

# PREA Facility Audit Report: Final

**Name of Facility:** Lansing Correctional Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 06/24/2022

| Auditor Certification   |                                      |
|---|--------------------------------------|
| The contents of this report are accurate to the best of my knowledge.   | <input checked="" type="checkbox"/>  |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.   | <input checked="" type="checkbox"/>  |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. | <input checked="" type="checkbox"/>  |
| <b>Auditor Full Name as Signed:</b> Karen d. Murray   | <b>Date of Signature:</b> 06/24/2022 |

| AUDITOR INFORMATION                 |                        |
|-------------------------------------|------------------------|
| <b>Auditor name:</b>                | Murray, Karen          |
| <b>Email:</b>                       | kdmconsults1@gmail.com |
| <b>Start Date of On-Site Audit:</b> | 05/15/2022             |
| <b>End Date of On-Site Audit:</b>   | 05/18/2022             |

| FACILITY INFORMATION              |   |
|-----------------------------------|---|
| <b>Facility name:</b>             | Lansing Correctional Facility                   |
| <b>Facility physical address:</b> | 301 East Kansas Street, Lansing, Kansas - 66043 |
| <b>Facility mailing address:</b>  | 714 SW Jackson St, Topeka, Kansas - 66603       |

| Primary Contact          |                         |
|--------------------------|-------------------------|
| <b>Name:</b>             | Allison Basinger        |
| <b>Email Address:</b>    | Allison.Basinger@ks.gov |
| <b>Telephone Number:</b> | 785.260.4658            |

| Warden/Jail Administrator/Sheriff/Director |                        |
|--|------------------------|
| <b>Name:</b>                               | Chandler Cheeks        |
| <b>Email Address:</b>                      | Chandler.Cheeks@ks.gov |
| <b>Telephone Number:</b>                   | 7852139640             |

| <b>Facility PREA Compliance Manager</b> |                          |
|---|--------------------------|
| <b>Name:</b>                            | Matthew Moore            |
| <b>Email Address:</b>                   | matthew.moore@ks.gov     |
| <b>Telephone Number:</b>                | O: (316) 285-2529        |
| <b>Name:</b>                            | Michael Thompson         |
| <b>Email Address:</b>                   | michael.thompson1@ks.gov |
| <b>Telephone Number:</b>                |                          |

| <b>Facility Health Service Administrator On-site</b> |                           |
|--|---------------------------|
| <b>Name:</b>   | Kimberly Tilson           |
| <b>Email Address:</b>                                | ktilson@TeamCenturion.com |
| <b>Telephone Number:</b>                             | 9132400810                |

| <b>Facility Characteristics</b>  |  |
|--|--|
| <b>Designed facility capacity:</b>   | 2560   |
| <b>Current population of facility:</b>   | 1933   |
| <b>Average daily population for the past 12 months:</b>  | 1820   |
| <b>Has the facility been over capacity at any point in the past 12 months?</b>                                     | No   |
| <b>Which population(s) does the facility hold?</b>   | Males  |
| <b>Age range of population:</b>  | 18-75  |
| <b>Facility security levels/inmate custody levels:</b>   | Maximum, Medium, Minimum, Special Management |
| <b>Does the facility hold youthful inmates?</b>  | No   |
| <b>Number of staff currently employed at the facility who may have contact with inmates:</b>                       | 603  |
| <b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b> | 38   |
| <b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>             | 418  |

| AGENCY INFORMATION   |   |
|--|---|
| <b>Name of agency:</b>                                       | Kansas Department of Corrections                          |
| <b>Governing authority or parent agency (if applicable):</b> |   |
| <b>Physical Address:</b>                                     | 714 SW Jackson Street, Suite #300, Topeka, Kansas - 66603 |
| <b>Mailing Address:</b>                                      |   |
| <b>Telephone number:</b>                                     |   |

| Agency Chief Executive Officer Information: |  |
|---|--|
| <b>Name:</b>                                |  |
| <b>Email Address:</b>                       |  |
| <b>Telephone Number:</b>                    |  |

| Agency-Wide PREA Coordinator Information |                  |                       |                         |
|--|------------------|-----------------------|-------------------------|
| <b>Name:</b>                             | Allison Basinger | <b>Email Address:</b> | allison.basinger@Ks.gov |

| SUMMARY OF AUDIT FINDINGS  |  |
|--|--|
| <p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p> |  |
| <b>Number of standards exceeded:</b>   |  |
| 0  |  |
| <b>Number of standards met:</b>  |  |
| 45   |  |
| <b>Number of standards not met:</b>  |  |
| 0  |  |

# POST-AUDIT REPORTING INFORMATION

## GENERAL AUDIT INFORMATION

### On-site Audit Dates

|   |            |
|---|------------|
| 1. Start date of the onsite portion of the audit: | 2022-05-15 |
| 2. End date of the onsite portion of the audit:   | 2022-05-18 |

### Outreach

|   |   |
|---|---|
| 10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility? | <input checked="" type="radio"/> Yes<br><input type="radio"/> No  |
| a. Identify the community-based organization(s) or victim advocates with whom you communicated:   | <p>On 5.14.2022 at 2:05 pm, the Auditor contacted Alliance Against Family Violence at 522 Kickapoo Street, Leavenworth, KS 66048, telephone number 913.675.7220. After proper introductions and the reason for the call, the operator stated she was aware of the memorandum of understanding with the Lansing facility. The operator stated they had a special advocate for residents of the Lansing facility, and she would put the special advocate in contact with the resident, as instructed, by the advocacy agency.</p> <p>On 4.27.2022, at 9:47 am, this Auditor dialed 785.746.7437 and received a voice mail stating, "You have reached the voicemail for legal services for prisoners. Please leave your name and inmate number. This voicemail is checked once daily, or you can contact us on website at <a href="http://www.legalservicesforprisoners.org">www.legalservicesforprisoners.org</a>. This Auditor left a message requesting the protocol for anonymous reports of sexual harassment and sexual abuse.</p> <p>On 4.27.2022 at 1:56 pm, this Auditor received a return call from Legal Services. The staff returning the call stated he would turn over information to the institution PREA investigator. The staff stated legal services is just a contact for them either through the phone or by writing. The caller stated the agreement in place is simply to take the call and call the institution where the call was received; there is no follow up on the investigation process, moving forward. During the onsite review, the Auditor dialed Legal Services once again to make certain the PREA Coordinator was contacted as opposed to the facility. Legal Services left the Auditor a voicemail and stated the agency would only notify the PREA Coordinator.</p> <p>On 2.26.2022 at 5:42 pm, this Auditor phoned the Kansas University Medical Center at 3901 Rainbow Blvd., Kansas City, KS 66160 at 913.588.5000. Attendant 'Sparkle' answered the call. Upon asking if the hospital had a SANE/SAFE unit, the attendant stated the hospital did complete forensic exams. Upon asking if inmates from the Lansing Correctional Facility were allowed to be brought for forensic exams, the attendant stated yes, they have been brought there in the recent past.</p> |

## AUDITED FACILITY INFORMATION

|                                   |      |
|-----------------------------------|------|
| 14. Designated facility capacity: | 2560 |
|-----------------------------------|------|

|  |  |
|--|--|
| 15. Average daily population for the past 12 months:                             | 1820   |
| 16. Number of inmate/resident/detainee housing units:                            | 17   |
| 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees? | <input type="radio"/> Yes<br><input checked="" type="radio"/> No<br><input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility) |

## Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

### Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

|   |      |
|---|------|
| 36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:   | 1886 |
| 38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:  | 106  |
| 39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit: | 219  |
| 40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:  | 0    |
| 41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:   | 122  |
| 42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:  | 21   |
| 43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:   | 41   |
| 44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:   | 9    |
| 45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:   | 27   |
| 46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:  | 84   |

|   |  |
|---|--|
| 47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:                                     | 0  |
| 48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations): | Of the blind, deaf, hard of hearing residents, there was a total of 122. This total number was not divided by individual disability.   |
| <b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>  |  |
| 49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:   | 603  |
| 50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:   | 418  |
| 51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:  | 38   |
| 52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:   | No text provided.  |
| <b>INTERVIEWS</b>   |  |
| <b>Inmate/Resident/Detainee Interviews</b>  |  |
| <b>Random Inmate/Resident/Detainee Interviews</b>   |  |
| 53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:  | 21   |
| 54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)   | <input type="checkbox"/> Age<br><input checked="" type="checkbox"/> Race<br><input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)<br><input checked="" type="checkbox"/> Length of time in the facility<br><input checked="" type="checkbox"/> Housing assignment<br><input type="checkbox"/> Gender<br><input type="checkbox"/> Other<br><input type="checkbox"/> None |
| 55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?  | The facility provided rosters by housing units and targeted residents. Residents were randomly chosen by the Auditor by selecting the first names on each page, of each housing unit.  |

|   |  |
|---|--|
| 56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?  | <input checked="" type="radio"/> Yes<br><input type="radio"/> No |
| 57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):   | No text provided.  |
| <b>Targeted Inmate/Resident/Detainee Interviews</b>   |  |
| 58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:  | 23   |
| <p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p> |  |
| 60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:  | 1  |
| 61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:   | 3  |
| 62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:  | 2  |
| 63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:   | 2  |
| 64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:  | 1  |
| 65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:  | 2  |
| 66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:  | 5  |

|   |   |
|---|---|
| 67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:  | 2   |
| 68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:   | 2   |
| 69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol: | 3   |
| 70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):  | Additional interviews were conducted primarily due to them either wanting to speak to the Auditor or the Auditor being asked to speak with these residents. |

## Staff, Volunteer, and Contractor Interviews

### Random Staff Interviews

|   |  |
|---|--|
| 71. Enter the total number of RANDOM STAFF who were interviewed:  | 12   |
| 72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)  | <input checked="" type="checkbox"/> Length of tenure in the facility<br><input checked="" type="checkbox"/> Shift assignment<br><input checked="" type="checkbox"/> Work assignment<br><input checked="" type="checkbox"/> Rank (or equivalent)<br><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)<br><input type="checkbox"/> None |
| 73. Were you able to conduct the minimum number of RANDOM STAFF interviews?   | <input checked="" type="radio"/> Yes<br><input type="radio"/> No   |
| 74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation): | No text provided.  |

### Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

|  |    |
|--|----|
| 75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors): | 15 |
|--|----|



|  |  |
|--|--|
| <b>76. Were you able to interview the Agency Head?</b>   | <input checked="" type="radio"/> Yes<br><input type="radio"/> No   |
| <b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b> | <input checked="" type="radio"/> Yes<br><input type="radio"/> No   |
| <b>78. Were you able to interview the PREA Coordinator?</b>  | <input checked="" type="radio"/> Yes<br><input type="radio"/> No   |
| <b>79. Were you able to interview the PREA Compliance Manager?</b>                                   | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards) |

|  |   |
|--|---|
| <p><b>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</b></p> | <p><input type="checkbox"/> Agency contract administrator</p> <p><input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</p> <p><input type="checkbox"/> Line staff who supervise youthful inmates (if applicable)</p> <p><input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable)</p> <p><input checked="" type="checkbox"/> Medical staff</p> <p><input checked="" type="checkbox"/> Mental health staff</p> <p><input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches</p> <p><input checked="" type="checkbox"/> Administrative (human resources) staff</p> <p><input type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</p> <p><input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations</p> <p><input checked="" type="checkbox"/> Investigative staff responsible for conducting criminal investigations</p> <p><input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness</p> <p><input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation</p> <p><input checked="" type="checkbox"/> Staff on the sexual abuse incident review team</p> <p><input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation</p> <p><input type="checkbox"/> First responders, both security and non-security staff</p> <p><input checked="" type="checkbox"/> Intake staff</p> <p><input type="checkbox"/> Other</p> |
| <p><b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b></p>                     | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>   |
| <p><b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b></p>                    | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>   |
| <p><b>a. Enter the total number of CONTRACTORS who were interviewed:</b></p>   | <p>2</p>  |

|  |  |
|--|--|
| <p><b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b></p> | <p><input type="checkbox"/> Security/detention</p> <p><input type="checkbox"/> Education/programming</p> <p><input checked="" type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p> |
| <p><b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b></p>   | <p>One each, medical and mental health contractors were interviewed.</p>   |

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

|   |   |
|---|---|
| <p><b>84. Did you have access to all areas of the facility?</b></p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
|---|---|

### Was the site review an active, inquiring process that included the following:

|   |   |
|---|---|
| <p><b>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</b></p>                                      | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
| <p><b>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</b></p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
| <p><b>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b></p>  | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
| <p><b>88. Informal conversations with staff during the site review (encouraged, not required)?</b></p>  | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
| <p><b>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b></p>  | <p>No text provided.</p>  |

### Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

|  |  |
|--|--|
| 90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation? | <input checked="" type="radio"/> Yes<br><input type="radio"/> No |
|--|--|

|   |                   |
|---|-------------------|
| 91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.). | No text provided. |
|---|-------------------|

## SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

### Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

|                               | # of sexual abuse allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|-------------------------------|-------------------------------|------------------------------|------------------------------------|---|
| Inmate-on-inmate sexual abuse | 15                            | 0                            | 15                                 | 0   |
| Staff-on-inmate sexual abuse  | 0                             | 0                            | 0                                  | 0   |
| <b>Total</b>                  | 15                            | 0                            | 15                                 | 0   |

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

|                                    | # of sexual harassment allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|------------------------------------|------------------------------------|------------------------------|------------------------------------|---|
| Inmate-on-inmate sexual harassment | 0                                  | 0                            | 0                                  | 0   |
| Staff-on-inmate sexual harassment  | 0                                  | 0                            | 0                                  | 0   |
| <b>Total</b>                       | 0                                  | 0                            | 0                                  | 0   |

### Sexual Abuse and Sexual Harassment Investigation Outcomes

#### Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

**94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:**

|                                      | Ongoing | Referred for Prosecution | Indicted/Court Case Filed | Convicted/Adjudicated | Acquitted |
|--------------------------------------|---------|--------------------------|---------------------------|-----------------------|-----------|
| <b>Inmate-on-inmate sexual abuse</b> | 0       | 0                        | 0                         | 0                     | 0         |
| <b>Staff-on-inmate sexual abuse</b>  | 0       | 0                        | 0                         | 0                     | 0         |
| <b>Total</b>                         | 0       | 0                        | 0                         | 0                     | 0         |

**95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:**

|                                      | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|--------------------------------------|---------|-----------|-----------------|---------------|
| <b>Inmate-on-inmate sexual abuse</b> | 0       | 1         | 12              | 2             |
| <b>Staff-on-inmate sexual abuse</b>  | 0       | 0         | 0               | 0             |
| <b>Total</b>                         | 0       | 1         | 12              | 2             |

**Sexual Harassment Investigation Outcomes**

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

**96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:**

|   | Ongoing | Referred for Prosecution | Indicted/Court Case Filed | Convicted/Adjudicated | Acquitted |
|---|---------|--------------------------|---------------------------|-----------------------|-----------|
| <b>Inmate-on-inmate sexual harassment</b> | 0       | 0                        | 0                         | 0                     | 0         |
| <b>Staff-on-inmate sexual harassment</b>  | 0       | 0                        | 0                         | 0                     | 0         |
| <b>Total</b>                              | 0       | 0                        | 0                         | 0                     | 0         |

**97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:**

|   | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|---|---------|-----------|-----------------|---------------|
| <b>Inmate-on-inmate sexual harassment</b> | 0       | 0         | 0               | 0             |
| <b>Staff-on-inmate sexual harassment</b>  | 0       | 0         | 0               | 0             |
| <b>Total</b>                              | 0       | 0         | 0               | 0             |

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

|   |  |
|---|--|
| 98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:  | 6  |
| 99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)                  |
| <b>Inmate-on-inmate sexual abuse investigation files</b>  |  |
| 100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:  | 6  |
| 101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?  | <input type="radio"/> Yes<br><input checked="" type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) |
| 102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?  | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) |
| <b>Staff-on-inmate sexual abuse investigation files</b>   |  |
| 103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:   | 0  |
| 104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?   | <input type="radio"/> Yes<br><input checked="" type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)  |
| 105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?   | <input type="radio"/> Yes<br><input checked="" type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)  |
| <b>Sexual Harassment Investigation Files Selected for Review</b>  |  |
| 106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:  | 0  |
| a. Explain why you were unable to review any sexual harassment investigation files:   | The facility did not experience any sexual harassment investigation in the past 12 months.   |

|  |   |
|--|---|
| <p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p> |
|--|---|

**Inmate-on-inmate sexual harassment investigation files**

|  |          |
|--|----------|
| <p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p> | <p>0</p> |
|--|----------|

|  |  |
|--|--|
| <p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p> |
|--|--|

|  |  |
|--|--|
| <p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p> |
|--|--|

**Staff-on-inmate sexual harassment investigation files**

|   |          |
|---|----------|
| <p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p> | <p>0</p> |
|---|----------|

|   |   |
|---|---|
| <p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p> |
|---|---|

|   |   |
|---|---|
| <p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p> |
|---|---|

|   |                          |
|---|--------------------------|
| <p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p> | <p>No text provided.</p> |
|---|--------------------------|

**SUPPORT STAFF INFORMATION**

**DOJ-certified PREA Auditors Support Staff**

|  |   |
|--|---|
| <p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> |
|--|---|

**Non-certified Support Staff**

|  |   |
|--|---|
| <p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> |
|--|---|

**AUDITING ARRANGEMENTS AND COMPENSATION**

|   |   |
|---|---|
| <p>121. Who paid you to conduct this audit?</p> | <p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input checked="" type="radio"/> Other</p> |
|---|---|

|                                     |                                 |
|-------------------------------------|---------------------------------|
| <p>Identify the entity by name:</p> | <p>PREA Auditors of America</p> |
|-------------------------------------|---------------------------------|



## Standards

### Auditor Overall Determination Definitions

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

### Auditor Discussion Instructions

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.

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|--------|--|
| 115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator |
|        | Auditor Overall Determination: Meets Standard                          |
|        | Auditor Discussion   |

Document Review:

1. Lansing Correctional Facility PAQ
2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016
3. KDOC Facilities Management Organizational Chart, dated 3.2022
4. Kansas Department of Corrections PREA Compliance Manager Listing, not dated
5. Lansing Correctional Facility Organizational Chart, dated 8.2020

Interviews:

1. Random Residents
2. Targeted Residents
3. Random staff
4. Supervisory staff
5. Deputy Warden of Programs - PREA Compliance Manager

Interviews:

Through interviews with residents and staff and review of resident and staff files, it is evident that this facility interweaves requirements for this standard in their daily protocols. Both residents and staff could speak to facility PREA practices and protocols being used as is described in the agency's PREA policy. The Deputy Warden of Programs - PREA Compliance Manager could attest to having the required time to institute and implement PREA protocols.

Site Review Observation:

During the tour of the facility, the Auditor witnessed postings, consisting of current agency and facility PREA Zero-Tolerance, Audit Notices, internal and external reporting information for residents, throughout the facility. During the tour the Auditor approached and informally interviewed residents and staff. Residents were able to demonstrate how they could access PREA information, report externally to hotline numbers and internally to the PREA Coordinator via resident pay phones. The facility recently signed a MOU with an outside advocate and due to the advocates needing to complete training for the facility, those postings were not available during the tour.

(a) Lansing Correctional Facility PAQ states the agency policy mandates zero-tolerance toward all forms of sexual abuse and sexual harassment in the facility it operates and those directly under contract.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016, page 1, section Policy Statement, states, "It is the policy of the Kansas Department of Corrections to provide a safe and secure environment for all offenders. Offenders have the right to be free from all sexual abuse and sexual harassment and the KDOC has a "zero tolerance" for such actions. (28 C.F.R. §§ 115.11 and 115.311) Each facility shall implement a Coordinated Response that includes prevention, detection, response, and prosecution/discipline of assailants. This policy targets sexual abuse and sexual harassment of offenders whether by staff or by other offenders."

(b) Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016, page 4, section I. A., states, "The KDOC shall designate a KDOC PREA Coordinator to oversee agency efforts to comply with PREA standards and each warden/superintendent shall assign one staff member as the facility PREA Compliance Manager (PCM) with overall responsibility for coordinating all elements of the Coordinated Response (see Attachment A). (28 C.F.R. §§ 115.11 and 115.311) An alternate PCM shall also be designated."

The facility provided a KDOC Facilities Management Organizational Chart. This organizational chart demonstrates the PREA Coordinator is in the agency organizational structure and reports directly to the Deputy Secretary of Facilities who reports directly to the Secretary of Corrections.

(c) Lansing Correctional Facility PAQ states the agency has a PREA Compliance Manager.

The PREA Compliance Manager has sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. The PREA Compliance Manager reports to the Statewide PREA Coordinator and the Lansing Correctional Facility Warden.

The facility provided a Kansas Department of Corrections PREA Compliance Manager Listing. This listing includes the following:

Lansing Correctional Facility  
Mike Thompson, PCM/Staff Development – 620.625.7767

The facility provided a Lansing Correctional Facility Organizational Chart. The organizational structure demonstrates PREA reports directly to the Deputy Warden of Programs.

Through such reviews, the facility meets the standard requirements

|        |  |
|--------|--|
| 115.12 | <b>Contracting with other entities for the confinement of inmates</b>  |
|        | <b>Auditor Overall Determination:</b> Meets Standard   |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Cherokee County, Kansas PREA Contract Amendment, dated 8.9.2019</li> <li>3. Cloud County, Kansas PREA Contract Amendment, dated 8.7.2019</li> <li>4. Jackson County, Kansas PREA Contract Amendment, dated 8.7.2019</li> <li>5. Agreement for Offender Services, Washington County, dated 7.16.2018</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. PREA Compliance Coordinator</li> </ol> <p>During the pre-audit phase, the PREA Coordinator, per the agency PAQ, conveys the agency has no privatized contracts.</p> <p>(a) The Lansing Correctional Facility PAQ states the facility has five contracts with private agencies for confinement services of their inmates. The new Lansing Correctional Facility Complex was built by Core Civic. A new contract for the confinement of KDOC residents was entered into in July 2019. Additionally, KDOC renewed its contracts with five County Facilities between July 2018 and September 2019. All County Facilities were found to be in full PREA Compliance when audited.</p> <p>(b) The facility provided contracts and or contract amendments. Amendments state, "Purpose of Contract Amendment for Offender Housing Services to add additional PREA language. Contracts state, "Contractor agrees to comply with the requirements of the national standards of the Prison Rape Elimination Act (PREA), 42 U.S.C. 15601, et. seq.</p> <p>Through such reviews, the facility meets the standard requirements</p> |

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| 115.13 | <b>Supervision and monitoring</b>  |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. Staffing Analysis, dated 4.12.2022</li> <li>4. Lansing Correctional Facility Staffing Plan, dated 5.17.2022</li> <li>5. Staff Analysis To Ensure Protection Against Sexual Abuse 2022 Review, dated 5.10.2022</li> <li>6. Shift Log – Deviation, not dated</li> <li>7. Log Book – Unannounced Round Example, dated 4.17.2022</li> <li>8. April 2022 Unannounced Round Example – Documented Security Issue</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Residents</li> <li>2. Targeted Residents</li> <li>3. Random staff</li> <li>4. Lieutenants</li> <li>5. Administrative Captain</li> <li>6. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Resident interviews demonstrated each consistently had daily access to Unit Teams and being reviewed by their teams no less than once a month. Residents stated Unit Teams check in on them often and ask them how they are doing.</p> <p>Staff interviewed could attest to supervisory staff conducting unannounced rounds, each day, often occurring multiple times per day. The Administrative Captain and Lieutenants attested to completing unannounced rounds in all areas of the facility. Each stated they document rounds in each individual living areas computer system, upon entering each building. The Captain stated area checks are consistently done randomly, at different times, throughout each day.</p> <p>Site review observation:</p> <p>The Auditor was able to review unannounced round documentation on each building's housing area computer. Documentation demonstrated rounds are completed several times per day, during all shifts. The Major, Captain and Lieutenants were noticed on each shift, throughout each shift. During the onsite review, the Auditor and facility PREA Team were on site as early as 8:00 am until 10:30 pm and supervisory staff were witnessed throughout those onsite hours.</p> <p>(a) The Lansing Correctional Facility PAQ states the agency requires the facility to develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against abuse. The daily number of inmates, based on the facility website on August 20, 2021 is 1800 with the capacity of 2432 and the staffing plan was predicated.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 4-5, section D., states, "Each facility shall develop General Orders to reflect the policy and practice of having intermediate level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment."</p> <p>The facility provided a Staffing Analysis. The analysis demonstrates schedules are in place for each department of the facility.</p> <p>The facility provided a Lansing Correctional Facility Staffing Plan. The Staffing Plan consists of the following elements.</p> <ul style="list-style-type: none"> <li>• Assessment of Need</li> <li>• Campus Description &amp; Offender Population</li> <li>• Programs</li> <li>• Regulatory Requirements</li> <li>• Video Surveillance</li> <li>• Supervisory Placement</li> <li>• Documentation of staff and Inmate files and records</li> <li>• Staffing Plan Deviations</li> <li>• The prevalence of substantiated and unsubstantiated incidents of sexual abuse</li> <li>• Other relevant factors</li> <li>• Staffing Plan reviews and updates</li> </ul> <p>The Staffing Plan is signed by the PREA Compliance Manager, PREA Coordinator, and Warden and signed on 5.18.2022.</p> |

(b) The Lansing Correctional Facility PAQ states each time the staffing plan is not complied with, the facility does document and or justifies deviations. The PAQ states the facility has deviated from the staffing plan in the past 12 months and those deviations are documented in the Shift Log. The PAQ states FMLA, sick calls, vacation time, resident transports, and resident hospitalizations are the primary reasons for staff shortages.

