

# PREA AUDIT: AUDITOR'S SUMMARY REPORT

## ADULT PRISONS & JAILS



[Following information to be populated automatically from pre-audit questionnaire]	
Name of facility: Ellsworth Correctional Facility	
Physical Address: 1607 State Street Ellsworth Kansas 67439	
Date report submitted:	
<b>Auditor Information</b>	
Address: 1550 L Street Fort Dodge IA 50501	
E-Mail: Leslie. <a href="mailto:Wagers@lowa.gov">Wagers@lowa.gov</a>	
Telephone number: 515-574-4732	
Date of facility visit: 6-23-15	
<b>Facility Information</b>	
Facility mailing address: (if different from above) PO Box 107 Ellsworth Kansas 67439	
Telephone number: 785-472-5501	
The facility is:	
<input type="checkbox"/> Military <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Private for profit <input type="checkbox"/> Municipal <input checked="" type="checkbox"/> State <input type="checkbox"/> Private not for profit	
Facility Type: <input type="checkbox"/> Jail <input checked="" type="checkbox"/> Prison	
Name of PREA Compliance Manager: Marty Sauers                      Title: Deputy Warden	
E-Mail Address: Marty.Sauers@doc.ks.gov                      Phone Number: 785-472-6201	
<b>Agency Information</b>	
Name of agency: Kansas Department of Corrections	
Governing authority or parent agency: (if applicable) State of Kansas	
Physical address: 714 SW Jackson Suite 300 Topeka, Kansas 66603-3722	
Mailing address: (if different from above)	
Telephone Number: 785-231-1111 of 800-311-0806	
<b>Agency Chief Executive Officer</b>	
Name: Ray Roberts                      Title: Secretary of Corrections	
E-Mail Address: Ray.Roberts@doc.ks.gov                      Telephone Number: 785-296-3310	
<b>Agency-Wide PREA Coordinator</b>	
Name: Elisabeth Copeland                      Title: Corrections Manager II	
E-Mail Address: Elisabeth.Copeland.doc.ks.gov                      Telephone Number: 785-296-4431	

# AUDIT FINDINGS

## NARRATIVE:

The site visit for PREA audit of the Ellsworth Correctional Facility (ECF) was conducted on June 23-25, to determine compliance with the Prison Rape Elimination Act standards finalized August 2012.

The facility houses special management, maximum, high medium, low medium and minimum custody inmates. The facility has a total of 28 buildings and the inmate population at the time of the audit was 897. The age range of the population is 18-67 years of age. There is 393.5 staff including volunteers and contractors, working throughout the facility.

There are 305 total cameras throughout the facility to enhance staff coverage.

During the on-site audit, the auditors toured the facility and conducted formal staff and inmate interviews.

The auditor's interviewed, random inmates from the facility (10 random inmates from all of the housing units, including one limited English speaking, one self-identified gay inmates, one who had made prior sexual abuse allegations and two from the specialized housing unit). At least 12 other inmates were informally interviewed by the auditor's during the tour. In addition, the auditor questioned 22 staff (11 specialized staff and 10 random Correctional Officers from each shift), about PREA training, how to report, to whom to report, filing reports, available interventions, conducting interviews, evidence collection, follow up, and monitoring retaliation. Specialized staff interviewed included the Warden, PREA compliance manager/Classification Director, Deputy Warden, Human Resources Associate, Major Correctional Counselors, Unit Managers, Nursing staff, Dentist, Captain's, Wardens Secretary. And I&I staff and their secretary.

## DESCRIPTION OF FACILITY CHARACTERISTICS

The Ellsworth Correctional Facility (ECF) is located at 1607 State Street, Ellsworth, Kansas 67439. The facility was approved for construction by the 1986 Legislature and was designed to house 226 minimum-custody inmates on a 68.6-acre site. Since then, ECF has expanded and the Central Unit currently provides housing for 832 multi-custody adult male inmates. In 2012, ECF added the 11-acre East Unit located at 1655 Avenue K in Ellsworth, (approximately 2.5 miles from the main compound), which includes 95 minimum-custody beds.

Ellsworth Correctional Facility's mission is to safely and effectively contain and supervise inmates, while also providing for community, employee and inmate safety.

