

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: 08-11-2016

Auditor Information			
Auditor name: Jeff Rogers			
Address: P.O. Box 1628			
Email: jamraat02@gmail.com			
Telephone number: 502-320-4769			
Date of facility visit: August 2-3, 2016			
Facility Information			
Facility name: Warren County Jail			
Facility physical address: 920 Kentucky Street, Bowling Green, Kentucky 42101			
Facility mailing address: <i>(if different from above)</i>			
Facility telephone number: 270-843-4606			
The facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input checked="" type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input type="checkbox"/> Prison	<input checked="" type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Jackie Strode			
Number of staff assigned to the facility in the last 12 months: 92			
Designed facility capacity: 562			
Current population of facility: 630			
Facility security levels/inmate custody levels: minimum to maximum			
Age range of the population: 18 and up			
Name of PREA Compliance Manager: Brian McPherson		Title: Captain/PREA Coordinator/Manager	
Email address: brian.mcpherson@ky.gov		Telephone number: 270-843-4606	
Agency Information			
Name of agency: Warren County Jail			
Governing authority or parent agency: <i>(if applicable)</i> Warren County Fiscal Court			
Physical address: 429-East 10 th Ave., Bowling Green, Kentucky			
Mailing address: <i>(if different from above)</i>			
Telephone number: 270-843-4146			
Agency Chief Executive Officer			
Name: Jackie Strode		Title: Jailer	
Email address: jackie.strode@ky.gov		Telephone number: 270-843-4606	
Agency-Wide PREA Coordinator			
Name: Brian McPherson		Title: Captain/PREA Coordinator/Compliance Manager	
Email address: brian.mcpherson@ky.gov		Telephone number: 270-843-4606	

AUDIT FINDINGS

NARRATIVE

The Prison Rape Elimination Act (PREA) on-site audit of the Warren County Jail in Bowling Green, Kentucky was conducted on August 2-3, 2016 by Jeff Rogers from Frankfort, Kentucky, a U.S. Department of Justice Certified PREA Auditor for adult prisons and jails. Pre-audit preparation included a thorough review of all documentation and materials submitted by the facility along with the data included in the completed Pre-Audit Questionnaire. The documentation reviewed included agency policies, procedures, forms, education materials, training curriculum, organizational charts, posters, brochures and other PREA related materials that were provided to demonstrate compliance with the PREA standards. This review prompted a series of questions that were reduced to writing and submitted to the PREA Coordinator for review. Answers to the questions were submitted by the the PREA Coordinator and reviewed by the auditor prior to the on-site audit. All issues found during the pre-audit review were corrected to the satisfaction of the auditor. During the one and one half days of the on-site audit, the auditor was provided a private, key only accessible office in the facility from which to work and conduct confidential interviews. Formal personal interviews were conducted with facility staff, inmates and contractors. The auditor interviewed 10 random inmates from various housing units. Ten (10) random staff members were interviewed representing all three shifts. Also interviewed were 14 specialty staff using the DOJ Questionnaires assigned to the following specialty staff:

- Medical and Mental Health Staff (3)
- PREA Coordinator/PREA Compliance Manager
- Agency Head
- Warden
- Staff Person who Monitors Retaliation
- Investigator
- Human Resources
- Incident Review Team
- Intake Staff
- Person Who Conducts Screening/Risk Assessments
- Intermediate or Higher Level Staff who Conduct Unannounced Rounds
- Contractor

Random Inmates were interviewed using the recommended DOJ protocols that question their knowledge of a variety of PREA protections generally and specifically their knowledge of reporting mechanisms available to inmates to report abuse or harassment. Specialty Staff and Random Staff were questioned using the DOJ protocols that question their PREA training and overall knowledge of the agency's zero tolerance policy, reporting mechanisms available to inmates and staff, the response protocols when an inmate alleges abuse, and first responder duties. The auditor reviewed personnel records for six staff members to determine compliance with training mandates and background check procedures. Records for five inmates in the facility were reviewed to evaluate screening and intake procedures and inmate education. The auditor also reviewed five investigation reports from the facility. The jail maintains a memorandum of understanding with the Hope Harbor Rape Crises Center of Bowling Green to provide emotional support services to victims of sexual abuse and they also provide a toll free hotline that inmates or staff can use to report an allegation of sexual abuse or harassment. The auditor toured the facility escorted by the PREA Coordinator and observed among other things the facility configuration, location of cameras and mirrors, staff supervision of inmates, dorm layout including shower/toilet areas, placement of posters and PREA informational resources, security monitoring. The auditor noted that shower areas allow inmates to shower separately. Notices of the PREA audit were posted on June 27, 2016 throughout the facility in common areas.