The facility provided a Shift Log, demonstrating deviations are documented. The example provided states, "Lt XXXX in to assist with locking up the"

(c) The Lansing Correctional Facility PAQ states at least once every year the facility/agency, in collaboration with the PREA coordinator, does review the staffing plan to whether adjustments are needed in (a) the staffing, (b) the deployment of monitoring technology, or (c) the allocation of agency/facility resources to commit to the staffing plan to ensure compliance with the staffing plan.

The facility provided a Staff Analysis to Ensure Protection Against Sexual Abuse 2022 Review. The review considers the following:

- Generally accepted detention and correctional practices
- Any judicial findings of inadequacy – no findings
- Any findings of inadequacy from Federal Investigative agencies – no findings
- Any findings of inadequacy from internal or external oversight bodies – no findings
- All components of the facilities physical plan – no recommendations
- The composition of the offender population – no recommendations
- The number and placement of supervisor staff – no recommendations
- Institution programs occurring on a particular shift – no recommendations
- Any applicable state or local laws, regulation, or standards – no recommendations
- The prevalence of substantiated and unsubstantiated incidents of sexual abuse – no recommendations
- Any trends seen in the documentation of deviations from operational staffing – several changes and recommendations
- Any other relevant factors – no other relevant factors

(d) The Lansing Correctional Facility PAQ states facility requires that intermediate level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment.

D. 1-3, state,

1. "Each facility shall ensure that round occur periodically in all areas of the facility.
2. Staff shall be prohibited from alerting other staff members that these supervisory rounds are occurring unless such announcement is related to the legitimate operational functions of the facility.
3. The rounds will be documented as "unannounced rounds" and readily accessible during audits as outlined in the facilities standard operating procedures."

The facility provided sample Log Book entries to demonstrate unannounced rounds are documented, each day. The sample provided demonstrated:

1. On 4.17.2022, at 0947 – B-Building Unannounced Rounds and Duress Button checks completed by Captain XXXX
2. On 4.17.2022, at 1015 – Clinic / Infirmary Unannounced Rounds & Duress button checks completed by Captain XXXX

The facility provided an April 2022 Unannounced Rounds document demonstrating unannounced rounds were completed and a security violation of an unlocked door was documented.

Through such reviews, the facility meets the standard requirements

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| 115.14 | <p><b>Youthful inmates</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. Youthful Offender Resident Communication, dated 4.1.2021 – 4.1.2022</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>The PAQ provided by the facility stated this facility did not house youthful inmates. Discussions with the Deputy Warden of Programs - PREA Compliance Manager demonstrated youthful inmates were not housed at this facility.</p> <p>Site Observation:</p> <p>The facility tour and formal and informal interviews with residents and staff demonstrated youthful inmates were not housed at the facility.</p> <p>(a) The Lansing Correctional Facility PAQ states the agency prohibits placing youthful inmates in a housing unit in which a youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. The Kansas Department of Corrections do not house Youthful Inmates.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 5., section E. 1., states, "Youthful offenders shall be housed at the Kansas Juvenile Correctional Complex, unless an exception is approved by the Deputy Secretary of Facility Management and the reasons for the exception are well documented. Youthful offenders will be transferred to RDU on their 18th birthday or as soon thereafter as possible considering operational schedules of each facility and the KDOC transportation hub.</p> <ol style="list-style-type: none"> <li>1. While housed at any adult KDOC facility, youthful offenders shall have sight and sound separation from other adult offenders or have direct staff supervision."</li> </ol> <p>The facility provided a Youthful Offender Resident Communication from the Deputy Warden, which states, "At no time from April 1, 2021 to April 21, 2022 has Lansing Correctional facilities staff has not had any youthful offenders housed at this facility."</p> <p>Through such reviews, the facility meets the standard requirements.</p> |
|--------|--|

|        |  |
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| 115.15 | <b>Limits to cross-gender viewing and searches</b>   |
|        | <b>Auditor Overall Determination:</b> Meets Standard   |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. Kansas Department of Corrections, IMPP 12-103D: Offender and Facility Searches, dated 12.12.2017</li> <li>4. Kansas Department of Corrections LCF General Orders, 9,106, Subject: Security and Control, dated 10.29.2020</li> <li>5. Cross-Gender Search Communication, dated 4.1.2021 – 4.1.2022</li> <li>6. Kansas Department of Corrections IMPP: Transgender and Intersex Offender Placement, dated 7.17.2019</li> <li>7. Examination Genital Status Communication, dated 4.1.2021 – 4.1.2022</li> <li>8. Kansas Department of Corrections Staff Skill Development Division, Corrections Officer Annual Training, Offender Pat Searches Curriculum, dated 9.30.2010</li> <li>9. Kansas Lansing Correctional Facility FY2022 Training Credit Form, dated 12.15.2021\</li> </ol> <p>Post Audit:</p> <ol style="list-style-type: none"> <li>1. Warden Memorandum, Subject: Limits to Cross Gender Searches and View, dated 6.16.2022</li> <li>2. Maintenance Work Order – Per PREA Audit Shut Off 2st Shower in each Pod, dated 5.24.2022</li> <li>3. Female Announcement Logbook entries, dated 6.16.2022</li> <li>4. Deputy Warden Email Communication, Subject: E. Dorm Update, dated 6.4.2022</li> <li>5. Major East Email Communication, Subject: Resident Attire, dated 6.13.2022</li> <li>6. 23 Cross Gender and Transgender Pat Search Training Acknowledgments, dated 6.16.2022</li> <li>7. Deputy Warden Email Communication, Subject: Cross Gender Announcements, dated 6.4.2022</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Residents</li> <li>2. Targeted Residents</li> <li>3. Random staff</li> <li>4. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Interviews with residents demonstrated staff do not see them naked except when they are showering in stalls without shower curtains. Residents believed to be sexually safe and stated searches were conducted respectfully, typically with two staff. A large percentage of residents reported not hearing female staff announce their presence when entering the buildings. However, residents stated they often times are in their cells with their headphones on and probably cannot hear staff when they enter the area.</p> <p>Interviews with staff demonstrated all were not aware of and or had concise memory of cross-gender and/or transgender pat down or strip searches. Informal and formal interviews suggested residents who shower in the first shower stall, stalls without curtains, do so to perform lude acts to the activities and other personnel who enter the housing area.</p> <p>Site Review Observation:</p> <ol style="list-style-type: none"> <li>1. Intake area</li> <li>2. Search area</li> </ol> <p>During the tour of the facility the Auditor observed the Intake Department. Residents are brought in through the Sallyport connected to the Intake Department. Residents are held in a large holding area, open to the area and called in individually to change out clothing behind one of two areas, in the same room, behind half walls. Search areas are in the same room and two staff are conducting strip searches at the same time, out of line of sight of camera view. Once searched, residents receive their issued clothing, towel wraps with preliminary PREA information and Resident Rule Books. Residents are then housed overnight and brought back to Intake the following day to receive their comprehensive PREA Education and viewing of the PREA video.</p> <p>Shower stalls, nearest to the day room, in Buildings A and B are currently not provided with a shower curtain. Curtains are affixed to the ceiling in the same manner as a hospital emergency room. Shower curtains are torn down buy residents through continued use and were on back order. Every shower area had half walls and had shower curtains available in each shower area; however, not all had a shower curtains. Residents were observed walking through dayrooms in shower towels and without shirts on.</p> <p>Due to the interviews with residents regarding female staff announcements, the first shower not being equipped with shower curtains and staff not having clear memory of cross gender searches, the facility was asked to provide action plans. Action plans discussed with the Deputy Warden/PREA Compliance Manager, PREA Coordinator and the Warden included the following:</p> |



- The facility to provide a memorandum providing sustainable action plans for observations noted during the onsite review.
- Provide documented training rosters of cross gender announcements and cross-gender and transgender pat down and strip searches to applicable staff.
- If the first shower stall continues to stay in use; provide photos of shower curtains installed for those showers.

Post audit, the facility provided the following documentation:

1. Warden Memorandum, Subject: Limits to Cross Gender Searches and View, addressed to Whom It May Concern, states, "Lansing Correctional Facility acknowledges corrections needed implemented in regard to PREA Standard 115.15 – Limits to Cross-Gender Searches and Viewing. We have addressed the PREA Auditors observations in the following ways:

- Shower stalls, nearest to the day room, in Buildings A and B are currently not provided with a shower curtain.
  - o The shower stalls nearest to the day room have been disabled by facility maintenance. Residents and staff have been notified through a facility wide email that these first shower stalls have been disabled in order to meet PREA compliance.
- Residents were observed walking through dayrooms in shower towels and without shirts on.
  - o A facility wide email has been sent reminding Residents of the dress code within facility and outlined the sanctions that will be implemented if the dress code is not followed. (Major Dan and Captain Bailey sent out an email on Monday June 13 addressing this.)
- Interviews with staff demonstrated all were not aware of and or had concise memory of cross-gender and/or transgender pat down or strip searches.
  - o The Major implemented training for all staff regarding cross gender pat searches, pat searches for Residents who identify as Transgender.
- Interviews demonstrated female staff are not consistently announcing their presence when entering housing units.
  - o Deputy Warden Reece sent an all-staff email addressing female staff announcements, reminding all staff to do so and to document the announcements in the electronic logbook. Also, shift supervisors were tasked with spot checking and monitoring.

LCF provides assurance by this letter that the action steps listed above will continuously be implemented as an established practice for this facility.

Warden Cheeks"

2. Deputy Warden Email Communication, Subject: E. Dorm Update, addressed to the facility Warden states, "Notice to all staff and residents: Effective immediately no resident shall pass the end of the bunk area without being fully clothed. Residents must have shirt and pants on when out in the foyer and day room area of the pod. Residents must be fully clothed prior to crossing the wall in front of the restroom and shower area."

3. Major East Email Communication, Subject: Resident Attire, addressed to: Captains, Lieutenants, and facility staff, stating, "As we are making rounds, standing mainline/mass movement, please address residents who are not compliant with their attire. (shirts, ID's, hats backwards, altered jeans). We must come together as a team to correct these issues. Thank you all." This email was forwarded to all KDOC facility employees on 6.13.2022 with the additional text. "Major East asked me to pass his original message on to the masses. In addition to the issues mentioned by the Major, many of our resident's attire does not fit properly, and there is a high number of residents not wearing their shirts tucked into trousers (outside of the living unit). The non-compliance issues highlighted by the Major and myself are all in violation of IMPP 12-129, "Resident Hygiene and Appearance". Shift Supervisors and the SST will be taking more proactive measures to correct residents who are not in compliance, and we would appreciate everyone's assistance going forward! You have the full support of the Captain's office. Thank you, Captain Bailey"

4. 23 Cross Gender and Transgender Pat Search Training Acknowledgments. Acknowledgments state, "I hereby acknowledge that I have received training in Resident Pat-Down Searches, to include Cross Gender and Transgender Resident Searches. I have successfully performed Resident Pat-Down Searches, to include, Cross-Gender and Transgender Resident Searches. Per IMPP 10-143D. III. B., I have been informed and I am aware, that "No search or physical examination may be conducted by a non-medical person to determine any offender's genital status." If such information is needed to determine the genital status, medical staff will be responsible for acquiring that information." Acknowledgments are signed and dated by both the staff trained and the Shift Supervisor.

5. Deputy Warden Email Communication, Subject: Cross Gender Announcements, addressed to KDOC facility staff, stating, "In compliance with PREA standards, please ensure when females enter a pod an audible announcement of "FEMALE IN THE UNIT" is made. All announcement of such must be documented in the electronic log book. Capt/Lt. Please be checking during your shifts that this is taking place."

6. Maintenance Work Order – Per PREA Audit Shut Off 2st Shower in each Pod, dated 5.24.2022.

7. Female Announcement Logbook entries. Entries state, "1800 Female in unit announced."

(a) The Lansing Correctional Facility PAQ states the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of their Inmates. In the past 12 months the facility has conducted zero cross-gender strip or cross-gender

visual body cavity searches of Inmates.

Kansas Department of Corrections, IMPP 12-103D: Offender and Facility Searches, page 1, section Policy, states, "All searches shall be conducted in accordance with IMPP 12-103 and shall not be conducted as a form of harassment or in a manner causing damage to property or the unnecessary use of force, embarrassment, or indignity to the person being searched.

Searches shall be conducted in a manner to control the presence of contraband in the facility. Frequent, unannounced, irregularly timed searches, to include offenders, vehicles entering the perimeter, and all building areas accessible to offenders shall be conducted.

Strip searches shall be conducted by staff trained and qualified in the approved procedures for searches. Visual inspection of offender body cavities shall be conducted based on a reasonable belief that the offender is carrying contraband or other prohibited material. Only the Warden or designee shall authorize a body cavity search."

The facility provided a Cross-Gender Search Communication from the Deputy Warden Office, stating, "At no time from April 1, 2021 to April 2022 has Lansing Correctional facilities staff had to perform any cross-gender strip or cavity searches. There have been no exigent circumstances that cross gender strip or cavity search would be necessary."

(b) Lansing Correctional Facility PAQ states the facility does not house female residents.

(c) Lansing Correctional Facility PAQ states the facility policy requires that all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches be documented and justified. The facility does not house female inmates.

Kansas Department of Corrections, IMPP 12-103D: Offender and Facility Searches, page 3, section II. B. 2., states, "Whenever a cross-gender strip search or cross-gender visual body cavity search is performed, in accordance with IMPP 12-103, it shall be documented on an Incident Report."

(d) Lansing Correctional Facility PAQ states the facility has implemented policies and procedures that enable Inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera).

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 4, section C. 1. a., states, "An offender shall be able to shower and perform bodily functions without nonmedical staff of the opposite gender viewing them, except in exigent circumstances (as defined above, per national PREA standards) or when such viewing is incidental to routine security checks."

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 4, section C., states, "Staff shall be aware of offenders' state of undress. The presence of staff of the opposite gender shall be announced prior to entering a housing unit and the announcement will be documented in the chronological log by the person making the announcement."

(e) The Lansing Correctional Facility PAQ states the facility has a policy prohibiting staff from searching or physically examining a transgender or intersex Inmate for the sole purpose of determining the inmate's genital status. Such searches did not occur in the past 12 months.

Kansas Department of Corrections, IMPP 12-103D: Offender and Facility Searches, page 4, section III. C., states, "Staff members are prohibited from searching or physically examining a transgender or intersex 10/29/20 for the sole purpose of determining the 10/29/20's genital status per PREA standard 115.15."

The facility provided an Examination Genital Status Communication from the Deputy Warden Office stating, "At no time from April 1, 2021 to April 1, 2022, has Lansing Correctional facilities performed any physical examination of a transgender, or intersex resident for the sole purpose of determining the residents' genital status."

Kansas Department of Corrections LCF General Orders, 9,106, Subject: Security and Control, page 3, section III. B, states, "Manual or instrument inspection of body cavities shall only be conducted when there is reason to do so, and when authorized in writing by the Warden or Deputy Warden who is acting Warden. Such inspection shall be conducted in private by contracted health care personnel or a local medical facility."

(f) The Lansing Correctional Facility PAQ states 100% of security staff receive training on conducting cross-gender pat-down searches and searches of transgender and intersex Inmates in a professional and respectful manner.

The facility provided Kansas Department of Corrections Staff Skill Development Division, Corrections Officer Annual Training, Offender Pat Searches Curriculum. The course description, states, "During this course, we will review offender pat

search procedures. You will be required to demonstrate your knowledge, skills and abilities during a practical exercise for a pat search.”

The facility provided Kansas Lansing Correctional Facility FY2022 Training Credit Form. This form documents:

- Course title
- Date of training
- Actual hours attended
- Certificate received
- Location of training (classroom, webinar, phone conference)
- DOC Number
- Printed name
- Date received
- Train Code
- Approved/Disapproved
- Initials

Through such reviews, the facility met the standards requirements.

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| 115.16 | <b>Inmates with disabilities and inmates who are limited English proficient</b>   |
|        | <b>Auditor Overall Determination:</b> Meets Standard  |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. Language Line Services Contract Award, dated 12.2.2020</li> <li>4. Kansas Department of Corrections Policy Memorandum, dated 1.4.2019</li> <li>5. PREA Inmate Education Brochures – Zero Tolerance for Sexual Harassment and Sexual Abuse, English and Spanish, not dated</li> <li>6. 2022 PREA Signage, Internal Reporting Instructions, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Targeted Residents</li> <li>2. Unit Team Members</li> <li>3. Investigator</li> </ol> <p>During interviews with targeted residents who were disabled either cognitively, physically and or English not being a first language, most could articulate their understanding of PREA protocols. One cognitive resident, who also wrote the auditor, had psychosis, had a hard time with the present moment throughout the interview, stated he had spoken to a PREA auditor during past Audits, CNN, DOJ and television host. The resident had a very short memory span and was difficult to keep on track. The Unit Team/Mental Health and Investigation staff assigned to this individual reported having many conversations with him, were gentle and understanding; however, each reported regardless of the many meetings with him, he just couldn't remember having conversations regarding his long ago seemingly negative PREA experience.</p> <p>(a) The Lansing Correctional Facility PAQ states the agency has established procedures to provide disabled Inmates equal opportunities to be provided with and learn about the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment.</p> <p>During the pre-audit phase, the PREA Coordinator explained, "We provide any and all accommodations for any person needing such. We provide what is needed on a case-by-case basis, whether that be creating documentation in large font, braille, playing a video of the information for those who cannot see, we utilize translation devices for languages needed other than Spanish (we have Spanish speaking staff at LCF for translation), including sign language, PCM or Unit Team would ensure those who are low functioning would have a clarifying conversation."</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 7, section E., states, "The facility shall provide offender education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills."</p> <p>The facility provided a Language Line Services Contract Award. Page 1, section Item, states, "Full contract is for Document Translation, Braille Document Conversation, Onsite Spoken Interpretation and Sign Language Interpretation Services however this Contractor only provides Document Translation Services and Interpretation Services under this contract."</p> <p>(b) The Lansing Correctional Facility PAQ states the agency has established procedures to provide inmates with limited English equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</p> <p>The facility provided PREA Inmate Education Brochures – Zero Tolerance for Sexual Harassment and Sexual Abuse in English and Spanish. Brochures include the following topics:</p> <ul style="list-style-type: none"> <li>• What is Sexual Harassment</li> <li>• What is Sexual Abuse</li> <li>• What is Staff Voyeurism</li> <li>• Examples of Staff Voyeurism</li> <li>• Tips for Avoiding Sexual Harassment and Sexual Abuse</li> <li>• Right to Report</li> <li>• How to Report</li> <li>• External Reporting Option</li> <li>• If You Are Abused</li> <li>• What to Do If You Have Been Sexually Abused</li> <li>• Notice for Failure to Report</li> </ul> |

The facility provided PREA 2022 Signage in English and Spanish. This document states, "Report incidents of sexual harassment or sexual abuse by directly reporting to any staff member, dialing #50 or writing a form 9, Family or others can make reports on your behalf by calling the number given on the agency website. Calls can be anonymous."

(c) The Lansing Correctional Facility PAQ states the agency prohibits the use of inmate interpreters. In the last 12 months the facility has had zero instances where inmates were used for interpreters.

The facility provided a Kansas Department of Corrections Policy Memorandum signed by the Secretary of Corrections. Page 1, section IV. B., states, "The agency shall not rely on offender interpreters, offender readers, or other types of offender assistants during investigation of sexual violence, staff sexual misconduct, or sexual harassment, except in limited or exigent circumstances, where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first-response duties, or the investigation of the allegation(s)."

Through such reviews, the facility meets the standard requirements

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| 115.17 | <b>Hiring and promotion decisions</b>   |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP #02-126D Human Resource Memorandum, dated 5.14.2019</li> <li>3. Request for Issuance of Identification Card – Contractor/Volunteer, not dated</li> </ol> <p>Post Audit:</p> <ol style="list-style-type: none"> <li>1. Post Audit: HR Manager Letter, dated 6.17.2022</li> <li>2. Post Audit: Mandatory Pre-Service PREA Questions, completed form, dated 6.3.2022</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Human Resource Professional III</li> </ol> <p>Interviews with the Human Resource Professional demonstrated he requests background checks through KDJIS, NCIC and CHR and background checks are completed annually. Institutional reference checks are completed immediately following an applicant's interview and Administrative Adjudication questions are asked the first day of orientation.</p> <p>Site Review Observation:</p> <p>Review of 12 personnel files demonstrated Administrative Adjudication questions were asked upon hire; however, not during the promotion process. Criminal background checks were completed at hire and in October of 2021 for those staff who had been employed longer than one year. Institutional reference checks were completed for all applicable applicants.</p> <p>Due to the current practice of Administrative Adjudication questions not being asked during the promotion process, the Human Resource Professional was asked to provide a memorandum providing a sustainable action plan for future promoted employees.</p> <p>Post Audit:</p> <p>The facility provided letter form the Human Resource Manager, stating, "As Human Resource Manager of Lansing Correctional Facility I acknowledge PREA compliance policy:</p> <p>115.17 Hiring and promotion decision (f) The agency shall ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty of disclose any such misconduct.</p> <p>Upon notice that our facility needed to be compliant in conducting PREA self-acknowledgment questions with our employees upon promoting to new positions, we began issuing the attached mandatory PREA questions to be completed and returned by the staff promoting to any new position. We will continue to issue mandatory questions to new hires as well as acknowledgements of PREA training and understanding during their new-hire orientation.</p> <p>The process of our agency asking all applicants and employees who may have contact with inmates directly about previous misconduct will remain in place in order to maintain PREA compliance and provide our resident population with safe and effective corrections practices free of sexual misconduct or fear of such actions."</p> <p>The facility provided a Mandatory Pre-Service PREA Questionnaire, demonstrating mandatory adjudication questions are answered. In addition, the document has staff affirm the following: "I affirm that the answers I have provided are accurate and truthful. I understand that material omissions regarding such misconduct, or the provision of materially false information, shall result in any dismissal or removal from the facility/program and a permeant gate closure to all IDOC facilities. I also understand I have a continuing affirmative duty to disclose any such misconduct." The acknowledgment is signed and dated by the employee.</p> <ol style="list-style-type: none"> <li>3. Post Audit: Mandatory Pre-Service PREA Questions, completed form, dated 6.3.2022</li> </ol> <p>(a) The Lansing Correctional Facility PAQ states the agency policy prohibits hiring or promoting anyone who may have contact with inmates, and prohibits enlisting the services of any contractor who may have contact with inmates who has engaged in or been convicted in or administratively adjudicated in sexual activity described in paragraph (a)(2) of this standard.</p> <p>Kansas Department of Corrections, IMPP #02-126D Human Resource Memorandum, page 9, section D. 1-3, states, "In compliance with the U.S. Department of Justice, National Standards to Prevent, Detect, and Respond to Prison Rape, 42 U.S.C. § 15601, et seq., and 28 C.F.R. §§ 115.17, 115.76, 115.317, and 115.376, the KDOC shall not hire or promote anyone into a position who may have contact with offenders that:</p> |

1. Has engaged in sexual abuse of offenders in an institutional setting;
2. Has been convicted of engaging in sexual activity in the community facilitated by force, the threat of force, or coercion; or
3. Has been civilly or administratively adjudicated to have engaged in such activity.”

(b) The Lansing Correctional Facility PAQ states agency policy requires the consideration of any incidents of sexual harassment when determining to hire and or promote anyone, or to enlist services of any contractor, who may have contact with inmates.

Kansas Department of Corrections, IMPP #02-126D Human Resource Memorandum, page 3, second paragraph states, “Staff Member: When used within the context of this policy, staff refers to all employees, contract personnel, and volunteers.”

Kansas Department of Corrections, IMPP #02-126D Human Resource Memorandum, page 9, section X. E., states, “All incidents of sexual harassment perpetrated by an applicant against offenders shall be considered in making hiring and promotional decisions.”

(c) The Lansing Correctional Facility PAQ states Agency policy requires background checks are conducted with all new hires who have contact with inmates and makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. In the past 12 months 88 persons hired may have contact with an inmate who have had criminal background checks.

Kansas Department of Corrections, IMPP #02-126D Human Resource Memorandum, page 9, section X. A, C., state, A. “All employment confirmation letters should indicate that employment is contingent upon the results of a background investigation and reference check.

C. A criminal history record information check shall be completed on each candidate offered employment with the Department of Corrections including new hires and promotional candidates and on all current employees at least annually. Minimally, criminal history checks shall include a name search in the National Crime Information Center (NCIC) information systems including Interstate Identification Index (III) and wants/warrants searches as well as a state driver’s license check.”

Kansas Department of Corrections, IMPP #02-126D Human Resource Memorandum, page 10, section F., states, “Prior institutional employers of each candidate including new hires and promotional candidates, and contract employee candidates, shall be contacted for information on substantiated allegations of sexual abuse of an offender or any resignation during a pending investigation of an allegation of sexual abuse of an offender using the Request for Information from Prior Institutional Employer Letter (Attachment G). Prior institutional employers shall include confinement facility, jail, juvenile facility, secure juvenile facility, lock up, and prison.”

(d) The Lansing Correctional Facility PAQ states the agency policy requires that a criminal background records check be completed before enlisting the services of any contractor who may have contact with inmates. In the past 12 months there were 133 contracts for services where criminal background record checks were conducted on all contractors covered in the contract who might have contact with inmates. Policy compliance can be found in provision (c) of this standard.

(e) The Lansing Correctional Facility PAQ states the agency requires background checks to be completed every five years. Policy compliance can be found in provision (d) of this standard. Policy compliance can be found in provision (c) of this standard.

