PREA AUDIT: AUDITOR'S SUMMARY REPORT ADULT PRISONS & JAILS





[Following information to be populated automatically from pre-audit questionnaire]		
Name of facility: Topeka Correctional Facility		
Physical Address: 815 SE Rice Road Topeka, Kansas	66607	
Date report submitted: August 15, 2014		
Auditor Information Jean Ev		
Address: 406 N. High Street, Anamosa, Iowa 52205	5	
E-Mail: jean.even@iowa.gov		
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Date of facility visit: July 14, 15, 16		
Facility Information		
Facility mailing address: (if different from above)		
Telephone number: 785-296-3317		
The facility is:		
☐ Military ☐ County	□ Federal	
☐ Private for profit ☐ Municipal	X State	
☐ Private not for profit		
'		
Facility Type:		
Name of PREA Compliance Manager: Colene Fisch	· ·	
E-Mail Address: ColeneF@doc.ks.gov	Phone Number: 785-559-5102	
Agency Information		
Name of agency: Kansas Department of Corrections		
Governing authority or parent agency: (if applicable		
Physical address: 714 SW Jackson Suite 300 Topeka,	Kansas 66603	
Mailing address: (if different from above)		
Telephone Number: 785-296-3317		
Agency Chief Executive Officer		
Name: Ray Roberts	Title: Secretary of Corrections	
E-Mail Address: RayR@doc.ks.gov	Telephone Number: 785-296-3317	
Agency-Wide PREA Coordinator		
Name: Talia Labouchardiere	Title: Corrections Manager II	
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AUDIT FINDINGS

NARRATIVE:

The audit of the Topeka Correctional Facility (TCF) was conducted on July 14 -16, 2014 by Jean Even, Certified PREA Auditor and two assistants in order to determine compliance with the Prison Rape Elimination Act (PREA) standards. An entrance meeting was held to introduce the audit team to their staff currently on the TCF PREA team. This included but not limited to: Deputy Secretary of Facilities Management Johnnie Goddard, KDOC PREA Coordinator Talia Labouchardiere, CCII Mark Mora, Warden Hope Cooper, Deputy Warden Colene Fischli, Human Resources John Harold, Health Services Victoria McClintock, Classification Administrator Karen Williams and Major Rick Matthias. Following the entrance meeting, over seven (7) hours was spent touring the facility during the course of the audit. Areas included the living units, inmate services, laundry, gym, dining hall/kitchen, canteen, yard, industries areas, health services, visiting rooms, video surveillance rooms, and shift supervisor areas. Informal interviews were done with both staff and inmates while in the various areas throughout the facility.

An inmate roster was obtained and a random sampling of inmates was chosen. Attention was paid to special populations within the facility. Information in regards to zero tolerance for sexual abuse and harassment is easily accessible for the inmates. All inmates understood PREA and how to report allegations of sexual abuse and sexual harassment. One transgender inmate was identified and information was obtained from this individual.

Formal staff interviews were completed with the PREA Coordinator, PCM, the Warden, Human Resources, Health Services, Shift supervisors, PREA investigators, Officers/Sgts, Counselor, and Unit manager. Staff from all three shifts were interviewed. All staff are knowledgeable of KDOC/TCF policies and their responsibilities if an allegation or incident occurs.

PREA case log/data and investigative files were made accessible for the audit team to examine prior investigations. Investigations are handled by EAI KDOC Central Office and are done promptly, thoroughly, and attention is given to details. Investigative decisions are based upon evidence gathered.

PREA Standards and policies were reviewed for compliance. Questions were clarified and suggestions were made to enhance TCF's procedures.

TCF complied with all applicable standards. Some practices/procedures were beyond requirements and received exceeds expectations.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Topeka Correctional Facility (TCF) is located at 815 SE Rice Road, Topeka, Kansas 66607. The mission is for TCF to provide female inmates safe and secure confinement in an environment which is gender responsive and utilizes gender specific strategies to assist in successful inmate transition and return to their families and communities.

The facility houses special management, maximum, high medium, low medium, minimum and work release level inmates. It is divided into two compounds; Central unit compound and I-J compound. The facility has 14 buildings. One single celled housing unit; seven (7) multiple occupancy cell housing units, two (2) open bay/dorm style housing units, and there are ten (10) segregation cells. The designed facility capacity is 815 inmates. The inmate population was 740. The age range of the population is 18-74 years of age. TCF does not house youthful inmates under the age of 18. There is 246 staff working throughout the facility. There are 449 total cameras throughout the facility utilized to enhance the staff coverage.

All inmates that are initially admitted to TCF will enter through I-J compound receiving and discharge. The facility encourages advancement through the level system which is based upon their sentences, programming, classification, treatment, behavior, etc. TCF offers a wide variety of jobs for the inmates including off site work assignments for work release inmates. Recreational activities are available to inmates on both compounds.

The facility design allows for inmates to be separated from other inmates or staff when a sexual abuse or sexual harassment allegation is made. TCF attempts to maintain the level and privileges an inmate may have prior to an allegation.

TCF has tentative plans for redesigning a unit that will provide better safety, supervision and security. All construction and redesigning of exiting units/areas have PREA considerations taken into account.

Number of standards exceeded: 6

Number of standards met: 36

Number of standards not met: 0

Number of standards not applicable: 1

115.11	ZERO TOLERANCE OF SEXUAL ABUSE AND SEXUAL HARASSMENT; PREA COORDINATOR		
X Exceeds Standard (substantially exceeds requirement of standard)			
☐ Meets Standard (sub	ostantial compliance; complies in all material ways with the standard for the		
relevant review period			
☐ Does Not Meet Stan	dard (requires corrective action)		
	cluding corrective actions needed if does not meet standard		
sexual harassment. (en policy mandating zero tolerance towards all forms of sexual abuse and IMPP, 10-103D, p. 1) They have outlined prevention, detection and responding atts throughout the policy. (IMPP, 10-103D)		
1	Coordinator has sufficient time and authority to develop and oversee		
1 1	ks closely with all of the facilities/institutions within the Kansas Dept of		
	ping policies and ensuring the proper practices and procedures are followed. manager at TCF will coordinate efforts with the PREA Coordinator. They work		
	REA team, EAI and staff at the facility by to ensure policy is being followed		
appropriately.	, , , , , , , , , , , , , , , , , , , ,		
П			
115.12	CONTRACTING WITH OTHER ENTITIES FOR THE CONFINEMENT OF INMATES		
Exceeds Standard (s	ubstantially exceeds requirement of standard)		
X Meets Standard (substantial compliance; complies in all material ways with the standard for the			
relevant review period			
☐ Does Not Meet Stan	dard (requires corrective action)		
	cluding corrective actions needed if does not meet standard		
11	in place. (IMPP 01-105 Contracts for Programs and Services) The agency Dakota Department of Corrections for confinement of female inmates under		
	the age of 18. The contract was signed with both state entities in agreement in October 2013. In		
<u> </u>	akota DOC agreed to comply with all applicable PREA standards. During this		
audit period, North D	akota DOC was not housing anyone due to zero inmates fitting the criteria.		
115.13	SUPERVISION AND MONITORING		
L	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 Stan	dard (requires corrective action)		

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

Based on IMPP 10-03 Coordinated Response to Sexual Abuse and Harassment, GO 01-102 (PREA);

post orders; IMPP 02-111 Staffing Analysis, Operational Staffing, and Roster Management.