DESCRIPTION OF FACILITY CHARACTERISTICS

The mission of the Warren County Regional Jail is to provide a safe and well maintained atmosphere while also providing for the care and custody of those incarcerated. The jail strives to be firm but fair to all those housed at the jail as well as complying with State and Federal regulations. The main jail was completed in April of 1987. It is located in downtown Bowling Green, Kentucky approximately 50 miles from Nashville, Tennessee. When it was opened 78 inmates were moved from the old jail located at 429 East 10th St. In 1998 the 144 bed Class D building was opened which houses work release inmates and inmates who are Class D state inmates. In 2000 another 160 bed addition which houses the females and federal inmates was opened. In 2003 the old juvenile section of the facility was transformed into a female Class D program for state inmates. It was recently renovated again allowing for an additional 12 inmates. There has been a change in the Kentucky Jail Standards which has allowed additional beds to be opened in selected cells which brings the total number of beds to 562. There are 48 housing units located in the jail. The number of inmates in each unit is dependent on the inmates classification level. Thus housing unit populations range from 1 inmate up to 18 inmates in a particular housing unit. Single occupancy cells are available for the protection of inmates requiring protective custody or suicide watch. Showers are located in the housing units and provide a plastic shower curtain to allow for privacy. Only one inmate may shower at a time. If a transgender or intersex inmate wants to shower separately there are showers available for their use. Toilets also allow for privacy. The jail has administrative offices, a medical clinic, indoor recreation areas for inmates, a sally port entrance for inmates, a kitchen and dining space. There are also outside recreation areas at the jail.

There are several types of programs in place at the Warren County Jail.

The Class D work program consists of state prisoners who are convicted of Class D felonies and have been sentenced to less than 5 years. Once these prisoners are sentenced, they are classified and assigned a security level by the State Department of Corrections (no sexual offenders are eligible). If their security level is minimum, they are eligible to participate. The program only performs work for government and non-profit agencies, and this work is done free of charge. The inmates are paid by the state for working. It can also help to reduce their sentence. Inmates are initially supervised by a deputy jailer. Later, if their performance is adequate, they can be promoted to a community job with civilian supervision. The Class D Program provides over 100,000 hours of community service for Bowling Green and Warren County.

If a prisoner has drug or alcohol involvement they have to be placed in a detox cell for a minimum of five hours or a maximum of eight. There are two big observation cells and six small observation cells in the detox area. These cells are also used for medical and disciplinary observation. After processing, inmates are finger printed on a Motorola Livescan fingerprint machine. The fingerprints taken can help identify past charges that the inmate has been finger printed on and even help solve cases where no one had been charged with the crime. Prisoners are then brought into the Booking area to be processed by the arresting officer and Deputies. For safety and security reasons only three officers and their prisoners are allowed in the booking area at a time. Prisoner information is then recorded in the computer and photographs are taken.

The Federal Transport Officers consists of Warren County Regional Jail Deputies who are trained in Federal Inmate transport procedures through the U.S. Marshals Service. Their duty is the safe transportation of high risk Federal Inmates to and from their court destination throughout the State of Kentucky along with the State of Tennessee. The U.S. Marshal service requires that two Deputies transport federal inmates. The Deputies will go on Federal time during any transports and the jail is reimbursed for that time.

S.E.R.T. is a specially trained emergency response unit of Deputy Jailers at the Warren County Regional Jail. All members apply when there is a posted opening. The application process consists of physical fitness exams, orientation, exposure to OC pepper spray and officer survival drill, and an oral board examination. The final selections are made by the Jailer. S.E.R.T. Deputies must attend mandatory training once a month which is held on the second Tuesday at 3 p.m. Training can be held more often if it is necessary or has been requested. S.E.R.T. is prepared to handle situations that regular line staff cannot. This includes but is not limited to: controlling unruly inmates, cell extractions, riots, hostage situations, escapes, and specialized non-lethal, less than lethal, and lethal force options utilizing the use of force continuum. It is the goal of S.E.R.T. to use the minimum amount of force necessary to achieve the desired objective.

The Warren County Jail implemented the Inmate Reentry Program January 2011. It is meant to help offenders to better transition back into society while at the same time reducing the recidivism rate of these individuals. Reentry involves the use of programs targeted at promoting the effective reintegration of offenders back to communities upon their release from jail. Reentry programming, which often involves a comprehensive case management approach, is intended to assist offenders in acquiring the life skills needed to succeed in the community and become law-abiding citizens. A variety of programs are used to assist offenders in the reentry process. These include pre-release programs, drug rehabilitation, vocational training, mentoring and work programs. The mission of the Warren County Jail's Inmate Reentry Program is to provide effective training, assistance and mentoring to incarcerated individuals from a county jail perspective. There goal is to help individuals and their families with supportive services so the individual may transition from jail to society and sustain a lifestyle that will not lead them back to incarceration. This program uses volunteers made up of professionals, mentors, church members, public/ private employers, and other organizations that may offer supportive assistance or information for offenders. Using professionals, the jail can better assess the current status and needs of the incarcerated individual. Church groups and individual volunteers help serve as mentors to the offender, showing by example, how to lead a successful and sustaining lifestyle. With the help of employers who are willing to offer jobs, offenders will be equipped with the means to provide for themselves as well as their families.

