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





[Following information to be populated a	utomatically from pre-audit questionnaire]
Name of facility: Larned Correctional Mental Health	Facility
Physical Address: 1318 KS Hwy 264, Larned, Ks 6755	0
Date report submitted: May 14, 2015	
Address: 510 E. 12 th St., Des Moines, Iowa 50319	
E-Mail: Delbert.Longley@iowa.gov	
Telephone number: 515-725-5731	
Date of facility visit: April 20-22, 2015	
Facility mailing address: (if different from above)	
Telephone number:	
The facility is:	
☐ Military ☐ County	☐ Federal
☐ Private for profit ☐ Municipal	State
☐ Private not for profit	
Facility Type: ☐ Jail ☒ Prison	
Name of PREA Compliance Manager: Tim Easley Title: LCMHF Deputy Warden	
E-Mail Address: Tim.Easley@doc.ks.gov Phone Number: 620-910-7519	
Name of agency: Larned Correctional Mental Health	Facility
Governing authority or parent agency: Kansas Depar	rtment of Corrections
Physical address: 1318 KS Hwy 264, Larned, Ks 6755	0
Mailing address: (if different from above)	
Telephone Number: 785-296-3310	
Name: Doug Waddington	Title: LCMHF Warden
E-Mail Address: Doug.Waddington@doc.ks.gov	Telephone Number: 620-910-7509
Name: Elisabeth Copeland	Title: Corrections Manager II
E-Mail Address: Elisabeth.Copeland@doc.ks.gov	Teleph o ne Number: 785-296-4431

AUDIT FINDINGS

NARRATIVE:

The audit of the Larned Correctional Mental Health Facility (LCMHF) was conducted April 20-22, 2015 by Delbert Longley, Certified PREA Auditor; Jen Foltz, Certified PREA Auditor; and Don Baker, PREA Auditor, 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 LCMHF PREA team. This included but not limited to: Doug Waddington, Warden; Tim Easley, Deputy Warden and PREA Compliance Manager; Kent Schmidt, Staff Development and Assistant PREA Compliance Manager; Lisa Copeland, KDOC PREA Coordinator; Talia Huff, KDOC PREA Specialist; Mark Mora, KDOC CCII; James Graham, LCMHF Chief of Security; and several other Administrative Staff. Following the entrance meeting, interviews were conducted with key leadership personnel in the morning. After lunch, over five (5) hours was spent touring the facility, including a satellite site immediately to the west of the main unit. Areas toured included the living units, inmate services, laundry, gym, dining hall/kitchen, canteen, yard, industries areas, health services, visiting rooms, video surveillance rooms, tower, 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. LGTBI inmates were identified and information was obtained from these individuals.

Formal staff interviews were completed with the PREA Coordinator, PREA Compliance Manager, Warden, Human Resources, Health Services, Shift supervisors, PREA investigators, Officers/Sgts, Counselors and a Unit manager. Staff from all three shifts were interviewed. All staff are knowledgeable of KDOC/LCMHF 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 LCMHF's procedures.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Larned Correctional Mental Health Facility (LCMHF) is located at 1318 KS Hwy 264, Larned, KS 67550. The mission is for LCMHF to provide male inmates safe and secure confinement 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. The main-custody compound within the walled portion of the LCMHF and a minimum-security unit located outside the walls. The facility has 8

buildings. The inmate population was 423 during the time of the audit. The age range of the population is 18-73 years of age. LCMHF does not house youthful inmates under the age of 18. There is 270 staff, including volunteers and contractors, working throughout the facility. There are 212 total cameras throughout the facility utilized to enhance the staff coverage.

All inmates are admitted and discharged through a centralized reception center. The facility encourages advancement through the level system which is based upon sentences, programming, classification, treatment, behavior, etc. LCMHF offers a wide variety of jobs for the inmates including off site work assignments for work release inmates. Recreational activities are available to inmates at each site.

The facility design allows for inmates to be separated from other inmates or staff when a sexual abuse or sexual harassment allegation is made.

HCF has in place a 5 year plan to enhance safety, supervision and security.

All construction and redesigning of exiting units/areas have PREA considerations taken into account.