TCF has a Staffing Plan that is reviewed and revised as needed annually by the Warden. This is mandated in KDOC policy. TCF has a Staffing Level Justification Report that documents the operational staffing levels, the actual staffing levels and the deviations from these numbers. This was completed for every date and shift. When there was a deviation, it provided an explanation as to why.

Based upon interviews, the staffing plan takes into account activities such as religious services, showers and other daily issues. The Shift Captains assessed their shift needs and have shown more staff are needed for certain shifts. TCF had documented PREA considerations to determine staffing needs. They outline staff/inmate ratios and where additional staff would benefit the facility. 449 cameras are placed strategically throughout the facility to enhance coverage but not replace staff. Unit supervisors and Shift Supervisors shall make unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Staff shall be prohibited from alerting other staff members that supervisory rounds are occurring. (General Order 01-102, p. 3, I., C.) Rounds were documented via electronic logs.

115.14	YOUTHFUL INMATES		
☐ Exceeds Standard (si	☐ Exceeds Standard (substantially exceeds requirement of standard)		
☐ Meets Standard (sub	ostantial compliance; complies in all material ways with the standard for the		
relevant review period	relevant review period)		
☐ Does Not Meet Stan	dard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard			
This standard is not applicable. The youthful inmates are taken from county jail by KDOC staff and			
transported directly to North Dakota Department Youth Correctional Facility. The inmates would			
	remain there until they reach the age of 18 and then returned to TCF for the remainder of their		
sentence. (IMPP 11-1	104)		

115.15	LIMITS TO CROSS GENDER VIEWING AND SEARCHES	
X Exceeds Standard (substantially exceeds requirement of standard)	
\square Meets Standard (substantial compliance; complies in all material ways with the standard for the		
relevant review period)		
☐ Does Not Meet Stand	dard (requires corrective action)	
Auditor comments, inc	luding corrective actions needed if does not meet standard	
Based on IMPP 10-103 Coordinated Response to Sexual Abuse and Sexual Harassment; IMPP 12-103		
Inmate and Facility Se	Inmate and Facility Searches; GO 09-107 Searches, Contraband, Crime Scene Preservation; Post	
Orders and Pat Search training curricula.		
	cross-gender strip searches or cross-gender visual body cavity searches except	
	ces or when performed by medical practitioners. TCF has discontinued all	
cross-gender pat sear	ches. (IMPP 12-103, p. 1) In the event a cross-gender search is conducted, the	

Shift Supervisor must be notified and documentation would be completed explaining the deviation from policy. (09-107, p.2 II., A. #1) No incidents occurred during this time period. If a search of either kind is to be conducted, it must be done by a trained staff member in a professional and respectful manner. The training curriculum and records were reviewed.

TCF exceeds this standard due to the following: Strip searches are to be conducted in private, by a trained female staff member, and shall be witnessed by at least one other female staff whenever possible. When a witness is not available it shall be videotaped and preserved on tape for a minimum of three years. Pat searches are conducted in various areas throughout the institution. The inmates are required to stand on a red arrow painted on the floor and face the camera that is monitoring the area while being searched. (09-107, p, 2, II. Search of Inmates, A. #1, a.) This policy not only protects the inmates but the staff conducting the searches.

TCF does not restrict inmates from accessing programs in order to meet the requirements of this standard.

The facility requires staff to be aware of the inmate's state of undress. The presence of staff of the opposite gender shall be announced "Male officer on duty" prior to entering a housing unit where an inmate could be undressed. (Post Order #6, p. 2, II, B) This procedure was witnessed during the tour of the facility. On G-dorm this was announced when initially entering as well as when nearing the divided room areas. This was conducted as per policy.

Inmates are allowed to shower and perform bodily functions without nonmedical staff of the opposite gender viewing them, except in exigent circumstances or when the viewing would be incidental to routine security checks. The showers were single stalls with double shower curtains which allowed for privacy. The curtains had been shortened so staff were able to observe if more than one inmate was in the stall. Inmates dress in the outer shower stall areas or in an area in their room/cell that is not fully visible to staff or other inmates.

TCF does not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. One transgender inmate was identified and frequent interactions have transpired to ensure PREA compliance. All shower stalls are divided and provide privacy.

Monitoring of an inmate in a mental health /suicide status was allowed for any staff. During this audit, the Warden gave the directive to the Shift Captains that the post would be a female staff only position due to the possibility of a female inmate disrobing or being exposed while performing bodily functions.

115.16	INMATES WITH DISABILITIES AND INMATES WHO ARE LIMITED ENGLISH PROFICIENT	
	FROTICIENT	
☐ Exceeds Standard (su	ubstantially exceeds requirement of standard)	
X 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		
Policies IMPP 01-103 Inmate Rule Book Distribution and Translation; IMPP 10-103 Coordinated		
Response to Sexual A	buse and Harassment; IMPP 10-138 Assistance for Offenders and/or Victims	
with Limited Proficier	ncy; GO 01-102 PREA all have outlined what is required for the facility in	

instances of inmates with disabilities and inmate who are limited with English. The facility shall provide offender education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired or otherwise disabled, as well as to inmates who have limited reading skills. (IMPP 10-103D, p. 5, III, E) When an offender has problems understanding the rule book, a staff member or translator shall assist the inmate in understanding the rules. To the extent practical, a translation may be made for anyone who language is other than English. A translation shall be made for any language spoken by significant numbers of inmates. (IMPP 01-103, p. 1, I., A, #1, #2)

Limited English proficiency will not prevent inmates, detainees, victims, or parolees from accessing important programs and information, understanding rules; participating in proceedings; or gaining eligibility for parole, probation, treatment programs, alternatives to revocation or classification. (IMPP 10-138, p. 1)

TCF has access to outside interpreter services for various languages. The facility has it outlined as to who are acceptable interpreters for inmates. (IMPP 10-138, p. 2 & 3, IV) They currently contract with Big Word to provide the translation services. (Documentation with access codes and languages available.)

