

# PREA AUDIT: AUDITOR'S SUMMARY REPORT

## ADULT PRISONS & JAILS



<b>Name of facility:</b> Kentucky Correctional Institution for Women			
<b>Physical address:</b> 3000 Ash Ave, Pewee Valley, KY, 40056			
<b>Date report submitted:</b> September 26, 2014			
<b>Auditor Information</b>			
<b>Address:</b> Folsom & West Prospector Place, Building #1, Lincoln, NE, 68509-4661			
<b>Email:</b> stephanie.huddle@nebraska.gov			
<b>Telephone number:</b> 402-479-5660			
<b>Date of facility visit:</b> August 12-14, 2014			
<b>Facility Information</b>			
<b>Facility mailing address:</b> <i>(if different from above)</i> P.O. Box 337, Pewee Valley, KY, 40056			
<b>Telephone number:</b> 502-241-8454			
<b>The facility is:</b>	<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		
<b>Facility Type:</b>	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
<b>Name of PREA Compliance Manager:</b> Shannon Butrum		<b>Title:</b> Procedures Officer	
<b>Email address:</b> shannon.butrum@ky.gov		<b>Telephone number:</b> 502-241-8454x3354	
<b>Agency Information</b>			
<b>Name of agency:</b> Kentucky Department of Corrections			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> Justice of Public Safety Cabinet			
<b>Physical address:</b> 275 East Main - Health Services Building, Frankfort, KY, 40602			
<b>Mailing address:</b> <i>(if different from above)</i> P.O. Box 2400, Frankfort, KY, 40602			
<b>Telephone number:</b> 502-546-2200			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> LaDonna Thompson		<b>Title:</b> Commissioner	
<b>Email address:</b> LaDonna.Thompson@ky.gov		<b>Telephone number:</b> 502-564-4726	
<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> Bryan K. Henson		<b>Title:</b> PREA Coordinator	
<b>Email address:</b> bryan.henson@ky.gov		<b>Telephone number:</b> 270-388-0241x206	

# AUDIT FINDINGS

## **NARRATIVE:**

A PREA Audit was conducted at the Kentucky Correctional Institution for Women (KCIW) August 12-14, 2014. Three auditors from the Nebraska Department of Correctional Services, all certified as PREA Auditors through the Department of Justice, conducted the audit. Stephanie Huddle served as Chairperson and Brad McDonnell and Trish Brockman served as Support Staff. Michele Dauzat, Louisiana Department of Corrections PREA Coordinator, also assisted. Prior to the on-site audit, phone interviews were conducted with personnel both within and external to the Kentucky Department of Corrections (KDOC). Auditors toured the entire facility August 12 and began interviews that day. Interviews of staff and inmates continued on August 13 and 14. Inmates from each housing unit were interviewed, as well as all categories of inmates as required. Additional documentation review was conducted August 14 and the close-out was also conducted August 14. The facility was well prepared for the audit and staff were courteous and helpful throughout the entire audit.

## **DESCRIPTION OF FACILITY CHARACTERISTICS:**

The KCIW is located on 270 acres near Pewee Valley, Kentucky. KCIW houses adult female felons with a design capacity of 713. The institution is a campus-style setting and has both single and double-bunked cells. It is a multi-custody facility and houses community custody, minimum, medium, maximum and death row inmates. There are 11 buildings, with two multiple occupancy housing units and two dorm-style housing units and an on-site medical department. Cameras are located throughout the facility. Programs include Paws with a Purpose; Life Without a Crutch; Alcohol and Narcotics Anonymous; Al-Anon and other self-help groups; Rational and Emotive Therapy; Exiting class, Community Reintegration Services; and Aftercare Task Force. There are also numerous education classes, special visit programs and religious activities. Forensic exams are conducted off site. KCIW has been ACA accredited since 1982.