Number of standards exceeded: 4

Number of standards met: 38

Number of standards not met: 0

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115.11	ZERO TOLERANCE OF SEXUAL ABUSE AND SEXUAL HARASSMENT; PREA
	COORDINATOR
\square Exceeds Standard (s	ubstantially exceeds requirement of standard)
☑ Meets Standard (substance)	ostantial compliance; complies in all material ways with the standard for the
relevant review period	
•	dard (requires corrective action)
j.	
Auditor comments, inc	cluding corrective actions needed if does not meet standard
IMPP10-103D, Policy	Statement, LCMHF GO 01-114
115.12	CONTRACTING WITH OTHER ENTITIES FOR THE CONFINEMENT OF INMATES
☐ Exceeds Standard (s	ubstantially exceeds requirement of standard)
· ·	ostantial compliance; complies in all material ways with the standard for the
relevant review period	,
'	dard (requires corrective action)
	(1044)
Auditor comments, inc	cluding corrective actions needed if does not meet standard
	se juvenile offenders. KDOC has contracts with North Dakota
-	greement; Nebraska Intergovernmental Agreement; and Butler County Jail.
	5. 6. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
115.13	SUPERVISION AND MONITORING
☐ Exceeds Standard (s	ubstantially exceeds requirement of standard)
☐ Exceeds Standard (s ☑ Meets Standard (sub	ubstantially exceeds requirement of standard) ostantial compliance; complies in all material ways with the standard for the
☐ Exceeds Standard (s☑ Meets Standard (subsequence)☐ Exceeds Standard (subsequence)	ubstantially exceeds requirement of standard) ostantial compliance; complies in all material ways with the standard for the
☐ Exceeds Standard (s☑ Meets Standard (subsequence)☐ Exceeds Standard (subsequence)	ubstantially exceeds requirement of standard) ostantial compliance; complies in all material ways with the standard for the
☐ Exceeds Standard (s☑ Meets Standard (subsection of the content of the conten	ubstantially exceeds requirement of standard) ostantial compliance; complies in all material ways with the standard for the dard (requires corrective action)
 □ Exceeds Standard (s ⋈ Meets Standard (subsequence) □ Does Not Meet Standard (subsequence) □ Auditor comments, incomments, incomments 	ubstantially exceeds requirement of standard) ostantial compliance; complies in all material ways with the standard for the dard (requires corrective action) cluding corrective actions needed if does not meet standard
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 □ Exceeds Standard (s ☑ Meets Standard (subsequence) □ Does Not Meet Standard □ Auditor comments, incomments, incomments and the several candade where addition 	ubstantially exceeds requirement of standard) ostantial compliance; complies in all material ways with the standard for the idard (requires corrective action) cluding corrective actions needed if does not meet standard imeras and staff in place to provide adequate supervision. Suggestions were lial cameras could be placed to further enhance monitoring.
☐ Exceeds Standard (subsection of the comments of the comment	ubstantially exceeds requirement of standard) ostantial compliance; complies in all material ways with the standard for the idard (requires corrective action) cluding corrective actions needed if does not meet standard imeras and staff in place to provide adequate supervision. Suggestions were
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☐ Exceeds Standard (subsection of the comments of the comment	ubstantially exceeds requirement of standard) ostantial compliance; complies in all material ways with the standard for the dard (requires corrective action) cluding corrective actions needed if does not meet standard meras and staff in place to provide adequate supervision. Suggestions were hal cameras could be placed to further enhance monitoring. The provided in the standard supervision of the standard supervision. Suggestions were hal cameras could be placed to further enhance monitoring. The provided in the standard standard supervision of the standard supervision of the standard supervision. Suggestions were had cameras could be placed to further enhance monitoring. The provided in the standard supervision of the s
□ Exceeds Standard (subsection of the comments of the comment	ubstantially exceeds requirement of standard) estantial compliance; complies in all material ways with the standard for the dard (requires corrective action) cluding corrective actions needed if does not meet standard emeras and staff in place to provide adequate supervision. Suggestions were all cameras could be placed to further enhance monitoring. Estandard Es
□ Exceeds Standard (subsection of the comments of the comment	ubstantially exceeds requirement of standard) ostantial compliance; complies in all material ways with the standard for the idard (requires corrective action) cluding corrective actions needed if does not meet standard ameras and staff in place to provide adequate supervision. Suggestions were all cameras could be placed to further enhance monitoring. If Analysis, Operational Staffing and Rooster Management; and LCMHF GO 01- YOUTHFUL INMATES ubstantially exceeds requirement of standard)
□ Exceeds Standard (subsection of the comments of the comment	ubstantially exceeds requirement of standard) ostantial compliance; complies in all material ways with the standard for the idard (requires corrective action) cluding corrective actions needed if does not meet standard imeras and staff in place to provide adequate supervision. Suggestions were hal cameras could be placed to further enhance monitoring. Sa Analysis, Operational Staffing and Rooster Management; and LCMHF GO 01- YOUTHFUL INMATES ubstantially exceeds requirement of standard) ostantial compliance; complies in all material ways with the standard for the
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115.15	LIMITS TO CROSS GENDER VIEWING AND SEARCHES	
=	substantially exceeds requirement of standard)	
<u>-</u>	☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the	
relevant review period	,	
☐ Does Not Meet Star	ndard (requires corrective action)	
	cluding corrective actions needed if does not meet standard	
	e opposite gender do a very good job of announcing their presence. This has	
	ugh inmate interviews. Living Unit Supervisor Post Order 2014; LCMHF GO 01-114; LCMHF GO 09-	
108.	Living Unit Supervisor Post Order 2014, Edwine GO 01-114, Edwine GO 03-	
100.		
115.16	INMATES WITH DISABILITIES AND INMATES WHO ARE LIMITED ENGLISH	
115.10	PROFICIENT	
✓ Evenade Standard (s	substantially exceeds requirement of standard)	
•	bstantially exceeds requirement of standard) bstantial compliance; complies in all material ways with the standard for the	
relevant review period		
•	ndard (requires corrective action)	
L DUES NOT MEET Star	idala (requires corrective action)	
Auditor comments, in	cluding corrective actions needed if does not meet standard	
	lable to assist those who are limited English proficient and the inmate that is	
deaf.	idole to doorse those who die illineed English provision and the illineed that is	
	10-138; Brochure in English and Spanish.	
. ,		
115.17	HIRING AND PROMOTION DECISIONS	
	substantially exceeds requirement of standard)	
-	bstantial compliance; complies in all material ways with the standard for the	
relevant review period		
•	ndard (requires corrective action)	
 ·	,	
Auditor comments, in	cluding corrective actions needed if does not meet standard	
LCMHF completes ba	ckground checks on all new hires prior to an offer of employment, and on all	
current employees p	rior to promotions, volunteers and contractors at least once every five (5)	
years.		
IMPP 02-126		
115.18	UPGRADES TO FACILITIES AND TECHNOLOGY	
Exceeds Standard (s	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 Star	ndard (requires corrective action)	
l		
	cluding corrective actions needed if does not meet standard	
	to make changes to enhance monitoring and supervision, ie: additional	
cameras. This is depo	endent upon budgetary availability.	