The main control room is the nerve center of the facility. From this control room the Deputies can monitor inside and outside of the jail by camera and intercom speakers. The main control room is the most secure area in the jail. The door remains locked unless a Deputy has to enter or exit. All entry into or out of the jail or any opening of the cell doors is controlled by the main control Deputy. There are 115 surveillance cameras operating throughout the jail. All doorways in the jail have video surveillance as well as stairwells in the jail. The surveillance footage from these cameras can be saved for approximately 30 days. The surveillance footage can be seen on computer screens maintained for the Jailer and PREA Coordinator, and in the control center and select other staff such as the chief deputy.

SUMMARY OF AUDIT FINDINGS

Overall, the interviews of inmates reflected that they were aware of and understood the PREA protections and the agency's zero tolerance policy. Inmates receive written materials at intake that provide detailed information about PREA protections, the multiple ways to report sexual abuse or harassment and ways to protect themselves from abuse. Subsequent to intake, inmates are provided more comprehensive education on PREA that includes personal instruction in addition to a video that addresses PREA that is shown on the inmates closed circuit television station..

There are also PREA posters in English and Spanish to assist in educating inmates about PREA. Inmates indicated they understand the various ways to report abuse and discussed the posters throughout the facility with the telephone number to call to report sexual abuse or harassment. Inmates were able to articulate to the auditor what they would do and who they would tell if they were sexually abused or harassed. Inmates reported they could tell a trusted staff member, friend or family member, file a grievance, or call the sexual abuse hotline telephone number at the Hope Harbor Rape Crises Center. Inmates indicated to the auditor that they felt safe in the facility. Inmates were also aware that outside services were available including counseling for sexual abuse and harassment.

There were 30 allegations that were PREA related. All allegations were for harassment.. Of the 30 harassment allegations 16 were unfounded, five (5) were unsubstantiated and seven (7) were substantiated. Two other allegations came from inmates who told of previous sexual misconduct at another facility during the intake process at the jail. During the past 12 months there have been 8,250 inmates admitted to the Warren County Jail.

All facility staff interviewed indicated they had received detailed PREA training and could articulate the meaning of the agency's zero tolerance policy. Staff was knowledgeable about their roles and responsibilities in the prevention, reporting and response to sexual abuse and sexual harassment. Staff consistently articulated the variety of reporting mechanisms for inmates and staff to use to report sexual abuse or sexual harassment. Additionally, staff were well trained on the PREA first responder's protocol for any PREA related allegation and could clearly articulate exactly the steps they would follow if they were the first responder to an incident.

In summary, after reviewing all pertinent information and after conducting inmate and staff interviews, the auditor found that jail leadership have clearly made PREA compliance a high priority and have devoted a significant amount of time and resources to policy development, training of staff and education of residents on all the key aspects of PREA.

Number of standards exceeded: 0

Number of standards met: 41

Number of standards not met: 0

Number of standards not applicable: 2

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

The agency PREA Policy
The Agency Organization Chart
The PREA Response Flowchart
Interview with the PREA Coordinator

The Warren County Jail has a Policy that outlines their zero tolerance policy including the definitions included in standards 115.5 that covers general definitions and 115.6 that covers definitions related to sexual abuse. The PREA Policy includes provisions for the prevention, detection, and response of sexual abuse and harassment. The agency organization chart shows the PREA Coordinator reporting to the Jailer. The PREA Coordinator said he had sufficient time and authority to develop, implement, and oversee the the facility's efforts at complying with the PREA Standards. The PREA Coordinator also serves as the PREA Compliance Manager, thus the Coordinator is also the Compliance Manager.

Standard 115.12 Contracting with other entities for the confinement of inmates

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Interview with the Jailer and PREA Coordinator
Intergovernmental Agreement between Warren County Jail and the Federal Bureau of Prisons (FBOP)

The agreement between the Warren County Jail and the Federal Bureau of Prisons contains the required PREA provision/language in its contract that began in 2014 and has an end date of 2022. The PREA Coordinator monitors the contract in conjunction with a representative from the FBOP on a continuing basis.