The facility houses special management, maximum, high medium, low medium and minimum custody inmates. The facility has a total of 28 buildings and the inmate population at the time of the audit was 897. The age range of the population is 18-67 years of age. There is 393.5 staff including volunteers and contractors, working throughout the facility.

There are 305 total cameras throughout the facility to enhance staff coverage.

Spiritual Life Center (SCL): Chaplaincy Services are designed to assist inmates affiliated with all recognized faith groups/denominations to achieve individual spiritual growth. Inmates are afforded opportunities to participate in their primary worship service and any special services/activities open to the general population. Various counseling services are also available including individual, marriage, parenting, crisis, grieving and spiritual counseling.

The SLC also provides space to expand support group activities such as Jaycees, Alcohols/Narcotics Anonymous, Master Life, Experiencing God and Making Peace With Your Past.

ECF offers offenders opportunities through the following programs:

Barton Community College Vocational Homebuilding Program Manufacturing Skills Certification (MSC): Welding, Plumbing, Internet and Computing Core Certification, GED Instruction/Testing, Work Ready Instruction/Testing, Inmate Responsibility and Accountability Model (RAM) Training, Bicycle Refurbishing Program, Community Access Network (CAN), Inc., Wheels for the World, Canine Assistance Rehabilitation Education and Services (CARES), Inc., Work Programs

#### Summary of findings:

When the on-site audit was completed, an exit meeting was held. With the following ECF staff.

Dan Schnurr, Warden

Marty Sauers, Deputy Warden / PREA Compliance Manager

Todd Britton, Correctional Facilities Specialist / Alternate PCM

Robert Murrell, Chief of Security

Jina Murrell, Human Resource Manager

Peggy Steimel, Administrative Specialist – Warden's Office

While I could not give the facility a final finding, I gave an overview of the audit and thanked the Ellsworth Correctional Facility staff for their hard work and commitment to the Prison Rape Elimination Act.

Number of standards exceeded: 3

Number of standards met: 41

Number of standards not met: 0

Not Applicable: 1

115.11	ZERO TOLERANCE OF SEXUAL ABUSE AND SEXUAL HARASSMENT; PREA COORDINATOR
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<p><b>IMPP10-103D, Policy Statement,</b></p> <p>The agency wide PREA coordinator has developed an excellent system for all agency efforts to meet the standards. She assists the PREA compliance manager at the facility and ensures they have the resources that they need. A PREA Database has been developed to include documentation from Initial Report through the Incident Review.</p>	

115.12	CONTRACTING WITH OTHER ENTITIES FOR THE CONFINEMENT OF INMATES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<p><b>IMPP10-103D, Policy Statement,</b></p> <p><b>MOU in place to house juvenile offenders. KDOC has contracts with North Dakota Intergovernmental Agreement; Nebraska Intergovernmental Agreement; and Butler County Jail.</b></p>	

115.13	SUPERVISION AND MONITORING
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<p><b>IMPP12-137D Staffing Analysis, Operational Staffing and Rooster Management; and EFC GO 20-101.</b></p> <p>Warden reviews the institutional staffing plan annually and ensures that there is always the proper staffing level.</p> <p>Documentation of unannounced rounds that cover all shifts was reviewed. The video camera system consists of 305 cameras with digital recording. In addition, they have had two staff trained to be PREA auditors to use their expertise in ensuring that they are meeting all the standards for PREA.</p>	

115.14	YOUTHFUL INMATES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
NA	

115.15	LIMITS TO CROSS GENDER VIEWING AND SEARCHES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>IMPP-10-103D, IMPP-12-103, ECF Living Unit 3 Post Order.</b> The facility is an all-male population.  Staff is all trained on conducting strip searches of transgender and intersex inmates in a professional manner. The curriculum and training records were reviewed.	

115.16	INMATES WITH DISABILITIES AND INMATES WHO ARE LIMITED ENGLISH PROFICIENT
<input checked="" type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>IMPP 10-103D; IMPP-01-103 Rule book distribution and translation, IMPP 10-138; Brochure in English and Spanish.</b> ECF takes appropriate steps to ensure inmates with disabilities and inmates with limited English proficiency have an opportunity to participate in and benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. PREA handouts and inmate handbooks are in English and Spanish. Offender Intake ensures compliance with this standard. ECF has staff that is proficient in Spanish and signing for the deaf.	