Also any inmate that is deaf or hard of hearing, or those who are blind or with limited vision, or those who have intellectual, psychiatric, or speech disabilities, or limited English shall have equal opportunity to participate in and benefit from the KDOC's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

TCF had prominent signs posted throughout the facility in Spanish as well as English. In addition to this, TCF provided an offender PREA orientation handout.

115.17	HIRING AND PROMOTION DECISIONS

X 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

Based upon 02-118 Employee & Volunteer Rules of Conduct and Undue Familiarity; GO 01-102 Prison Rape Elimination Act of 2003; IMPP 02-120 Employee Disciplinary Procedures and Formal Actions; IMPP 02-119 Personnel Records; IMPP 02-126 Selection Process; Human Resources interview and TCF hiring. KDOC shall not hire or promote anyone who (1) has engaged in sexual abuse of inmates in an institutional setting; (2) has been convicted of engaging in sexual activity in the community facilitated by force, the threat of force, or coercion, or (3) has been civilly or administratively adjudicated to have engaged in such activity. All incidents of sexual harassment perpetrated by an applicant against inmates shall be considered in making hiring and promotional decisions. (02-106 Selection Process, p. 1)

KDOC performs criminal background checks at least every 5 years of current employees and contractors who may have contact with inmates. TCF exceeds the expectations because they conduct the background checks on a yearly basis which was confirmed with Human Resources (HR). HR keeps a log of requests for information from other facilities/agencies in regards to current or former personnel.

Documentation of background checks was reviewed.

115.18	UPGRADES TO FACILITIES AND TECHNOLOGY	
☐ Exceeds Standard (so	ubstantially exceeds requirement of standard)	
X 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		

Based on KDOC 01-123 Authorization for Construction, Renovation or Demolition of Physical Structures: outlines expectations for any facility/institution within the Department to follow. B dorm was recently remodeled. Based upon the tour and staff interviews, this building renovation was designed similar to the other dorms currently occupied. J – Cell house has been planned for renovation. Discussions included the layouts and aspects for video monitoring. The cameras will have the potential to provide the maximum benefit for surveillance in order to prevent and detect any PREA related incidents. TCF went through all of their existing buildings determining any potential blind spots. The placement of cameras for exteriors of the buildings, entrances/exits, and monitoring of interiors will be enhanced.

Although not required, TCF has placed some cameras video with audio capability in strategic areas including the transport vehicles. This should significantly reduce allegations/incidents that are PREA related.

Meeting minutes were reviewed.

KDOC has a coordinated response to sexual abuse and sexual harassment. (IMPP 10-103) Investigative procedures (IMPP 22-103) and investigation manual inform staff of the responsibility to secure and preserve any crime scene and evidence until an investigator can arrive and assume possession. All physical evidence will be collected in a manner that it can be admissible in court. Evidence will be collected, stored and disposed of per EAI guidelines that are based upon DOJ National Protocol.

When TCF has an allegation of sexual assault, the inmate is evaluated by medical personnel and then transported to Stormont Vail Hospital for the forensic examination. A SANE/SART nurse will collect any evidence with is then turned over to EAI.

Stormont Vail Hospital will arrange for a victim advocate if the inmate would like one present. YWCA Center for Safety and Empowerment will then provide the services while the inmate is at the hospital. However, their guidelines prevent direct service once the inmate has returned to the facility. TCF has been attempting for some time to find a source for a victim advocate that could

continue working with the victim. The details have not been finalized. On site mental health personnel work with the victim. TCF recently obtained training material that may be considered for staff to be considered "a qualified staff member" to assist inmates while at the facility. TCF has not had any incidents during this audit period. Memos included in documentation.

115.22	POLICIES TO ENSURE REFERRALS OF ALLEGATIONS FOR INVESTIGATIONS		
☐ Exceeds Standard (se	☐ Exceeds Standard (substantially exceeds requirement of standard)		
X Meets Standard (sub	stantial compliance; complies in all material ways with the standard for the		
relevant review period			
☐ Does Not Meet Stan	dard (requires corrective action)		
	cluding corrective actions needed if does not meet standard		
	Based upon IMPP 22-203 Investigation Procedures; EAI Investigation protocol; GO 01-102 PREA; 10-		
	103D Coordinated Response to Sexual Abuse and Harassment.		
	KDOC will ensure that an administrative and/or criminal investigation is conducted into any		
allegations of staff sexual misconduct or staff sexual harassment. Investigations of offender sexual abuse or sexual harassment shall be investigated, disciplined and referred for prosecution when			
warranted. EAI has an agent assigned and dedicated to the facility. They make the determination			
on what type of incident they are dealing with. EAI then works with the prosecutors if an			
investigation needs to	o proceed for criminal charges.		
Website contained re	port. Investigative database reviewed.		

□ Exceeds Standard (substantially exceeds requirement of standard) X 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/TCF has policies and training curriculum for all employees for all aspects of this standard. IMPP 03-104 Minimum Departmental Training Standards; Crediting of Education and Specialty Training; IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment; GO 01-102 PREA; IMPP 02-118 Employee & Volunteer Rules of Conduct and Undue Familiarity were reviewed. Staff are aware of the zero tolerance policy for sexual abuse and harassment. They receive training on their responsibilities for prevention, detection, reporting and response. TCF staff are trained on the proper method to conduct pat and strip searches for the gender housed at their facility. Training curriculum and records were provided and reviewed.

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	115.32	VOLUNTEER AND CONTRACTOR TRAINING

☐ Exceeds Standard (substantially exceeds requirement of standard)
X 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 Based upon policies IMPP 02-118 Employee and Volunteer Rules of Conduct and Undue Familiarity; IMPP 03-104 Minimum Departmental Training Standard, Crediting of Education and Specialty training; IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment; IMPP 13-106 Volunteer Rules of Conduct; GO 01-102 PREA, training curriculum and documentation. TCF ensures all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and
response policies and procedures.