## **SUMMARY OF AUDIT FINDINGS:**

The auditors were impressed at the work being done at both the agency and facility level. Shannon Butrum, PREA Compliance Manager, showed knowledge and compassion, and it was very apparent how much she cares about and believes in PREA. All staff interviewed were very knowledgeable, particularly with their reporting requirements and the immediate action needed in order to ensure inmate safety. Inmates were courteous and familiar with PREA. During her interview, an inmate who had reported sexual abuse said everything from her initial report to the investigation was handled very well; she went on to say the actions of the staff made her feel validated, which is something she never expected in a prison environment. PREA posters and information was readily available throughout the facility and cross-gender announcements were done on a consistent basis. There was discussion regarding training on mandatory reporting laws, which Bryan Henson, PREA Coordinator, immediately began researching. It was clear PREA is a priority and staff are dedicated to the safety of inmates, staff, visitors and the public.

Number of standards exceeded: 1

Number of standards met: 43

Number of standards not met: 0

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>KCIW has policy outlining their zero-tolerance standard regarding sexual abuse in confinement. While not every standard is written in policy, those that are required to be are in policy and the facility meets the standards in practice and procedures. An agency-wide PREA Coordinator position has been established and he is actively involved with the facility's efforts towards compliance. A facility PREA Compliance Manager has been identified; she demonstrates excellent knowledge of the standards and her compassion and conviction are evident in the work she does.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>KDOC does contract for the confinement of inmates. The agency has entered into 34 contracts; of these, only one does not require contractors to adopt and comply with PREA standards. This is due to the facility dedicating less than 50% of their beds for KDOC inmates.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>KCIW complies with a staffing plan that ensures safety and security are maintained. Deviations from the plan are documented. Documentation was provided showing the PREA Coordinator is actively involved in the review of staffing plans and all elements required by the standards are taken into consideration. Supervisors conduct unannounced rounds on all shifts throughout the facility.</b>	

115.14	YOUTHFUL 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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b> <b>KCIW does not house youthful inmates. However, policy is in place in the event they would have to house inmates under 17 years of age.</b>	

115.15	LIMITS TO CROSS GENDER VIEWING AND SEARCHES
<input checked="" 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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b> <b>KCIW staff do not conduct cross gender strip or body cavity searches. An example of their logging form was provided to show how such searches would be documented if they occur. The standard prohibits cross gender pat searches as of August 20, 2015. KCIW has already implemented this standard, and short of exigent circumstances, the facility does not conduct cross gender pat searches. No cross gender strip, body cavity or pat searches had been conducted in the past 12 months. Staff of the opposite gender are required to announce their presence upon entering a housing unit/living area. Not only is an announcement made, there are also signs in every housing unit entry way which show whether a male staff is on duty/in the unit. This allows additional male staff to know whether or not they need to make an announcement and also lets inmates returning to their housing unit know whether or not a male is on duty/in the unit. Transgender inmates are not searched for the sole purpose of determining genital status, and all staff are trained to conduct cross gender pat searches in a respectful manner while still keeping security needs in mind.</b>	

115.16	INMATES WITH DISABILITIES AND INMATES WHO ARE LIMITED ENGLISH PROFICIENT
<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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b> <b>Policy is in place to ensure inmates with disabilities have equal access to PREA information. Information is also available in formats to provide such information. KCIW does not rely on inmate interpreters. All inmates interviewed understood what PREA is, reporting mechanisms and their rights.</b>	

115.17	HIRING AND PROMOTION DECISIONS
<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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>KCIW does not hire or promote individuals who have engaged or been convicted of sexual abuse/assault in a confinement setting or in the community, or who have been civilly adjudicated of such an incident. Occurrences of sexual harassment are taken into consideration when determining whether or not to promote a staff member. Potential employees undergo a thorough background check, as do contractors who may have contact with inmates. Background checks are conducted every five years on current employees. Potential employees are asked about any prior incidents of sexual abuse/assault with the understanding omitting or falsifying information may result in termination.</b>	

115.18	UPGRADES TO FACILITIES AND TECHNOLOGY
<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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>KCIW takes inmate safety very seriously. PREA is a component of expanding any portion of the facility and also when determining what, if any, additional video monitoring and other technology should be utilized.</b>	