(f) Kansas Department of Corrections, IMPP #02-126D Human Resource Memorandum, page 11, section X. N. 5. a-c, states, “Candidates for any position shall be disqualified from further consideration for employment, and if hired, there shall be grounds for termination of employment, if:

- a. has engaged in sexual abuse of offenders in a correctional setting;
- b. b. Has been convicted of engaging in sexual activity in the community facilitated by force, the threat of force or coercion; or,
- c. has been civilly or administratively adjudicated to have engaged in such activity.”

The facility provided a Request for Issuance of Identification Card – Contractor/Volunteer. This document includes a Mandatory Pre-Service PREA Questions document. This document asks employees the following questions.

- Have you engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?
- Have you been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?
- Have you been civilly or administratively adjudicated to have engaged in the activity described in 1 or 2 above?
- Have you ever had a substantiated finding of sexual harassment of an offender, resident, or student in prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?
- I affirm that the answers I have provided are accurate and truthful. I understand that material omissions regarding such misconduct, or the provision of materially false information, shall result in my dismissal or removal from the facility/program and a permanent gate closure to all KDOC facilities. I also understand I have a continuing affirmative duty to disclose any such misconduct.

(g) The Lansing Correctional Facility PAQ states that agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

(h) Kansas Department of Corrections, IMPP #02-126D Human Resource Memorandum, page 12, section XI. C., states, "All candidates shall be asked to provide specific and detailed information about prior employers and references for use in an employment reference check. If additional information is necessary beyond that included in an application, resume, or Kansas Department of Corrections Security and Employment Information form, the appropriate Human Resources Manager or designee shall request and obtain additional employment information from the candidate."

Through such reviews, the facility meets the standard requirements



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| 115.18 | <b>Upgrades to facilities and technologies</b>   |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Birds Eye View of Lansing Correctional Facility, new construction 2019</li> <li>3. Certificate of Occupancy, dated 1.23.2020</li> <li>4. Kansas Department of Corrections, IMPP #01-123D Authorization for Construction, Renovation or Demolition of Physical Structures, dated 11.16.2014</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Major</li> <li>2. Deputy Warden of Programs - PREA Compliance Manager</li> <li>3. PREA Coordinator</li> </ol> <p>Interviews with all the PREA Coordinator and PREA Manager demonstrated cameras were used and staff supervision is relied upon throughout the campus. The facility is preparing for a large percentage of cameras to be replaced; however, at this time camera replacement is on an as needed basis.</p> <p>Site Review Observation:</p> <p>Multiple cameras were witnessed throughout the facility. Cameras were observed throughout each building hallway, in living units, dining hall, kitchen and programmatic areas. Many areas, especially hallways and or kitchen preparation or industry areas, mirrors were strategically placed to ensure blind spots could be viewed through staff supervision.</p> <p>(a) The Lansing Correctional Facility PAQ states the facility has acquired a new facility or made substantial expansions or modifications to existing facilities since the last PREA audit. A design was created for the new Lansing Correctional Facility Complex in March 2018. In December of 2019, the minimum facility construction was completed, and Residents moved into the space the same month. This minimum resident building is outside of the main complex and is referred to as LCF-East.</p> <p>In January 2020, Residents moved into the newly constructed A and B buildings which are maximum and medium custody. These buildings are inside the complex and are referred to as LCF-Central.</p> <p>Kansas Department of Corrections, IMPP #01-123D Authorization for Construction, page 2, section 4., states, "New construction, renovation, or expansion of a facility shall comply with recognized professional correctional standards and applicable to federal and state statutes, rules and regulations. This shall include the Prison Rape Elimination Act (PREA) standards and consideration of the effect of such changes to protect offenders from sexual abuse."</p> <p>The facility provided a Birds Eye View of the complex, picturing the new constructed additions.</p> <p>The facility provided a Certificate of Occupancy, demonstrated residents were allowed to occupy Buildings A, Housing Unit, B-Housing Unit and C/D-Prison Support Services on 1.23.2020.</p> <p>(b) The Lansing Correctional Facility PAQ states the facility has installed camera in the last 12 months. As a part of the new construction, new camera systems were put in place. The remaining portions of the old buildings still in use have been transferred to the new camera system.</p> <p>Through such reviews, the facility meets the standard requirements</p> |

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| 115.21 | <b>Evidence protocol and forensic medical examinations</b>  |
|        | <b>Auditor Overall Determination:</b> Meets Standard  |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP #22-103 Enforcement, Apprehension, Investigation Division: Investigation Procedures: dated 4.1.2014</li> <li>3. Kansas Statutes Chapter 65. Public Health 65-448</li> <li>4. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>5. Kansas Bureau of Investigation, DNA Submission Form, dated 8.1.2014</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Residents</li> <li>2. Targeted Residents</li> <li>3. Random staff</li> <li>4. LPN</li> <li>5. Behavioral Health Contract Provider</li> <li>6. PREA Coordinator</li> </ol> <p>Formal and informal interviews with residents and staff indicated each were aware of immediately reporting allegations to facility staff.</p> <p>Every random staff interviewed clearly articulated first responder duties to include immediately protecting, preserving and reporting allegations of sexual abuse.</p> <p>The facility LPN and Behavioral Health Contract Provider interviewed stated they understood their responsibilities as responders to sexual abuse victims. These staff each stated they would report immediately, complete the required checklist required of the Coordinated Response and follow hospital orders to ensure proper follow up care was provided as prescribed by hospital SANE/SAFE providers.</p> <p>Site Review Observation:</p> <p>Signage was clearly posted throughout the facility in highly trafficked areas, standardized bulletin postings in living units and in all programmatic areas of the facility.</p> <p>(a) The Lansing Correctional Facility PAQ states the facility is responsible for conducting Administrative Investigations and the Central Office, Department of Criminal Investigation is responsible for conducting criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct.</p> <p>Kansas Department of Corrections, IMPP #22-103 Enforcement, Apprehension, Investigation Division: Investigation Procedures, page 3, section D., 1-4, states, "All allegations of sexual abuse, sexual harassment or nonconsensual sexual acts shall have an agent assigned to investigate. An investigation shall be initiated immediately on any such allegation and shall follow a uniform evidence protocol as set forth in the EAI Manual. In addition to an agent, the facility's PREA Compliance Manager and Mental Health personnel shall be notified of the allegation. (28 C.F.R. § 115.22)</p> <ol style="list-style-type: none"> <li>1. EAI staff assigned to investigate allegations of sexual abuse, sexual harassment, or nonconsensual acts, shall have completed training in investigation of sexual assault cases prior to being assigned to the case. (28 C.F.R. § 115.34)</li> <li>2. In addition to the standard investigative practices, particular attention will be paid to the victim's age (relating to youthful offenders; referring to offenders under 18 years of age), medical and behavioral health, and security needs. Adequate precautions will be taken to prevent further victimization. The agent will ensure that all of the articles of IMPP 10- 103 are followed.</li> <li>3. All allegations of sexual harassment, sexual abuse of an offender by a staff member and nonconsensual sexual acts shall be immediately reportable incidents as defined in IMPP 01-113 and notifications shall be made accordingly.</li> <li>4. Any PREA-related case in which the evidence indicates the allegation could be or will be substantiated will be reported to the Central Office Statewide PREA Coordinator immediately." <p>(b) The Lansing Correctional Facility PAQ states the protocol being developmentally is not appropriate for youth. Policy compliance can be found provision (a) of this standard.</p> <p>(c) The Lansing Correctional Facility PAQ states the facility offers all inmates who experience sexual abuse access to forensic medical examinations. Forensic examinations are offered at no cost to the victim. Where possible, all examinations are conducted by SAFE or SANE examiners. There have been four medical exams, SAFE/SANE exams performed in the last 12 months. All documentation is uploaded into EAI case log. Reference LCF-PR-21-12. Forensic exams are completed at the Kansas University Medical Center. Kansas University Medical Center has a partnership with MOCSA-Metropolitan</p> </li></ol> |

organization to Counter Sexual Assault.

The EAI Caselog is an internal database system that is a centralized location for all EAI departments to enter information into. It also serves as an information repository. All EAI agents have the ability to open cases and upload relevant information of such cases as the case develops. It also serves a purpose for supervisors and executive staff to randomly audit the number of cases and the disposition of each case. Caselog is restricted to EAI Agents, EAI Supervisors, EAI Executive staff and facility executive staff (i.e. Warden, Deputy Warden's, PCM's) and of course Central office executive staff.

The facility provided a Kansas Bureau of Investigation, DNA Submission Form. This form documents the following:

- Case Information
  - o Contributing Agency
  - o Agency Case Number
  - o Investigating Officer and contact information
- References
- Evidence
- Synopsis

On 2.26.2022 at 5:42 pm, this Auditor phone the Kansas University Medical Center at 3901 Rainbow Blvd., Kansas City, KS 66160 at 913.588.5000. Attendant 'Sparkle' answered the call. Upon asking if the hospital had a SANE/SAFE unit, the attendant stated the hospital did complete forensic exams. Upon asking if inmates from the Lansing Correctional Facility were allowed to be brought for forensic exams, the attendant stated yes, they have been brought there in the recent past.

The facility provided Kansas Statutes Chapter 65. Public Health 65-448. Qualified persons at medical care facilities to examine victims of sexual offenses, when; remedy for refusal; costs. Section C., states, "The fee chargeable for conducting an examination of a victim as herein provided shall be established by the department of health and environment. Such fee, including the cost of the sexual assault evidence collection kit shall be charged to and paid by the county where the alleged offense was committed, and refusal of the victim to report the alleged offense to law enforcement shall not excuse or exempt the county from paying such fee. The fee for conducting an examination of a victim as herein provided shall not be charged or billed to the victim or to the victim's insurance carrier."

(d) The Lansing Correctional Facility PAQ states the facility attempts to make a victim advocate from a rape crisis center available to the victim, in person or by other means. All efforts are documented. If a rape crisis center is not available to provide victim advocate services, the facility utilizes a local rape center.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 10, section E.9., states, "The KDOC and/or KDOC facilities shall make an effort to establish Memorandums of Understanding with local rape crisis/victim advocate centers in an effort to coordinate forensic medical exams, victim advocacy services, etc."

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 11, section H. 2., states, "The KDOC shall attempt to provide victims of sexual abuse victim advocacy services from a local rape crisis center. If this is not possible, efforts shall be made to provide victim advocacy services through a community-based organization or by a qualified staff member. The facility shall document its efforts in doing so."

(e) The Lansing Correctional Facility PAQ states a qualified community member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information and referrals.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 11, section H. 3., states, "The KDOC shall attempt to provide a victim advocate to support the victim through the forensic medical exam and investigatory processes."

(f-h) The Lansing Correctional Facility PAQ states the agency is responsible for Administrative investigations. See provision (d) for the facilities qualified community-based staff member.

Through such reviews, the facility meets the standard requirements

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| 115.22 | <b>Policies to ensure referrals of allegations for investigations</b>   |
|        | <p data-bbox="242 145 738 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="242 208 451 237"><b>Auditor Discussion</b></p> <p data-bbox="242 271 435 300">Document Review:</p> <ol data-bbox="242 304 1430 398" style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> </ol> <p data-bbox="242 432 352 461">Interviews:</p> <ol data-bbox="242 465 467 557" style="list-style-type: none"> <li>1. Random Residents</li> <li>2. Targeted Residents</li> <li>3. Investigator</li> </ol> <p data-bbox="242 562 1437 624">Resident interviews demonstrated those who had reported allegations of abuse were responded to timely, with care and consideration and their Unit Team followed up them, often.</p> <p data-bbox="242 656 499 685">Site Review Observation:</p> <p data-bbox="242 689 1481 752">There were 15 allegations of sexual abuse in the past 12 months. Of those allegations eight were reviewed on site and each was found to have a timely referral response, most within the same day of the reported allegation.</p> <p data-bbox="242 779 1481 972">(a) The Lansing Correctional Facility PAQ states the agency ensures that an administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. In the past 12 months the facility has had 23 allegations of sexual abuse and sexual harassment that were received. In the past 12 months 23 allegations resulted in an Administrative Investigation. In the past 12 months zero investigations resulted in a Criminal Investigation. 15 investigations of sexual assault and abuse and eight were sexual harassment. Of those investigations nine are closed and 14 remain open as of 4.26.2022.</p> <p data-bbox="242 1003 1422 1164">Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 3, section 4., states, "When the quality of evidence appears to support criminal prosecution, investigators shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution."</p> <p data-bbox="242 1196 1485 1323">(b) The Lansing Correctional Facility PAQ states the agency has policy that requires allegations of sexual abuse or harassment to be referred for investigation to an agency with the legal authority to conduct criminal investigations. Within the KDOC Application Portal, under Investigations, there is a link to Case Log. This is the repository for all criminal investigations of sexual abuse and sexual harassment.</p> <p data-bbox="242 1355 1485 1482">Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 7, section IV. A., states, "Staff shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment, whether it is in regard to an offender or another staff member. Staff may report to their supervisor, Appointing Authority, or EAI."</p> <p data-bbox="242 1514 1453 1576">The agency's policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the agency website at <a href="https://www.doc.ks.gov/facilities/faq/prea">https://www.doc.ks.gov/facilities/faq/prea</a></p> <p data-bbox="242 1608 914 1637">Through such reviews, the facility meets the standard requirements</p> |

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| 115.31 | <b>Employee training</b>   |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. Kansas Department of Corrections Offender PREA Orientation Acknowledgment Form, not dated</li> <li>4. PREA Inmate Education Brochures – Zero Tolerance for Sexual Harassment and Sexual Abuse, English and Spanish, not dated</li> <li>5. PREA 2022 Signage in English and Spanish</li> </ol> <p>Post Audit:</p> <ol style="list-style-type: none"> <li>1. Warden Memorandum, Subject: Inmate Education, dated 6.16.2022</li> <li>2. Prison Rape Elimination Act PREA Flyer, dated 6.2020</li> <li>3. Prison Rape Elimination Act PREA Brochure, 30 Day and Annual, dated 6.2020</li> <li>4. Record of Resident Signature Upon Intake, dated May 2022</li> <li>5. Comprehensive PREA Education for Residents Acknowledgement Form, dated 6.2022</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Residents</li> <li>2. Targeted Residents</li> <li>3. Intake – CO2 Sergeant</li> <li>4. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Interviews random and targeted residents reported their knowledge and receipt of PREA education, reporting options to staff, writing a grievance, telling a friend, notifying a family member, pressing #50 on resident phones, completing a Form 9 and or dialing the hotline numbers posted on Zero-tolerance Posters throughout the facility.</p> <p>Site Observation:</p> <p>Of the 24 resident files reviewed, each demonstrated evidence of PREA education within 72 hours of intake. File review demonstrated 30-day comprehensive education was not currently in practice. Review of the Arrival Intake Checklist/Education participation provided to intakes was not inclusive of required PREA education elements at intake, transfer or 30-day comprehensive education acknowledgments.</p> <p>Discussions with the PREA Coordinator, Deputy Warden and Warden included an action plan to update the facility brochure to provide residents current Advocate information, confidential reporting information, transgender considerations and provide documented training/participation in required resident education to and from all residents on campus. Continued training to occur for each new arrival and transferred resident.</p> <p>The facility to provide a memorandum providing sustainable action plans for observations noted during the onsite review.</p> <p>Post Audit, the facility provided the following:</p> <ol style="list-style-type: none"> <li>1. Warden Memorandum, Subject: Inmate Education, addressed to: Whom it May Concern, states, "Lansing Correctional Facility acknowledges corrections needed implemented regarding PREA Standard 115.33 – Inmate Education. We have addressed the PREA Auditors observations in the following ways: <ul style="list-style-type: none"> <li>• The facility PREA brochure has been updated to include: advocacy information (Alliance Against Family Violence), confidential reporting and transgender consideration information.</li> <li>• Lansing has begun re-educating all residents on PREA. <ul style="list-style-type: none"> <li>o A team has been put together and was specifically trained by Statewide PREA Coordinator regarding re-education points to fulfill this requirement.</li> <li>• The facility has updated and provided PREA flyer and process information for all incoming residents. PREA flyers and acknowledgement sheets have been provided to the Admissions and Discharge staff to educate and provide to residents.</li> <li>• PREA education will continue for each LCF resident: <ul style="list-style-type: none"> <li>o A PREA flyer will be given to each new resident arriving at LCF. The resident will sign an acknowledgment form at that time. Within 72 hrs, at the time of the initial SVA, the Unit Team will read the flyer to the resident, ensure the resident has the opportunity to ask and have any questions answered.</li> <li>o The PREA brochure will be provided to residents at the 30 Day and Annual SVA. The PREA brochures will be read to the resident, and the Unit Team will ensure the resident has the opportunity to ask and have any questions answered at that time. The resident will be given a copy of the PREA brochure and asked to sign the acknowledgement form.</li> </ul> </li> </ul> </li> </ul> </li> </ol> <p>LCF provides assurance by this letter that the action steps listed above will continuously be implemented as an established practice for this facility.</p> |

Warden Cheeks"

2. Prison Rape Elimination Act PREA Flyer demonstrating the following is provided to residents:

- Kansas Department of Corrections Zero-Tolerance Policy introduction
- You have the Right to be Safe
- What is it:
  - a. Sexual Abuse
  - b. Sexual Harassment
  - c. Prohibited behaviors
- How to Report
  - a. Direct Report
  - b. Anonymous Report
- Where to Report
  - a. Inside the Facility
  - b. Outside the Facility
- Resource for Healing
  - a. Alliance Against Family Violence address and phone number information

3. Prison Rape Elimination Act PREA Brochure, 30 Day and Annual, demonstrating the following is provided to residents:

- You Have the Right To Be Free From Sexual Harassment
  - a. Resident to Resident
  - b. Staff/Volunteer/Contractor to Resident
- You Have The Right to Report Sexual Abuse And Sexual Harassment Without Being Punished
  - a. Report so you are known
  - b. Report without being known
- Where to Report
  - a. Inside the facility
  - b. Outside the facility
- Resource for Healing
  - a. Call the 24hr Hotline
  - b. Write
- Residents who Identify as Transgender
- Creating a Safe Environment
- You can find a complete list of the PREA Standards at: <https://www.prearesourcecenter.org/implementation/prea-standards/prison-and-jail-standards>

4. Record of Resident Signature Upon Intake demonstrates the following is included and acknowledged by residents:

- "I have received the PREA flyer that includes Kansas's zero-tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse or sexual harassment, and advocacy center information." Forms include resident printed name, KDOC Number, date, signature and staff signature.

5. Comprehensive PREA Education for Residents Acknowledgement Form demonstrating residents have:

- Participated in Comprehensive PREA Education
- Understand the information regarding rights to be free from sexual abuse and sexual harassment and to be free from retaliation
- Understand Kansas Department of Corrections' policies and procedures for responding to sexual abuse and sexual harassment.
- Being provided the opportunity to ask questions about the information within the Comprehensive PREA Education for Residents

Forms include resident printed name, signature, KDOC number, date of education, educator printed and signed name.

(a) The Lansing Correctional Facility PAQ states inmates receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. 2304 inmates admitted in the past 12 months were given information at intake.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 6, section 3. A.-B., state,

A. "Information about department/facility policy and procedure regarding sexual abuse/harassment shall be included in each facility's orientation program and shall be provided in a manner that is clearly understood by the offender."

B. During the intake process, offenders shall receive information explaining the agency's zero- tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment."

(b) The Lansing Correctional Facility PAQ states within the past 12 months, 2304 inmates received age appropriate PREA education within 30 days of intake.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 6, section 3.C., states, "Within 30 days of intake, the facility shall provide comprehensive education to offenders either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding policies and procedures for responding to such incidents."

(c) The Lansing Correctional Facility PAQ states of those who were not educated during 30 days of intake, all inmates have been educated subsequently.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 6, section 3.D., states, "Offenders shall receive education upon transfer to a different facility to the extent that the policies and procedures of the offender's new facility differ from those of the previous facility."

(d) The Lansing Correctional Facility PAQ states Inmate PREA education is available in accessible formats for all inmates including those who are limited English proficient, deaf, visually impaired, otherwise disabled or have limited reading skills.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 6, section 3.E., states, "The facility shall provide offender education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills."

(e) The Lansing Correctional Facility PAQ states the facility maintains documentation of inmate participation in PREA education sessions.

The facility provided Kansas Department of Corrections Offender PREA Orientation Acknowledgment Forms signed by Offenders. Acknowledgments attest to receiving the Offender's Guide for Sexual Harassment and Sexual Abuse: Prison Rape Elimination Act (PREA) of 2003 brochure. Having been advised of the Kansas Department of Corrections Zero Tolerance Policy in regards to offender and staff sexual misconduct.

(f) The Lansing Correctional Facility PAQ states The agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats.

The facility provided PREA Inmate Education Brochures – Zero Tolerance for Sexual Harassment and Sexual Abuse in English and Spanish. Brochures include the following topics:

- What is Sexual Harassment
- What is Sexual Abuse
- What is Staff Voyeurism
- Examples of Staff Voyeurism
- Tips for Avoiding Sexual Harassment and Sexual Abuse
- Right to Report
- How to Report
- External Reporting Option
- If You Are Abused
- What to Do If You Have Been Sexually Abused
- Notice for Failure to Report

The facility provided PREA 2022 Signage in English and Spanish. This document states, "Report incidents of sexual harassment or sexual abuse by directly reporting to any staff member, dialing #50 or writing a form 9, Family or others can make reports on your behalf by calling the number given on the agency website. Calls can be anonymous."

Through such reviews, the facility meets the standard requirements.

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| 115.32 | <b>Volunteer and contractor training</b>  |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 13-101: Volunteering, dated 10.22.2014</li> <li>3. PREA Training Acknowledgment, not dated</li> <li>4. Kansas Department of Corrections Orientation and Basic Volunteer Training Lesson Plan, dated 6.2.2015</li> <li>5. Kansas Department of Corrections Mentor/Volunteer Acknowledgement Regarding PREA Training and KDOC's Sexual Assault Prevention and Intervention Program, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Contract LPN</li> <li>2. Contract Behavioral Health Provider</li> <li>3. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Medical and mental health contractors reported having initial and annual training that is provided to all staff. In addition to annual training, each contractor has completed PREA Specialized Medical / Mental Health training.</p> <p>(a) The Lansing Correctional Facility PAQ states all volunteers and contractors who have contact with Inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and harassment prevention, detection, and response. 418 contractors and volunteers, who have contact with Inmates, have completed the required training.</p> <p>Kansas Department of Corrections, IMPP 13-101: Volunteering, page 7, section 5. A., states, "Sexual assault prevention/PREA;</p> <p>a. When volunteers have completed PREA training, they shall review, sign and date the Mentor/Volunteer Acknowledgment Regarding PREA Training and the KDOC's Sexual Assault Prevention and Intervention Program at Attachment E."</p> <p>(b) The Lansing Correctional Facility PAQ states all volunteers and contractors who have contact with Inmates have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.</p> <p>The facility provided a Kansas Department of Corrections Orientation and Basic Volunteer Training Lesson Plan. The Lesson Plan is a 4 to 6-hour training and include the following Performance Objectives.</p> <ul style="list-style-type: none"> <li>• KDOC Mission and Vision</li> <li>• Code of ethics</li> <li>• Role of the facility, Parole office</li> <li>• Overview of volunteer programming and duties</li> <li>• Acquaintance to the specific location of volunteering</li> <li>• Safety/security procedures for volunteer working within said location</li> <li>• Specific General Orders and procedures that govern the work being done by volunteers and community</li> <li>• Needs, attitudes and lifestyles of the offender population</li> <li>• Risk Reduction philosophy/programming</li> <li>• Risk/Needs classification and program placement</li> <li>• Volunteer Rules of Conduct &amp; Undue familiarity, sexual misconduct and volunteer vulnerability elements</li> <li>• Inmate Sexual Assault Prevention/PREA</li> <li>• Anti-social behaviors and strategies to redirect and motivate</li> <li>• Cognitive culture philosophies and pro-social modeling techniques</li> <li>• Purposeful communication techniques</li> <li>• IMPP 12-121: Searches of volunteers</li> <li>• IMPP acknowledgement in volunteer/community policies</li> </ul> <p>Every volunteer shall complete annual training as required by the facility or parole office where he/she is doing volunteer work of not less than (4) hours within three (3) months of his/her annual anniversary date</p> <p>(c) The Lansing Correctional Facility PAQ states the agency maintains documentation confirming that the volunteers and contractors understand the training they have received.</p> <p>The facility provided PREA training acknowledgments. Signatures attest to acknowledging, understanding the zero tolerance policy and having the opportunity to ask any questions regarding PREA training.</p> <p>Through such reviews, the facility meets the standard requirements.</p> |



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| 115.33 | <b>Inmate education</b>   |
|        | <b>Auditor Overall Determination:</b> Meets Standard  |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. Kansas Department of Corrections Offender PREA Orientation Acknowledgment Form, not dated</li> <li>4. PREA Inmate Education Brochures – Zero Tolerance for Sexual Harassment and Sexual Abuse, English and Spanish, not dated</li> <li>5. PREA 2022 Signage in English and Spanish</li> </ol> <p>Post Audit:</p> <ol style="list-style-type: none"> <li>1. Warden Memorandum, Subject: Inmate Education, dated 6.16.2022</li> <li>2. Prison Rape Elimination Act PREA Flyer, not dated</li> <li>3. Prison Rape Elimination Act PREA Brochure, 30 Day and Annual, not dated</li> <li>4. Record of Resident Signature Upon Intake, dated May 2022</li> <li>5. Comprehensive PREA Education for Residents Acknowledgement Form, dated 6.2022</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Residents</li> <li>2. Targeted Residents</li> <li>3. Intake – CO2 Sergeant</li> <li>4. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Interviews random and targeted residents reported their knowledge and receipt of PREA education, reporting options to staff, writing a grievance, telling a friend, notifying a family member, pressing #50 on resident phones, completing a Form 9 and or dialing the hotline numbers posted on Zero-tolerance Posters throughout the facility.</p> <p>Site Observation:</p> <p>Of the 24 resident files reviewed, each demonstrated evidence of PREA education within 72 hours of intake. File review demonstrated 30-day comprehensive education was not currently in practice. Review of the Arrival Intake Checklist/Education participation provided to intakes was not inclusive of required PREA education elements at intake, transfer or 30-day comprehensive education acknowledgments.</p> <p>Discussions with the PREA Coordinator, Deputy Warden and Warden included an action plan to update the facility brochure to provide residents current Advocate information, confidential reporting information, transgender considerations and provide documented training/participation in required resident education to and from all residents on campus. Continued training to occur for each new arrival and transferred resident.</p> <p>The facility to provide a memorandum providing sustainable action plans for observations noted during the onsite review.</p> <p>Post Audit, the facility provided the following:</p> <ol style="list-style-type: none"> <li>1. Warden Memorandum, Subject: Inmate Education, addressed to: Whom it May Concern, states, "Lansing Correctional Facility acknowledges corrections needed implemented regarding PREA Standard 115.33 – Inmate Education. We have addressed the PREA Auditors observations in the following ways: <ul style="list-style-type: none"> <li>• The facility PREA brochure has been updated to include advocacy information (Alliance Against Family Violence), confidential reporting and transgender consideration information.</li> <li>• Lansing has begun re-educating all residents on PREA. <ul style="list-style-type: none"> <li>o A team has been put together and was specifically trained by Statewide PREA Coordinator regarding re-education points to fulfill this requirement.</li> <li>• The facility has updated and provided PREA flyer and process information for all incoming residents. PREA flyers and acknowledgement sheets have been provided to the Admissions and Discharge staff to educate and provide to residents.</li> <li>• PREA education will continue for each LCF resident: <ul style="list-style-type: none"> <li>o A PREA flyer will be given to each new resident arriving at LCF. The resident will sign an acknowledgment form at that time. Within 72 hrs, at the time of the initial SVA, the Unit Team will read the flyer to the resident, ensure the resident has the opportunity to ask and have any questions answered.</li> <li>o The PREA brochure will be provided to residents at the 30 Day and Annual SVA. The PREA brochures will be read to the resident, and the Unit Team will ensure the resident has the opportunity to ask and have any questions answered at that time. The resident will be given a copy of the PREA brochure and asked to sign the acknowledgement form.</li> </ul> </li> </ul> </li> </ul> </li> </ol> <p>LCF provides assurance by this letter that the action steps listed above will continuously be implemented as an established practice for this facility.</p> |

Warden Cheeks"

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4. Record of Resident Signature Upon Intake demonstrates the following is included and acknowledged by residents:

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- Participated in Comprehensive PREA Education
- Understand the information regarding rights to be free from sexual abuse and sexual harassment and to be free from retaliation
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- Being provided the opportunity to ask questions about the information within the Comprehensive PREA Education for Residents

Forms include resident printed name, signature, KDOC number, date of education, educator printed and signed name.

