in order to protect inmates and preserve possible crime scene evidence. Review of documents (PREA Investigation Report and Extraordinary Occurrence Report indicate staff following procedures set forth in policy.	

115.65	COORDINATED RESPONSE
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
The BCFC has operating procedures (BCFC PREA Sexual Assault Plan) which meet the requirements of this standard. Employees interviewed were knowledgeable about the BCFC Sexual Assault Plan and their roles with regard to duties and responsibilities.	

115.66	PRESERVATION OF ABILITY TO PROTECT INMATES FROM CONTACT WITH ABUSERS
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action) <input checked="" type="checkbox"/> Not Applicable	
Auditor comments, including corrective actions needed if does not meet standard	
Memo from PREA Compliance Manager indicating this standard is Non-Applicable. Neither the BCFC nor the KDOC has any collective bargaining power.	

115.67	AGENCY PROTECTION AGAINST RETALIATION
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
The agency has policy (CPP 3.22) requiring each facility it operates to designate a staff member or department be charged with monitoring retaliation. Memo from facility Warden designates the BCFC PREA Compliance Manager as the party responsible for monitoring possible acts of retaliation. KDOC policy (CPP 14.7) prohibits retaliation, defines retaliation as grounds for disciplinary action, and establishes monitoring shall occur for at least 90 days following an incident of sexual abuse. Documentation was provided showing no monitoring had occurred during the previous 12 months as there have been two separate PREA reports filed of which one was found to be unfounded and the other did not meet the standard of being a PREA sexual harassment event that would require monitoring.	

115.68	POST-ALLEGATION PROTECTIVE CUSTODY
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>In the past 12 months no inmates who alleged they were sexually abused were placed in involuntary protective custody. Memo from BCFC Compliance Manager indicates one inmate was placed in a “Temporary Holding Cell” upon his return from the St. Joseph’s Hospital following a Sexual Assault exam. The inmate was housed there temporarily for his own protection pending the completion of the investigation due to the fact the alleged abuser was unknown and no other alternative means of housing was available to ensure his safety. This inmate was transferred to another facility to ensure his protection. Auditors reviewed the BCFC Temporary Holding Area log for the inmate who was housed there for his protection pending the outcome of the investigation, Sexual Offense Allegation Reporting Form, and Transfer Authorization for inmate. The BCFC has operating procedures (BCFC PREA Sexual Assault Plan) which meet the requirements of this standard.</p> <p>Note: The BCFC does not have a restrictive housing unit; however, has two holding cells to separate inmates for protection. The maximum time an inmate may be held in these holding cells is 72 hours at which time the inmate is either released to general population or transferred to another facility.</p>	

115.71	CRIMINAL AND ADMINISTRATIVE INVESTIGATIONS
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>Auditors reviewed policy CPP 14.7, Investigation Records, Crimcast Training Records, and a letter of Compliance from the Kentucky State Police (SP). The KDCO has policy (CPP 14.7) in place regarding both administrative and criminal investigations. Training records indicate both employees who investigate sexual abuse/harassment are required to take specialized training. Both Investigators were interviewed and explained how they follow up with the KSP to ensure the facility remains informed of criminal investigations. The retention schedule showed investigations are kept as long as the abuser is incarcerated or employed, plus five years. A review of 50% of investigations conducted showed all elements required by the standard are in place. Any substantiated cases of criminal conduct are referred for prosecution by KSP (one such case existed; however, the incident took place prior to this audit period. The incident involved a contract employee and inmate in the canteen area. Documentation did demonstrate the contract employee was referred for prosecution and charged with 3rd degree rape.) There were no such investigations since May of 2013. Note: the facility took actions to prevent repeat incidents happening in the canteen area. A new company was hired to run the canteen without the help of inmate labor. Inmates are no longer allowed in the canteen as a result of this change. Taking such actions demonstrates the commitment by the BCFC Administration and the KDOC to protect inmates from such abuses.</p>	

115.72	EVIDENTIARY STANDARDS FOR ADMINISTRATIVE INVESTIGATIONS
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>KDOC Policy (CCP 14.7) dictates no standard higher than a preponderance of the evidence as the standard of proof in determining whether allegations of abuse or harassment are substantiated. Interviews with both investigators indicated they follow policy, in fact both could nearly articulate the preponderance of evidence verbatim with regard to KDOC policy.</p>	

115.73	REPORTING TO INMATES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>Auditors reviewed KDOC Policy (14.7), KDOC Offender Notification – PREA Alleged Sexual Abuse forms (demonstrating the inmate was notified by the BCFC Compliance Manager in writing of the outcome of the investigation), and two memos from the BCFC Compliance Manager. The BCFC obtains information from Kentucky State Police (KSP) regarding the results of criminal allegations investigated by the KSP. Inmates will be notified per policy of the status of inmate or staff perpetrators, including whether or not there is an indictment or conviction as a result of the investigation; all notifications are documented.</p>	

115.76	DISCIPLINARY SANCTIONS FOR STAFF
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>KDCO Policy (3.22) is in place regarding staff disciplinary sanctions. In the past 12 months one employee of the BCFC was found to have violated the KDOC sexual abuse/harassment policy. This employee received a “Written Reprimand” for misconduct resulting from making an inappropriate statement which involved the anus and the introduction of contraband (tobacco). No employees were terminated or resigned prior to termination as a result of an investigation. Policy (3.22) is in place to ensure actions that may be criminal are reported to Kentucky State Police and relevant licensing bodies, although there were no such instances in the past 12 months.</p>	

115.77	CORRECTIVE ACTION FOR CONTRACTORS AND VOLUNTEERS
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
KDOC Policy (CPP 3.22) includes contractors and volunteers and is consistent with the requirements of this standard. There were no instances of sexual abuse/harassment allegations or investigations concerning contract staff or volunteers during this audit period. The response received during the auditor's interview with the BCFC Warden indicates compliance with this standard.	