115.21	EVIDENCE PROTOCOL AND FORENSIC MEDICAL EXAMINATIONS
<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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>KCIW conducts administrative investigations internally. Criminal investigations are conducted by the Kentucky State Police (KSP). Forensic exams are conducted off-site by SANEs and provided at no cost to the victim. Victim advocates are available to inmate victims; procedures are outlined in an MOU. KCIW has requested KSP follow protocol as defined by the standards.</b>	
<b>*In reviewing the reporting form, a recommendation was made to add a space for SANE/SAFE forensic exams. This recommendation does not negatively affect the standard, as all elements were met.</b>	

115.22	POLICIES TO ENSURE REFERRALS OF ALLEGATIONS FOR 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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>All allegations meeting PREA criteria are investigated, either internally (administrative) or externally (criminal). All allegations within the past 12 months were investigated. The KDOC website provides information regarding the KSP's responsibility to investigate criminal allegations.</b>	

115.31	EMPLOYEE TRAINING
<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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>KCIW is responsible for training all of their staff. The required elements of the training are met, with one exception (see below). The training is tailored to female inmates. Employees are trained in PREA on an annual basis and it can be verified the training was completed and understood.</b>	
<b>*Upon initial review of this standard it was determined it did not meet PREA criteria. The training did not address how to comply with relevant laws regarding mandatory reporting to outside authorities. While it was clear staff were given information pertaining to referring criminal or potential criminal allegations to KSP, there was no information about reporting abuse of vulnerable adults or youths. The PREA Coordinator researched the mandatory reporting laws of Kentucky and determined KDOC is exempt; the law does not include the state corrections department as mandatory reporters. It was determined there would be no need to add this information to training, as there is a possibility of creating confusion for employees.</b>	

115.32	VOLUNTEER AND CONTRACTOR TRAINING
<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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>All volunteers and contractors receive appropriate training. Documentation of such training is maintained.</b>	

115.33	INMATE EDUCATION
<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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<p>Inmates receive comprehensive education within 1-2 days upon arrival at the facility, which is significantly above the 30 day requirement. During the past 12 months, 560 inmates received the comprehensive education. All inmates who were not educated did receive such information. Education is provided in formats accessible to all inmates. Posters were highly visible during the tour. There is nothing in existing policy regarding inmates being educated upon transferring to a new facility, however, this does not prohibit KCIW from meeting the standard.</p>	

115.34	SPECIALIZED TRAINING: 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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<p>Investigators complete training specific to conducting PREA investigations. The training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and criteria required to substantiate an administrative case. Documentation is maintained showing staff attended the training. KCIW has 12 staff who have completed the required training.</p>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<p>In addition to the regular PREA training, all full and part time medical and mental health care practitioners receive training in how to detect and assess signs of sexual abuse/harassment, how to preserve physical evidence of sexual abuse, how to respond in a professional and respectful manner and how to report incidents/suspicious. KCIW have 33 medical and mental health care practitioners who work there on a regular basis; 100% of these staff have received the required training. Documentation of the training is maintained.</p>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<p><b>Inmates are assessed upon intake for their risk of being sexually abusive or abused within 24 hours of their arrival at the facility. KCIW had 773 inmates whose length of stay was 72 hours or more; 100% of these inmates were screened. The intake screening form utilized contains all 10 required elements. Policy requires inmates be screened a second time within 30 days should additional, relevant information come to light and inmates are reassessed when warranted. KCIW policy prohibits inmates from being disciplined for refusing to answer any questions during the screening process. The facility implements appropriate controls regarding dissemination of information.</b></p>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<p><b>Information from screening is used when placing inmates in housing, work or programming assignments. While it is not in written policy the agency must make individualized determinations regarding individual safety, staff interviewed who are responsible for risk screening ensured this does take place. Any housing/programming for transgender inmates is decided on a case-by-case basis; policy is in place ensuring placement of transgender and intersex inmates is reviewed at least twice each year. Policy also ensures transgender inmates' own views regarding their safety will be given consideration and they are given the opportunity to shower separately.</b></p> <p><b>*It was recommended the facility make a previously written memo regarding transgender inmates and individual showers available to all staff; this was done during the on-site audit.</b></p>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<p><b>Policy is in place prohibiting the placement of inmates at high risk for sexual victimization in involuntary protective custody. There were no inmates at KCIW placed in involuntary protective custody within the past 12 months due sexual safety concerns. Should inmates be placed in segregation for this reason, policy is in place ensuring access to programs, privileges and education; reasons this could not be provided would be documented. Reviews of segregation status for sexual safety are done every seven days, which is above the 30 day requirement of the standards.</b></p>	