Standard 115.13 Supervision and monitoring

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

- Staffing Plan
- PREA Policy
- Interviews with the Jailer and PREA Coordinator
- Interview with Chief Deputy
- Unannounced Rounds Reports

The Jailer and Chief Deputy discussed developing the staffing plan that incorporates the use of video monitoring and the other 10 points included in the standard for developing a staffing plan. There are no youthful offenders at the jail and Kentucky State Jail Standards are used in part for developing the plan. On each shift the Captain of the shift conducts unannounced rounds of the jail and records these events on the shift log. There has been no deviations from the staffing plan and the plan is posted. The PREA policy includes the provision of not alerting other staff during unannounced rounds. The chief deputy said staff are not alerted when shift unannounced rounds are conducted.

Standard 115.14 Youthful inmates

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The state of Kentucky houses all inmates under the age of 18 in Juvenile Facilities operated by the Kentucky Department of Juvenile Justice, thus there are no youthful offenders at the jail. Therefore, this standard is Non-Applicable.

Standard 115.15 Limits to cross-gender viewing and searches

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific

corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Staff Training Records
Staff Training Curriculum
Random Staff Interviews
PREA Policy

Random staff said they had been trained to conduct cross-gender pat down searches but no staff of the opposite gender can strip search/body cavity search or observe a member of the opposite gender conducting a strip search/body cavity search. Only in exigent circumstances can a member of the opposite gender conduct a pat down search. Otherwise the practice is not allowed by policy. Inmates said they had not been searched by staff of the opposite gender nor did staff of the opposite gender view them in the shower, toilet, or other areas of the facility in any stage of undress. During interviews with random staff each staff said they were aware of the policy not to search or physically examine an inmate for the sole purpose of determining the inmates genital status. Also random staff and inmate interviews confirmed that member of the opposite gender announce their presence when entering a housing unit of the opposite gender.

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

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

English and Spanish Intake Materials
Hope Harbor Flyer with Telephone Number and Address in English and Spanish
PREA Policy
Language Services Contract

The facility provides language assistance through the Language Line according to staff interviews and the contract between the jail and the company. This service includes the hard of hearing. There is also a psychiatric nurse who can assist anyone that has learning disabilities. Posters are located throughout the facility in both English and Spanish that let inmates know who they can contact for crises intervention services. Posters include telephone numbers and addresses. The use of inmates for interpretive services is limited to exigent circumstances such as a medical emergency or similar event.

Standard 115.17 Hiring and promotion decisions

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These

recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Agency Personnel Policies
Interview with Jailer
Interview with Human Resources Staff

Agency personnel polices comply with the requirements of this standard. All staff, volunteers and contractors go through background checks prior to hire and every year after that exceeding the five year requirement contained in this standard. Every potential staff fills out a 14 page application form that requires self admittance to any prior actions that would constitutes sexual abuse or harassment. The jail follows the open records act that require a release of information form be submitted by an applicant allowing his/her personnel records to be shared with other agencies or employers.

Standard 115.18 Upgrades to facilities and technologies

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Interviews with the Jailer and PREA Coordinator

There has been no renovations or additions since the 2012. There has been ungrades to the video surveillance camera system since then with the addition of over 50 cameras since 2012. The additional cameras have allowed for better observation of inmates at the facility.

Standard 115.21 Evidence protocol and forensic medical examinations

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Facility policy
Southern Health Partners Policy and Procedure for Dealing with Sexual Assault, Abuse and Harassment
PREA Audit Report

SANE/SAFE nurses are not employed at the jail. These types of services are provided by the Bowling Green Medical Center. A representative from the Hope Harbor Rape Crises Center will accompany any inmate with emotional support services during the conduct of the forensic exam process at the Medical Center. The Hope Harbor agreement also allows 24 hour crises intervention services to inmates through the use of the toll free hotline number. The Kentucky State Police has said that all investigators follow the requirements of this standard subsections a-e during the course of investigations. The jail also has in policy that its investigators follow the same requirements as the State Police.

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard.

Facility PREA Policy
Kentucky State Policy Memo
Interviews with PREA Coordinator and Facility Investigator

The jail's policy outlines the requirements of the investigation process at the jail. Similarly the Kentucky State Policy do as well and require their investigators to be trained in the appropriate protocols for sexual assaults, abuse and harassment complaints. When an allegation is received by the PREA Coordinator an investigator from the jail is assigned to begin an investigation. If the investigation reveals that sexual abuse has occurred or the allegation is otherwise determined to be criminal in nature, then the Kentucky State Police is called in to conduct its investigation. If applicable, the case will be turned over to the Warren County Attorney for prosecution. All jail staff serving as Investigators have been trained in the NIC training curriculum for Investigators.