The level and type of training provided to volunteers and contractors is based upon the services they provide and level of contact they have with the inmates. All volunteers and contractors are notified of the zero-tolerance policy in regards to sexual abuse and harassment. They are informed on how to report any incidents of such. (IMPP 10-103D, p. 4, E, #1, #2)

115.33	INMATE EDUCATION		
\square Exceeds Standard (s	☐ Exceeds Standard (substantially exceeds requirement of standard)		
X Meets Standard (su	X Meets Standard (substantial compliance; complies in all material ways with the standard for the		
relevant review period)			
☐ Does Not Meet Standard (requires corrective action)			
A 49.			
Auditor comments, including corrective actions needed if does not meet standard			
Based on IMPP 10-10	3D.		

Inmates receive education during intake and orientation. The information includes the zero tolerance policy as well as procedures for reporting threatening or assaultive behavior of a sexual or possibly sexual nature. Inmate handbooks are provided to them. Brochures (English or Spanish) shall be given to the inmate.

Within 30 days of intake to TCF, all inmates receive a comprehensive education either in person or by video regarding their rights to be free from sexual abuse and sexual harassment, and to be free from retaliation for reporting incidents. The inmates also receive an overview of KDOC policies and procedures.

Inmate education is in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled, as well as to inmates who have limited reading skills.

Signs/posters are displayed throughout the facility on bulletin boards and near inmate telephones. Documentation is maintained for all inmates.

During interviews and tour, inmates were educated on the subject of PREA regardless of their level or status within TCF. TCF had done a good job educated inmates including those with mental health related issues.

115.34	SPECIALIZED TRAINING:	
115 3/1	1 ZDEC 1011/ED 1801000003.	
11J.JT	I DI ECIALIZED INAINING.	

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- X 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

Based on policy IMPP 03-104 Minimum Departmental Training Standards, Crediting of Education and Specialty Training; IMPP 22-103 Investigation Procedures; IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment; GO 01-102 PREA. Enforcement, Apprehensions, and Investigations-Investigations Protocol Manual was reviewed. KDOC/TCF ensures that all investigators have received training in conducting PREA related investigations in confinement settings. They are provided techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. KDOC/TCF maintain the documentation that the investigators have completed the required training in conducting sexual abuse investigations.

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- X 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

Based on policy IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment; IMPP 03-104 Minimum Departmental Training Standards, Crediting of Education and Specialty Training; GO 01-102 PREA. Corizon General Health Services Policy and Procedure – Federal Sexual Assault Reporting and Regulations. Basic and annual training curriculum/agendas. Lists of all medical and mental health staff. Medical and behavioral health staff have been trained in: how to detect and assess signs of sexual abuse and sexual harassment and preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. (IMPP 10-103D, p. 5, #3, a, b, c)

TCF maintains documentation that medical and mental health practitioners have received the training. Medical and behavioral health care practitioners shall also receive the training mandated for staff members under 115.31 or for contractors and volunteers under 115.32. (IMPP 10-103D, p. 5, #3, d, e)

115.41	SCREENING FOR RISK OF VICTIMIZATION AND ABUSIVENESS

☐ Exceeds Standard (substantially exceeds requirement of standard)
X 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
Based upon IMPP 10-139 Screening for Sexual Victimization and Abusiveness; GO 01-102 PREA, IMPP 05-101 Utilization, Confidentiality, Privacy, Security, and Dissemination of Information Contained within Agency Records. Random inmate and staff interviews. Example screenings. All inmates at TCF are assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. An internal classification checklist is completed before an offender transfers by the counselor. Upon transfer this information will be used by the receiving facility to make determinations regarding housing, bed, work, education, and program assignments. The initial intake screening is completed within 72 hours at TCF prior to being placed into multi-occupancy housing. This is done to ensure no victim or potential victim of sexual abuse is housed
with a sexual aggressor or potential sexual aggressor. TCF uses the internal checklist and manual to complete objective screenings. The intake screening considers the ten criteria for section (d) of this standard. The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known, in assessing inmates for risk of being sexually abusive. Within 30 days from the inmate's arrival TCF, the facility will reassess the inmate's risk of
victimization or abusiveness based upon any additional, relevant information received by TCF since the intake screening.
The inmate's risk level is reassessed at least annually and when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.
Inmates are not disciplined for refusing to answer or disclosing information to staff when being assessed.
TCF has appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.
TCF does not detain inmates for the solely for civil immigration purposes.
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115.42 USE OF SCREENING INFORMATION

115.42	USE OF SCREENING INFORMATION
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (so relevant review period	ubstantial compliance; complies in all material ways with the standard for the d)
☐ Does Not Meet Sta	ndard (requires corrective action)
Auditor comments, ir	icluding corrective actions needed if does not meet standard

Based upon IMPP 10-139 Screening for Sexual Victimization and Abusiveness; IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment; GO 01-102 PREA, GO 18-101 Custody and Programs Classification; GO 19-101 Work Assignments; GO 23-101 Programs and Inmate Access. PREA Compliance Manager and other staff interviews.

TCF uses information from the risk screening to inform housing, bed, work, education and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. (IMPP 10-139, p. 1&2)

TCF makes individualized determinations about how to ensure the safety of each inmate by utilizing the internal classification checklist. This thorough screening tool provides collection of information and reassessment if necessary.

TCF considers the information available when determining the best housing and programming assignments for transgender and intersex inmates. The decisions are made on a case by case basis. These individuals are reviewed/assessed at least twice per year. TCF had a rapport with the one identified transgender inmate and considered the inmate's own views.

Transgender or intersex inmates are allowed to shower separately from other inmates. Special accommodations are not needed due to showers having individual stalls allowing for privacy and security.

TCF does not house lesbian, gay, bisexual, transgender or intersex inmates in a separate area based upon their status of their identification. These individuals are housed and working among other inmates within the facility.

115.43	PROTECTIVE CUSTODY
☐ Exceeds Standard (si	ubstantially exceeds requirement of standard)

X 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

Based upon IMPP 10-139 Screening for Sexual Victimization and Abusiveness; GO 10-102 PREA; GO 10-101 Segregation; IMPP 20-104 Purpose of Administrative Segregation & Appropriate Placements; IMPP 20-101 Minimum Standards for Operation of Segregation Units; IMPP 20-108 Protective Custody. Warden, PREA Compliance Manager, and other staff interviews.

TCF did not involuntarily segregate inmates who are at high risk for sexual victimization unless a thorough assessment determined that there was no available alternative means of separation from likely abusers. (GO 01-102, p. 2, #7)

Inmates in segregation for periods exceeding 60 days are provided the same program opportunities and privileges as inmates in administrative segregation and protective custody. (GO 10-101, p. 2, II. C.)