(a) The Lansing Correctional Facility PAQ states inmates receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. 2304 inmates admitted in the past 12 months were given information at intake.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 6, section 3. A.-B., state,

A. "Information about department/facility policy and procedure regarding sexual abuse/harassment shall be included in each facility's orientation program and shall be provided in a manner that is clearly understood by the offender."

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education within 30 days of intake.

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The facility provided Kansas Department of Corrections Offender PREA Orientation Acknowledgment Forms signed by Offenders. Acknowledgments attest to receiving the Offender's Guide for Sexual Harassment and Sexual Abuse: Prison Rape Elimination Act (PREA) of 2003 brochure. Having been advised of the Kansas Department of Corrections Zero Tolerance Policy in regards to offender and staff sexual misconduct.

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The facility provided PREA 2022 Signage in English and Spanish. This document states, "Report incidents of sexual harassment or sexual abuse by directly reporting to any staff member, dialing #50 or writing a form 9, Family or others can make reports on your behalf by calling the number given on the agency website. Calls can be anonymous."

Through such reviews, the facility meets the standard requirements.

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| 115.34 | <p><b>Specialized training: Investigations</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. Certificates of Completion – PREA Specialized Investigations Training</li> </ol> <p>Interviews and on-site file review:</p> <ol style="list-style-type: none"> <li>1. Facility Investigators</li> </ol> <p>Interviews with facility investigators and personnel file review demonstrated that the investigators interviewed had completed annual investigator training and annual training as is required in standard 115.31.</p> <p>(a-b) The Lansing Correctional Facility PAQ states the agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 6, section F. 2. a-d., state,</p> <ol style="list-style-type: none"> <li>a. "Training in conducting such investigations in confinement settings."</li> <li>b. Techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.</li> <li>c. The facility shall maintain documentation that investigators have completed the required specialized training in conducting sexual abuse investigations.</li> <li>d. Any State entity or Department of Justice component that investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations."</li> </ol> <p>(c) The Lansing Correctional Facility PAQ states the agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. The PAQ states employees and the agency has five employees who have completed investigator training.</p> <p>The facility provided Certificates of Completion – PREA Specialized Investigations Training for four of the five investigators.</p> <p>Through such reviews the facility meets the standard requirements</p> |
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| 115.35 | <b>Specialized training: Medical and mental health care</b>  |
|        | <b>Auditor Overall Determination:</b> Meets Standard   |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. Basic PREA Training Acknowledgement, dated 2.2.2022</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Contacted LPN</li> <li>2. Contracted Behavior Health Provided</li> </ol> <p>Contract medical and mental health staff report receiving PREA annual training through on line education, and folders with facility information on responding to PREA at the facility. Contractors reported specialized training included reporting responsibilities, reactions to abuse, what happens after an allegation is reported, and follow up care with victims.</p> <p>Site Observation:</p> <p>File review of the mental health staff training records demonstrated each had completed specialized medical and mental health training as well as initial and annual training.</p> <p>(a) The Lansing Correctional Facility PAQ states the agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. The facility has 92 (100%) medical and mental health staff who work at the facility have received training required by agency policy. Medical and mental health staff complete the National Institute of Corrections E-Learning module.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 6, section 3. a-c., states, "Medical and behavioral health staff and shall include the following:</p> <ol style="list-style-type: none"> <li>a. How to detect and assess signs of sexual abuse and sexual harassment and preserve physical evidence of sexual abuse.</li> <li>b. How to respond effectively and professionally to victims of sexual abuse and sexual harassment.</li> <li>c. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment."</li> </ol> <p>(b) The Lansing Correctional Facility PAQ states their medical staff do not conduct forensic medical exams.</p> <p>(c) The Lansing Correctional Facility PAQ states the agency maintains documentation showing that medical and mental health practitioners have completed the required training.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 6, section 3.d., states, "The facility shall maintain documentation that medical and behavioral health practitioners have received the training."</p> <p>(d) Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 6, section 3.e., states, "Medical and behavioral health care practitioners shall also receive the training mandated for staff members under 28 C.F.R. §§ 115.31, 115.331, 115.32, or 115.332, depending upon the practitioner's status at the agency."</p> <p>The facility provided a completed PREA Training Acknowledgement. This acknowledgement affirms the appropriate staff has attended Orientation training at the Training Center and confirms she was taught the Basic PREA course and understands the expectation outlined in IMPP 10-103d.</p> <p>Through such reviews the facility meets the standard requirements.</p> |

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| 115.41 | <b>Screening for risk of victimization and abusiveness</b>  |
|        | <b>Auditor Overall Determination:</b> Meets Standard  |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, dated 10.16.2019</li> <li>3. Kansas Department of Corrections – Sexual Victimization Assessment Form, not dated</li> <li>4. PREA Application User Manual, “Important Screening Instructions”, not dated</li> </ol> <p>Post Audit</p> <ol style="list-style-type: none"> <li>1. Warden Memorandum, Subject: Screening for risk of victimization, uploaded to OAS 6.17.2022</li> <li>2. LCF SVA Tracking for 3.2002</li> <li>3. LCF SVA List on 6.17.2022</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>4. Random Residents</li> <li>5. Targeted Residents</li> <li>6. Unit Team Supervisor</li> <li>7. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Interviews with residents demonstrated each had been asked risk screening questions, such as if they had previously been in a prison or jail, if they had been sexually abused in the past and or perpetrated abuse and how they identified.</p> <p>Formal and informal interviews with staff demonstrated that risk assessments are completed with each resident within 72 hours of admission.</p> <p>Site Observation:</p> <p>Review of 24 resident files, demonstrated residents were missing the initial screening within 72-hours and 30-day requirement of admission into the facility and when warranted due to an incident of sexual abuse.</p> <p>Action plans discussed with the PREA Coordinator, Deputy Warden and Warden consisted of:</p> <ul style="list-style-type: none"> <li>• The facility to providing a memorandum outlining a sustainable action plan ensuring assessments are completed within the 72-hour and 30-day requirements. Important to note is the facility recognized at the beginning of the year an issue existed with risk screening being completed within the required time frames. In February of 2022 the facility had been 100% compliant with risk screenings; however, file review demonstrated compliance had not been completely sustained.</li> <li>• The facility to complete initial and 30 day assessments that have not been completed for applicable residents.</li> <li>• The facility to provide documentation demonstrating each required 72 hour and 30-day assessment has been completed for residents entering the program from March 1, 2022 through June 1, 2022. Documentation can be provided via database information and or through a spreadsheet with resident id/name, intake date and initial and 30-day assessment completion dates.</li> </ul> <p>Post audit the facility provided the following:</p> <ol style="list-style-type: none"> <li>1. Warden Memorandum, Subject: Screening for risk of victimization, addressed to Whom It May Concern, stating, “Lansing Correctional Facility acknowledges corrections needed implemented regarding PREA Standard 115.41 – Screening for risk of Victimization and Abusiveness. We have addressed the PREA Auditors observations in the following ways: <ul style="list-style-type: none"> <li>• LCF is working reallocation of position to hire a person as the facility PREA compliance Manger.</li> <li>• A staff person has been identified to review SVA on a daily basis to ensure compliance and monitor all initial 72 hour and 30-day SVAs.</li> <li>• Recent education has been provided to unit team staff on May 25, 2022. The training covered risk assessments completed on victims and alleged abusers. The training was presented by Agency PCM Allison Basinger.</li> <li>• Also, the transfer clerk is currently sending out notification to all unit team staff at the 20-day mark to remind them of the upcoming 30-day SVA.</li> <li>• To date all LCF SVA initial, 30 and annual have are current and up to date.</li> </ul> </li> </ol> <p>LCF provides assurance by this letter that the action steps listed above will continuously be implemented as an established practice for this facility.</p> <p>Warden Cheeks”</p> <ol style="list-style-type: none"> <li>2. The facility provided a LCF SVA Tracking for 3.2022. This tracking demonstrated of the 58 residents in the facility, 19 had past due SVAs.</li> </ol> |

3. On 6.17.2022, the facility provided LCF SVA List, demonstrating of 43 residents in the program, each had a completed SVA.

(a) The Lansing Correctional Facility PAQ states the facility has a policy that requires screening, upon admission or transfer, for risk of sexual abuse victimization or sexual abusiveness toward other Inmates.

Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, page 1, section Policy, states, "Designed to complement the custody (or external) classification system, the KDOC has established internal classification procedures for screening offenders for risk of sexual victimization and/or sexual aggression (or predation).

As a measure of enhanced safety and security for all offenders, and pursuant to 28 C.F.R. §§ 115.41, 115.42, 115.341, and 115.342 there are two (2) components of screening for victimization and abusiveness: an initial screening within 72 hours of intake, and a full assessment within 30 days of intake. This screening is conducted on all offenders, and information obtained is then used to make determinations regarding housing, bed, work, education, and program assignments."

(b) The Lansing Correctional Facility PAQ states the number of inmates entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other inmates with 72 hours of their entry into the facility was 601.

Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, page 2, section A.1, states, "Within 72 hours of intake and prior to placement in multi-occupancy housing, an offender receives an initial Sexual Victimization and Abusiveness Assessment (SVA); ensuring that no victim or potential victim of sexual abuse is housed with a sexual aggressor or potential sexual aggressor."

(c-e) The Lansing Correctional Facility PAQ states the facility conducts risk assessments by using an objective screening instrument. Policy compliance can be found in provision (a) of this standard.

Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, page 2, section A.2. a., states, "Intake Investigators or designated facility staff conducts this assessment to ensure that relevant information is relayed to the appropriate parties and documented in the assessment.

a. This information must be ascertained through conversations with the offender during the intake process and medical and mental health screenings; during classification assessments; and by reviewing court records, case files, facility behavioral health records, and other relevant documentation from the offender's files."

The facility provided a Kansas Department of Corrections – Sexual Victimization Assessment Form. The assessment includes the following factors:

#### Aggressive/Predatory Factors

1. Does the Resident have any history of institutional SEXUAL predatory behavior?
2. Does the Resident have any history of non-sexual predatory behavior?
3. Does the Resident have a disciplinary conviction for KAR 44-12-301, 306, 314, 323, or 324?
4. Does the Resident have a current or prior conviction for an offense scored "greatest" in the Custody Classification Manual Offense Severity Table (attachment B) in the past 15 years?
5. Does the Resident have a Central Monitor Note (CM Note) against another offender(s) in which he or she is listed as the aggressor?
6. Is the Resident validated (CM Note) as a member of a Security Threat Group (STG)?
7. Does the Resident have a history of institutional sexual activity?

If item 1 is scored "yes," the Resident is a Known Aggressor (KA). If three or more other items are scored "yes," the Resident is Aggressive Potential (AP). If two or less items are scored "yes," the Resident is Unrestricted (UN).

#### Vulnerability Factors

1. Does the Resident have a history of being a victim of sexual abuse?
2. Does the Resident have a current or prior conviction for sex offenses against an adult or child?
3. Is the Resident age 23 or under, or age 65 or over?
4. Is the Resident small in stature (5'6" or less and/or 140 lbs. or less)?
5. Does the Resident have a medical or mental health condition (level 5 or above) or were they receiving SSDI for a (physical, mental, developmental) disability immediately prior to incarceration?
  - a. Does the Resident have a physical limitation that would make them vulnerable in a prison setting?
6. A. The Resident is: Heterosexual, Lesbian, Gay, Bisexual, Transgender, Intersex, Gender non-conforming  
B. The Resident is perceived to be: Heterosexual, Lesbian, Gay, Bisexual, Transgender, Intersex, Gender non-conforming
7. Does the Resident see themselves as being vulnerable (regarding aggressive actions or sexual victimization)?
8. Is this the Resident first time in prison (not jail)?
9. Is the Resident's criminal history exclusively non-violent?

If item 1 is scored "yes," the Resident is a Victim Incarcerated (VI). If three or more other items are scored "yes," the Resident is Victim Potential (VP). If two or less items are scored "yes," the Resident is Unrestricted (UN).

Other factors to consider:/Housing Considerations/Overriding Issues – Explain/Requesting an override/Override Decision Approved-Disapproved/Decision by:/Decision date and time/Override comments and/or factors driving placement.

(f) The Lansing Correctional Facility PAQ states the policy requires that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. The number of inmates entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 30 days or more) who were reassessed for their risk of sexual victimization or of being sexually abusive with 30 days after their arrival at the facility based upon any additional relevant information received since intake was 427.

During the pre-audit phase, the PREA Coordinator provided the following commentary, "The Unit Team Managers are monitoring the dates for the Resident's SVAs and is communicating with Unit Teams when the SVA date is near to approach to ensure the SVA is completed on time. We are in the process of creating an Access database which will make finding and organizing the upcoming 72 hr, 30 day, bi-annually and yearly SVA dates much more accessible. Additionally, and for extra assurance, a classifications person, outside of the living units and other than Unit Team Managers, will be tasked to oversee the Access database and will be used to double-check that SVA dates are being completed on time."

Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, page 2, section B.1, states, "Staff responsible for housing assignments must be immediately notified when an offender scores at risk for potential victimization or aggression on the SVA.

1. Within 30 days of intake, every offender is to have another SVA completed to determine if any changes occurred in measuring the risk for sexual victimization and/or sexual aggression."

(g) The Lansing Correctional Facility PAQ states the policy requires that an inmate's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, page 3, section II. B., states, "Within 30 days of intake, every offender has another SVA completed to determine if any changes occurred in measuring the risk for sexual victimization and/or sexual aggression. This is completed electronically in the Application Portal and must include any additional relevant information received since intake."

(h-i) The Lansing Correctional Facility PAQ states the policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) questions regarding: (a) whether or not the inmate has a mental, physical, or developmental disability; (b) whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) whether or not the inmate has previously experienced sexual victimization; and (d) the inmate's own perception of vulnerability.

The facility provided a PREA Application User Manual, "Important Screening Instructions. Page 47, first three sentences, states, "NOTE: The KDOC DOES NOT house offenders detained solely for civil immigration purposes. 1. Offenders CANNOT be punished for refusing to answer or for not disclosing complete information in response to questions. Only classification staff, PCM's, EAI and 2. facility administration can have access to the answers on the SVA. 3. Security staff and offender work crew supervisors may have access to the final internal classification ONLY. This will aide in determining emergency cell/bunk placements and/or work crew assignments."

Through such reviews, the facility meets the standard requirements



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| 115.42 | <b>Use of screening information</b>           |
|        | Auditor Overall Determination: Meets Standard |
|        | Auditor Discussion                            |

Document Review:

1. Lansing Correctional Facility PAQ
2. Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, dated 10.16.2019
3. Kansas Department of Corrections, IMPP 10-143D: Transgender and Intersex Offender Placement, dated 7.17.2019

Interviews:

1. Targeted Residents
2. Random Residents
3. Random Staff
4. Unit Team Supervisor
5. Deputy Warden
6. PREA Coordinator

Formal and informal interviews with staff demonstrated resident risk level is shared with Unit Team Members; however, only the risk screenings are only available to Classification, the investigative team and the Warden.

Targeted and Random Residents speak to the intake process being respectable to include search procedures.

(a) The Lansing Correctional Facility PAQ states the facility uses information from the risk screening required by §115.341 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, page 4, section VIII. C., states, "All notifications to necessary facility staff must be made by the staff member completing the screening, as necessary to ensure that the information is used to make determinations regarding housing, bed, work, education, and program assignments and to ensure appropriate follow-up can be provided."

(b) The Lansing Correctional Facility PAQ states the agency/facility makes individualized determinations about how to ensure the safety of each inmate. Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, page 1, section Policy, states, "As a measure of enhanced safety and security for all offenders, and pursuant to 28 C.F.R. §§ 115.41, 115.42, 115.341, and 115.342 there are two (2) components of screening for victimization and abusiveness: an initial screening within 72 hours of intake, and a full assessment within 30 days of intake. This screening is conducted on all offenders, and information obtained is then used to make determinations regarding housing, bed, work, education, and program assignments."

(c) The Lansing Correctional Facility PAQ states the agency/facility makes housing and program assignments for transgender, or intersex inmates in the facility on a case-by-case bases.

Kansas Department of Corrections, IMPP 10-143D: Transgender and Intersex Offender Placement, page 2, section II. A. 1., "Transgender and Intersex offenders must not be assigned to gender-specific facilities based solely on their external genitalia. While determining facility placement, the Department must consider physical layout and offender privacy issues. 1. In deciding whether to assign a transgender or intersex offender to a facility for male or female offenders, and in making other housing and programming assignments, the Department must consider, on a case-by-case basis, whether placement would ensure the offender's health, safety, and security; and whether the placement would present management or other safety or security concerns."

(d) Kansas Department of Corrections, IMPP 10-143D: Transgender and Intersex Offender Placement, page 3, section II. A. 1., "For each transgender or intersex offender, the reassessment must be completed at least twice per year to review the appropriateness of placement and programming assignments and to assess any threats to safety experienced by the offender. (28 C.F.R. §§ 115.42 and 115.342)."

(e) Kansas Department of Corrections, IMPP 10-143D: Transgender and Intersex Offender Placement, page 2, section II. A. 2., "During the interview process to assess any safety concerns, serious consideration must be given to an offender's own views with respect to his or her own safety."

(f) Kansas Department of Corrections, IMPP 10-143D: Transgender and Intersex Offender Placement, page 3, section IV. B. 1. a., states, "A transgender or intersex offender must be given the opportunity to shower separately from other offenders. a. This offer and their refusal or acceptance of separate shower times must be documented in a case note."

Through such reviews the facility meets the standard requirements

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| 115.43 | <b>Protective Custody</b>  |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, dated 10.16.2019</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Targeted Residents</li> <li>2. Random staff</li> <li>3. Specialized staff</li> <li>4. Intake Staff – Restricted Housing</li> </ol> <p>Through interviews this Auditor learned placement of resident in seclusion is typically done only as a result of an allegation and primarily at the request of the inmate. Targeted residents interviewed who were currently in protective custody believed they could either stay out of trouble easier or didn't realize placement was in their best interest. Six residents interviewed in protective custody consisted of two transgender, one gender non-conforming (refused the interview in person), one cognitive, and two on special management. Four of those residents could describe how to report PREA, each preferred placement in protective custody and one transgender had a very difficult time staying on track with high mental health issues. Resident interviewed could speak to their Unit Team meeting with them on a monthly basis and checking in on them often to ensure they were okay. Residents stated they trust their Unit Teams</p> <p>(a) The Lansing Correctional Facility PAQ states the agency has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless and an assessment of all available alternatives has been made and a determination has been made that there is not available alternative means of separation from likely abusers. The number of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment is zero.</p> <p>Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, page 4, section VII., A.-C., states,</p> <p>A. "Offenders at a high risk for sexual victimization must not be placed in involuntary restrictive housing unless an assessment of all available alternatives has been made and a determination has been made that there is no alternative means of separation from likely abusers."</p> <p>B. If an assessment cannot be immediately made the offender may be housed for less than 24 hours in restrictive housing while the assessment is completed.</p> <p>C. Offenders placed in involuntary restrictive housing must not ordinarily remain for more than 30 days."</p> <p>(b) During the pre-audit phase, the PREA Coordinator provided the following description of the practice required for this provision. "At the time KDOC policy related to Protective Custody, IMPP 20-108 and GO 10-103 does not address a resident's access to program, education and work. However, our current practice for residents participating in educational or work programing may be returned to their educational or work program upon completion of special management housing, given the resident still meets the requirements of the programing and/or work requirement and if there is an available slot and if the placement does not create a safety or security risk to the facility."</p> <p>(c) The Lansing Correctional Facility PAQ states the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing in the past 12 months, for longer than 30 days while awaiting alternative placement was zero.</p> <p>(d) The Lansing Correctional Facility PAQ states from a review of case files of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facilities concerns for the inmate's safety, and (b) the reason or reason why alternative means of separation could not be arranged was zero.</p> <p>(e) The Lansing Correctional Facility PAQ states if an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population is not applicable.</p> <p>Through such reviews, the facility meets the standard requirements</p> |

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| 115.51 | <b>Inmate reporting</b>  |
|        | <b>Auditor Overall Determination:</b> Meets Standard   |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. 2022 PREA Signage, Internal Reporting Instructions, not dated</li> <li>4. PREA Inmate Education Brochures – Zero Tolerance for Sexual Harassment and Sexual Abuse, English and Spanish, not dated</li> <li>5. LSP PREA Sign, Legal Services, English and Spanish, not dated</li> <li>6. Detention for Immigration Purposes Waiver, 4.1.2021 – 4.1.2022</li> <li>7. Narrative Report, dated 4.18.2022</li> <li>8. Kansas Department of Corrections Staff PREA Booklet, not dated</li> </ol> <p>Post Audit:</p> <ol style="list-style-type: none"> <li>2. Warden Memorandum, Subject: Inmate Reporting, dated 6.16.2022</li> <li>3. Email communication from Legal Services Director, dated 6.17.2022</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Residents</li> <li>2. Targeted Residents</li> <li>3. Random staff</li> </ol> <p>Staff and residents were comfortable reporting verbally to any staff; however, each interviewed knew the Deputy Warden of Programs - PREA Compliance Manager by name and were comfortable approaching him with questions throughout our three days at the facility. Residents stated they were given PREA orientation at intake, could contact family, put in a request to mental health and were aware of pressing #50 to report to the hotline.</p> <p>Site Observations:</p> <p>During the tour and informal inmate interviews, residents were able to demonstrate how they could make hotline calls by pressing #50. As the Auditor and the resident hung up from testing the system, the PREA Coordinator walked in our area and demonstrated a message had come up on her phone notifying her of the call we just placed by utilizing #50.</p> <p>During the interview with Legal Services, the facility private entity, demonstrated the entity is notifying facility PREA Compliance Manager and/or the agency PREA Coordinator of reported sexual abuse reports.</p> <p>An action plan discusses with the PREA Coordinator and Deputy Warden consisted of the Agency PREA Coordinator providing Legal Services with reporting requirement guidelines. The Agency PREA Coordinator to provide such communication with Legal Services to the Auditor via memorandum.</p> <p>Post Audit the facility provided the following:</p> <ol style="list-style-type: none"> <li>1. Warden Memorandum, Subject: Inmate Reporting, addressed to Whom It May Concern, stating, "Lansing Correctional Facility acknowledges corrections needed implemented regarding PREA Standard 115.51, Inmate Reporting. We have addressed the PREA Auditors observations in the following ways: <ul style="list-style-type: none"> <li>• Residents can report outside of the facility to Legal Services for Prisoners at 785-746-7437 and write to PO Box 12438, Overland Park, Ks, 66283.</li> <li>• Reporting requirements and guidelines have been provided to staff at Legal Services. They have been instructed to contact Agency PREA Coordinator Allison Basinger in the event of any PREA reports.</li> </ul> </li> </ol> <p>LCF provides assurance by this letter that the action steps listed above will continuously be implemented as an established practice for this facility.</p> <p>Warden Cheeks"</p> <ol style="list-style-type: none"> <li>2. The facility provided an email communication with Legal Services, stating, "It was good talking with you yesterday, I am writing to recap. If Legal Services for Prisoners gets an inmate contact from an inmate wanting to make a PREA complaint, we are to call you (please email me the correct phone number, I didn't seem to get it yesterday, and also email a copy to you at this email address. We are not to turn any PREA complaints over to the institution's PREA staff. I also gave permission for you to use this email address on your materials as long as there is no expense to us for that. I will also be notifying my other Legal Services for Prisoners staff of this new arrangement once you send me the phone number."</li> </ol> <p>(a) The Lansing Correctional Facility PAQ states the agency has established procedures allowing for multiple internal ways</p> |

for Inmates to report privately to agency officials about sexual harassment, abuse, retaliation and or any type of neglect.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 7, section IV. A, states, "ALL: Staff shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment, whether it is in regard to an offender or another staff member. Staff may report to their supervisor, Appointing Authority, or EAI."