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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Inmates have multiple methods to report allegations of abuse/harassment. During interviews, all inmates were aware of how they could report an incident. Inmates have both an outside reporting mechanism and an anonymous hotline available to them. Staff are required to accept all reports, and expressed understanding of this policy during interviews. Staff were also aware they could call a reporting hotline in order to report an allegation privately.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>KCIW has policy regarding grievances dealing with sexual abuse, upon which no time limit is imposed. Inmates are not required to first use an informal grievance process or attempt to resolve the issue with staff. Inmates may submit grievances to staff other than those involved with the grievance; the grievances are not referred to the staff member who is the subject of the complaint. KCIW had four grievances pertaining to sexual abuse within the past 12 months; two reached the final decision within 90 days and no grievances required extensions. Third parties may assist inmates with filing grievances; there were no such grievances within the past 12 months. Policy exists regarding emergency grievances; there were no emergency grievances files at KCIW pertaining to risk of sexual abuse within the past 12 months.</b>	
<b>*While not required to be in written policy by the standard, it was recommended information regarding third party filing be added to existing policy.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Inmates have access to outside victim support services. The provider of these services was interviewed and was able to clearly articulate procedures for assisting incarcerated victims. Flyers and posters, observed during the tour, were also readily available at the facility. Inmates understand the confidentiality requirements of these services. A copy of the MOU was provided prior to the on-site audit.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Third parties can report allegations through a telephone hotline. Information is on the agency website.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>All staff are required to immediately report any incident or allegation of sexual abuse or retaliation; staff interviewed were very familiar with these requirements. They were also aware of the need for discretion. Medical and mental health staff were familiar with their reporting requirements and limitations on confidentiality and informed the inmates of such during initiation of services. KDOC is not considered a mandatory reporter under Kentucky law; as such; there is no obligation to report to outside authorities an incident involving a vulnerable adult or victim under the age of 18. All allegations are referred for investigation and given to investigative staff.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Policy is in place regarding immediate protection of inmates. All staff interviewed were extremely knowledgeable about these requirements and knew what to do if an inmate reported an allegation to them.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Policy is in place requiring notification to another facility in the event an allegation is made while at KCIW. This notification occurs within 72 hours and is documented. There were four reports from inmates alleging they were abused while at another facility in the past 12 months. KCIW received no notifications within the past 12 months from other facilities.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>KCIW has policy regarding actions taken by first responders. There were 16 allegations an inmate was sexually abused in the past 12 months. Of these, the alleged victim and perpetrator were separated by the first security staff member on scene 10 times. On two occasions the first person on scene was not a security staff member, but security staff was notified in both instances. There were no allegations where staff were notified within a time period allowing for evidence collection.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>KCIW has a written plan that was provided prior to the on-site audit outlining responsibilities of first responders, medical/mental health practitioners, investigative staff and facility leadership.</b>	