115.78	DISCIPLINARY SANCTIONS FOR INMATES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
KDOC Policy (15.2) demonstrates policy confirming compliance with this standard. The policy lists Sexual Assault as a category VII (Major Violation) which subjects an inmate to possible sanctions of 4 years loss of good time (non-restorable) &/ 365 days disciplinary segregation. The BCFC has had one allegation of an inmate engaging in inmate-on-inmate sexual abuse; however, the investigation into the allegation demonstrated the allegation was unfounded. Documentation indicates there have been no substantiated findings for inmate-on-inmate incidents of sexual abuse during this audit period.	

115.81	MEDICAL AND MENTAL HEALTH SCREENINGS; HISTORY OF SEXUAL ABUSE
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
KDOC Policy (14.7) indicates inmates are offered a follow-up meeting with medical or mental health staff within 14 days if they disclose prior sexual victimization or perpetration during risk screening. One inmate in the past 12 months at the BCFC indicated during the Behavior/Mental Health Screening he had a history of sexual-victimization. Documentation indicates this inmate was offered continued counseling services to which the inmate initially declined. Inmate later contacted medical staff to request to see a mental health provider. Notes indicate inmate was advised of resources as well as notifying the inmate they were free of charge. The one inmate (100%) who disclosed such victimization during this audit period was offered a follow-up meeting. During the on-site audit it was discovered all BCFC employees had access to the "Risk Assessment" application. This was corrected by the final day of the audit by changing user profiles for employees who did not need access to such information. Effective 9/25/14 this information is being shared for the purpose of housing/living, programming and work assignments, thus allowing this standard to be met.	

115.82	ACCESS TO EMERGENCY MEDICAL AND MENTAL HEALTH SERVICES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>KDOC Policy (14.7) dictates that the Medical Department shall promptly make arrangements for alleged victims to be transported to an outside facility for an examination and treatment. All treatment is provided at no cost to the inmates. BCFC PREA Sexual Assault Plan as well as interviews with both employees and inmates confirms compliance with this standard.</p>	

115.83	ONGOING MEDICAL AND MENTAL HEALTH CARE FOR SEXUAL ABUSE VICTIMS AND ABUSERS
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>Documentation provided to auditors indicates no incidents of sexual abuse in the past 12 months have occurred at the BCFC. KDOC policy is compliant with this standard. KDOC has a Memorandum of Understanding (MOU) with the Kentucky Association of Sexual Assault Programs (KASAP) to provide offenders with confidential emotional support services related to sexual violence. 115.83 d. & e. do not apply to the BCFC as only male inmates are housed at the BCFC. KDOC dictates all medical and mental health services related to sexual abuse will be provided at no cost to the inmate. No documented known inmate-on-inmate abuser(s) have been housed, nor has there been any inmate-on-inmate abuses occur at the BCFC during this audit period.</p>	

115.86	SEXUAL ABUSE INCIDENT REVIEWS
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>KDOC policy (14.7) provides that all sexual abuse incident reviews are conducted by the appropriate staff within 30 days upon the closing of an investigation for all allegations determined to be substantiated or unsubstantiated. The documentation reviewed by auditors demonstrated the reviewing committee for sexual abuse incident reviews consisted of the BCFC PREA Compliance Manager, PREA Investigator, Medical Staff, Deputy Warden and the Warden. Per KDOC policy (14.7) all required elements are taken into consideration by review committee.</p>	

115.87	DATA COLLECTION
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>KDOC policy (14.7) dictates for the collection of accurate uniform data for every allegation of sexual abuse at all facilities to include facilities which have contracts for the confinement of KDOC offenders. The BCFC provided auditors with documentation demonstrating all appropriate data is being collected. BCFC aggregated data was consistent with KDOC data. The KDOC PREA Coordinator works closely with the BCFC PREA Compliance Manager to maintain, review, and collect all necessary data; this data is stored electronically by the KDOC PREA Coordinator. Responses during interviews with PREA Coordinator and PREA Comp. Mgr. are consistent with standard.</p>	

115.88	DATA REVIEW FOR CORRECTIVE ACTION
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>The KDOC reviews the data collected to assess the effectiveness of its sexual abuse prevention, detection, and response policies. Any areas identified as deficiencies or areas which will improve the effectiveness are addressed. The KDOC publishes an annual report in which compares data from the previous year in order to assess progress and address concerns. These reports are reviewed and approved by the KDOC Commissioner and are available on the KDOC website (http://corrections.ky.gov/communityinfo/Documents/PREA/2013%20KDOC%20PREA%20Annual%20Report%20-revised%206-19-14.pdf). There are no personal identifiers contained in the annual report available on the website.</p>	

115.89	DATA STORAGE, PUBLICATION, AND DESTRUCTION
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>Standard requirements are included in KDOC policy (14.7). All PREA Data is kept a minimum of 10 years. Annual reports pertaining to this data are available on the KDOC website with all identifying information being removed prior to being published.</p>	

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of agency under review.

Levi E Bennett

Auditor Signature

Levi E. Bennett

Certified PREA Auditor

10-16-2014

Date