Standard 115.31 Employee training

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Employee Training Policy
Training Curriculum
PREA Audit Report

Training Records
Interview with PREA Coordinator
Random Staff Interviews
Training Policy
PREA Policy

A review of the training curriculum indicates that the components of this standard have been taught to all staff at the Warren County Jail. This was confirmed during random staff interviews and in speaking to the PREA Coordinator. The facility's policy requires that all staff be trained annually during in-service training. A review of training records was completed prior to arrival. Each staff has also been given a PREA Handout that addresses the zero tolerance policy and PREA in general.

Standard 115.32 Volunteer and contractor training

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Training Policy for Volunteers and Contractors
Training Acknowledgement Forms
Training Curriculum
PREA Brochure for Volunteers and Contractors

Each volunteer and contractor receives training in the facility's zero tolerance policy and signs an acknowledgement form verifying that person's receipt and understanding of the PREA Policy. The training curriculum is designed for contractors and volunteers. The jail uses volunteers to supervise jail inmates on outside work details for government and other similar types of businesses in Warren County.

Standard 115.33 Inmate education

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Inmate PREA Education Policy
PREA Audit Report

Intake Forms Including the Screening for Risk Classification Form
Intake/PREA Education Forms in Spanish and English
Hope Harbor (Rape Crises Center) PREA Signs in Spanish and English
TV Channel with PREA Video
Signed Inmate Acknowledgement Forms
Interviews with Random Inmates

The jail makes the PREA Education available on a continual basis on the closed circuit TV Channel set up by Time Warner Cable of Bowling Green. This video runs at intervals throughout the week. Each inmate is processed at intake and provided the rules for reporting sexual assault or harassment and the facility's Zero Tolerance Policy. The inmates signs an acknowledgement form indicating his/her understanding of the PREA Policy. The jail has the use of a Language Line Interpreting service that allows any person needing help with understanding/interpreting the PREA Information. Inmates reported receiving the PREA Information during the booking/intake process.

Standard 115.34 Specialized training: Investigations

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Investigators Policy
Investigator Certificates of Completion
Investigation Reports
Investigator Interviews

The jail has trained five deputies to be PREA Investigators including the PREA Coordinator. Each person selected was given specialized training through the National Institute of Corrections or through the Moss Group in conjunction with NCCD. Each investigator was issued a certificate of completion. According to a facility investigator part of the training included techniques for interviewing sexual abuse victims, proper use of the Miranda and Garrity warnings, collection of evidence and preservation of evidence and also the criteria and evidence required to substantiate a case for administrative action or referral for prosecution.

Standard 115.35 Specialized training: Medical and mental health care

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Medical Care Policy
Signed Training Acknowledgement Forms
Medical Policy Related to What to Do in the Event of a Sexual Assault
PREA Policy
Interviews with Medical and Mental Health Staff

The Southern Health Partners is the contractor who provides medical services at the jail. During interviews with medical and mental health staff each acknowledged receiving the specialized training in how to detect and assess signs of sexual abuse or harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and harassment and how to report allegations or suspicions of sexual abuse and harassment and the PREA Zero Tolerance Policy. Medical staff at the jail do not conduct SANE/SAFE forensic exams.

Standard 115.41 Screening for risk of victimization and abusiveness

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

PREA Policy
Classification and Assessment Forms
Housing Policy
Cell Classification Chart
Protective Custody Form
Medical Questionnaire
L,G,B,T,I Policy
Intake/Classification Officer Interview

Each inmate is assessed during the intake procedure to determine their risk of being sexually abused or sexually abusive toward other inmates. Each inmate is asked a series of questions during the initial intake process to determine their status as being at risk of sexual victimization or abusiveness toward others. The assessment asks all of the questions identified in subsection d (1-10) of this standard. The intake officer said he reassesses each inmate every 30 days. In addition to this the jail has a video that's plays daily discussing the jail's zero tolerance policy and how to report sexual abuse or harassment. The intake officer also said only those staff such as medical are the only staff with a need-to-know basis, are given information about the risk assessment.

Standard 115.42 Use of screening information

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

PREA Policy
Classification and Assessment Forms
Housing Policy
Cell Classification Chart
Protective Custody Form
Medical Questionnaire
L,G,B,T,I Policy
Intake/Classification Officer Interview
Interview with PREA Coordinator

The jail does not have special housing units dedicated for the L,G,B,T, I inmates. Each inmate is placed in a cell that best protects an inmate from being sexually abused or harassed after he/she goes through the intake/booking process according to the intake officer. The jail has a cell classification form that provides the intake officer with available options for the placement of inmates. The intake officer said that each L,G,B,T,I inmate would be reassessed every 6 months to review any threats made against the inmate. The intake officer and policy indicate a L,G,B,T,I inmate can shower and use the toilet separately from other inmates. He also said that each inmates own view of their safety is considered during the intake process. Each inmate is reassessed within 72 hours of intake to determine appropriate housing and programming assignments. There has been no transgender or intersex inmates at the jail in at least the last three years.