Inmates at a high risk for sexual victimization are not placed in involuntary segregation housing unless an assessment of all available alternative have been made and a determination that there is no alternative means of separation from likely abusers. (IMPP 10-139, p. 3, V., B.)

If an assessment cannot be completed immediately, TCF may house an inmate in segregation for less than 24 hours while the assessment is being completed.

If an inmate had to be placed into involuntary segregation, TCF would maintain the necessary documentation as to why this was done.

Inmates placed in involuntary segregation will not ordinarily remain there for more than 30 days.

(IMPP 10-139, p. 3, V, C)	
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115.51	INMATE REPORTING
X Exceeds Standard	(substantially exceeds requirement of standard)
☐ Meets Standard (su	bstantial compliance; complies in all material ways with the standard for the
relevant review period	
☐ Does Not Meet Stan	dard (requires corrective action)
Auditor comments, inc	cluding corrective actions needed if does not meet standard
Based on IMPP 10-10	3 Coordinated Response to Sexual Abuse and Harassment; GO 01-102 PREA,
	ling between Legal Services for Prisoners and the KDOC. Staff and inmate
	ntation of incidents/reports.
-	ethods for an offender to report allegations of sexual abuse or harassment.
	be reported verbally to any staff member or in writing using a Form 9 or
-	Staff, in addition to using confidential methods. Inmates are able to dial #50,
-	1-888-317-8204) via third parties, grievance procedures, or Staff/Offender
<u> </u>	IMPP 10-103D, p.6) (GO 01-102, p.6 V) TCF received an exceeds due to the
•	to easily access any phone and call #50 to report.
	portunity to report sexual abuse or sexual harassment to a public or private
•	not part of the KDOC or TCF. Such reports shall be made through the Legal
	office or through the use of the internal reporting procedures listed in the
	(GO 01-102, p. 6, V, D) Signs and information are posted throughout the
facility.	
	ility to privately report sexual abuse and sexual harassment of inmates. They
	otline number which may remain confidential at the request of the reporting
party. The calls are re	eferred to the KDOC PREA Coordinator or the Director of Enforcement,

115.52 EXHAUSTION OF ADMINISTRATIVE REMEDIES INMATE REPORT □ Exceeds Standard (substantially exceeds requirement of standard) INMATE REPORT

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Apprehensions, and Investigations (EAI).

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

Based upon K.A.R. 44-15-204, GO 01-102 and examples of prior reports.

There are no time limits for submission of a grievance regarding an allegation of sexual abuse. The time limits for any grievance or portion thereof that does not allege an incident of sexual abuse or imminent sexual abuse shall be with the limits specified. (p. 7)

TCF does not require an inmate to attempt to resolve with staff any alleged incident of sexual abuse by a staff member, contractor, or volunteer. (p. 3)

A final decision on the merits of any portion of a grievance alleging sexual abuse or appeal shall be

issued by the secretary within 90 day of the initial filing of the grievance. Computation of the 90-day time period does not include time taken by the inmates in preparing and submitting any administrative appeal. If at any level of the administrative process, the inmate does not receive a response within the time allotted for reply, including any notified extensions, the inmate may consider the absence of a response to be a denial at that level and may proceed to the next level for an appeal. (p.5)

Grievances may be filed by a third party including fellow inmates, staff, family members, attorneys and outside advocate on behalf of the inmate. The inmate pursues any subsequent steps in the administrative remedy process. If the inmate declines to have the request processed on that individual's behalf, the facility shall document the inmate's decision. (p. 7)

Each inmate submitting a grievance concerning imminent sexual abuse shall state "Emergency Sexual Abuse Grievance" clearly on the grievance form. Each grievance alleging that an inmate is subject to substantial risk of imminent sexual abuse shall be treated as an emergency grievance. The Warden shall provide an initial response within 48 hours and shall issue a final decision within five calendar days. The initial response and final decision shall document the determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. (p. 6)

115.53

INMATE ACCESS TO OUTSIDE CONFIDENTIAL SUPPORT SERVICES

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- X 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

Based on IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment; GO 01-102 PREA. Victim services will be offered to the victim at the hospital with follow up behavioral health coordination between the hospital and TCF contract behavioral health. (GO 01-102, p. 9, E.) When inmates are referred to behavioral health for assessment of PREA, both inmates (perpetrator and victim will be assigned a Behavioral Health Advocate that can assist them in explaining the investigative process and provide updates as appropriate to the investigation. Behavioral staff will be assigned in this capacity for at least 90 days after the initial investigation. Referrals will be made as needed. (GO 01-102, p, 11, C.)

TCF has the information for outside sources on postings in living units. Information includes addresses and telephone numbers. Inmates are also provided the brochure on community sexual assault programs, which are available through health services staff, unit counselors and the PCM. Stormont Vail Hospital will contact the victim advocate for the inmates while they are at the hospital. The YWCA is currently providing this service. KDOC has been in communication with the Kansas Coalition Against Sexual and Domestic Violence (KCSDV) which would provide victim advocacy and emotional support services. They are attempting to establish a statewide MOU which would act as a template for each of the KDOC prison facilities so they can enter into agreements with their local crisis centers.

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115.54 THIRD-PARY REPORTING

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- X 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

IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment; GO 01-102 PREA; MOU with Legal Services for Prisoners; TCF brochure – Family's Guide to Inmate Sexual Assault Prevention. TCF has a method to receive third party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.

Staff shall accept reports made verbally, in writing, anonymously, or third parties. The grievance process may be used by inmate or third party to report sexual abuse or harassment. (GO 01-102, p,6 V., C, E.)

Legal services for Prisoners will accept both oral and written reports of sexual abuse or sexual harassment allegations from offenders incarcerated within KDOC facilities.

115.61 STAFF AND AGENCY REPORTING DUTIES

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- X 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

Based on IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment; GO 01-102 PREA; IMPP 22-103 Investigation Procedures; Corizon Policy P-B-04.00 – Federal Sexual Assault Reporting Regulations; Correct Care Solutions J-B-04. Staff and inmate interviews. PREA checklist and investigative case log.

All staff shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment, whether it is in regard to an offender or another staff member. (IMPP 10-103D, IV, A. and GO 01-102, p.6 V, F)

Apart from reporting to designated supervisors, staff shall not reveal any information related to sexual abuse reports to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. (IMPP 10-103D, IV, A, #2)

Any employee who becomes aware of staff sexual misconduct has a responsibility to report it.