The facility provided PREA Inmate Education Brochures – Zero Tolerance for Sexual Harassment and Sexual Abuse in English and Spanish. Brochures include the following topics:

- What is Sexual Harassment
- What is Sexual Abuse
- What is Staff Voyeurism
- Examples of Staff Voyeurism
- Tips for Avoiding Sexual Harassment and Sexual Abuse
- Right to Report
- How to Report
- External Reporting Option – Legal Services for Prisoners – 785.296.8887; P.O. Box 12438, Overland Park, KS 66282
- If You Are Abused
- What to Do If You Have Been Sexually Abused
- Notice for Failure to Report

The facility provided PREA 2022 Signage in English and Spanish. This document states, "Report incidents of sexual harassment or sexual abuse by directly reporting to any staff member, dialing #50 or writing a form 9, Family or others can make reports on your behalf by calling the number given on the agency website. Calls can be anonymous."

(b) The Lansing Correctional Facility PAQ states facility provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency. The agency does not have a policy requiring inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.

The facility provided a LSP PREA Sign, Legal Services in English and Spanish. The sign states, "In compliance with the federal Prison Rape Elimination Act (PREA), the Kansas Department of Corrections (KDOC) offers the services of Legal Services for Prisoners (LSP) for offenders to report an incident of sexual abuse or sexual harassment to an entity not part of the KDOC.

Legal Services for Prisoners (LSP) P.O. Box 12438 Overland Park, Kansas 66282 785-746-7437 You can contact your Unit Team or the PREA Compliance Manager (PCM) for additional information."

On 4.27.2022, at 9:47 am, this Auditor dialed 785.746.7437 and received a voice mail stating, "You have reached the voicemail for legal services for prisoners. Please leave your name and inmate number. This voicemail is checked once daily or you can contact us on website at [www.legalservicesforprisoners.org](http://www.legalservicesforprisoners.org). This Auditor left a message requesting the protocol for anonymous reports of sexual harassment and sexual abuse.

On 4.27.2022 at 1:56 pm, this Auditor received a return call from Legal Services. The staff returning the call stated he would turn over information to the institution PREA investigator. The staff stated legal services is just a contact for them either through the phone or by writing. The caller stated the agreement in place is simply to take the call and call the institution where the call was received; there is no follow up on the investigation process, moving forward. During the onsite review, the Auditor dialed Legal Services once again to make certain the PREA Coordinator was contacted as opposed to the facility. Legal Services left the Auditor a voicemail and stated the agency would only notify the PREA Coordinator.

The facility provided a Detention for Immigration Purposes Waiver. The waiver states, "At no time from April 1, 2021 to April 1, 2022 has Lansing Correctional facilities detained residents solely for civil immigration purposes."

(c) The Lansing Correctional Facility PAQ states the agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties. The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties. The PAQ states staff are to document allegations received by the end of the shift. Policy compliance can be found in provision (a) of this standard.

The facility provided a Narrative Report. This report demonstrates a hotline call was made by an inmate, reporting inmate on inmate inappropriate touching of buttocks. Staff response indicates date and time the victim and perpetrator were separated; alleged victim seen by behavioral health; notifications to Warden/Superintendent; and, person making notifications

(d) The Lansing Correctional Facility PAQ states the agency has established procedures for staff to privately report sexual abuse and sexual harassment of inmates. Staff are informed of these procedures in the following ways.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 7, section IV. C. 2., states, "ADULT: Staff, offender family members or others may report incidents or suspected incidents of sexual abuse by calling a toll free third-party hotline: 1-888-317-8204. Allegations of sexual abuse or harassment reported through the third-party hotline shall be confidential and may remain anonymous at the request of the reporting party. These calls shall be referred to the KDOC PREA Coordinator or the Director of Enforcement, Apprehensions, and Investigations."

Through such reviews, the facility meets the standard requirements

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| 115.52 | <b>Exhaustion of administrative remedies</b>  |
|        | <b>Auditor Overall Determination:</b> Meets Standard  |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections KAR 44.15.106 Emergency Procedure, dated, 5.1.1984</li> <li>3. Kansas Department of Corrections KAR 44.15.204, Article 15. Grievance Procedures for Inmates, dated 9.27.2013</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Residents</li> <li>2. Targeted Residents</li> <li>3. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Residents interviewed were aware of the grievance procedures and understood they could complete a grievance, if necessary. However, many residents interviewed stated they were comfortable enough with staff they would simply go to a staff member if they had an issue.</p> <p>(a) The Lansing Correctional Facility PAQ states the agency does have an administrative procedure for dealing with Inmate grievances regarding sexual abuse.</p> <p>Kansas Department of Corrections KAR 44.15.204, Article 15. Grievance Procedures for Inmates, page 1, section (a) (2), states, "Inmates shall not be required to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse by a staff member, contractor, or volunteer, or a grievance in which it is alleged that sexual abuse by another inmate or by a staff member, contractor, or volunteer was the result of staff neglect or violation of responsibilities."</p> <p>(b) Agency policy does not require an inmate to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse.</p> <p>(c) The Lansing Correctional Facility PAQ states the agency's policy and procedure allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The agency's policy and procedure require that an inmate grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint.</p> <p>Kansas Department of Corrections KAR 44.15.204, Article 15. Grievance Procedures for Inmates, page 1, section (a) (4), states, "Any inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint. The grievance shall not be referred to a staff member who is the subject of the complaint."</p> <p>(d) The Lansing Correctional Facility PAQ states the Kern County Sheriff's Office Detentions Bureau states the agency's policy and procedures that require a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. In the past 12 months:</p> <ul style="list-style-type: none"> <li>• there have been one grievances filed alleging sexual abuse; "Upon receiving the grievance a PREA checklist was initiated. After interviewing the Resident, EAI Agents collaborated with the PCM and it was determined the events did not meet the PREA standards."</li> <li>• zero cases where the agency requested an extension of the 90-day period to respond to a grievance.</li> <li>• zero grievances alleging sexual abuse that involved extensions because final decision was not reached within 90 days.</li> </ul> <p>The agency always notifies an inmate in writing when the agency files for an extension, including notice of the date by which a decision will be made.</p> <p>Kansas Department of Corrections KAR 44.15.204, Article 15. Grievance Procedures for Inmates, page 2, section (a) (2), states, "Each grievance alleging sexual abuse shall be returned to the inmate, with an answer, within 10 working days from the date of receipt."</p> <p>(e) The Lansing Correctional Facility PAQ states agency policy and procedure permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates. Agency policy and procedure requires that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline. The number of grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline was zero.</p> <p>Kansas Department of Corrections KAR 44.15.204, Article 15. Grievance Procedures for Inmates, page 3, section (h) (1),</p> |

states, "Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist any inmate in filing requests for administrative remedies relating to allegations of sexual abuse and shall also be permitted to file these requests on behalf of any inmate."

(f) The Lansing Correctional Facility PAQ states the facility has a policy and established procedures for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. The facilities policy and procedures for emergency grievances alleging substantial risk of imminent sexual abuse require an initial response within 48 hours. The facilities policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse require that a final agency decision be issued within 5 days. No grievances were received alleging substantial risk of imminent sexual abuse, that were filed in the past 12 months, reached final decisions within five days.

Kansas Department of Corrections KAR 44.15.204, Article 15. Grievance Procedures for Inmates, page 2, sections (e) (1)(3), state,

1. "Each inmate submitting a grievance concerning imminent sexual abuse shall state that inmate's intentions by writing "Emergency Sexual Abuse Grievance" clearly on the grievance form."
3. "After receiving an emergency grievance alleging imminent sexual abuse, the warden or designee shall provide an initial response within 48 hours and shall issue a final decision within five calendar days. The initial response and final decision shall document the determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance."

Kansas Department of Corrections KAR 44.15.204, Article 15. Grievance Procedures for Inmates, page 3, sections (h) (3), state, "If the inmate declines to have the request processed on that individual's behalf, the facility shall document the inmate's decision."

(g) The Lansing Correctional Facility PAQ states the facility has a written policy that limits its ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the inmate filed the grievance in bad faith. In the past 12 months, there have been zero grievances alleging sexual abuse to occasions where the agency demonstrated that the Inmate filed the grievance in bad faith.

Kansas Department of Corrections KAR 44.15.204, Article 15. Grievance Procedures for Inmates, page 3, sections (3) (i), states, "Grievances in bad faith. Any inmate may be disciplined for filing a grievance related to alleged sexual abuse only if it can be demonstrated that the inmate filed the grievance in bad faith. In this instance, a disciplinary report alleging violation of K.A.R. 44-12-303 or 44-12-317, as appropriate, may be issued."

Through such reviews, the facility meets the standard requirements



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| 115.53 | <b>Inmate access to outside confidential support services</b>   |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. PREA Inmate Education Brochures – Zero Tolerance for Sexual Harassment and Sexual Abuse in English and Spanish, not dated</li> <li>4. Memorandum of Understanding Alliance Against Family Violence, effective until 5.1.2023</li> </ol> <p>Post Audit:</p> <ol style="list-style-type: none"> <li>3. Warden Memorandum, Subject: Access to Outside Confidential Support Services, dated 6.16.2022</li> <li>4. Advocacy Agency Training Rosters, dated 6.9.2022</li> <li>5. Completed Basic Volunteer Training Information Packets</li> <li>6. Alliance Against Family Violence Facility Posting, dated 6.2022</li> <li>7. Four photos of Alliance Against Family Violence postings in the facility</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Residents</li> <li>2. Targeted Residents</li> <li>3. Random staff</li> <li>4. Specialized staff</li> </ol> <p>Staff and resident interviews did not consist of questions in regard to advocate services.</p> <p>Observation:</p> <p>Facility does have a newly implemented and current memorandum of understanding with an advocate agency; however, due to the advocates not yet completing training individual to the facility, the facility has not yet posted advocate contact information to include address and contact phone number.</p> <p>An action plan was discussed with the PREA Coordinator, Deputy Warden and Warden, to include the following:<br/>The facility to complete training with advocacy employees; train and make residents and staff aware of advocate contact information.</p> <p>Prior to giving residents access to advocate information, provide an explanation of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. (This information could be provided on the advocacy brochure.)</p> <p>Once residents and staff have been trained, provide documentation of such training, and pictures of advocacy postings with advocacy address and phone number information.</p> <p>Post Audit:</p> <p>The facility provided the following:</p> <ol style="list-style-type: none"> <li>1. Warden Memorandum, Subject: Access to Outside Confidential Support Services, addressed to Whom It May Concern, stating, "Lansing Correctional Facility acknowledges corrections needed implemented regarding PREA Standard 115.53 – Inmate Access to outside Confidential Support Service. We have address the PREA Auditors observations in the following ways: <ul style="list-style-type: none"> <li>• An established partnership has been obtained with Alliance Against Family Violence to provide advocacy services and confidential reporting. Reporting is available on resident phones by calling #523, and by writing PO Bo 465, Leavenworth, KS 66048</li> <li>• Alliance staff were provided PREA training on June 9, 2022, by State PCM Allison Basinger</li> <li>• Alliance staff were provided facility training on June 15, 2022</li> <li>• Third-party reports by family and friends of residents" can be made by calling 888-317-8204.</li> <li>• Residents can report outside of the facility to Legal Services for Prisoners at 785-746-7437 and write to PO Box 12348, Overland Park, KS 66282</li> <li>• Advocate contact information has been included in comprehensive PREA pamphlets provided during resident re-education. Information was distributed electronically via resident email</li> <li>• Staff have been educated by means of comprehensive PREA pamphlets went out via email.</li> </ul> </li> </ol> <p>LCF provided assurance by this letter that the action steps listed above will continuously be implemented as an established practice for this facility.</p> |

Warden Cheeks”

2. Advocacy Agency Training Rosters demonstrate 10 Advocates attended training on 6.9.2022. Training rosters include advocate printed name and signature.

3. Two completed Basic Volunteer Training Information Packets, which include:

- Acknowledgement of Training to include: Sexual Assault Prevention/PREA
- Affirmation of Policy Form
- Possession of Personal Cell Phone
- Affirmation Policy
- Volunteer/Mentor Agreement
- Mentor/Volunteer Acknowledgment Regarding PREA Training and the KDOC's Sexual Assault Prevention and Intervention Program
- Kansas Department of Corrections Code of Ethics
- State of Kansas Social Media Policy Understanding & Accepting of Policy
- Kansas Department of Corrections Volunteer Professional Standards and Rules of Conduct

Each policy statement and acknowledgement were signed and dated by the advocates.

4. Alliance Against Family Violence Facility Posting which includes direction to dial #523 for the 24-hour hotline and address information.

5. Four photos of Alliance Against Family Violence postings in the facility

(a) The Lansing Correctional Facility PAQ states the facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by:

- Giving inmates (by providing, posting, or otherwise making accessible) mailing addresses and telephone numbers (including toll-free hotline numbers where available) of local, State, or national victim advocacy or rape crisis organizations.
- Does not give inmates mailing addresses and telephone number (including toll-free hotline numbers where available) for immigrant services agencies for persons detained solely for civil immigration purposes; and
- Enables reasonable communication between inmates and these organizations, in as confidential manner as possible.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 11, section H. 1-2, state, “

1. “Victims of sexual abuse shall be provided the brochure on community sexual assault programs, which shall be available through health services staff, unit counselors, and the PCM.
2. The KDOC shall attempt to provide victims of sexual abuse victim advocacy services from a local rape crisis center. If this is not possible, efforts shall be made to provide victim advocacy services through a community-based organization or by a qualified staff member. The facility shall document its efforts in doing so.”

The facility provided PREA Inmate Education Brochures – Zero Tolerance for Sexual Harassment and Sexual Abuse in English and Spanish. Brochures include the following topics:

- What is Sexual Harassment
- What is Sexual Abuse
- What is Staff Voyeurism
- Examples of Staff Voyeurism
- Tips for Avoiding Sexual Harassment and Sexual Abuse
- Right to Report
- How to Report –
- External Reporting Option
- If You Are Abused
- What to Do If You Have Been Sexually Abused
- Notice for Failure to Report

(b) The Lansing Correctional Facility PAQ states the facility informs Inmates, prior to giving them access to outside support services, the extent to which such communications will be monitored. The facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply for disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant Federal, State, or local law.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 8-9, section C. 1. a. 1-4, state, “Offenders can report through the KDOC Sexual Assault Helpline, accessible by dialing #50 through any offender phone free of charge.

1. Calls may be placed anonymously or the caller may provide identifying information at the caller's discretion.
2. Access to and the ability to retrieve messages received through the Helpline shall be restricted to central office EAI.

3. The KDOC Sexual Assault Helpline shall be publicized in all KDOC adult facilities through the use of posters, General Orders, notices, etc.

4. Offender phones shall have helpline instructions posted in a conspicuous location on or near the phones.”

(c) The Lansing Correctional Facility PAQ states the facility maintains memoranda of understanding with community service providers that are able to provide inmates with emotional support services related to sexual abuse.

The facility provided a Memorandum of Understanding Alliance Against Family Violence. This advocacy relationship is new to the facility with a current memorandum of understanding. The first paragraph of the memorandum of understanding states, “To comply with the Federal Prison Rape Elimination Act Standards, the Agency and the Facility agree to collaborate to increase the education regarding, streamline the response to and ensure advocacy services are provided for sexual abuse.” The agreement is in place until May 1, 2023.

On 5.14.2022 at 2:05 pm, the Auditor contacted Alliance Against Family Violence at 522 Kickapoo Street, Leavenworth, KS 66048, telephone number 913.675.7220. After proper introductions and the reason for the call, the operator stated she was aware of the memorandum of understanding with the Lansing facility. The operator stated they had a special advocate for residents of the Lansing facility and she would put the special advocate in contact with the resident, as instructed, by the advocacy agency.

Through such reviews, the facility meets the standard requirements.

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| 115.54 | <b>Third-party reporting</b>  |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. KDOC P.R.E.A. Prison Rape Elimination Act Posting, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Residents</li> <li>2. Targeted Residents</li> <li>3. Random staff</li> <li>4. Specialized staff</li> <li>5. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Residents and staff interviewed demonstrated their reporting knowledge of third-party reporting stating that they could tell a family member, have a staff report for them, or report through #50 and report anonymously.</p> <p>Site Observation:</p> <p>During tours of visitation area, PREA information was posted to include third party reporting information. Many residents have tablets which can be used to report to the PREA Coordinator and or Legal Services.</p> <p>(a) The Lansing Correctional Facility PAQ states the facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment. The agency publicly distributes information on how to report Inmate sexual abuse or sexual harassment on behalf of Inmates.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 8, section 2., states, "Staff, offender family members or others may report incidents or suspected incidents of sexual abuse by calling a toll free third-party hotline: 1-888-317-8204. Allegations of sexual abuse or harassment reported through the third-party hotline shall be confidential and may remain anonymous at the request of the reporting party. These calls shall be referred to the KDOC PREA Coordinator or the Director of Enforcement, Apprehensions, and Investigations."</p> <p>On 4.27.2022 at 12:27 pm, this Auditor phoned 1.888.317.8204 and received the following upon call initiation: Welcome to the Kansas Department of Corrections. Please listen carefully, for adult inmate concerns, press 1. Upon pressing 1, the following voicemail stated, "Hello, you have reached XXX XXXX with facility management, please leave your name, phone number and the reason for your call. The Auditor left a message, explaining the reason for the call and requesting a call back regarding protocols if an offender were to leave a message of sexual harassment or sexual abuse.</p> <p>On 4.27.2022, at 1:02 pm, the agency PREA Coordinator returned the call and explained that call initially goes to Public Service Executive, who forwarded the Auditor's to the PREA Auditor, explaining this is the protocol for all third party calls.</p> <p>The agency publishes Third Party reporting information on their website at Reporting Incidents — (ks.gov). The website provides a phone number 785.213.4551. The Auditor phoned the number provided on 4.27.2022 at 12:06 pm and received a voicemail message, stating, "This is XXX XXXX, please leave a message and I will return call as soon as possible." The Auditor left a message, explaining the reason for the call and requested a call back with information on agency protocols for third party reports received on this number.</p> <p>On 4.27.2022 at 1:04 pm, this Auditor received a call back from the above number. The caller stated the call would be forwarded to the state PREA Coordinator. The caller provided the state PREA Coordinator's name and phone number. The PREA Coordinator confirmed she had received the message and contacted the PREA Auditor in response.</p> <p>The facility provided a KDOC P.R.E.A. Prison Rape Elimination Act Posting. This posting provides offenders the following information:</p> <p>"If you or someone you know is a victim of sexual abuse or sexual harassment, Report It!</p> <ul style="list-style-type: none"> <li>• Offenders can report to any staff member</li> <li>• #50 from any offender telephone</li> <li>• Third Party dial 888.317.8264</li> <li>• Offenders can also make a report to: <ul style="list-style-type: none"> <li>o Legal Services for Prisoners, P.O. Box 12438, Overland Park, Kansas 66281</li> </ul> </li> <li>• You can report anonymous!"</li> </ul> <p>Through such reviews, the facility meets the standard requirements.</p> |

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| 115.61 | <b>Staff and agency reporting duties</b>   |
|        | <b>Auditor Overall Determination:</b> Meets Standard   |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Residents</li> <li>2. Targeted Residents</li> <li>3. Random staff</li> <li>4. Specialized Staff</li> <li>5. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Interviews with the facility staff and residents demonstrated each actively practices and understood the importance of immediately reporting all allegations of sexual abuse and sexual harassment.</p> <p>Site Observations:</p> <p>Investigation reviewed demonstrated allegations are referred for investigation on the day the allegations are reported or within 24 hours of reports.</p> <p>(a) The Lansing Correctional Facility PAQ states the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The agency requires all staff to report immediately and according to agency policy any retaliation against Inmates or staff who reported such an incident. The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 7, section IV., A, states, "Staff shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment, whether it is in regard to an offender or another staff member. Staff may report to their supervisor, Appointing Authority, or EAI."</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 8, section IV., D. 1., states, "Retaliation against offenders or staff who report sexual abuse or sexual harassment or who cooperate with investigations shall be strictly prohibited. (28 C.F.R. §§ 115.11 and 115.311)</p> <ol style="list-style-type: none"> <li>1. All staff shall report any allegations of retaliation to EAI or the facility PREA Compliance Manager either verbally or in writing. Offenders are encouraged to report retaliation as well."</li> </ol> <p>(b) The Lansing Correctional Facility PAQ states, apart from reporting to designated supervisors or official and designated state or local service agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 7, section IV., A. 2., states, "Apart from reporting to designated supervisors, staff shall not reveal any information related to sexual abuse reports to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions."</p> <p>(c) Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 10, section G., states, "Medical and behavioral health practitioners are required to report sexual abuse and must inform offenders of their duty to report at the instigation of services."</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 9, section V., G. 1., states, "Medical and behavioral health practitioners are required to report sexual abuse and must inform offenders of their duty to report at the instigation of services."</p> <p>(d) Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 5, section A. 5., states, "All newly hired KDOC employees shall receive the KDOC brochure, "Undue Familiarity and Sexual Misconduct." All KDOC staff members shall review this policy and receive training on the following:</p> <ol style="list-style-type: none"> <li>1. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities."</li> </ol> |

(e) Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 4, section 2., states, "When an anonymous allegation is received, the Shift Supervisor or PCM shall immediately ascertain whether there is an identified victim. If there is, the Shift Supervisor or PCM shall immediately interview the alleged victim in a private setting in a respectful manner to:

- Determine if the alleged victim confirms the allegation
- Assess protective custody needs
- Obtain a written statement from the offender, if possible

If the Shift Supervisor interviews the alleged victim, s/he shall notify the PCM of the allegation and result of the interview."