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

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

**IMPP 02-126D**

Based on interviews with HR this standard Exceeds requirement. Policies and Operating procedures to meet this standard IMPP 02-126D. Background checks on staff and contractors are current; brochures for new staff exceed expectation for new employees.

The KDOC conducts background checks at least every five years for employees.

Volunteers have a new schedule for background checks which is now in policy.

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

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

**IMPP 01-123D, Site plan**

**ECF has a 5 year upgrade to facility plan**

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

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

**KDOC EAI Investigative Protocol Manual, June 2011; KSA 65 448; MOU with Domestic Violence Association of Central Kansas; IMPP 10-103D; IMPP 22-103; ECF GO 20-101 Inmate Sexual Assault Prevention-Intervention**

The ECF healthcare staff follows the institution's written plan for responding to allegations of sexual assault of inmates. Investigators also use a thorough PREA Investigation Checklist to ensure all policies and procedures are followed. The assaulted inmate is transported to the Salina Regional Medical Center Emergency Room which is properly equipped to assess (i.e. SANE Nurse), treat, provide required prophylaxis, and gathers forensic evidence. In addition the Crisis Intervention Services will be contacted to request an advocate to be sent to accompany the inmate. They have detailed Memo of Understandings with the service providers and law enforcement to help clarify

responsibilities.. Healthcare staff is not involved in the management or treatment of sexual assault cases unless it is necessary to stabilize the inmate before the transfer to the appropriate community facility. Policies and interviews with investigators, medical and mental health staff support the compliance with this standard. There were no allegations over this report period where forensic medical exams were required.

115.22	POLICIES TO ENSURE REFERRALS OF ALLEGATIONS FOR INVESTIGATIONS
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>IMPP 22-103 Investigative Procedures; KDOC 10-103D;          ECF GO 20-101 Inmate Sexual Assault Prevention-Intervention</b>	

115.31	EMPLOYEE TRAINING
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>KDOC IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; KDOC IMPP 03-104D Minimum Departmental Training Standards.</b> The training curriculum and training records. All staff interviewed indicated that they received the required PREA training.	

115.32	VOLUNTEER AND CONTRACTOR TRAINING
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>KDOC IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; KDOC IMPP 03-104D Minimum Departmental Training Standards; IMPP 13-101D Volunteering; IMPP 02-118 Employee and Volunteer Rules of Conduct and Undue Familiarity; ECF Volunteer Brochure.</b> Reviewed contractor and volunteer sign-in sheets for training received	



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115.33	INMATE EDUCATION
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard)	
<input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
<input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment</b> PREA Posters are displayed throughout the facility in prominent areas with the address to contact to report abuse. In addition, they can send a staff message or letter to the institution Warden via a Kiosk system. The facility inmate handbook covers the PREA information. All inmates receive a PREA Orientation upon arrival at the facility and how to report sexual harassment or abuse, A Guide for Offender Conduct. Within 24 hours of arrival a comprehensive education is provided on additional PREA information which includes a video. These sessions are all documented with the inmate's signature that they have received and understand the information.	

115.34	SPECIALIZED TRAINING: INVESTIGATIONS
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard)	
<input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
<input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment ; IMPP 22-103; ECF Investigator certificates</b> Investigators have received specialized training developed by KDOC for conducting sexual abuse investigations and crime scene preservation.	

115.35	SPECIALIZED TRAINING: MEDICAL AND MENTAL HEALTH CARE
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard)	
<input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
<input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>IMPP 10-103D ; Coordinated Response to Sexual Abuse and Harassment; Memo for 115.35 Forensic</b>	

**Medical Examinations.**

All medical and mental health staff has received specialized on PREA Addressing Sexual Abuse and Harassment of inmates. This training includes issues on victim identification, interviewing, reporting, and interventions for medical and mental health staff. Interviews with the medical and mental health staff confirmed the training was received.

115.41

**SCREENING FOR RISK OF VICTIMIZATION AND ABUSIVENESS**

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

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

**IMPP10-139 Internal Classification Checklist; IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; ECF GO 20-101 Inmate Sexual Assault Prevention-Intervention**

All offenders newly admitted have an internal classification review, –Intake Screening Tool completed by the classification administrator before transfer to another facility. Within 72 hours, they will reassess the offender’s Internal Classification Instrument code based upon any additional, relevant information received by the institution. This was verified through interviews with the staff.