115.21 EVIDEN	NCE PROTOCOL AND FORENSIC MEDICAL EXAMINATIONS
	ially exceeds requirement of standard)
•	
relevant review period)	Il compliance; complies in all material ways with the standard for the
•	and a commontive entire.
☐ Does Not Meet Standard (re	equires corrective action)
Auditor comments including	corrective actions needed if does not meet standard
	iews confirm the proper protocols are in place and utilized as
needed.	lews commit the proper protocols are in place and admized as
	ocol Manual, June 2011; KSA 65 448; MOU with Family Crisis Center
	1
115.22 POLICE	ES TO ENSURE REFERRALS OF ALLEGATIONS FOR INVESTIGATIONS
-	ially exceeds requirement of standard)
	l compliance; complies in all material ways with the standard for the
relevant review period)	
\square Does Not Meet Standard (re	equires corrective action)
Auditor comments including	corrective actions needed if does not meet standard
	lace, investigators on staff to ensure investigations are conducted.
IMPP 22-103	lace, investigators on stail to ensure investigations are conducted.
IIVIFF 22-103	
115.31 EMPLO	DYEE TRAINING
	ially exceeds requirement of standard)
	I compliance; complies in all material ways with the standard for the
relevant review period)	il compilatice, compiles in an material ways with the standard for the
□ Does Not Meet Standard (re	actions corrective action)
Does Not Meet Standard (16	equires corrective action)
Auditor comments, including	corrective actions needed if does not meet standard
	ompleted very well. Staff was able to articulate proper response to a
sexual violation complaint.	ompleted very well. Stall was able to alticulate proper response to a
IMPP 10-103; See annual train	ining schedule
1011 1 20 200, 000 01111001 0101	ining serieur.
115.32 VOLUI	NTEER AND CONTRACTOR TRAINING
<u> </u>	
	ially exceeds requirement of standard)
•	l compliance; complies in all material ways with the standard for the
relevant review period)	
\square Does Not Meet Standard (re	equires corrective action)
Auditor comments including	servestive estions needed if does not most standard
	corrective actions needed if does not meet standard
sexual violation complaint.	understand their responsibilities in reporting and responding to a
IMPP03-104	