Standard 115.43 Protective custody

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Protective and Administrative Custody Policy
PREA Policy
Interview with PREA Coordinator and Intake Officer

The Jail has 15 single cells available for anyone including inmates who fear for their safety or fear of sexual abuse by other inmates. The jail has many options available to house inmates both those who are victims or those who are sexually abusive to others. Any inmate in administrative/protective custody has access to all education or other programming available at the jail.

Standard 115.51 Inmate reporting

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Hope Harbor MOU
Interviews with Random Inmates
Grievance Process
Request Forms
Hope Harbor Posters with 800# to Report Sexual Abuse or Harassment
Staff Interviews

The inmates interviewed said that they could report sexual abuse or harassment by submitting a request for help form that the jail utilizes for assisting inmates in making reports. Inmates also said they could call the 800 number and that the call would be free. Inmates said they could tell a friend or family member to report abuse. Staff were also aware of the 800 number for reporting sexual abuse or harassment privately. The 800 number is maintained by the Hope Harbor Rape Crises Center which is an outside resource and not part of the jail.

Standard 115.52 Exhaustion of administrative remedies

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Grievance Policy
PREA Policy
Disciplinary Process Policy

The jail's policy allows an inmate to file a grievance at any time. The grievance is handled by the Chief Deputy and if appealed the grievance goes to the Jailer. If the grievance is further appealed it goes to the County Judge Executive and the Fiscal Court's Commissioners for resolution. The grievance must be resolved in 10 days according to policy. An inmate can file a grievance through a friend, fellow inmate, or family member. There has been no grievances filed alleging sexual abuse or harassment according to the PREA Coordinator.

Standard 115.53 Inmate access to outside confidential support services

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Hope Harbor MOU
 English and Spanish Intake Material
 Language Service Contract
 Intake Forms
 Randon Inmate Interviews

The intake officer provides each inmate information about how to report sexual abuse and harassment. Each inmate signs an acknowledgement form verifying their receipt and understanding of how to report sexual abuse and harassment. The jail has entered into a Memorandum of Understanding with a rape crises center named Hope Harbor that provides emotional support to any inmate wanting to access their services. Inmates said they understood if they talk to anyone from this agency the information shared would not be shared with anyone else. Inmates also said the posters on the walls from Hope Harbor had their telephone number and address and that they could talk to them at any time.

Standard 115.54 Third-party reporting

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Signage in Jail Lobby
 Hope Harbor Brochure
 Inmate Interviews

The Jail has signage in the front lobby that gives out the name and telephone number of who to report sexual abuse and harassment of an inmate. The sign has the jail's telephone number and the Hope Harbor Rape Crises Center number as well. This number is also located throughout the facility in both Spanish and English on posters from Hope Harbor. Inmates told the auditor they were aware that third parties could report sexual abuse and harassment on their behalf.

Standard 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

PREA Policy
PREA Flowchart
Random Staff Interviews
Medical Staff Interviews

Every staff person interviewed including medical and mental health staff said they knew to report any allegation or suspicion of sexual abuse and harassment to the shift supervisor for that shift. From there it goes through the chain of command. This allegation is also reported to the PREA Coordinator and he assigns an investigator to the case. According to staff interviews, staff also do not share information with other staff about any allegation or incident of sexual abuse and harassment. Also staff said they would report any retaliation of staff or inmates to the PREA Coordinator. This was also true if a staff person's negligence led to a sexual assault or harassment of an inmate or staff member.

Standard 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

PREA Policy
Classification Policy
Housing Policy
Interview with the Jailer
Interviews with Random Staff

Each person interviewed including random staff and the Jailer said that if an inmate is subject to a substantial risk of sexual abuse their first duty is to protect the inmate by moving that person to a safe place and separating that person from the alleged person threatening sexual abuse or harassment.

Standard 115.63 Reporting to other confinement facilities

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

PREA Policy
Incident Report

According to the PREA Coordinator there were two incidents reported by inmates during the inmate's stay at the Jail. After reviewing the incident reports it appears the jail handled the information correctly by verifying that the Kentucky State Police had already investigated the incidents that occurred elsewhere. The PREA Coordinator indicated that had the KSP not investigated these incidents, they would have contacted the KSP themselves so an investigation could occur.

Standard 115.64 Staff first responder 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Training Certifications
PREA Policy
PREA Flowchart
Interview with the Jailer
Random Staff Interviews

The jailer told the auditor that all security staff have been trained as first responders. An examination of training records confirmed this. Random staff who were also trained as first responders knew to separate the victim and perpetrator. If the incident had occurred in a time frame that allowed for collection of evidence, staff knew to preserve the crime scene and then allow for the Kentucky State Police to collect any DNA or other pertinent evidence.