115.42

**USE OF SCREENING INFORMATION**

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

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

**IMPP 11-106 Case Management; IMPP 10-139 Screening for Sexual Victimization and Abusiveness; ECF GO 20-101 Inmate Sexual Assault Prevention-Intervention**

The facility uses the screening information to determine housing, bed, work, education, and program assignment with the goal of keeping inmates at high risks of being sexually victimized separate from those at high risks of being sexually abusive. Housing and program assignments are done on a case by case basis. They have a thorough system for collecting this information and providing continued re-assessment and follow-up services if needed. Placement and programming assignments for transgender and intersex inmates are reassessed at least twice a year. Operating procedures address how the information from the Internal Classification Instrument code will be used.

115.43	PROTECTIVE CUSTODY
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>IMPP 20-106 Segregation Review Board; IMPP 20-105 Segregation and Documentation; IMPP 20-104 Purpose of Administration Segregation and Appropriate Placements; IMPP 20-101 Minimum Standards for the Operation of Segregation Units; IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; IMPP 20-108 Protective Custody.</b> Agency policies ,Administrative Segregation and Protective Custody Segregation meet this standard. If an inmate was at imminent risk of sexual victimization, they could temporarily be placed in temporary close custody cell until the investigation and alternative means of separation is found	

115.51	INMATE REPORTING
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; ECF GO 20-101 Inmate Sexual Assault Prevention-Intervention.</b> Based on staff and inmate interviews, this is clearly documented. The procedures for reporting are clearly stated in the inmate handbook and on posters located throughout the facility.	

115.52	EXHAUSTION OF ADMINISTRATIVE REMEDIES	INMATE REPORTING
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)		
<b>Auditor comments, including corrective actions needed if does not meet standard</b>		
<b>IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment</b> Grievance procedures covers the elements of this standard. One (1) grievance was filed in this reporting period that alleged sexual abuse and this was immediately referred to the Investigator.		

115.53	INMATE ACCESS TO OUTSIDE CONFIDENTIAL SUPPORT	INMATE
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	SERVICES	REPORTING
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)		
<b>Auditor comments, including corrective actions needed if does not meet standard</b>		
<b>IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment</b> ECF has an agreement with the Crisis Intervention Services to provide services to victims in the institution should they request advocacy, counseling, or some other form of support		

115.54	THIRD-PARY REPORTING
<input checked="" type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>IMPP 10-103D; Third Party Resources</b> Brochures and posters are given to family, guests, and visitors with the procedure for reporting. This is also located on the KDOC website at: <a href="http://www.doc.state.ks.us/Documents/PREA/ThirdPartyReportingPoster.pdf">http://www.doc.state.ks.us/Documents/PREA/ThirdPartyReportingPoster.pdf</a>  Posters are located throughout the facility with a 1-88 number and offenders can use #55.	

115.61	STAFF AND AGENCY REPORTING DUTIES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; ECF GO 20-101 Inmate Sexual Assault Prevention-Intervention</b> This was also verified through interviews with random staff.	

115.62	AGENCY PROTECTION DUTIES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	

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

**IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; IMPP 20-104 Purpose of Segregation; IMPP 20-105 Basic Operation of Administrative Segregation; IMPP 20-108 Protective Custody; ECF GO 20-101 Inmate Sexual Assault Prevention-Intervention**

The facility takes immediate action if there was substantial risk of imminent sexual abuse. There has been one inmate placed in this status during this report period. This was also verified through interviews with random staff.

115.63

**REPORTING TO OTHER CONFINEMENT FACILITIES**

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

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

**IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment**

Agency policy includes all the components of this standard. This was also verified through interviews with Deputy Warden and PREA Manager. ECF has not received any allegation that an inmate was abused while confined at another facility. There have been no allegations of sexual abuse that ECF received from other facilities

115.64

**STAFF FIRST RESPONDER DUTIES**

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

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

**IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; ECF GO 20-101 Inmate Sexual Assault Prevention-Intervention; IMPP 22-103 Investigative Procedures**

Agency policies include all the components of this standard. This was also verified through interviews with random staff.

115.65

**COORDINATED RESPONSE**

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

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

**IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; ECF GO 20-101 Inmate Sexual Assault Prevention-Intervention; Corizon response policy.**

Agency policies address this standard in a very detailed effective manner. This was discussed in interviews with the Deputy Warden, PREA Compliance Manager and the Investigators.