115.33	INMATE EDUCATION
	d (substantially exceeds requirement of standard)
	(substantial compliance; complies in all material ways with the standard for the
relevant review per	
☐ Does Not Meet S	tandard (requires corrective action)
	including corrective actions needed if does not meet standard
	to articulate how they could report a violation anonymously, third party, in
person or in writin	g.
IMPP 10-103	
445.24	CDECIALIZED TRAINING, INVESTIGATIONS
115.34	SPECIALIZED TRAINING: INVESTIGATIONS
	d (substantially exceeds requirement of standard)
•	substantial compliance; complies in all material ways with the standard for the
relevant review peri	•
☐ Does Not Meet St	tandard (requires corrective action)
	including corrective actions needed if does not meet standard
_	rained in the proper procedures and understand protocols for investigating
allegations.	
IMPP 10-103D	
I	
115.35	SPECIALIZED TRAINING: MEDICAL AND MENTAL HEALTH CARE
☐ Exceeds Standard	d (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the
relevant review peri	od)
☐ Does Not Meet St	tandard (requires corrective action)
Auditor comments,	including corrective actions needed if does not meet standard
Medical and menta	al health professionals understand their role in responding and reporting any
allegation of sexua	Il nature.
IMPP 10-103D	
115.41	SCREENING FOR RISK OF VICTIMIZATION AND ABUSIVENESS
☐ Exceeds Standard	substantially exceeds requirement of standard)
	substantial compliance; complies in all material ways with the standard for the
relevant review peri	•
The state of the s	tandard (requires corrective action)
	,
Auditor comments,	including corrective actions needed if does not meet standard
	to articulate they were screened and re-screened within the time frames and
mandated of the P	
IMPP 10-139; LCM	HF GO 01 114

115.42	USE OF SCREENING INFORMATION
	ubstantially exceeds requirement of standard)
 ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the 	
relevant review period	·
· ·	dard (requires corrective action)
	au a (. equil de con con e de con,
Auditor comments, inc	cluding corrective actions needed if does not meet standard
Screening informatio	n is used to determine proper housing for each inmate.
LCMHF Employee Roo	oster; IMPP 11-106; IMPP 10-139
115.43	PROTECTIVE CUSTODY
☐ Exceeds Standard (s	ubstantially exceeds requirement of standard)
	ostantial 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
Staff utilizes protective	ve custody as needed by utilizing screening information or inmate
IMPP 10-103D	
115.51	INMATE REPORTING
☐ Exceeds Standard (s	ubstantially 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, inc	cluding corrective actions needed if does not meet standard
Inmates have several	methods of reporting accessible to them. All inmates that were interviewed
	e at least part of the multiple means of reporting.
IMPP 10-103D	
115.52	EXHAUSTION OF ADMINISTRATIVE REMEDIES
☐ Exceeds Standard (s	ubstantially exceeds requirement of standard)
	ostantial compliance; complies in all material ways with the standard for the
relevant review period)	
	dard (requires corrective action)
	cluding corrective actions needed if does not meet standard
·	place that adequately address the inmate grievance system on how to file a
KDOC KAR 44-15-204	es involved, and remedies for the grievances.
KDUC KAK 44-15-204	

115.53 INMATE ACCESS TO OUTSIDE CONFIDENTIAL SUPPORT SERVICES
☐ Exceeds Standard (substantially exceeds requirement of standard)
relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard
Outside services are available through volunteers and if needed, at outside locations with staff that
are knowledgeable and competent to provide services.
LCMHF GO 01-114; IMPP 10-103D; KDOC Advocate Contract; LCMHF MOU Family Crisis Center
115.54 THIRD-PARY REPORTING
☐ Exceeds Standard (substantially exceeds requirement of standard)
relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard
Inmates interviewed were comfortable with making a report by third party if they felt the need to
do so.
445 C4 CTAFF AND ACENICY DEPORTING DUTIES
115.61 STAFF AND AGENCY REPORTING DUTIES
☐ 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
Staff understands policy and protocol for reporting any violation that comes to their attention.
IMPP 10-103
A OF NOV PROTECTION BUTTER
115.62 AGENCY PROTECTION DUTIES
☐ 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)
Analitan agreements including corrective actions pended if does not most standard
Auditor comments, including corrective actions needed if does not meet standard Staff understands policy and protocols to protect inmates from allegations to securing and
investigating a sexual assault.
Investigating a sexual assault.