CCS employees who observe or become aware of sexual activity of any sort between inmates are required to report the activity to the Facility Administration. CCS employees must inform any person reporting such sexual activity that report of sexual abuse, sexual harassment and sexual

misconduct must be reported.

document any incidents.

TCF does not house any inmate under the age of 18.

Allegations including third party and anonymous reports are forwarded to the investigators.

115.62	AGENCY PROTECTION DUTIES		
☐ Exceeds Standard (s	☐ Exceeds Standard (substantially exceeds requirement of standard)		
X Meets Standard (su	ubstantial compliance; complies in all material ways with the standard for the		
relevant review period)			
☐ Does Not Meet Star	ndard (requires corrective action)		
Auditor comments, in	cluding corrective actions needed if does not meet standard		
Based on IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment; GO 01-102 PREA; IMPP 10-139 Screening for Victimization and Abusiveness; IMPP 20-104 Purpose of Administrative Segregation and Appropriate Placements; IMPP 20-108 Protective Custody. Staff and inmate interviews. PREA case log.			
	•		

115.63	REPORTING TO OTHER CONFINEMENT FACILITIES		
☐ Exceeds Standard (substantially exceeds requirement of standard)			
X Meets Standard (su	bstantial compliance; complies in all material ways with the standard for the		
relevant review period)			
☐ Does Not Meet Stan	☐ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard			
	3 Coordinated Response to Sexual Abuse and Harassment. EAI PREA case log.		
Staff and inmate interviews. Examples of incidents.			
When a report is received that an inmate has been the victim of sexual abuse or harassment while			
incarcerated at another facility or under the supervision of another office; as soon as possible, but			
no later than 72 hours of receiving the report, the head off the office/facility that has received the			
allegation shall notify	the head of the office/ facility where the alleged abuse occurred. The head of		
the office/facility reco	eiving the notification shall ensure the allegation is investigated TCF will		

115.64	STAFF FIRST RESPONDER DUTIES	
☐ Exceeds Standard (substantially exceeds requirement of standard)		
X 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

Based upon IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment, Attachment A; IMPP 22-103 Investigation Procedures; GO 10-102 PREA.

When TCF learns of an allegation, they will separate the inmates. They will preserve and protect any crime scene until evidence can be collected. TCF staff will take the necessary steps to ensure the physical evidence isn't destroyed including evidence that may be present on the abuser.

All first responders including those individuals not in security are under the same requirements when an allegation is made.

TCF staff and EAI will work together to ensure the required procedures are followed. The Control Center will dispatch additional correctional officers to assist with any duties as necessary. When interviewed, all staff including supervisors, treatment, health services, officers, etc. was aware of their responsibilities and were knowledgeable of TCF's coordinated response to sexual abuse and sexual harassment.

115.65		COORDINATED RESPONSE
X Excee	ds Standard (substantially exceeds requirement of standard)
☐ Meets	\square 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

Based upon GO 01-102 PREA; IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment. Staff and inmate interviews. Flowchart for allegations of sexual activity.

TCF has written institutional plans/policy to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

The facility has a flowchart that can be used for reference when an incident or allegations are reported. It encompasses steps to follow for ensuring all areas are notified and documentation is completed. The policy began with first responder duties; coordinated response by shift supervisors, medical staff, behavioral health, forensic examination; EAI investigation; responsibilities of the PCM; and incidents with anonymous allegations.

Although incidents are all different with varying components/circumstances to them, TCF has a very inclusive approach to responding to and managing aspects of a reported incident/allegation. Time and consideration of their responsibilities is evident within their policies. Staff have received good training and were well versed in this area. They are prepared should they encounter an allegation or incident. The Warden, PCM and EAI are notified and are involved right from the start which is an essential part of their response. TCF has good communication among each other.

115.66	PRESERVATION OF ABILITY TO PROTECT INMATES FROM CONTACT WITH	
	ABUSERS	

☐ Exceeds Standard (substantially exceeds requirement of standard)		
X 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 Based upon Agency Head interview. Documentation in regards to collective bargaining. Excerpt from the Memorandum of Agreement between the State of Kansas and KOSE. TCF does have collective bargaining with Kansas Organization of State Employees (KOSE). Management has the ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.		

115.67	AGENCY PROTECTION AGAINST RETALIATION		
☐ Exceeds Standard (su	ubstantially exceeds requirement of standard)		
X Meets Standard (sul relevant review period)	bstantial compliance; complies in all material ways with the standard for the		
☐ Does Not Meet Stand	dard (requires corrective action)		
Auditor comments, inc	cluding corrective actions needed if does not meet standard		
Based upon IMPP 10-	103 Coordinated Response to Sexual Abuse and Harassment. GO 01-102		
PREA. Example of mo	PREA. Example of movement record, retaliation monitoring worksheet, staff offender relations		
checklist and memos.			
The PCM, in coordination with the Classification Administrator and EAI, will monitor decisions and incidents regarding inmates who report sexual abuse or harassment or who cooperate with investigations. The PCM will consider and review housing, disciplinary reports, record notes, EAI case log, internal classification checklist designation, behavioral health level changes, behavioral health referrals, staff offender relations checklist and grievances in order to determine if retaliation has or is occurring.			
The PCM will monitor retaliation for at least 90 days unless there is a concern or further			
information to indica	information to indicate the need for further monitoring. In the case of inmates, periodic status checks are conducted.		

115.68	POST-ALLEGATION PROTECTIVE CUSTODY
☐ Exceeds Standard (s	ubstantially exceeds requirement of standard)

Appropriate measures will be taken for any individual who expresses a fear of retaliation. The obligation to monitor shall terminate only if the allegation is determined to be unfounded.

X 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
Based on GO 01-102 PREA; IMPP 10-103 Coordinated Response to Sexual Assault and Harassment; IMPP 20-104 Purpose of Administrative Segregation and Appropriate Placements; IMPP 20-108 Protective Custody. Investigative summary, Administrative Segregation report, staff and inmate interviews. PCM and Warden interviews Inmates determined to be at high risk for sexual victimization or who have been determined to have suffered sexual abuse shall not be placed in involuntary segregation unless a thorough assessment determines that there is no available means of separation from likely abusers. They will only be housed in involuntary segregation until an alternative means of separation can be arranged.