Through such reviews, the facility meets the standard requirements

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| 115.62 | <p><b>Agency protection duties</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Targeted Residents</li> <li>2. Facility Investigator</li> <li>3. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Interviews with the targeted residents and specialized staff demonstrated the facility staff act promptly and respond properly at the discovery of any incident involving sexual harassment and sexual abuse. Residents interviewed who had reported allegations of abuse, concurred allegations were responded to promptly and thoroughly and were satisfied with the facilities response protocols.</p> <p>(a) The Lansing Correctional Facility PAQ states when the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the Inmate. In the past 12 months, the facility reports zero Inmates were subject to substantial risk of imminent sexual abuse. Upon discovery of Inmate being subject to substantial risk, the facility immediately separates the victim from the perpetrator, made notification and completed incident reporting requirements.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 9, section V. A. 1-3., states, "Each facility shall utilize the Coordinated Response (Attachment A) as a written institutional plan to establish reports of sexual abuse and sexual harassment.</p> <ol style="list-style-type: none"> <li>1. The response shall ensure that victims receive immediate protection and immediate and on-going medical and behavioral health care and support services as well as ensure that investigators are allowed to obtain useable evidence."</li> <li>2. Any offender who alleges that he or she has been the victim of sexual abuse shall be offered immediate protection from the assailant.</li> <li>3. KDOC staff shall not make judgments or assumptions about the credibility of a victim, suspect, or witness of sexual abuse.</li> </ol> <p>Through such reviews the facility meets the standard requirements</p> |
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| 115.63 | <b>Reporting to other confinement facilities</b>  |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Warden</li> </ol> <p>The interview with the Warden demonstrated that he was aware that upon receiving an allegation that a resident was sexually abused while confined at another facility, he had the responsibility to notify the head of the facility where the allegation occurred. The Warden stated he would have the investigation team begin an internal investigation and would keep in contact with the facility in question until the investigation was completed.</p> <p>Site Observation:</p> <p>The facility had no reported allegations of sexual abuse while confined at another facility.</p> <p>(a) The Lansing Correctional Facility PAQ states the agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. The agency's policy also requires that the head of the facility notify the appropriate investigative agency. In the past 12 months, the facility has received zero allegations that an inmate was abused while in confinement at another facility.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 9, section D. 2, states, "When a report is received that an offender has been the victim of sexual abuse or harassment while incarcerated at another facility or under the supervision of another office:</p> <ol style="list-style-type: none"> <li>1. As soon as possible, but no later than 72 hours of receiving the report, the head of the office/facility that has received the allegation shall notify the head of the office/facility where the alleged abuse occurred.</li> <li>2. The head of the office/facility receiving the notification shall ensure the allegation is investigated pursuant to this policy."</li> </ol> <p>(b) The Lansing Correctional Facility PAQ states agency policy requires that the facility head provides such notification as soon as possible, but no later than 72 hours after receiving the allegation. Policy compliance can be found in provision (a) of this standard.</p> <p>(c) The Lansing Correctional Facility PAQ states the facility documents that it has provided such notification within 72 hours of receiving the allegation.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 9, section D., states, "As soon as possible, but no later than 72 hours of receiving the report, the head of the office/facility that has received the allegation shall notify the head of the office/facility where the alleged abuse occurred."</p> <p>(d) The Lansing Correctional Facility PAQ states facility policy requires that allegations received from other agencies or facilities investigated in accordance with the PREA standards. In the last 12 months, there have been zero allegations of sexual abuse the facility received from other facilities.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 9, section D. 3., states, "All incidents of offender sexual abuse or sexual harassment shall be investigated, disciplined and referred for prosecution when warranted.</p> <p>Through such reviews, the facility meets the standard requirements</p> |



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| 115.64 | <b>Staff first responder duties</b>  |
|        | <p data-bbox="240 147 738 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="240 210 451 237"><b>Auditor Discussion</b></p> <p data-bbox="240 273 435 300">Document Review:</p> <ol data-bbox="240 304 1430 398" style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> </ol> <p data-bbox="240 434 352 461">Interviews:</p> <ol data-bbox="240 465 855 560" style="list-style-type: none"> <li>1. Random staff</li> <li>2. Specialized staff</li> <li>3. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p data-bbox="240 564 1445 725">Informal and formal interviews with all staff interviewed demonstrated each were aware of their first responder responsibilities. Staff stated reporting information is posted on bulletin boards in each housing area and throughout programmatic areas of the facility. Each stated they would have one officer preserve an alleged area while the victim and suspect were being separated and preserved by another officer. Each staff interviewed stated they would make proper notifications to supervisory staff and complete a report documenting details of any incident or reported allegation.</p> <p data-bbox="240 757 416 784">Site Observation:</p> <p data-bbox="240 788 1445 882">Documentation review of the investigations of sexual abuse demonstrated staff responded accurately and promptly. The facility staff are aware of the facilities coordinated response to ensure all protocols are followed as is documented in their facility plan.</p> <p data-bbox="240 913 1485 1173">(a) The Lansing Correctional Facility PAQ states the agency has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to separate, preserve, protect, collect physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.</p> <p data-bbox="240 1205 1477 1330">In the past 12 months, the number of allegations that an inmate was sexually abused was 16. Of these allegations of sexual abuse in the past 12 months, the number of times the first security staff member to respond to the report separated the alleged victim and abuser was 16. In the past 12 months, the number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence was 2.</p> <p data-bbox="240 1361 1477 1456">Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence was 2.</p> <p data-bbox="240 1487 1485 1612">Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report requested that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating was 2.</p> <p data-bbox="240 1644 1477 1769">Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating was 2.</p> <p data-bbox="240 1800 1477 1993">Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, Attachment A., Coordinated Response, states, "Prison Rape Elimination Act (PREA) mandates that agencies develop a written institutional plan to coordinate actions taken in response to an allegation of offender sexual abuse and harassment. The following protocol coordinates actions taken by staff first responders, medical and behavioral health practitioners, investigations and facility leadership. The PREA Checklist has been developed to ensure appropriate notifications are made in a timely and consistent manner.</p> <p data-bbox="240 2024 1382 2051">All offender sexual abuse or sexual harassment allegations shall be forwarded to the Shift Supervisor immediately.</p> <p data-bbox="240 2083 1046 2110">All PREA allegations, including third party and anonymous, must be investigated.</p> <p data-bbox="240 2114 1430 2141">Anonymous allegations and allegations related to official duties, such as pat searches, will be handled as outlined in the</p> |

"Exceptions" section of this protocol.

Upon discovery, instructions are in place for:

1. First Responder

- a. Call for immediate assistance and notify Shift Supervisor.
- b. Keep victim(s) and alleged perpetrator(s) separate.
- c. Secure scene.
- d. Complete written reports/narrative/incident report prior to departing shift and submit to Shift Supervisor.
- e. Staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, to make treatment, investigation, and other security and management decisions.

2. Administrative Discovery, (Kansas Protection Report Center Hotline, Form 9, #50 or direct communication with staff member/volunteer

(b) The Lansing Correctional Facility PAQ states the facility's' policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify security staff. Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder was six.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, Attachment A., Coordinated Response, SAFE Examination 2., states, "Ensure the alleged victim or perpetrator do not defecate, urinate, wash their hands, brush teeth, gargle, rinse mouth, eat or drink, change menstrual pads or tampons, shower, or change clothing prior to the examination."

Through such reviews, the facility meets the standard requirements

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| 115.65 | <b>Coordinated response</b>   |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random staff</li> <li>2. Specialized staff</li> <li>3. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Interviews with the Deputy Warden of Programs - PREA Compliance Manager and facility staff demonstrated the response to allegations of sexual assault is written to coordinate actions taken in response to sexual abuse and sexual harassment incidents.</p> <p>(a) The Lansing Correctional Facility PAQ states the facility developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, Attachment A., Coordinated Response, states, "Prison Rape Elimination Act (PREA) mandates that agencies develop a written institutional plan to coordinate actions taken in response to an allegation of offender sexual abuse and harassment. The following protocol coordinates actions taken by staff first responders, medical and behavioral health practitioners, investigations and facility leadership. The PREA Checklist has been developed to ensure appropriate notifications are made in a timely and consistent manner.</p> <p>All offender sexual abuse or sexual harassment allegations shall be forwarded to the Shift Supervisor immediately.</p> <p>All PREA allegations, including third party and anonymous, must be investigated.</p> <p>Anonymous allegations and allegations related to official duties, such as pat searches, will be handled as outlined in the "Exceptions" section of this protocol.</p> <p>Upon discovery, instructions are in place for:</p> <ol style="list-style-type: none"> <li>1. First Responder</li> <li>2. Administrative Discovery, (Kansas Protection Report Center Hotline, Form 9, #50 or direct communication with staff member/volunteer</li> </ol> <p>Coordinated Response, for:</p> <ol style="list-style-type: none"> <li>1. Shift Supervisor</li> <li>2. Medical Staff</li> <li>3. Behavioral Staff</li> <li>4. SAFE Examination</li> <li>5. EAF Investigation</li> <li>6. PREA Compliance Manager</li> </ol> <p>Through such reviews, the facility meets the standard requirements</p> |

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| <b>115.66</b> | <b>Preservation of ability to protect inmates from contact with abusers</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <p>1. Lansing Correctional Facility PAQ</p> <p>115.66</p> <p>(a) The Lansing Correctional Facility PAQ states the agency, facility, or any other governmental entity is not responsible for collective bargaining on the agency's behalf nor has entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>Through such reviews, the facility meets the standard requirements</p> |

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| 115.67 | <b>Agency protection against retaliation</b>   |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> </ol> <p>Post Audit:</p> <ol style="list-style-type: none"> <li>1. Warden Memorandum, Subject: Agency Protection Against Retaliation, dated 6.16.2022</li> <li>2. PREA 90-Day Offender Monitor Form, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>3. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Interviews Deputy Warden of Programs - PREA Compliance Manager demonstrated that he would complete retaliation monitoring. Retaliation monitoring would be completed regardless of the resident wanted such monitoring. When residents are designated for retaliation monitoring their unit teams are notified via email communication with the history of the incident and involvement of both the victim and abuser.</p> <p>Observation:</p> <p>Investigation file review demonstrated retaliation monitoring was not completed for residents following a report of sexual abuse.</p> <p>The action plan discussed with the PREA Coordinator, Deputy Warden and Warden resulted in the facility to providing a memorandum with a sustainable action plan for observations noted during the onsite review.</p> <p>Post audit the facility provided:</p> <ol style="list-style-type: none"> <li>1. Warden Memorandum, Subject: Agency Protection Against Retaliation, addressed to: Whom It May Concern, stating, "Lansing Correctional Facility acknowledges corrections needed implemented regarding PREA Standard 115.67 – Agency protection against retaliation. We have addressed the PREA Auditors observations in the following ways: <ul style="list-style-type: none"> <li>• A Unit Team Manager has been identified and selected to track all monitoring.</li> <li>• The PCM will forward all monitoring info to the Unit Team Manager who will meet with the resident every 30 days for minimum of 90 days.</li> <li>• The Unit Team Manager will complete the PREA 90 day Offender Monitor for in accordance to LCF GO 1-111.</li> <li>• After 90 days if no other monitoring is deemed necessary the Unit Team Manager will for the completed PREA 90-day Offender Monitor form to the PCM.</li> <li>• Monitor tracking will be done on the PREA calendar.</li> </ul> </li> </ol> <p>LCF provides assurance by this letter that the action steps listed above will continuously be implemented as an established practice for this facility.</p> <p>Warden Cheeks"</p> <ol style="list-style-type: none"> <li>2. The facility provided a PREA 90-Day Offender Monitor Form. This forms documents retaliation monitoring and includes the following statement: <ul style="list-style-type: none"> <li>• In accordance with PREA standard 115.67, LCF has charged the Records Unit Team Manager with monitoring retaliation against offenders (by other offenders and/or staff) for a period of at least 90-days following a report of sexual abuse/harassment. Monitoring beyond the 90-day period shall continue if the initial monitoring indicates a continuing need. The monitor will begin the day of the reported sexual abuse and continue for a period of (90) calendar days, with the meeting with the offender at 30 day intervals."</li> </ul> </li> </ol> <p>(a) The Lansing Correctional Facility PAQ states the agency has a policy to protect all Inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other Inmates or staff. The agency designates the PREA Compliance Manager to monitor retaliation.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 8, section IV. D. 1., states, "Retaliation against offenders or staff who report sexual abuse or sexual harassment or who cooperate with investigations shall be strictly prohibited.</p> <ol style="list-style-type: none"> <li>1. All staff shall report any allegations of retaliation to EAI or the facility PREA Compliance Manager either verbally or in writing. Offenders are encouraged to report retaliation as well."</li> </ol> |

(b) Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 8, section IV. D. 2., states, "The facility shall employ multiple protection measures, such as housing changes or transfers for victims or abusers, removal of alleged staff or offender abusers from contact with victims, and emotional support services for offenders or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations."

(c) The Lansing Correctional Facility PAQ states the facility monitors the conduct or treatment of Inmates or staff who reported sexual abuse and of Inmates who were reported to have suffered sexual abuse to ascertain if there are any changes that may suggest possible retaliation by Inmates or staff. The facility will monitor conduct or treatment until the Inmate is discharged. The facility acts promptly to remedy any such retaliation. In the past 12 months, the facility has had zero incidents of retaliation.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 8, section IV. D. 3. a-b., states, "For at least 90 days following a report of sexual abuse, the facility shall monitor the conduct and treatment of offenders or staff who reported the sexual abuse and of offenders who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by offenders or staff, and shall act promptly to remedy any such retaliation.

a. Items to monitor include any offenders' disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. This shall also include periodic status checks, for offenders.

b. Monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need. The facility shall designate who is charged with this monitoring."

(d) Compliance for periodic status checks can be found in provision (c) of this standard.

(e) State of Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 8-9, section IV. D. 4., states, "If any other individual who cooperates with an investigation expresses a fear of retaliation, the facility shall take appropriate measures to protect that individual against retaliation."

(f) State of Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 9, section IV. D. 5., states, "The obligation to monitor shall terminate only if the allegation is determined to be unfounded."

Through such reviews, the facility meets the standard requirements

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| 115.68 | <b>Post-allegation protective custody</b>  |
|        | <b>Auditor Overall Determination:</b> Meets Standard   |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Residents</li> <li>2. Targeted Residents</li> <li>3. Staff Supervising Protective Custody</li> <li>4. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Random and targeted resident interviews demonstrated that residents are placed in protective custody typically at their own choosing and or during investigations to keep them safe.</p> <p>Interviews with facility staff demonstrated that the protective custody for targeted residents only occurs when absolutely necessary and never solely as a means for residents who identify as LBGTQI.</p> <p>Site Observation:</p> <p>Targeted residents are placed in isolation cells in restricted housing either during an investigation or at their own request.</p> <p>(a) The Lansing Correctional Facility PAQ states the agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was zero. The number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement was zero. From a review of case files of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged was one. If an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 12, section VI. A. 6., states, "Each facility shall establish General Orders to identify the following:</p> <p>A. Identification of possible alternatives to restrictive housing for offenders who report sexual abuse, and when involuntary restrictive housing of alleged sexual abuse victims is employed, shall comply with the requirements set forth in IMPP 20-104."</p> <p>Through such reviews, the facility meets the standard requirements</p> |

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| 115.71 | <b>Criminal and administrative agency investigations</b>  |
|        | <b>Auditor Overall Determination:</b> Meets Standard  |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 22-103: Investigation Procedures, dated 04.01.2014</li> <li>3. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Targeted Residents</li> <li>2. Facility Investigators</li> <li>3. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Interviews with the facility investigators demonstrated each had completed specialized investigator training. The investigators clearly articulated processes required during an investigation, to include the notification requirements to victims.</p> <p>Site Observation:</p> <p>Review of the nine Administrative Investigations demonstrated each were completed thoroughly and within 30 days of the initial report. Each investigation included interviews with victims, abusers, witnesses and staff in the area where the allegation took place.</p> <p>The facility had a total of 15 allegations of sexual abuse in the past 12 months. Of those investigations, two were substantiated as resident on resident sexual abuse, 12 were unsubstantiated as resident on resident sexual abuse and one was unfounded.</p> <p>(a) The Lansing Correctional Facility PAQ states the agency/facility has a policy related to criminal and administrative agency investigations.</p> <p>Kansas Department of Corrections, IMPP 22-103: Investigation Procedures, page 3, section I. A., states, "Investigations shall be initiated as prescribed by IMPP 22-101. All allegations of misconduct or criminal activity received by EAI shall be reviewed and a determination made as to how the allegation will be handled. EAI will review the information and determine if the investigation should be conducted by that office or if the issues would be more appropriately handled through a different process"</p> <p>Kansas Department of Corrections, IMPP 22-103: Investigation Procedures, page 3, section I. D., states, "All allegations of sexual abuse, sexual harassment or nonconsensual sexual acts shall have an agent assigned to investigate. An investigation shall be initiated immediately on any such allegation and shall follow a uniform evidence protocol as set forth in the EAI Manual. In addition to an agent, the facility's PREA Compliance Manager and Mental Health personnel shall be notified of the allegation."</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 1 of Attachments, third paragraph, states, "All PREA allegations, including third party and anonymous, must be investigated. Anonymous allegations and allegations related to official duties, such as pat searches, will be handled as outlined in the "Exceptions" section of this protocol."</p> <p>(b) Kansas Department of Corrections, IMPP 22-103: Investigation Procedures, page 3, section I. D. 1., states, "EAI staff assigned to investigate allegations of sexual abuse, sexual harassment, or nonconsensual acts, shall have completed training in investigation of sexual assault cases prior to being assigned to the case."</p> <p>(c) State of Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 4, section 2., states, "EAI investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator."</p> <p>(d) State of Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 4, section 4., states, "When the quality of evidence appears to support criminal prosecution, investigators shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution."</p> <p>(e) State of Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment,</p> |



page 4, section 5., states, "The credibility of a victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as offender or staff."

State of Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 9, section D. 2. a., states, "No offender who alleges sexual abuse shall be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation."

(f) Kansas Department of Corrections, IMPP 22-103: Investigation Procedures, page 5, section 3. d., states, "Staff members that are suspected of administrative and criminal violations may be required to answer questions under penalty of disciplinary action. The staff member shall sign the Disciplinary Interview Advice of Rights forms (Attachments B and C) being advised that the agent cannot grant immunity from prosecution although the statements obtained may be immune."

Kansas Department of Corrections, IMPP 22-103: Investigation Procedures, page 8, section V. B., states, "Investigation reports shall be submitted on the Standard Investigation Report form (Attachment G) and will be completed within seven (7) calendar days of the conclusion of the investigation. The original case file, along with supporting materials and evidence, shall be maintained by the appropriate investigation section. A copy of the investigation report and appropriate documentation will be provided to the Warden/Parole Director, and the County Attorney/District Attorney of jurisdiction if appropriate. Additional case materials will be provided as requested. The Chief Legal Counsel and/or designees shall have access to investigation files as needed to carry out their duties and responsibilities."

(g) Policy compliance regarding the documentation of a written report can be found in provisions (f) of this standard.

(h) The Lansing Correctional Facility PAQ states there has been zero allegations of conduct that appears to be criminal that was referred for prosecution, since the last audit date.

State of Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 9, section D. 3., states, "All incidents of offender sexual abuse or sexual harassment shall be investigated, disciplined and referred for prosecution when warranted."

(i) The Lansing Correctional Facility PAQ states the agency retains all written reports pertaining to administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. Within 24 hours of a reported and determined PREA event, EAI will open an investigation which includes opening a PREA checklist in Case Log. Case Log cases and documentation therein are never purged.

(j) The Lansing Correctional Facility PAQ states, IMPP 22-103 Office of Enforcement, Apprehensions and Investigations Page 3, I., D., and Page 4, II, A, "Within 24 hours of a reported and determined PREA event, EAI will open an investigation which includes opening a PREA checklist in CaseLog. CaseLog cases and documentation therein are never purged."

Through such reviews, the facility meets the standard requirements.

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| 115.72 | <b>Evidentiary standard for administrative investigations</b>  |
|        | <b>Auditor Overall Determination:</b> Meets Standard   |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 22-103: Investigation Procedures, dated 04.01.2014</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Facility Investigators</li> </ol> <p>The interviews with the facility investigators demonstrated the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.”</p> <p>(a) The Lansing Correctional Facility PAQ states the agency imposes a standard of a preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Kansas Department of Corrections, IMPP 22-103: Investigation Procedures, page 4, section III. A., states, “The purpose of a formal investigation is to determine, based on the preponderance of evidence, whether there are sufficient facts or evidence to substantiate, refute, or dismiss allegations of criminal activity or administrative violations.”</p> <p>Through such reviews, the facility meets the standard requirements.</p> |

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| 115.73 | <b>Reporting to inmates</b>   |
|        | <b>Auditor Overall Determination:</b> Meets Standard  |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 22-103: Investigation Procedures, dated 04.01.2014</li> <li>3. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>4. Completed Notifications of Investigation Status Documentation</li> </ol> <p>Interviews:</p> <p>Facility Investigators</p> <p>Interviews with the facility investigator demonstrated notification requirements to victims was given verbally and in writing. Documentation of notifications are documented in the agency database used for investigations.</p> <p>(a) The Lansing Correctional Facility PAQ states the agency has a policy requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. The number of criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months was six.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 10, section E. 1., states, "Following an investigation of sexual abuse, EAI, or designated facility staff, shall inform the offender of the disposition of the investigation (substantiated, unsubstantiated, or unfounded)."</p> <p>The facility provided completed Notifications of Investigation Status documentation. Documentation demonstrates the following is completed for each notification.</p> <ul style="list-style-type: none"> <li>• Date/To/From</li> <li>• This letter is to inform you, as of ____, the status of the investigation into case LCF-PR-XX-X.</li> <li>• 1. The outcome of the investigation: Substantiated, Unsubstantiated, Unfounded</li> <li>• 2. The Staff member is: <ul style="list-style-type: none"> <li>o No longer posted in the offender's living unit;</li> <li>o Is no longer employed at the facility;</li> <li>o Has been indicted on a charge related to sexual abuse within the facility;</li> <li>o Has been convicted on a charge related to sexual abuse within the facility;</li> <li>o Not applicable</li> </ul> </li> <li>• The alleged abuser: <ul style="list-style-type: none"> <li>o Has been indicted on a charge related to sexual abuse within the facility.</li> <li>o Has been convicted of a charge related to sexual abuse within the facility.</li> <li>o Has been charged with a disciplinary violation institutionally</li> <li>o Not applicable</li> </ul> </li> </ul> <p>This letter is in regard to the above referenced case only. This case may be reopened in the future should additional evidence become available. Your cooperation in this investigation is appreciated.</p> <p>Notifications of Investigation Status templates can be found in Appendix H of the Kansas Department of Corrections, IMPP 22-103: Investigation Procedure.</p> <p>(b) The Lansing Correctional Facility PAQ states If an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the Inmate as to the outcome of the investigation is not applicable.</p> <p>(c) The Lansing Correctional Facility PAQ states following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency/facility subsequently does inform the Inmate (unless the agency has determined that the allegation is unfounded) whenever:</p> <ul style="list-style-type: none"> <li>• The staff member is no longer posted within the Inmate's unit;</li> <li>• The staff member is no longer employed at the facility;</li> <li>• The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or</li> <li>• The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.</li> </ul> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 10, section E. 2. a-c., states, "Following the report of staff sexual abuse of an offender, the facility shall inform the offender (unless it is determined to be unfounded) when:</p> |

- a. The staff member is no longer posted in the offender's living unit;
- b. The staff member is no longer employed at the facility; and/or
- c. The staff member has been indicted on a charge related to sexual abuse within the facility."

(d) The Lansing Correctional Facility PAQ states following an inmate's allegation that he or she has been sexually abused by another Inmate in an agency facility, the agency subsequently informs the alleged victim whenever: the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 10, section E. 3. a-b., states, "Following the report of offender sexual abuse of another offender, the facility shall inform the offender when:

- a. The alleged abuser is indicted on a charge related to sexual abuse within the facility;
- b. The alleged abuser is convicted on a charge related to sexual abuse within the facility."

(e) The Lansing Correctional Facility PAQ states the agency has a policy that all notifications to inmates described under this standard are documented. In the past 12 months, there has been nine notifications to an inmate, pursuant to this standard. Of those notifications made in the past 12 months, the number that were documented was nine. Policy compliance can be found in provision (c d) of this standard.

(f) Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 10, section E. 5., states, "The facility shall no longer have this obligation to report once the offender is released from the agency's custody."

Through such reviews, the facility meets the standard requirements.

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| 115.76 | <b>Disciplinary sanctions for staff</b>   |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. Kansas Department of Corrections, IMPP 02-120D: Employee Disciplinary Procedures and Informal/Formal Actions, dated 05.07.2015</li> <li>4. Letter from Lansing Correctional Facility Human Resource Manager, dated 5.10.2022</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Deputy Warden of Programs - PREA Compliance Manager</li> </ol> <p>Interview with the Deputy Warden of Programs - PREA Compliance Manager demonstrated the employee would be placed on Administrative Leave until the investigation was completed. Depending on the outcome, would depend on disciplinary action that would take place.</p> <p>Site Observation:</p> <p>In the last 12 months, the facility did not have any staff who were disciplined for violation of an agency sexual abuse or sexual harassment policy.</p> <p>115.76</p> <p>(a) The Lansing Correctional Facility PAQ states staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 9, section D. 3. a-b., states, "All incidents of offender sexual abuse or sexual harassment shall be investigated, disciplined and referred for prosecution when warranted.</p> <ol style="list-style-type: none"> <li>a. In keeping with the Department's zero tolerance policy, perpetrators of sexual abuse shall be disciplined and/or referred for prosecution.</li> <li>b. The presumptive disciplinary sanction for staff who have engaged in sexual abuse of an offender is termination." <p>The facility provided a Letter from Lansing Correctional Facility Human Resource Manager. This letter is addressed to the PREA Coordinator regarding reporting to licensing entities. The first paragraph of this letter states, "As stated in KDOC IMPP 10-103D 3C Coordinated Response to Sexual Abuse and Harassment: "All terminations for violations of agency sexual abuse or sexual harassment policies or resignations by staff who have resigned in lieu of termination are to be reported to relevant licensing as applicable."</p> <p>(b) The Lansing Correctional Facility PAQ states in the last 12 months, there has been zero staff from the facility that had violated agency sexual abuse or sexual harassment policies. Policy compliance can be found in provision (a) of this standard.</p> <p>(c) The Lansing Correctional Facility PAQ states disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. In the past 12 months there have zero staff requiring discipline for sexual abuse or sexual harassment.</p> <p>Kansas Department of Corrections, IMPP 02-120D: Employee Disciplinary Procedures and Informal/Formal Actions, page 4-5, section 5. g., states, "The following factors shall be considered by the appointing authority prior to proposing formal disciplinary action: Type of disciplinary action taken with other employees under similar circumstances."</p> <p>(d) The Lansing Correctional Facility PAQ states all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past 12 months, zero staff have been terminated for sexual abuse or harassment. Policy compliance can be found in provision (a) of this standard.</p> <p>Through such reviews, the facility meets the standard requirements.</p> </li></ol> |

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| 115.77 | <b>Corrective action for contractors and volunteers</b>   |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. Kansas Department of Corrections, IMPP 01-106D: Denial of Entry Contract Personnel, dated 9.20.2016</li> <li>5. Kansas Department of Corrections, IMPP 02-118D: Employee and Volunteer Rules of Conduct and Undue Familiarity, dated 07.01.2015 Kansas Department of Corrections, LCF General Orders, Section 1,111, Subject: Sexual Abuse: Offender Sexual Abuse Prevention/Intervention, dated 9.9.2020</li> </ol> <p>Interviews:</p> <ul style="list-style-type: none"> <li>• Deputy Warden of Programs - PREA Compliance Manager</li> </ul> <p>The interview with the Deputy Warden of Programs - PREA Compliance Manager demonstrated any volunteer or contractor who engaged in sexual abuse would be removed from the facility and reported to law enforcement.</p> <p>Site Observation:</p> <p>During the last audit cycle, the facility did not have any volunteers or contractors subject to disciplinary action due to violating sexual abuse or sexual harassment policies.</p> <p>115.77</p> <p>(a) The Lansing Correctional Facility PAQ states agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with Inmates. In the past 12 months, there have been zero contractors or volunteers reported to law enforcement or relevant licensing bodies for engaging in sexual abuse of Inmates.</p> <p>Kansas Department of Corrections, IMPP 01-106D: Denial of Entry Contract Personnel, page 1, section Policy Statement, states, "All Departmental contracts with vendors who supply services to the KDOC shall provide for full compliance with all KDOC and facility rules by contract personnel. The contractor shall be obligated to remedy any concerns expressed by KDOC authorities regarding performance of the contractor's personnel. The vendor's administrative staff shall be required to take immediate and effective action when problematic contract personnel behavior is brought to their attention. In the event the concern cannot be remedied and removal of the contract personnel from the project is requested by the KDOC, the contracts shall provide that the contractor agrees to remove the contract personnel from the facility. If a contractor terminates an employee for any reason they shall notify the facility so a gate stop can be issued."</p> <p>Kansas Department of Corrections, LCF General Orders, Section 1,111, Subject: Sexual Abuse: Offender Sexual Abuse Prevention/Intervention, Attachment A, Mentor/Volunteer Acknowledgment has each Mentor or Volunteer sign under the following statement.</p> <p>"I acknowledge that I have read and understood the above policy information, from IMPP 10-103D. I am aware of my obligations to adhere to this policy. I acknowledge my understanding that if I engage in sexual abuse of an offender, I will be prohibited from having contact with offenders, and could be reported to law enforcement unless my activity is clearly not criminal, and to any relevant licensing body. I also acknowledge that on this day I have received training on my responsibilities under this policy; on the zero tolerance of the KDOC for sexual abuse or sexual harassment; and on the fact that I am required to report any incident of sexual assault told to me or of which I otherwise learn, and how I am to report. I acknowledge that I understand the training I received."</p> <p>(b) The Lansing Correctional Facility PAQ states the facility takes appropriate remedial measures and considers whether to prohibit further contact with Inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>Through such reviews, the facility meets the standard requirements.</p> |

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| 115.78 | <b>Disciplinary sanctions for inmates</b>     |
|        | Auditor Overall Determination: Meets Standard |
|        | Auditor Discussion                            |

Document Review:

1. Lansing Correctional Facility PAQ
2. Department of Regulations Inmate Conduct, Penalties, Discipline Procedure, Disciplinary and Administrative Segregation, Grievance Procedure and Reporting and Claims Procedure, dated 7.13.2007
3. KAR for Disciplinary Staff Statements from Disciplinary Hearing Officer, not dated

Interviews:

1. Facility Investigators

Interviews with the facility investigators demonstrated inmates who falsely reported PREA allegations would typically be moved to another housing unit and or facility due to safety reasons for the resident.