115 62	DEDORTING TO OTHER CONFINEMENT FACILITIES
115.63	REPORTING TO OTHER CONFINEMENT FACILITIES
	ard (substantially exceeds requirement of standard)
	d (substantial compliance; complies in all material ways with the standard for the
relevant review po	·
□ Does Not Mee	t Standard (requires corrective action)
A. ditar cammant	to including conventing actions product if does not most standard
	ts, including corrective actions needed if does not meet standard
	ds policy and protocols and verbally assured willingness to share pertinent hother facilities.
IMPP 10-103D	other facilities.
11411 10 1035	
115.64	STAFF FIRST RESPONDER DUTIES
	ard (substantially exceeds requirement of standard)
	d (substantial compliance; complies in all material ways with the standard for the
relevant review po	
-	t Standard (requires corrective action)
_ Does Not Mice	t Standard (regulies corrective detion)
Auditor comment	ts, including corrective actions needed if does not meet standard
	edgeable and was able to articulate their responsibilities as first responders to a
sexual assault in	· · · · · · · · · · · · · · · · · · ·
IMPP 10-103D	
115.65	COORDINATED RESPONSE
☐ Exceeds Standa	ard (substantially exceeds requirement of standard)
	d (substantial compliance; complies in all material ways with the standard for the
relevant review po	eriod)
☐ Does Not Meet	t Standard (requires corrective action)
	ts, including corrective actions needed if does not meet standard
•	in of action in place to respond to, investigate, provide treatment to any sexual
abuse or assault	
LCMHF GO 01-13	14
_	
115.66	PRESERVATION OF ABILITY TO PROTECT INMATES FROM CONTACT WITH
	ABUSERS
	ard (substantially exceeds requirement of standard)
	d (substantial compliance; complies in all material ways with the standard for the
relevant review p	·
☐ Does Not Meet	t Standard (requires corrective action)
Alika	
	ts, including corrective actions needed if does not meet standard
	ds policy, protocol and their responsibility to preserve the scene and to protect the rther abuse or retaliation.
KDOC KOSE MIO	A 2010, Renewed 6/30/14

115.67	AGENCY PROTECTION AGAINST RETALIATION
\Box Exceeds Standard (s	ubstantially exceeds requirement of standard)
⋈ Meets Standard (sull)	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
Staff understands pol	licy, protocol and their responsibility to protect the inmates from
retaliation.	
IMPP 10-103	
115.68	POST-ALLEGATION PROTECTIVE CUSTODY
☐ Exceeds Standard (s	ubstantially exceeds requirement of standard)
-	bstantial compliance; complies in all material ways with the standard for the
relevant review period	·
•	idard (requires corrective action)
Auditor comments, inc	cluding corrective actions needed if does not meet standard
	d is knowledgeable on how to address and protect inmates.
IMPP 10-103D	
115.71	CRIMINAL AND ADMINISTRATIVE INVESTIGATIONS
☐ Exceeds Standard (s	ubstantially exceeds requirement of standard)
-	bstantial compliance; complies in all material ways with the standard for the
relevant review period	·
·	idard (requires corrective action)
	,
Auditor comments, inc	cluding corrective actions needed if does not meet standard
-	nvestigative reports, cooperate with outside investigators to file criminal
	or to issue administrative sanctions as needed.
IMPP 22-103	
115.72	EVIDENTIARY STANDARDS FOR ADMINISTRATIVE INVESTIGATIONS
☐ Exceeds Standard (s	ubstantially exceeds requirement of standard)
-	bstantial compliance; complies in all material ways with the standard for the
relevant review period	
•	idard (requires corrective action)
	,
Auditor comments, inc	cluding corrective actions needed if does not meet standard
	ceived training and are knowledgeable concerning the handling of all
investigations.	5
IMPP 22-103	