	115.71	CRIMINAL AND ADMINISTRATIVE INVESTIGATIONS			
☐ Exceeds Standard (substantially exceeds requirement of standard)					
X 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 inc	luding corrective actions needed if does not meet standard	Auditor comments, including corrective actions needed if does not meet standard		

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

Based on IMPP 22-103 Investigation Procedures; IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment; GO 01-102 PREA. PREA case log, EAI Sexual Assault training certificates, investigative reports, records retention schedule, and memos.

TCF conducts its own investigations into allegations of sexual abuse and sexual harassment. They will conduct investigations promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

Where sexual abuse is alleged, TCF will use EAI trained investigators who have received special training in sexual abuse investigations.

EAI will gather and preserve direct and circumstantial evidence, including any physical and DNA evidence and any available electronic monitoring data. They will interview alleged victims, suspected perpetrators and witnesses. EAI will review prior complaints and reports of sexual abuse involving the suspected perpetrator.

If EAI has evidence that supports criminal prosecution, they will consult prosecutors as to where compelled interviews may be an obstacle for subsequent criminal prosecution.

The credibility of an alleged victim, suspect or witness will be assessed on an individual basis and not determined by if the individual is an inmate or staff member. TCF will not polygraph any alleged inmate victim.

EAI will attempt to determine if there were any staff actions or failures to act that could have contributed to an incident. They will document any relevant information obtained including

description of the physical and testimonial evidence. They will document any reasoning for credibility assessments, investigative facts and findings.

TCF will cooperate with any criminal investigation or proceedings and provide any documentation necessary. They will maintain communications on the status of the referred investigations. EAI will refer any substantiated allegations of conduct that appear to be criminal for prosecution. All written reports will be retained for the duration of the inmate's incarceration or employment by the agency, plus 5 years. EAI will evaluate and determine based upon the circumstantial and physical evidence obtained.

The investigations do not terminate if the alleged abuser or victim are no longer employed or incarcerated.

115.72	EVIDENTIARY STANDARDS FOR ADMINISTRATIVE INVESTIGATIONS		
☐ Exceeds Standard (substantially exceeds requirement of standard)			
X Meets Standard (substantial compliance; complies in all material ways with the standard for the			
relevant review period	relevant review period)		
☐ Does Not Meet Standard (requires corrective action)			
Auditor comments, inc	cluding corrective actions needed if does not meet standard		
Based upon IMPP 22-103 Investigation procedures and examples.			
	The purpose of a formal investigation is to determine, based on the preponderance of evidence,		
where there are sufficient facts or evidence to substantiate, refute or dismiss allegations of criminal			
•	activity or administrative violations.		
EAI WIII evaluate the	circumstantial and physical evidence to make their determinations.		

115.73	REPORTING TO INMATES	
☐ Exceeds Standard (so	ubstantially exceeds requirement of standard)	
X 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, inc	cluding corrective actions needed if does not meet standard	
Based on IMPP 10-10	Based on IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment: IMPP 22-103	

Based on IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment; IMPP 22-103 Investigation Procedures; GO 01-102 PREA. EAI PREA case log, Example documentation and Memos. TCF will ensure that an inmate is notified as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. They will remain in contact with any outside agency in order to inform the inmate.

TCF will inform the inmate when the staff member is no longer posted within the inmate's unit; no longer employed at the facility; indicted on a charge related to sexual abuse within the facility; or learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

If TCF has an inmate make an allegation against another inmate that they were sexually abused, TCF will ensure that the alleged victim is notified if the alleged abuser has been indicted on a charge or convicted of a charge related to sexual abuse within the facility. TCF will ensure that there is documentation of this notification.

If the inmate has been released from TCF, the facility will no longer be obligated to report to them.

115.76	DISCIPLINARY SANCTIONS FOR STAFF		
□ 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 Stan	☐ Does Not Meet Standard (requires corrective action)		
Auditor comments, inc	cluding corrective actions needed if does not meet standard		
	Based on IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment; GO 01-102 PREA;		
	ee & Volunteer Rules of Conduct and Undue Familiarity; IMPP 02-120		
1 7	Employee Disciplinary Procedures and Formal Actions. Example documentation.		
	Staff shall be subject to disciplinary sanctions up to and including termination for violating TCF		
	policy in regards to sexual abuse or sexual harassment. Termination is the presumptive disciplinary sanction for staff who engaged in sexual abuse. (GO 01-102, p. 11)		
	actors for violations of KDOC policy relating to sexual abuse and harassment.		
	This included the circumstances involved, the staff member's disciplinary history and the sanctions		
imposed for compara	imposed for comparable offenses by other staff with similar histories.		
All terminations for v	All terminations for violations of the sexual abuse or sexual harassment policies or resignations by		
staff who would have	been terminated if not for their resignation, shall be reported to law		
enforcement agencie	s if found to be criminal, and to any relevant licensing bodies. (GO 01-102,		
p.11)			

□ Exceeds Standard (substantially exceeds requirement of standard) X 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 Based on IMPP 02-118 Employee & Volunteer Rules of Conduct and Undue Familiarity; GO 01-102 PREA. EAI PREA case log, example investigation material, memos, staff interviews. Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies if found to be criminal, and to relevant licensing bodies. The facility will take the appropriate remedial measures and will consider whether to prohibit further contact with inmates.

	115.78	DISCIPLINARY SANCTIONS FOR INMATES	
	\square Exceeds Standard (substantially exceeds requirement of standard)		
	X Meets Standard (substantial compliance; complies in all material ways with the standard for the		
	relevant review period)		
	☐ Does Not Meet Stand	dard (requires corrective action)	
		luding corrective actions needed if does not meet standard	
		314 Sexual Activity; KAR 44-12-328 Undue Familiarity; GO 15-106 Disciplinary	
		Matrix; IMPP 10-103 Coordinated Response to Sexual Assault and Harassment.	
	EAI PREA case log, example documentation, memos, staff and inmate interviews.		
	TCF hold inmates accountable and will impose disciplinary sanctions following an administrative or criminal finding that the inmate engaged in inmate-on- inmate sexual abuse.		
	Disciplinary sanctions will occur and will be based upon the circumstances of the incident, inmate's		
	disciplinary history, and similar sanctions imposed on other inmates with comparable offenses.		
	TCF will consider the mental health of an inmate and will consult with the mental health staff prior to imposing discipline. (GO 115-106, p. 2)		
TCF will refer to inmates to mental health staff to address any underlying reasons or motivations		tes to mental health staff to address any underlying reasons or motivations	
	for sexual abuse and will determine if the inmate's participation is a condition for access to		
	programming or othe		
	Inmates may be disciplined for sexual contact with staff only upon a finding that the staff member did not consent to such contact.		
		se made in good faith will not constitute false reporting of an incident even if	
	•	sn't establish sufficient evidence to substantiate the allegation.	
	~	al activity between inmates. They will take the appropriate action when	
incidents of sexual activity that are not coerced or considered sexual abuse occur.			