(a-b) The Lansing Correctional Facility PAQ states inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse. Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse. In the past 12 months there have been one administrative findings of inmate-on-inmate sexual abuse have occurred at the facility. In the past 12 months there have no criminal findings of guilt for inmate-on-inmate sexual abuse, occurring at the facility. The disciplinary process is addressed through a hearing process which allows residents to present facts of the case, evidence to a hearing officer. This process is provided in the Inmate Rule book. Violations of all KARs are in the book.

Department of Regulations Inmate Conduct, Penalties, Discipline Procedure, Disciplinary and Administrative Segregation, Grievance Procedure and Reporting and Claims Procedure, 44-12-314, states, "Sexual activity: aggravated sexual activity; sodomy; aggravated sodomy. (a) No inmate shall commit or induce others to commits an act of sexual intercourse or sodomy, even with the consent of both parties. Participation in such an act shall be prohibited.

(d) Violation of this regulation shall be a class I offense.

(c) KAR 44-13-408. Assistance from staff, states, "If the hearing officer finds that at least one of the following conditions is met, the hearing officer shall appoint a staff member from an approved list to act as staff assistant to aid the inmate at the disciplinary hearing and to question relevant witnesses: (1) The inmate is incapable of self-representation due to physical or mental disability, whether temporary or permanent. (2) The inmate is illiterate in the English language. (3) The charge is too complex for the inmate to readily comprehend or defend against. (4) Testimony or other evidence will be given, either directly or indirectly, by a confidential inmate informant or witness. (5) The inmate either refuses to attend or has been removed from the hearing. (6) Any other circumstance exists that, in the judgment of the hearing officer, substantially impairs the inmate's ability to participate meaningfully in the inmate's defense. (b) A list of staff members to aid the inmate as staff assistants shall be made available to the hearing officer by the warden."

(d) The Lansing Correctional Facility PAQ states the facility does not offer therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse.

(e) The Lansing Correctional Facility PAQ states the agency disciplines inmates for sexual contact with staff only upon finding that the staff member did not consent to such contact.

Department of Regulations Inmate Conduct, Penalties, Discipline Procedure, Disciplinary and Administrative Segregation, Grievance Procedure and Reporting and Claims Procedure, 44-12-324, states, "Battery. Battery is the unlawful or unauthorized, intentional touching or application of force to the person of another, when done in a rude, insolent or angry manner. Violation of this rule shall be a class 1 offense."

(f) The Lansing Correctional Facility PAQ states the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 3, section 6., states, "If an investigation reveals that a report of sexual abuse or sexual harassment was made in bad faith, the facility may hold offenders accountable through the appropriate disciplinary process."

(g) The Lansing Correctional Facility PAQ states the agency prohibits all sexual activity between inmates. If the agency prohibits all sexual activity between inmates and disciplines inmates for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced. Compliance can be found in provision (a) of this standard.

Through such reviews, the facility meets the standard requirements.



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| 115.81 | <b>Medical and mental health screenings; history of sexual abuse</b>  |
|        | <b>Auditor Overall Determination:</b> Meets Standard  |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, dated 12.20.2016</li> <li>4. Behavior Health Case Consultation, computer generated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Targeted Residents</li> <li>2. Intake Staff</li> <li>3. Random staff</li> <li>4. Unit Team Supervisor</li> <li>5. Administrative Captain</li> <li>6. Major</li> </ol> <p>Interviews with specialized staff and targeted residents demonstrated disclosure reports are reported to the Unit Team staff who would report the disclosure to the Mental Health Department. Documentation of disclosures and follow up appointments are documented in the medical department database.</p> <p>Site Observation:</p> <p>The Unit Team Supervisor was able to demonstrate a newly implemented electronic system of referrals documented in a database along with an email notification system. This system has been in place since February of 2022 and was current in regard to files reviewed during the onsite review.</p> <p>(a, c) The Lansing Correctional Facility PAQ states all Inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner. Follow up meetings are offered within 14 days of the intake screening. In the past 12 months 90 of inmates who disclosed prior victimization during the intake screening. Medical and mental health staff maintain secondary materials, documenting compliance with the above required services.</p> <p>Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, page 4, section VIII. A., states, "If the SVA indicates that an offender has experienced prior sexual victimization, whether in a facility or in the community, the facility must offer the offender follow-up with a medical or behavioral health practitioner within 14 days of the screening. (28 C.F.R. §§ 115.81 and 115.381) The date of the referral is documented on the SVA."</p> <p>The facility provided a computer generated Behavior Health Case Consultation. The case consultation includes the following:</p> <ul style="list-style-type: none"> <li>• General note</li> <li>• Contact Information</li> <li>• Subjective Information</li> <li>• Goals, Objectives, and Interventions Addressed Today</li> <li>• Current Assessment</li> <li>• Assessment/Diagnosis</li> <li>• Plan/Additional Information</li> <li>• Signature</li> <li>• Contact type</li> <li>• Reason for contact</li> <li>• Details</li> <li>• Individuals present</li> <li>• Support Resources</li> </ul> <p>(b) The Lansing Correctional Facility PAQ states all Inmates who have previously perpetrated sexual abuse, as indicated during the screening pursuant to § 115.41, are offered a follow-up meeting with a mental health practitioner. All Inmates are allowed a follow-up meeting offered within 14 days of the intake screening. In the past 12 months 90 of inmates who disclosed previously perpetrated sexual abuse, as indicated during the screening process.</p> <p>Kansas Department of Corrections, IMPP 10-139D: Screening for Sexual Victimization and Abusiveness, page 4, section VIII. B., states, "If the SVA indicates that an offender has previously perpetrated sexual abuse, whether in a facility or in the community, the facility must offer the offender follow-up with a medical or behavioral health practitioner within 14 days of the</p> |

screening. (28 C.F.R. §§ 115.81 and 115.381) The date of the referral is documented on the SVA.”

(d) The Lansing Correctional Facility PAQ states, Information related to sexual victimization or abusiveness that occurred in an institutional setting is not strictly limited to medical and mental health practitioners. During the pre-audit phase, the PREA Coordinator provided the following commentary. “The information is protected by technology permissions to access the information. The following have access to see the information - EAI Agents, PCM and PCMA at each Facility, PREA Coordinator.”

(e) The Lansing Correctional Facility PAQ states, Medical and mental health practitioners do not obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institution setting unless the inmate is under the age of 18.

Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 11, section V. G. 8., states, “Informed consent shall be obtained from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting.”

Through such reviews, the facility meets the standards requirements.

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| 115.82 | <b>Access to emergency medical and mental health services</b>  |
|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Targeted Residents</li> <li>2. Random staff</li> <li>3. Mental Health Staff</li> </ol> <p>Interviews with staff and Targeted Residents demonstrated that inmates are aware of access to emergency medical and mental health services and such services have been offered and accepted. As is stated in standards of this report.</p> <p>(a-b) The Lansing Correctional Facility PAQ states Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. Medical and mental health staff maintain secondary materials (e.g., form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 10, section. G. 2-4., states,</p> <ol style="list-style-type: none"> <li>2. "Access to medical and behavioral health care shall be provided immediately, upon report or discovery, to victims of sexual abuse."</li> <li>3. When medically and procedurally appropriate, victims and perpetrators of sexual abuse will be offered an off-site forensic medical exam performed by a certified Sexual Assault Nurse Examiner (SANE), at no cost to the offender.</li> <li>4. Medical and behavioral health care staff shall contribute to a coordinated response to all allegations of sexual abuse by relaying, to the PCM and/or security/administrative staff, information pertinent to the well-being of the offender(s) or for investigative purposes."</li> </ol> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 1, section. Appendix – Coordinated Response, states, "Prison Rape Elimination Act (PREA) mandates that agencies develop a written institutional plan to coordinate actions taken in response to an allegation of offender sexual abuse and harassment. The following protocol coordinates actions taken by staff first responders, medical and behavioral health practitioners, investigations and facility leadership. The PREA Checklist has been developed to ensure appropriate notifications are made in a timely and consistent manner."</p> <p>(c) The Lansing Correctional Facility PAQ states Inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 11, section. 5. A-b., states, "Victims of sexual abuse while incarcerated shall be offered:</p> <ol style="list-style-type: none"> <li>a. Emergency contraception and pregnancy tests (when vaginal penetration has occurred) when deemed medically necessary, for female offenders</li> <li>b. Prophylaxis for sexually transmitted infections"</li> </ol> <p>(d) The Lansing Correctional Facility PAQ states Treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Policy compliance can be found in provision (a) of this standard.</p> <p>Through such reviews, the facility meets the standard requirements.</p> |

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| 115.83 | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>   |
|        | <b>Auditor Overall Determination:</b> Meets Standard   |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> <li>3. Kansas Department of Corrections, IMPP P-F-06: Response to Sexual Assault, dated 7.1.2020</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Targeted Residents</li> <li>2. LPN</li> <li>3. Contract Behavioral Provider</li> </ol> <p>Interviews with staff and residents demonstrated that each are aware of access to emergency medical and mental health services. Residents who reported sexual abuse reported staff acted immediately, empathetically and addressed their concerns and needs.</p> <p>(a/c) The Lansing Correctional Facility PAQ states the facility offers medical and mental health evaluation and, as appropriate, treatment to all Inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 11, section V. G. 7., states, "The facility shall attempt to conduct a behavioral health evaluation of all known offender- on-offender abusers within 60 days of discovery of such abuse history."</p> <p>Kansas Department of Corrections, IMPP P-F-06: Response to Sexual Assault, page 1, section 5. b., states, "In all cases, whether the victim is treated in-house or referred to an outside facility the following will occur: There is an evaluation by a qualified mental health professional for crisis intervention counseling and follow-up."</p> <p>Kansas Department of Corrections, IMPP P-F-06: Response to Sexual Assault, page 2, section 6., states, "Healthcare staff wo have been trained in the evaluation and treatment of sexual assaults will provide evaluation services crisis intervention counseling, and long-term follow-up, if requested. Required reporting will follow Federal standards and agency policy."</p> <p>(d-e) This provision is not applicable as the facility does not serve female clients.</p> <p>(f) The Lansing Correctional Facility PAQ states Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 11, section V. G. 5. a-b, states, "Victims of sexual abuse while incarcerated shall be offered:</p> <ol style="list-style-type: none"> <li>a. Emergency contraception and pregnancy tests (when vaginal penetration has occurred) when deemed medically necessary, for female offenders</li> <li>b. Prophylaxis for sexually transmitted infections"</li> </ol> <p>(g) The Lansing Correctional Facility PAQ states treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Policy compliance can be found in provision (a) of this standard.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 11, section V. G. 3., states, "When medically and procedurally appropriate, victims and perpetrators of sexual abuse will be offered an off-site forensic medical exam performed by a certified Sexual Assault Nurse Examiner (SANE), at no cost to the offender."</p> <p>(h) The Lansing Correctional Facility PAQ states if the facility is a prison, it attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 11, section V. G. 7., states, "The facility shall attempt to conduct a behavioral health evaluation of all known offender- on-offender abusers within 60 days of discovery of such abuse history."</p> <p>Through such reviews, the facility meets the standard requirements.</p> |

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| 115.86 | <b>Sexual abuse incident reviews</b>  |
|        | <b>Auditor Overall Determination:</b> Meets Standard  |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 12-118D: Serious Incident Review Board Actions Pending and Subsequent to Incident review, Sexual Incident Review, dated 3.28.2018</li> <li>3. Completed Sexual Assault Incident Reviews (SAIR)</li> </ol> <p>Post Audit</p> <ol style="list-style-type: none"> <li>1. Warden Memorandum, Subject: Sexual Abuse Incident Review, dated 6.16.2022</li> <li>2. Four Completed Last 12 Month SAIR Board Reviews</li> <li>3. SAIR Calendar Invitation for Reoccurring Meetings</li> </ol> <p>Interviews:</p> <ul style="list-style-type: none"> <li>• Deputy Warden of Programs - PREA Compliance Manager</li> </ul> <p>The team on-site were aware of the requirements to document and safeguard investigations. Review of investigations demonstrated sexual abuse incident reviews were not completed for all investigations completed within the last 12 months.</p> <p>Action plans discussed with the PREA Coordinator, Deputy Warden and Warden consisted of:</p> <ul style="list-style-type: none"> <li>• Facility complete sexual abuse incident reviews for all investigations conducted in the past 12 months.</li> <li>• Facility to provide documentation sexual abuse incident reviews have been completed for investigations conducted in the past 12 months.</li> <li>• The facility to provide a memorandum providing sustainable action plan for observations noted during the onsite review.</li> </ul> <p>Post Audit the facility provided the following:</p> <ol style="list-style-type: none"> <li>1. Warden memorandum, Subject: Sexual Abuse Incident Review, addressed to: Whom It May Concern, stating, "Lansing Correctional Facility acknowledges corrections needed implemented regarding PREA Standard 115.86 – Sexual Abuse Incident Review. We have addressed the PREA Auditors observations in the following ways: <ul style="list-style-type: none"> <li>• A PREA calendar has been created to track all necessary incident reviews. The calendar is reoccurring on the 3rd Wednesday of each month at 10:00am-11:00am in the Wardens Conference room, to address any incidents within the last 30 days.</li> <li>• Meeting will include Warden, Deputy Wardens, Major, Classification Administrator, Case Management Administrator, All LCF Enforcement, Apprehension and Investigations staff, agency PCM, Medical/Behavior health.</li> <li>• All finding from the sexual abuse monitoring meeting will be documented in the PREA electronic SAIR form.</li> </ul> </li> </ol> <p>LCF provides assurance by this letter that the action steps listed above will continuously be implemented as an established practice for this facility.</p> <p>Warden Cheeks"</p> <ol style="list-style-type: none"> <li>2. The facility provided four completed incident reviews for the last 12 months' investigations. Reviews document the following information: <ul style="list-style-type: none"> <li>• Date of Incident Review</li> <li>• Case Number</li> <li>• Investigating Agent</li> <li>• Corrections Supervisor II or Above in attendance</li> <li>• Date Incident Was Reported</li> <li>• Date Incident Occurred</li> <li>• PREA Classification</li> <li>• Disposition of Case</li> <li>• Referred for Prosecution</li> <li>• Summary of the Investigation</li> <li>• Consider whether proper notifications were made and in the appropriate timeframes:</li> <li>• Document when the inmates(s) were seen by medical and mental health as well as the conclusion of the assessment by each: <ul style="list-style-type: none"> <li>• Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse:</li> <li>• Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility:</li> </ul> </li> </ul> </li> </ol> |

- Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse:
- Assess the adequacy of staffing levels in that area during different shifts:
- Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff:
- Recommendations:
- Facility plans for implementing recommended action, or facility reasons for not doing so:

(a) The Lansing Correctional Facility PAQ states the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. In the past 12 months there has been six administrative investigations of alleged sexual abuse completed at the facility,

Kansas Department of Corrections, IMPP 12-118D: Serious Incident Review Board Actions Pending and Subsequent to Incident review, Sexual Incident Review, page 4, section III., A. 1., states, "Each facility shall conduct a sexual abuse incident review coordinated by the facility PREA Compliance Manager at the conclusion of every sexual abuse investigation, including those in which the allegation has not been substantiated, unless the allegation has been determined to be unfounded."

(b) The Lansing Correctional Facility PAQ states sexual abuse incident reviews are ordinarily conducted within 30 days of concluding the criminal or administrative investigation.

In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents was six.

Kansas Department of Corrections, IMPP 12-118D: Serious Incident Review Board Actions Pending and Subsequent to Incident review, Sexual Incident Review, page 4, section III., A. 2., states, "Such reviews shall ordinarily occur within 30 days of the conclusion of the investigation."

The facility provided completed Sexual Assault Incident Reviews. Reviews consist of:

- Date of Incident
- Case Number
- Investigating Agent
- Names and Titles of Participants
- Incident Information
- PREA Classification
- Disposition of Case
- Referred for Prosecution
- Comments/Questions
- Summary of the Investigation
- Consider whether proper notifications were made and in appropriate timeframes
- Document when inmate was last seen by medical and mental health and conclusion of visit
- Consider whether the allegation or investigation indicates a need to change policy or practice
- Consider whether the incident was motivated by race, ethnicity, gender identity, gang affiliation or other group dynamics
- Examine the area in the facility where the incident allegedly occurred to assess physical barriers
- Assess the adequacy of staffing levels in that area during different shifts
- Assess whether monitoring of technology should be deployed or augmented to supplement supervision by staff
- Recommendations
- Facility plans for implementing recommended action, or facility reasons for not doing so.

(c) The Lansing Correctional Facility PAQ states the sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.

Kansas Department of Corrections, IMPP 12-118D: Serious Incident Review Board Actions Pending and Subsequent to Incident review, Sexual Incident Review, page 4, section III., B. 1-5., states, "The SAIR team shall include, at a minimum:

1. The PREA Compliance Manager, or other staff designated by the warden/superintendent, as chairperson;
2. The EAI Special Agent Supervisor or EAI Special Agent;
3. A CSII/JCOIII (Lieutenant) or higher;
4. A health care or mental health professional; and
5. Additional staff as appointed by the warden/superintendent."

(d) The Lansing Correctional Facility PAQ states the facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1) -(d)(5) of this section, and any recommendations for improvement and submits such report to the facility head and PREA compliance manager. Practice compliance can be found in provision (b) of this standard.

Kansas Department of Corrections, IMPP 12-118D: Serious Incident Review Board Actions Pending and Subsequent to

Incident review, Sexual Incident Review, page 4, section III., D. 1., states, "The SAIR team shall prepare a report of its findings, including but not necessarily limited to determinations made pursuant to this policy, and any recommendations for improvement.

1. The report shall be submitted to the facility warden/superintendent and KDOC PREA Coordinator within 10 business days of the completion of the review."

(e) The Lansing Correctional Facility PAQ states, the facility implements the recommendations for improvement or documents its reasons for not doing so. Compliance can be found in provision (d) of this standard. Practice compliance can be found in provision (b) of this standard.

Kansas Department of Corrections, IMPP 12-118D: Serious Incident Review Board Actions Pending and Subsequent to Incident review, Sexual Incident Review, page 4, section III., E. 1., states, "The facility shall implement the recommendations for improvement or shall document its reasons for not doing so."

Through such reviews, the facility meets the standard requirements.

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| <b>115.87</b> | <b>Data collection</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> </ol> <p>(a)/(c)-1,2</p> <p>The Lansing Correctional Facility PAQ states the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 11, section V. 1., 3. a. 1-7, "The KDOC PREA Coordinator shall, on an annual basis, review and analyze the aggregated data to assess for compliance with the national PREA standards and to improve the effectiveness of the sexual abuse prevention and intervention program.</p> <p>a. For every allegation of sexual abuse or sexual harassment, ALL documents and items to demonstrate a complete and proper Coordinated Response shall be located entirely in the electronic EAI Case file. The Agent shall upload documents and case information. Documents and processes, gathered or facilitated by the PCM, shall be forwarded electronically to EAI for inclusion in the electronic case file. Documentation should include, but not be limited to:</p> <ol style="list-style-type: none"> <li>1. Investigative Summary and Report.</li> <li>2. Interviews, audio recordings, video recordings, photographs, list of evidence, and all other documents and items respective to the case.</li> <li>3. PREA Checklist.</li> <li>4. S.A.I.R., if appropriate.</li> <li>5. Documentation from Medical/Behavioral Health, investigators, SAFE/ SANE (if applicable).</li> <li>6. Documentation of least restrictive housing. If the victim was involuntarily isolated, shall ensure completion and retention of requirements set forth in IMPP 20-104. (28 C.F.R. §§ 115.68 and 115.368).</li> <li>7. Documentation of monitoring retaliation."</li> </ol> <p>(b) The Lansing Correctional Facility PAQ states the annual report includes a comparison of the current year's data and corrective action from prior years. Policy compliance can be found in provision (a) of this standard.</p> <p>(d) The Lansing Correctional Facility PAQ states the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Policy compliance can be found in provision (a) of this standard.</p> <p>(e) The Lansing Correctional Facility PAQ states yes as the agency does not contract with private facilities. Information can be located at <a href="https://www.doc.ks.gov/facilities/prea/contracts">https://www.doc.ks.gov/facilities/prea/contracts</a></p> <p>(f) The Lansing Correctional Facility PAQ states the Department of Justice has not requested agency data for the previous calendar year.</p> <p>Through such reviews, the facility meets the standard requirements.</p> |



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| 115.88 | <b>Data review for corrective action</b>  |
|        | <p data-bbox="242 145 738 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="242 210 451 239"><b>Auditor Discussion</b></p> <p data-bbox="242 271 435 300">Document Review:</p> <ol data-bbox="242 304 892 432" style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections 2021 Annual PREA Report</li> <li>3. Kansas Department of Corrections 2020 Annual PREA Report</li> <li>4. Kansas Department of Corrections 2019 Annual PREA Report</li> </ol> <p data-bbox="242 463 1477 555">(a) The Lansing Correctional Facility PAQ states the agency reviews data collected and aggregated pursuant to §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training, including:</p> <ul data-bbox="242 562 1437 689" style="list-style-type: none"> <li>• Identifying problem areas;</li> <li>• Taking corrective action on an ongoing basis; and</li> <li>• Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole.</li> </ul> <p data-bbox="242 721 1075 750">The facility provided an Annual Report from 2021. The report includes the following:</p> <p data-bbox="242 781 588 810">Current Status of PREA in Kansas</p> <ul data-bbox="242 815 799 1339" style="list-style-type: none"> <li>• PREA Structure</li> <li>• PREA Vision</li> <li>• PREA Mission</li> <li>• PREA Structure</li> <li>• Facility PREA Compliance Managers</li> <li>• PREA Audits and Governor's Certification Compliance</li> <li>• KDOC Audit Roles and Frequency</li> <li>• Schedule for Third PREA Audit Cycle</li> <li>• PREA Funding</li> <li>• PREA Staff Training</li> <li>• Aggregated Data Compliance</li> <li><input type="checkbox"/> Investigations</li> <li><input type="checkbox"/> Survey of Sexual Violence Definitions</li> <li><input type="checkbox"/> Annual Aggregated Data – Adult</li> <li><input type="checkbox"/> Annual Aggregated Data – Juvenile</li> <li><input type="checkbox"/> Survey of Sexual Violence</li> </ul> <p data-bbox="242 1370 1433 1462">(b) The Lansing Correctional Facility PAQ states the annual report includes a comparison of the current year's data and corrective actions to those from prior years. The annual report provides an assessment of the agency's progress in addressing sexual abuse.</p> <p data-bbox="242 1494 1465 1585">(c) The Lansing Correctional Facility PAQ states the agency makes its annual report readily available to the public, at least annually, through its website. Annual reports are approved by the agency head. The following is the agency website where the annual reports for the last seven years are located is <a href="https://www.doc.ks.gov/facilities/prea">https://www.doc.ks.gov/facilities/prea</a></p> <p data-bbox="242 1617 1481 1709">(d) The Lansing Correctional Facility PAQ states when the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility.</p> <p data-bbox="242 1740 919 1769">Through such reviews, the facility meets the standard requirements.</p> |