115.66	PRESERVATION OF ABILITY TO PROTECT INMATES FROM CONTACT WITH 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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>KCIW has not entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>The Investigative Captain is responsible for monitoring retaliation and was able to articulate how he does this and what he does to ensure incidents of retaliation are not occurring. Multiple protection measures are employed. Staff and inmates are monitored for a minimum of 90 days but will be extended if necessary. There were two occurrences of retaliation within the past 12 months.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Existing policy prohibits placing inmates who allege they suffered sexual abuse in involuntary protective custody unless no other reasonable means to ensure safety can be determined. One inmate in the past 12 months was placed in involuntary protective custody for longer than 30 days. Case files of three inmates being placed in involuntary protective custody contained statements for the basis of the facility's concern and the reason(s) why no alternative separation could be arranged. An inmate's status is reviewed every seven days, which is above the 30 day timeframe required by the standard.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Policy is in place regarding both administrative and criminal investigations. All staff who investigate sexual abuse/harassment are required to take specialized training. A review of a sample of investigations showed all elements required by the standard are in place. Any substantiated cases of criminal conduct are referred for prosecution by KSP. There were no such investigations since August 2012. The retention schedule showed investigations are kept as long as the abuser is incarcerated or employed, plus five years. The Investigative Captain described the cooperation between KCIW and KSP and how the facility remains informed of criminal investigations.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Policy ensures preponderance of the evidence is the standard of proof in determining whether allegations of abuse or harassment are substantiated. The Investigative Captain articulated how he reaches such decisions with his investigations.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Inmates are notified of the results of the investigation into their allegations. In the past 12 months, 12 investigations were completed by the facility. Six inmates were notified of the outcome; the other six inmates had either discharged or had investigations that occurred prior to this policy being in place. KCIW obtains information from KSP regarding the results of their investigations into criminal allegations. Four investigations were completed by KSP; one inmate was notified of the result of the investigation. Inmates are also notified 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.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Policy is in place regarding staff disciplinary sanctions. In the past 12 months, four staff violated sexual abuse/harassment policy; one was terminated/resigned prior to termination as a result. One other staff member received another form of discipline. Policy is in place to ensure actions that may be criminal are reported to KSP and relevant licensing bodies, although there were no such instances in the past 12 months.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Policy ensures contractors and volunteers who sexually abuse inmates are prohibited from contact with them and referred to relevant licensing bodies, as well as KSP when the alleged act may be criminal in nature. Appropriate remedial measures are taken for other violations of PREA policy.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Inmates are subject to discipline for perpetrating sexual abuse and harassment. There were no instances of substantiated administrative or criminal findings an inmate perpetrated sexual abuse. Sanctions are commensurate with past history, the nature of the offense and comparable sanctions given to other inmates for the same type of misconduct, along with consideration to an inmate’s mental health status, including the consideration of therapy. Inmates are not disciplined for having sexual contact with staff, unless the staff member did not consent to the contact. Inmates are not disciplined for making reports in good faith, even if the allegation is determined to be unfounded. KCIW policy does prohibit consensual sexual contact/activities between inmates.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>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. In the past 12 months, 100% of inmates who disclosed such victimization were offered the follow-up meeting. Information is kept as confidential as possible, with information shared for the purpose of housing/living, programming and work assignments.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Inmate victims receive timely access and information regarding treatment and available treatment options, including emergency contraception and sexually transmitted infections. All treatment is provided at no cost to the inmates.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>All inmate victims, regardless of whether abuse occurred at KCIW or another confinement facility, are offered medical and mental health evaluations, including testing for sexually transmitted infections. Such treatment includes plans for follow-up care in the event they are transferred to another facility or released from custody. If circumstances require, inmates may receive pregnancy tests if they choose. Should pregnancy result, information and access to lawful medical services will be provided. All treatment is provided at no cost to the inmates. KCIW has policy in place ensuring staff attempt to conduct a mental health evaluation of inmates who abuse other inmates.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>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 PREA Compliance Manager, Investigative Captain and medical/mental health staff are involved in these reviews. All required elements are taken into consideration.</b>	
<b>*It was recommended space be added to include the names of all staff members on the form; currently, medical and mental health staff listed where space is available. While the standard has been met, in order to clear up any confusion regarding who participates in the reviews, all staff should be listed on the form.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Data is collected and aggregated annually and the Survey of Sexual Violence is submitted within the time frame outlined by the governing agency of that form. Data is maintained and collected from documents, investigations, incident reviews and other available reports.</b>	


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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>Collected data is reviewed to identify problem areas, make corrective action plans (when needed). Said data is used in annual reports for individual facilities and the KDOC. Data will be compared from the previous year in order to assess progress and concerns. These reports are approved by the Commissioner and are available on the KDOC website; in the event the reports contain identifying information, it will be redacted prior to publication.</b>	

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)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>All collected data is securely retained. Annual reports pertaining to this data are available on the KDOC website; identifying information, if any, is removed prior to being published. Data is kept at least 10 years.</b>	



**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.

  
\_\_\_\_\_  
Auditor Signature

  
\_\_\_\_\_  
Date