Standard 115.65 Coordinated response

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

PREA Policy

According to the jail's policy the institutional plan is spelled out in this policy. It requires that the staff person taking the allegation report to notify the shift commander who will ensure that medical staff are alerted to the situation. The shift commander ensures that the reporting inmate not shower or otherwise destroy any evidence. The shift commander shall also place the perpetrator in a dry cell to prevent flushing or destruction of evidence. Once medical has been advised and provided assistance, a PREA Investigator is assigned the case. The facility investigator shall notify the Kentucky State Police for the collection of DNA and other physical evidence when necessary.

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

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The Jailer said in an interview that there are no collective bargaining units for jail staff therefore this standard is Non-Applicable.

Standard 115.67 Agency protection against retaliation

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Code of Ethics

Prea Policy

PREA Audit Report

Interview with the Chief Deputy

The chief deputy is responsible for monitoring retaliation against any staff or inmate for reporting an allegation of sexual abuse or harassment or cooperates in any investigation of sexual abuse or harassment. The chief deputy will review disciplinary write ups, changes in an inmates or staff member's behavior and any other suspicious activity for at least 90 days or for as long as the situation presents itself. The use of administrative segregation can be requested by an inmate and approved by the chief deputy or jailer.

Standard 115.68 Post-allegation protective custody

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

PREA Policy

Example of Inmate Requesting Post Allegation Protective Custody

The example used to verify compliance was reviewed. The request for protective custody was voluntary and the reason for the request, and the basis for the concern for the inmate was well documented in incident reports, and investigation reports. The inmate requested voluntary administrative custody and five days later requested to be removed from protective custody. The process is compliant with PREA Regulation 115.43.

Standard 115.71 Criminal and administrative agency investigations

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

PREA Policy

Training Records

Investigation Report Examples

Interviews with Facility Investigators

There are five facility PREA investigators at the Jail. Each has been trained in investigations of sexual abuse and harassment through an PREA Audit Report

online training course by the National Institute of Corrections. The PREA Coordinator has also completed this training as well as training through the Moss Group in conjunction with the National Counsel on Crime and Delinquency. The PREA policy requires that each allegation is investigated as soon as possible after the incident is reported but within 24 hours or sooner. Each investigation report followed the guidelines of this standard by including descriptions of physical evidence, testimonial evidence from all witnesses, video footage when available, and all other pertinent facts and information related to the allegation. When facility investigators determine evidence suggests the incident is criminal in nature the PREA Coordinator contacts the Kentucky State Police. Once the investigation is given to the KSP, the facility investigator works with the KSP by providing their investigation report and any evidence that might have been collected. The jail does not conduct compelled interviews nor do they use truth telling devices to extract information from inmates. The departure from the jail by the victim or abuser (either staff or inmate) does not stop a criminal investigation from continuing. Jail personnel maintain contact with the KSP during any investigation. Each victim, suspect or witness's credibility is judged by the investigator on a case by case basis.

Standard 115.72 Evidentiary standard for administrative investigations

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

PREA Policy
Interview with PREA Coordinator
Interview with Investigator
Investigation Reports

Policy and practice require that a preponderance of the evidence be imposed in determining whether sexual abuse or harassment is substantiated. The interviews with investigators revealed that this is the case. In examining investigation reports the auditor reached the conclusion that a preponderance of the evidence is the standard for determining substantiated incidents.

Standard 115.73 Reporting to inmates

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Examples of Investigation Reports
Interview with PREA Coordinators
PREA Policy

The jail informs all victims of the results of any investigation that has been completed by either the jail's investigators or investigators from the KSP. The jail will subsequently inform the victim whenever the abuser is indicted and convicted on a charge of sexual abuse at the Jail. If the abuser is a staff person, the victim will be informed whenever the abuser has been removed from the victims housing unit or is no longer employed at the facility or has been indicted.

Standard 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 Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Code of Ethics
Personnel Policy
Appendix A of Personnel Policy
PREA Policy

If a staff member has violated the sexual abuse and harassment policies that staff person will be disciplined up to and including termination from the jail. The disciplinary sanctions for violating sexual abuse and harassment policies shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history and the sanctions imposed for similar offenses by other staff with similar histories. If the incident was clearly criminal in nature the jail will inform the KSP who may in turn, turn the case over to the local prosecutor.

Standard 115.77 Corrective action for contractors and volunteers

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

PREA Policy
Kentucky Revised Statute 510.120

The agency policy as well as KRS 510.120 declares that if any employee, contractor, or volunteer has sexual contact with an inmate that is substantiated then that person can be charged by prosecutors with sexual abuse in the second degree. There has been no occurrences of this at the jail in the past 12 months.