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| 115.89 | <b>Data storage, publication, and destruction</b>   |
|        | <b>Auditor Overall Determination:</b> Meets Standard  |
|        | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Lansing Correctional Facility PAQ</li> <li>2. Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, dated 12.20.2016</li> </ol> <p>(a) The Lansing Correctional Facility PAQ states the agency ensures that incident-based and aggregate data are securely retained.</p> <p>Kansas Department of Corrections, IMPP 10-103D: Coordinated Response to Sexual Abuse and Harassment, page 11, section I., 3., states, “</p> <p>(b) The Lansing Correctional Facility PAQ states agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website at <a href="https://www.doc.ks.gov/facilities/prea">https://www.doc.ks.gov/facilities/prea</a></p> <p>(c) The Lansing Correctional Facility PAQ states before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The agency database CaseLog is considered the repository for the aggregate data source for secure retention of all files. These files are never purged and are only viewable by EAI, Deputy Secretaries, Secretary of Corrections and he PREA Coordinator.</p> <p>Through such reviews, the facility meets the standard requirements.</p> |

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| 115.401 | <b>Frequency and scope of audits</b>   |
|         | <b>Auditor Overall Determination:</b> Meets Standard   |
|         | <p data-bbox="244 210 453 237"><b>Auditor Discussion</b></p> <p data-bbox="244 271 1334 297">(a) During the prior three-year audit period, the agency ensured that each facility operated was audited, once.</p> <p data-bbox="244 329 1278 356">(b) This is the third audit cycle for Lansing Correctional Facility and the third year of the third audit cycle.</p> <p data-bbox="244 387 1222 414">(h) The Auditor was granted complete access to, and the ability to observe, all areas of the facility.</p> <p data-bbox="244 445 1414 506">(i) The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p data-bbox="244 537 987 564">(m) The Auditor was permitted to conduct private interviews with residents.</p> <p data-bbox="244 595 1490 656">(n) Residents permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p> <p data-bbox="244 687 884 714">Through such reviews, the facility meets standard requirements.</p> |

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| 115.403 | <b>Audit contents and findings</b>  |
|         | <b>Auditor Overall Determination:</b> Meets Standard  |
|         | <b>Auditor Discussion</b>   |
|         | <p>(b) The agency has posted the current 2019 PREA audit report, on their website.</p> <p>Through such reviews, the facility meets standard requirements.</p> |

| <b>Appendix: Provision Findings</b> |   |     |
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| <b>115.11 (a)</b>                   | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>   |     |
|                                     | Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?  | yes |
|                                     | Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?   | yes |
| <b>115.11 (b)</b>                   | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>   |     |
|                                     | Has the agency employed or designated an agency-wide PREA Coordinator?  | yes |
|                                     | Is the PREA Coordinator position in the upper-level of the agency hierarchy?  | yes |
|                                     | Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?  | yes |
| <b>115.11 (c)</b>                   | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>   |     |
|                                     | If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)   | yes |
|                                     | Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)   | yes |
| <b>115.12 (a)</b>                   | <b>Contracting with other entities for the confinement of inmates</b>   |     |
|                                     | If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | yes |
| <b>115.12 (b)</b>                   | <b>Contracting with other entities for the confinement of inmates</b>   |     |
|                                     | Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)   | yes |

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| <b>115.13 (a)</b> | <b>Supervision and monitoring</b>   |     |
|                   | Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?  | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)? | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?  | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?  | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?  | yes |
| <b>115.13 (b)</b> | <b>Supervision and monitoring</b>   |     |
|                   | In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)  | yes |
| <b>115.13 (c)</b> | <b>Supervision and monitoring</b>   |     |
|                   | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?                       | yes |
|                   | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?       | yes |
|                   | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?   | yes |

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| <b>115.13 (d)</b> | <b>Supervision and monitoring</b>   |     |
|                   | Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?  | yes |
|                   | Is this policy and practice implemented for night shifts as well as day shifts?   | yes |
|                   | Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?  | yes |
| <b>115.14 (a)</b> | <b>Youthful inmates</b>   |     |
|                   | Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).) | yes |
| <b>115.14 (b)</b> | <b>Youthful inmates</b>   |     |
|                   | In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)   | na  |
|                   | In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)  | na  |
| <b>115.14 (c)</b> | <b>Youthful inmates</b>   |     |
|                   | Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)   | no  |
|                   | Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)  | no  |
|                   | Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)  | no  |
| <b>115.15 (a)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?   | yes |
| <b>115.15 (b)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)   | na  |
|                   | Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)  | na  |
| <b>115.15 (c)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  | yes |
|                   | Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?   | na  |

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| <b>115.15 (d)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?   | yes |
|                   | Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? | yes |
|                   | Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?   | yes |
| <b>115.15 (e)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?  | yes |
|                   | If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?          | yes |
| <b>115.15 (f)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?   | yes |
|                   | Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?   | yes |



| 115.16 (a) | Inmates with disabilities and inmates who are limited English proficient   |     |
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|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?                           | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?                          | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?                        | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?                         | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?                              | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.) | yes |
|            | Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?  | yes |
|            | Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?   | yes |
|            | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?   | yes |
|            | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?  | yes |
|            | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?   | yes |
| 115.16 (b) | Inmates with disabilities and inmates who are limited English proficient   |     |
|            | Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?  | yes |
|            | Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?   | yes |

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| <b>115.16 (c)</b> | <b>Inmates with disabilities and inmates who are limited English proficient</b>   |     |
|                   | Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? | yes |
| <b>115.17 (a)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?   | yes |
|                   | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?                                | yes |
|                   | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?   | yes |
|                   | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?  | yes |
|                   | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?                     | yes |
|                   | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?  | yes |
| <b>115.17 (b)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?   | yes |
|                   | Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?  | yes |
| <b>115.17 (c)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?   | yes |
|                   | Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?                    | yes |
| <b>115.17 (d)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?  | yes |
| <b>115.17 (e)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?  | yes |

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| <b>115.17 (f)</b> | <b>Hiring and promotion decisions</b>  |     |
|                   | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?   | yes |
|                   | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?  | yes |
|                   | Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?   | yes |
| <b>115.17 (g)</b> | <b>Hiring and promotion decisions</b>  |     |
|                   | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?  | yes |
| <b>115.17 (h)</b> | <b>Hiring and promotion decisions</b>  |     |
|                   | Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)   | yes |
| <b>115.18 (a)</b> | <b>Upgrades to facilities and technologies</b>   |     |
|                   | If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)        | yes |
| <b>115.18 (b)</b> | <b>Upgrades to facilities and technologies</b>   |     |
|                   | If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)                  | yes |
| <b>115.21 (a)</b> | <b>Evidence protocol and forensic medical examinations</b>   |     |
|                   | If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  | yes |
| <b>115.21 (b)</b> | <b>Evidence protocol and forensic medical examinations</b>   |     |
|                   | Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  | na  |
|                   | Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |

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| <b>115.21 (c)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                   | Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?   | yes |
|                   | Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?  | yes |
|                   | If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?  | yes |
|                   | Has the agency documented its efforts to provide SAFEs or SANEs?  | yes |
| <b>115.21 (d)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                   | Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?  | yes |
|                   | If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)   | yes |
|                   | Has the agency documented its efforts to secure services from rape crisis centers?  | yes |
| <b>115.21 (e)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                   | As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?   | yes |
|                   | As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?  | yes |
| <b>115.21 (f)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                   | If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)  | na  |
| <b>115.21 (h)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                   | If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.) | yes |
| <b>115.22 (a)</b> | <b>Policies to ensure referrals of allegations for investigations</b>   |     |
|                   | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?  | yes |
|                   | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?   | yes |

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| <b>115.22 (b)</b> | <b>Policies to ensure referrals of allegations for investigations</b>  |     |
|                   | Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? | yes |
|                   | Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  | yes |
|                   | Does the agency document all such referrals?   | yes |
| <b>115.22 (c)</b> | <b>Policies to ensure referrals of allegations for investigations</b>  |     |
|                   | If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)                                 | na  |
| <b>115.31 (a)</b> | <b>Employee training</b>   |     |
|                   | Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?   | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?   | yes |
|                   | Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?  | yes |
|                   | Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?  | yes |
|                   | Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  | yes |
|                   | Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?   | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?   | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?  | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?   | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?   | yes |
| <b>115.31 (b)</b> | <b>Employee training</b>   |     |
|                   | Is such training tailored to the gender of the inmates at the employee's facility?   | yes |
|                   | Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?  | yes |

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| <b>115.31 (c)</b> | <b>Employee training</b>  |     |
|                   | Have all current employees who may have contact with inmates received such training?  | yes |
|                   | Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?  | yes |
|                   | In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?  | yes |
| <b>115.31 (d)</b> | <b>Employee training</b>  |     |
|                   | Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?   | yes |
| <b>115.32 (a)</b> | <b>Volunteer and contractor training</b>  |     |
|                   | Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?   | yes |
| <b>115.32 (b)</b> | <b>Volunteer and contractor training</b>  |     |
|                   | Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? | yes |
| <b>115.32 (c)</b> | <b>Volunteer and contractor training</b>  |     |
|                   | Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?   | yes |
| <b>115.33 (a)</b> | <b>Inmate education</b>   |     |
|                   | During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?   | yes |
|                   | During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?  | yes |
| <b>115.33 (b)</b> | <b>Inmate education</b>   |     |
|                   | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?  | yes |
|                   | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?  | yes |
|                   | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?  | yes |
| <b>115.33 (c)</b> | <b>Inmate education</b>   |     |
|                   | Have all inmates received the comprehensive education referenced in 115.33(b)?  | yes |
|                   | Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?  | yes |

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| <b>115.33 (d)</b> | <b>Inmate education</b>   |     |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?   | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?   | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?  | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?   | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?  | yes |
| <b>115.33 (e)</b> | <b>Inmate education</b>   |     |
|                   | Does the agency maintain documentation of inmate participation in these education sessions?   | yes |
| <b>115.33 (f)</b> | <b>Inmate education</b>   |     |
|                   | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?   | yes |
| <b>115.34 (a)</b> | <b>Specialized training: Investigations</b>   |     |
|                   | In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| <b>115.34 (b)</b> | <b>Specialized training: Investigations</b>   |     |
|                   | Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  | yes |
|                   | Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  | yes |
|                   | Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  | yes |
|                   | Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)   | yes |
| <b>115.34 (c)</b> | <b>Specialized training: Investigations</b>   |     |
|                   | Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  | yes |

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| <b>115.35 (a)</b> | <b>Specialized training: Medical and mental health care</b>   |     |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)                           | yes |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  | yes |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)      | yes |
| <b>115.35 (b)</b> | <b>Specialized training: Medical and mental health care</b>   |     |
|                   | If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)  | na  |
| <b>115.35 (c)</b> | <b>Specialized training: Medical and mental health care</b>   |     |
|                   | Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  | yes |
| <b>115.35 (d)</b> | <b>Specialized training: Medical and mental health care</b>   |     |
|                   | Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)  | yes |
|                   | Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)   | yes |
| <b>115.41 (a)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                   | Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?  | yes |
|                   | Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?   | yes |
| <b>115.41 (b)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                   | Do intake screenings ordinarily take place within 72 hours of arrival at the facility?  | yes |
| <b>115.41 (c)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                   | Are all PREA screening assessments conducted using an objective screening instrument?   | yes |



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| <b>115.41 (d)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?   | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?  | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?   | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?  | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?  | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?  | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?   | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?   | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?  | no  |
| <b>115.41 (e)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?  | yes |
|                   | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?  | yes |
|                   | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?   | yes |
| <b>115.41 (f)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?  | yes |

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| <b>115.41 (g)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | Does the facility reassess an inmate's risk level when warranted due to a referral?  | yes |
|                   | Does the facility reassess an inmate's risk level when warranted due to a request?   | yes |
|                   | Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?   | yes |
|                   | Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?  | yes |
| <b>115.41 (h)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?  | yes |
| <b>115.41 (i)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?   | yes |
| <b>115.42 (a)</b> | <b>Use of screening information</b>  |     |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?   | yes |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?   | yes |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?  | yes |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?   | yes |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?   | yes |
| <b>115.42 (b)</b> | <b>Use of screening information</b>  |     |
|                   | Does the agency make individualized determinations about how to ensure the safety of each inmate?  | yes |
| <b>115.42 (c)</b> | <b>Use of screening information</b>  |     |
|                   | When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? | yes |
|                   | When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?   | yes |

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| <b>115.42 (d)</b> | <b>Use of screening information</b>  |     |
|                   | Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?   | yes |
| <b>115.42 (e)</b> | <b>Use of screening information</b>  |     |
|                   | Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?  | yes |
| <b>115.42 (f)</b> | <b>Use of screening information</b>  |     |
|                   | Are transgender and intersex inmates given the opportunity to shower separately from other inmates?  | yes |
| <b>115.42 (g)</b> | <b>Use of screening information</b>  |     |
|                   | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) | yes |
|                   | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)                | yes |
|                   | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)                   | yes |
| <b>115.43 (a)</b> | <b>Protective Custody</b>  |     |
|                   | Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?  | yes |
|                   | If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?   | yes |

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| <b>115.43 (b)</b> | <b>Protective Custody</b>  |     |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?   | yes |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?   | yes |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?  | yes |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?   | yes |
|                   | If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
|                   | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)               | yes |
|                   | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)             | yes |
| <b>115.43 (c)</b> | <b>Protective Custody</b>  |     |
|                   | Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?   | yes |
|                   | Does such an assignment not ordinarily exceed a period of 30 days?   | yes |
| <b>115.43 (d)</b> | <b>Protective Custody</b>  |     |
|                   | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?   | yes |
|                   | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?  | yes |
| <b>115.43 (e)</b> | <b>Protective Custody</b>  |     |
|                   | In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?      | yes |
| <b>115.51 (a)</b> | <b>Inmate reporting</b>  |     |
|                   | Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?  | yes |
|                   | Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?  | yes |
|                   | Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?  | yes |

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| <b>115.51 (b)</b> | <b>Inmate reporting</b>   |     |
|                   | Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?   | yes |
|                   | Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  | yes |
|                   | Does that private entity or office allow the inmate to remain anonymous upon request?   | yes |
|                   | Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)   | na  |
| <b>115.51 (c)</b> | <b>Inmate reporting</b>   |     |
|                   | Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?   | yes |
|                   | Does staff promptly document any verbal reports of sexual abuse and sexual harassment?  | yes |
| <b>115.51 (d)</b> | <b>Inmate reporting</b>   |     |
|                   | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?   | yes |
| <b>115.52 (a)</b> | <b>Exhaustion of administrative remedies</b>  |     |
|                   | Is the agency exempt from this standard?<br>NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. | yes |
| <b>115.52 (b)</b> | <b>Exhaustion of administrative remedies</b>  |     |
|                   | Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)   | yes |
|                   | Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)  | yes |
| <b>115.52 (c)</b> | <b>Exhaustion of administrative remedies</b>  |     |
|                   | Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)   | yes |
|                   | Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  | yes |

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| <b>115.52 (d)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                   | Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)   | yes |
|                   | If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)  | yes |
|                   | At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)  | yes |
| <b>115.52 (e)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                   | Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)  | yes |
|                   | Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) | yes |
|                   | If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)   | yes |
| <b>115.52 (f)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                   | Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  | yes |
|                   | After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)   | yes |
|                   | After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)   | yes |
|                   | After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)  | yes |
|                   | Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  | yes |
|                   | Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  | yes |
|                   | Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)   | yes |
| <b>115.52 (g)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                   | If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)   | yes |

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| <b>115.53 (a)</b> | <b>Inmate access to outside confidential support services</b>   |     |
|                   | Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?     | no  |
|                   | Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.) | na  |
|                   | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?  | no  |
| <b>115.53 (b)</b> | <b>Inmate access to outside confidential support services</b>   |     |
|                   | Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?  | yes |
| <b>115.53 (c)</b> | <b>Inmate access to outside confidential support services</b>   |     |
|                   | Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?  | yes |
|                   | Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?  | yes |
| <b>115.54 (a)</b> | <b>Third-party reporting</b>  |     |
|                   | Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?   | yes |
|                   | Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?   | yes |
| <b>115.61 (a)</b> | <b>Staff and agency reporting duties</b>  |     |
|                   | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?  | yes |
|                   | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?   | yes |
|                   | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?                                      | yes |
| <b>115.61 (b)</b> | <b>Staff and agency reporting duties</b>  |     |
|                   | Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?              | yes |

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| <b>115.61 (c)</b> | <b>Staff and agency reporting duties</b>  |     |
|                   | Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?  | yes |
|                   | Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?   | yes |
| <b>115.61 (d)</b> | <b>Staff and agency reporting duties</b>  |     |
|                   | If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?  | yes |
| <b>115.61 (e)</b> | <b>Staff and agency reporting duties</b>  |     |
|                   | Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?  | yes |
| <b>115.62 (a)</b> | <b>Agency protection duties</b>   |     |
|                   | When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?   | yes |
| <b>115.63 (a)</b> | <b>Reporting to other confinement facilities</b>  |     |
|                   | Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?  | yes |
| <b>115.63 (b)</b> | <b>Reporting to other confinement facilities</b>  |     |
|                   | Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?   | yes |
| <b>115.63 (c)</b> | <b>Reporting to other confinement facilities</b>  |     |
|                   | Does the agency document that it has provided such notification?  | yes |
| <b>115.63 (d)</b> | <b>Reporting to other confinement facilities</b>  |     |
|                   | Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?  | yes |
| <b>115.64 (a)</b> | <b>Staff first responder duties</b>   |     |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?   | yes |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?  | yes |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?     | yes |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? | yes |



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| <b>115.64 (b)</b> | <b>Staff first responder duties</b>   |     |
|                   | If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?  | yes |
| <b>115.65 (a)</b> | <b>Coordinated response</b>   |     |
|                   | Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?   | yes |
| <b>115.66 (a)</b> | <b>Preservation of ability to protect inmates from contact with abusers</b>   |     |
|                   | Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? | no  |
| <b>115.67 (a)</b> | <b>Agency protection against retaliation</b>  |     |
|                   | Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?  | yes |
|                   | Has the agency designated which staff members or departments are charged with monitoring retaliation?   | yes |
| <b>115.67 (b)</b> | <b>Agency protection against retaliation</b>  |     |
|                   | Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?   | yes |

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| <b>115.67 (c)</b> | <b>Agency protection against retaliation</b>  |     |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?          | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?  | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?  | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?   | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?   | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?  | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?   | yes |
|                   | Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?  | yes |
| <b>115.67 (d)</b> | <b>Agency protection against retaliation</b>  |     |
|                   | In the case of inmates, does such monitoring also include periodic status checks?   | yes |
| <b>115.67 (e)</b> | <b>Agency protection against retaliation</b>  |     |
|                   | If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?   | yes |
| <b>115.68 (a)</b> | <b>Post-allegation protective custody</b>   |     |
|                   | Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?   | yes |
| <b>115.71 (a)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                   | When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)  | yes |
|                   | Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)   | yes |

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| <b>115.71 (b)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?  | yes |
| <b>115.71 (c)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?   | yes |
|                   | Do investigators interview alleged victims, suspected perpetrators, and witnesses?   | yes |
|                   | Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?  | yes |
| <b>115.71 (d)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?   | yes |
| <b>115.71 (e)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?   | yes |
|                   | Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?   | yes |
| <b>115.71 (f)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?   | yes |
|                   | Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?  | yes |
| <b>115.71 (g)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?   | yes |
| <b>115.71 (h)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?   | yes |
| <b>115.71 (i)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?   | yes |
| <b>115.71 (j)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?   | yes |
| <b>115.71 (l)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) | na  |

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| <b>115.72 (a)</b> | <b>Evidentiary standard for administrative investigations</b>  |     |
|                   | Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?   | yes |
| <b>115.73 (a)</b> | <b>Reporting to inmates</b>  |     |
|                   | Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?  | yes |
| <b>115.73 (b)</b> | <b>Reporting to inmates</b>  |     |
|                   | If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)  | na  |
| <b>115.73 (c)</b> | <b>Reporting to inmates</b>  |     |
|                   | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?  | yes |
|                   | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?   | yes |
|                   | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?      | yes |
|                   | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? | yes |
| <b>115.73 (d)</b> | <b>Reporting to inmates</b>  |     |
|                   | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?  | yes |
|                   | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?   | yes |
| <b>115.73 (e)</b> | <b>Reporting to inmates</b>  |     |
|                   | Does the agency document all such notifications or attempted notifications?  | yes |
| <b>115.76 (a)</b> | <b>Disciplinary sanctions for staff</b>  |     |
|                   | Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?   | yes |
| <b>115.76 (b)</b> | <b>Disciplinary sanctions for staff</b>  |     |
|                   | Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?   | yes |

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| <b>115.76 (c)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                   | Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? | yes |
| <b>115.76 (d)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                   | Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?  | yes |
|                   | Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?   | yes |
| <b>115.77 (a)</b> | <b>Corrective action for contractors and volunteers</b>   |     |
|                   | Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?  | yes |
|                   | Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?  | yes |
|                   | Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?  | yes |
| <b>115.77 (b)</b> | <b>Corrective action for contractors and volunteers</b>   |     |
|                   | In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?  | yes |
| <b>115.78 (a)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?   | yes |
| <b>115.78 (b)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?  | yes |
| <b>115.78 (c)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?  | yes |
| <b>115.78 (d)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?   | no  |
| <b>115.78 (e)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?   | yes |

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| <b>115.78 (f)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?   | yes |
| <b>115.78 (g)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)  | yes |
| <b>115.81 (a)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).              | yes |
| <b>115.81 (b)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)                            | yes |
| <b>115.81 (c)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).                  | yes |
| <b>115.81 (d)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? | yes |
| <b>115.81 (e)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?   | yes |
| <b>115.82 (a)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                   | Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?   | yes |
| <b>115.82 (b)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                   | If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?   | yes |
|                   | Do security staff first responders immediately notify the appropriate medical and mental health practitioners?  | yes |

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| <b>115.82 (c)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                   | Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?  | yes |
| <b>115.82 (d)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                   | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  | yes |
| <b>115.83 (a)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?  | yes |
| <b>115.83 (b)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?  | yes |
| <b>115.83 (c)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Does the facility provide such victims with medical and mental health services consistent with the community level of care?   | yes |
| <b>115.83 (d)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)   | na  |
| <b>115.83 (e)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | na  |
| <b>115.83 (f)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?   | yes |
| <b>115.83 (g)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  | yes |
| <b>115.83 (h)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)   | yes |
| <b>115.86 (a)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?   | yes |

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| <b>115.86 (b)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does such review ordinarily occur within 30 days of the conclusion of the investigation?  | yes |
| <b>115.86 (c)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?   | yes |
| <b>115.86 (d)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?   | yes |
|                   | Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? | yes |
|                   | Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?  | yes |
|                   | Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  | yes |
|                   | Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  | yes |
|                   | Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?     | yes |
| <b>115.86 (e)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does the facility implement the recommendations for improvement, or document its reasons for not doing so?  | yes |
| <b>115.87 (a)</b> | <b>Data collection</b>  |     |
|                   | Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?  | yes |
| <b>115.87 (b)</b> | <b>Data collection</b>  |     |
|                   | Does the agency aggregate the incident-based sexual abuse data at least annually?   | yes |
| <b>115.87 (c)</b> | <b>Data collection</b>  |     |
|                   | Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?  | yes |
| <b>115.87 (d)</b> | <b>Data collection</b>  |     |
|                   | Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?  | yes |
| <b>115.87 (e)</b> | <b>Data collection</b>  |     |
|                   | Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)  | yes |
| <b>115.87 (f)</b> | <b>Data collection</b>  |     |
|                   | Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)  | yes |



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| <b>115.88 (a)</b>  | <b>Data review for corrective action</b>   |     |
|                    | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?   | yes |
|                    | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?  | yes |
|                    | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? | yes |
| <b>115.88 (b)</b>  | <b>Data review for corrective action</b>   |     |
|                    | Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?  | yes |
| <b>115.88 (c)</b>  | <b>Data review for corrective action</b>   |     |
|                    | Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?   | yes |
| <b>115.88 (d)</b>  | <b>Data review for corrective action</b>   |     |
|                    | Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?  | yes |
| <b>115.89 (a)</b>  | <b>Data storage, publication, and destruction</b>  |     |
|                    | Does the agency ensure that data collected pursuant to § 115.87 are securely retained?   | yes |
| <b>115.89 (b)</b>  | <b>Data storage, publication, and destruction</b>  |     |
|                    | Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?  | yes |
| <b>115.89 (c)</b>  | <b>Data storage, publication, and destruction</b>  |     |
|                    | Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?   | yes |
| <b>115.89 (d)</b>  | <b>Data storage, publication, and destruction</b>  |     |
|                    | Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?  | yes |
| <b>115.401 (a)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)                                      | yes |

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| <b>115.401 (b)</b> | <b>Frequency and scope of audits</b>  |     |
|                    | Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)   | no  |
|                    | If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)   | na  |
|                    | If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)  | yes |
| <b>115.401 (h)</b> | <b>Frequency and scope of audits</b>  |     |
|                    | Did the auditor have access to, and the ability to observe, all areas of the audited facility?  | yes |
| <b>115.401 (i)</b> | <b>Frequency and scope of audits</b>  |     |
|                    | Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?  | yes |
| <b>115.401 (m)</b> | <b>Frequency and scope of audits</b>  |     |
|                    | Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?   | yes |
| <b>115.401 (n)</b> | <b>Frequency and scope of audits</b>  |     |
|                    | Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?   | yes |
| <b>115.403 (f)</b> | <b>Audit contents and findings</b>  |     |
|                    | The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.) | yes |