115.73	REPORTING TO INMATES
	d (substantially exceeds requirement of standard)
☐ Meets Standard	(substantial compliance; complies in all material ways with the standard for the
relevant review per	iod)
☐ Does Not Meet S	Standard (requires corrective action)
Auditor comments,	, including corrective actions needed if does not meet standard
Staff understand t	their responsibility to report back to the inmate after an investigation is
complete, docume	entation has been reviewed, and inmates state they have been informed.
IMPP 10-103; IMP	P 22-103; IMPP 10-103D
115.76	DISCIPLINARY SANCTIONS FOR STAFF
	d (substantially exceeds requirement of standard)
	(substantial compliance; complies in all material ways with the standard for the
relevant review per	·
•	Standard (requires corrective action)
	realisation (Feduces confective decision)
Auditor comments.	, including corrective actions needed if does not meet standard
	as been reviewed concerning staff discipline when improper actions by a staff
	n place. Discipline has included termination of the employee.
	P 02-118; IMPP 20-120
	•
115.77	CORRECTIVE ACTION FOR CONTRACTORS AND VOLUNTEERS
	d (substantially exceeds requirement of standard)
	(substantial compliance; complies in all material ways with the standard for the
relevant review per	
•	Standard (requires corrective action)
Does Not Meet 3	standard (requires corrective action)
Auditor comments	, including corrective actions needed if does not meet standard
	olunteers have been locked out and refused admission due to inappropriate
behavior.	oranicolo navo acciniconos carana relación autorio mappi opriario
IMPP 10-103D	
115.78	DISCIPLINARY SANCTIONS FOR INMATES
	d (substantially exceeds requirement of standard)
	(substantially exceeds requirement of standard) (substantial compliance; complies in all material ways with the standard for the
relevant review per	·
Does Not Meet S	Standard (requires corrective action)
Auditor comments	including corrective actions needed if does not most standard
	, including corrective actions needed if does not meet standard
	they have taken disciplinary action towards inmates, including segregation if
IMPP 10-103	t and to maintain safety and security.
IIVIPP 10-103	

115.81	MEDICAL AND MENTAL HEALTH SCREENINGS; HISTORY OF SEXUAL ABUSE
☐ Exceeds Standard (s	substantially exceeds requirement of standard)
relevant review period)
☐ Does Not Meet Star	ndard (requires corrective action)
Auditor comments, inc	cluding corrective actions needed if does not meet standard
Screenings are condu	icted as part of the admission process and followed up on as required by
policy and standards	
IMPP 10-103D	
115.82	ACCESS TO EMERGENCY MEDICAL AND MENTAL HEALTH SERVICES
\square Exceeds Standard (s	substantially exceeds requirement of standard)
I	bstantial compliance; complies in all material ways with the standard for the
relevant review period	
☐ Does Not Meet Star	ndard (requires corrective action)
	cluding corrective actions needed if does not meet standard
	to medical and mental health personnel upon request or by staff directive
when the need arises	5.
IMPP 10-103D	
115.83	ONGOING MEDICAL AND MENTAL HEALTH CARE FOR SEXUAL ABUSE VICTIMS AND ABUSERS
☐ Exceeds Standard (s	substantially exceeds requirement of standard)
	bstantial compliance; complies in all material ways with the standard for the
relevant review period	
☐ Does Not Meet Star	ndard (requires corrective action)
Auditor comments, inc	cluding corrective actions needed if does not meet standard
Inmates receive med	ical and mental health care as needed, including counseling.
IMPP 10-103D	
115.86	SEXUAL ABUSE INCIDENT REVIEWS
☐ Exceeds Standard (s	substantially exceeds requirement of standard)
•	bstantial compliance; complies in all material ways with the standard for the
relevant review period	·
·	ndard (requires corrective action)
	·
Auditor comments, inc	cluding corrective actions needed if does not meet standard
Investigative staff, m	edical, and mental health staff reviews each case to determine appropriate
action on an individu	

IMPP 10-103D; IMPP 12-118; IMPP SAIR SM 14 0038 08 115.87 DATA COLLECTION ☐ 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 Staff was able to articulate the proper procedure to secure the scene and to collect evidence from the area of occurrence, personal hygiene and how to properly collect evidence by standard, policy, protocol, and good investigative techniques. **IMPP 10-103D** 115.88 DATA REVIEW FOR CORRECTIVE ACTION ☐ 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 By policy, LCMHF reviews data and policies to ensure all cases have been properly being addressed in the past, and makes changes as needed to be more proactive in responding to the needs of the inmates. Annual KDOC PREA Report 2014; http://www.doc.ks.gov/publications/kdoc-facilities-management 115.89 DATA STORAGE, PUBLICATION, AND DESTRUCTION

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☐ 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
By policy, LCMHF maintains records for a minimum of 10 years, and publicly post all required
reports for public review.
IMPP 10-103D; http://www.doc.ks.gov/facilities/prea

AUDITOR CERTIFICATION:

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

Delbert G. Longley	May 14, 2015
Auditor Signature	 Date