115.81	MEDICAL AND MENTAL HEALTH SCREENINGS; HISTORY OF SEXUAL ABUSE	
☐ Exceeds Standard (substantially exceeds requirement of standard)		
X 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		
Based on IMPP 10-10	3 Coordinated Response to Sexual Abuse and Harassment; IMPP 10-139	
Screening for Sexual Victimization and Abusiveness; GO 01-102 PREA; GO 21-101 Mental Health		
Services. Memos. Staff and inmate interviews.		
Inmates that have been identified as having been sexually victimized in an institutional setting or in		
the community will be offered follow up with medical or behavior health practitioners within 14		
days of the intake scr	eening. (GO 01-102, p. 6, #8)	

Inmates that have been identified as previously perpetrating sexual abuse, whether it occurred in an institutional setting or in the community, shall be offered a follow up meeting with a behavioral health practitioner within 14 days of the intake screening. (GO 01-102, p. 6, # 9)

All notifications to necessary facility staff shall be made by the staff member completing the screening, as necessary to ensure that the information being used to make determinations regarding housing, bed, work, education, and program assignments and to ensure appropriate follow-up can be provided.

Medical and mental health practitioners will obtain informed consent from an inmate prior to reporting information about incidents that occurred prior to an institutional setting.

115.82	ACCESS TO EMERGENCY MEDICAL AND MENTAL HEALTH SERVICES	
☐ Exceeds Standard (substantially exceeds requirement of standard)		
X Meets Standard (su	bstantial compliance; complies in all material ways with the standard for the	
relevant review period)		
☐ Does Not Meet Standard (requires corrective action)		
Auditor comments, inc	cluding corrective actions needed if does not meet standard	
	PREA; IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment;	
	t Forensic Exam Pamphlet. PREA checklist and memos. Interviews.	
	nealth will ensure that inmate victims of sexual abuse receive timely,	
unimpeded access to emergency medical treatment and crisis intervention services.		
Staff will refer inmates to medical and mental health practitioners are appropriate.		
Inmate victims are offered timely information and access to emergency contraception and sexual		
•	prophylaxis. Inmate victims of sexually abusive vaginal penetration while	
incarcerated will rece	. • .	
Any inmate that is re-	quiring treatment will not incur the cost for the treatment.	

115.83	ONGOING MEDICAL AND MENTAL HEALTH CARE FOR SEXUAL ABUSE VICTIMS	
	AND ABUSERS	
☐ Exceeds Standard (s	substantially exceeds requirement of standard)	
X 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		
Based on GO 01-102	PREA; IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment;	
KSCDV Sexual Assault Forensic Exam Pamphlet.		
TCF will offer medica	al and mental health evaluations as appropriate. Treatment will be given to	
	een victimized by sexual abuse while incarcerated.	
The evaluation and t	reatment of victims will include any necessary follow up treatment plans and	

any referrals for continued care. The community level of care will be provided to the inmates. Inmate victims of sexually abusive vaginal penetration will be offered pregnancy tests. Inmates will receive timely and comprehensive information to all lawful pregnancy-related medical services. Inmate victims will also be offered tests for sexually transmitted diseases as appropriate. Treatment will be provided without cost to the inmate.

A mental health evaluation of all known inmate-on-inmate abusers will be conducted within 60 days of learning of the abuse history and they will be offered treatment when appropriate.

	115.86	SEXUAL ABUSE INCIDENT REVIEWS	
☐ Exceeds Standard (substantially exceeds requirement of standard)			
	X 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, inc	cluding corrective actions needed if does not meet standard	
	Based on IMPP 10-103 Coordinated Response to Sexual Abuse and Harassment; IMPP 12-118		
	Serious Incident Review Board Actions Pending and Subsequent to Incident Reviews, Sexual		
	Incident Reviews; GO		
	The Sexual Assault Incident Review Board (SAIRB) will conduct of review at the conclusion of every		
	~	ation that has been determined to be substantiated or unsubstantiated. This	
	review will occur within 30 days of the conclusion of the sexual abuse investigation. The SAIR team includes the PCM, EAI, CSII or higher, a health care or mental health professional,		
	and any additional staff appointed by the Warden.		
The review team considers if there is a need to change policy or practice to better prevent,		•••	
	or respond to sexual abuse. They examine if there are any underlying issues or factors as outlined in		
	the standard. TCF will look at where the incident occurred, staffing levels, monitoring technology,		
	and other relevant information. They will document their findings and make recommendations as		
	appropriate. The report will be submitted to the Warden and KDOC PREA Coordinator within 10		
business days of the completion of the review. TCF will implement recommendations and document the reasons for not doing so.		·	
	accument the reason	s for not doing so.	

	115.87	DATA COLLECTION	
	☐ Exceeds Standard (substantially exceeds requirement of standard)		
	X 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			
	Based on IMPP 10-10	3 Coordinated Response to Sexual Abuse and Harassment; GO 01-102 PREA;	
	Survey; PREA Data and Memos.		
		ite, uniform date for every allegation of sexual abuse. Data shall be	
	aggregated at least ar	nnually and shall include the data necessary to respond to all questions from	

the most recent Survey of Sexual Violence conducted by the DOJ. All data shall be made available upon request of the DOJ no later than June 30 of any given year.

115.88	DATA REVIEW FOR CORRECTIVE ACTION	
\square Exceeds Standard (substantially exceeds requirement of standard)		
X 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, inc	cluding corrective actions needed if does not meet standard	
Based on GO 01-102	PREA, IMT meeting minutes and KDOC/TCF website.	
TCF management team will review all data collected in order to assess and improve the		
effectiveness of the sexual abuse prevention, detection, and response policies, practices and		
training.		

115.89	DATA STORAGE, PUBLICATION, AND DESTRUCTION	
☐ Exceeds Standard (substantially exceeds requirement of standard)		
X 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		
Based on GO 01-102	PREA; Data and PREA information from KDOC website.	
KDOC will collect data and securely maintain the data for 10 years after the date of the initial		
collection. This data can be obtained on the website which compares the previous years. All		
personal identifiers h	ave been removed and not published for the public.	

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.

<u>Jean Even</u>	August 15, 2014
Auditor Signature	Date