Standard 115.78 Disciplinary sanctions for inmates

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Inmate Disciplinary process
PREA Policy
Examples of Consequences
Interview with the Jailer
Interview with Mental Health Staff

Jail policy outlines the disciplinary process when an inmate violates jail rules of conduct including violation of sexual abuse or harassment policies. The disciplinary process takes into consideration the inmates mental health status as well as other examples of previous disciplinary actions taken against other inmates for the same offense. The jail policy does not approve of sexual contact between inmates. In examining an example of a consequence given for sexual harassment the inmate was placed in an observation cell for 24 hours as a result of his actions. A mental health staff said she would offer counseling for an inmate who is considered abusive if the inmate wanted counseling.

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

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to determine compliance with this standard:

Classification Form
Classification Policy
PREA Policy
Interviews with Medical Staff

The jail policy allows for a referral to a mental health practitioner for any inmate who reports prior sexual victimization or abusiveness
PREA Audit Report

toward others with a follow up meeting within 14 days after notification. Medical staff said they obtain informed consent from the inmate before reporting any past sexual victimization that did not occur in an institutional setting.

Standard 115.82 Access to emergency medical and mental health services

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Hope Harbor MOU
PREA Policy
Investigation Example
Interview with Medical and Mental Health Staff

Interviews with medical and mental health staff verified that inmate victims of sexual abuse are provided unimpeded access to emergency medical treatment and crises intervention services and this determination would be based on their professional judgement. Security staff have been trained as first responders and are able to provide limited medical and mental health services until medical or mental health staff arrive on the scene. The facility has an agreement with a rape crises center in Bowling Green called Hope Harbor. Hope Harbor provides emotional crises intervention services. Medical and mental health staff said they offer timely information and access to emergency contraception and sexually transmitted infection prophylaxis when medically appropriate. Any cost associated with a sexual assault treatment at the hospital is provided at no cost to the victim.

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

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Mental Health Care Policy
PREA Policy
Hope Harbor MOU
Interviews with Medical and Mental Health Staff

According to medical and mental health staff interviews, victims of sexual abuse are offered medical and mental health evaluations for all inmates victimized by sexual abuse. This evaluation according to these staff, include offering follow-up services as needed. The medical and mental health staff said they provide the same level of care as is offered in the community. According to interviews and agency policy inmate victims of sexual abuse are offered tests for sexually transmitted infections. If pregnancy results from sexual abuse at the jail such victims receive timely and comprehensive information about and access to all lawful pregnancy related medical services. These services are provided at no cost to the victim. The mental health staff also said that a mental health evaluation is offered to resident-on-resident abusers within 60 days of learning of the abuse history.

Standard 115.86 Sexual abuse incident reviews

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Interview with Jailer

Interview with PREA Coordinator

According to the PREA Coordinator a review is completed after each PREA incident if substantiated and a report generated. He also said the team looks at a variety of factors including: the need to change or alter any existing policy; consider whether the incident was motivated by race, ethnicity, gender identity status or perceived status or gang activities; access the staffing levels in that area; and access whether monitoring technology should be deployed or augmented to supplement supervision by staff. The team is composed of members of the facility staff as well as law enforcement officials when necessary. The team consists of the Chief Deputy, PREA Coordinator, the Jailer, Medical and mental health staff as appropriate

Standard 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to determine compliance with this standard:

Survey of Sexual Violence 2014

Interview with PREA Coordinator

The facility has a PREA Coordinator who collects and maintains the data from the jail. He also aggregates this data annually and prepares a report of its data related to PREA by June 30 of each year. This report is posted to the agency's website. The agency utilizes the data from the Survey of Sexual Violence that is reported annually to the DOJ in the preparation of its annual report.

Standard 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to verify compliance with this standard:

Interview with PREA Coordinator
Annual Report 2014 and 2015

The PREA Coordinator maintains all PREA related information and data. He compiles this information and produces an annual report. The report is posted on the jail's website. He assesses the data collected in order to determine if the jail's effort toward prevention, detection and response policies of the PREA Regulations are effective. The annual report is approved by the Jailer. The reports are posted on the facility website.

Standard 115.89 Data storage, publication, and destruction

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The following information was used to determine compliance with this standard:

PREA Policy
Interview with PREA Coordinator

According to the PREA Coordinator all PREA related information is stored in a secure server, password protected. All paper reports and information is locked in cabinets at the facility. The jail removes any personal identifiers in the report. According to the retention scheduled all data is retained for 10 years.

AUDITOR CERTIFICATION

I certify that:

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

Jeff Rogers
Auditor Signature

8-11-2016
Date