115.66	PRESERVATION OF ABILITY TO PROTECT INMATES FROM CONTACT WITH ABUSERS
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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

**KDOC KOSE MOA 2010, Renewed 6/30/14; Email verification for 115.66**

All collective bargaining agreements meet the requirements of the standard.

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

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

**IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; ECF GO 20-101 Inmate Sexual Assault Prevention-Intervention**

Deputy Warden Marty Sauers is assigned to monitor for possible retaliation. His responsibilities include interviewing inmates who previously alleged sexual victimization to ensure they haven't experienced retaliation because of their allegation(s); for at least 90 days following report of sexual assault/harassment allegation, and to monitor by way of periodic status checks. There have been no incidents of retaliation reported in this report period.

115.68	POST-ALLEGATION PROTECTIVE CUSTODY
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

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

**IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; ECF GO 20-105 Basic Operations of Administrative Segregation; IMPP 20-108 Protective Custody; IMPP 20-104 Purpose of Administrative Segregation and Appropriate Placements.**

Agency policy Administrative Segregation meets this standard. There have been no inmates placed in this status. If an inmate was at imminent risk of sexual victimization, they could temporarily be placed in temporary close custody cell until the investigation and alternative means of separation is found.

115.71

CRIMINAL AND ADMINISTRATIVE INVESTIGATIONS

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

**IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; IMPP 22-103 Investigations.**

Agency policies that address their standard, Major Discipline Report Procedures. The ECF Investigators conduct investigations within the facility after consulting the PREA Coordinator to determine how to proceed. All Investigators have received special investigation training. All of the investigations were reviewed promptly, thoroughly, and objectively. There were no substantiated allegations that were referred for prosecution during this period.

115.72

EVIDENTIARY STANDARDS FOR ADMINISTRATIVE INVESTIGATIONS

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

**IMPP 22-103 Investigations**

This is covered in the Investigator PREA training curriculum.

115.73

REPORTING TO INMATES

Exceeds Standard (substantially exceeds requirement of standard)

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

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

**IMPP 22-103 Investigations; IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment.**

PREA Agency Coordinator indicates that is the Investigators responsibility to notify the inmate of the findings. There is a standard form letter that is used and a copy kept in the investigative file. All inmates were notified of the outcomes of the investigations. There were no investigations completed by an outside agency in this report period.

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

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

**IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; IMPP 02-118 Employee and Volunteer Rules of Conduct; IMPP 02-120 Employee Disciplinary Procedure**

Agency Policy includes all the components of this standard. During this audit period no staff member has been found to violate agency sexual abuse or sexual harassment policies.

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

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

**IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; IMPP 02-118 Employee and Volunteer Rules of Conduct and Undue Familiarit.**

There was no contractor/volunteer during this period that was reported to law enforcement for engaging in sexual abuse of inmates.

115.78	DISCIPLINARY SANCTIONS FOR INMATES
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)



Does Not Meet Standard (requires corrective action)

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

**IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; IMPP 11-107 Inmate Program Plan; KAR 44-12-314 Inmate Rule Book; KAR 44-12-328**

This is stated in the inmate handbook which addresses all disciplinary sanctions for inmates. All sexual activity between inmates is prohibited.

115.81

MEDICAL AND MENTAL HEALTH SCREENINGS; HISTORY OF SEXUAL ABUSE

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

**IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; IMPP 10-139 Screening for Sexual Victimization and Abusiveness**

Policies addressing this standard include: Screening for any condition relevant to the Prison Rape Elimination Act of 2003 (PREA) through the use of the Internal Classification screening form is placed into the offenders file. If there is a potential for sexual perpetration or victimization indicated, they are placed in single cell status until further If the assessment indicates that the offender has experienced prior sexual victimization or previously perpetrated sexual violence, whether it occurred in an institutional setting or in the community, staff offers a follow-up meeting with a medical or mental health practitioner. This was verified through interviews with the staff. Through interviews with specialized staff, the facility has a thorough system for collecting this information and also has the capacity to provide continued re-assessment and follow-up services if needed.

115.82

ACCESS TO EMERGENCY MEDICAL AND MENTAL HEALTH SERVICES

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

**IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; ECF GO 20-101 Inmate Sexual Assault Prevention-Intervention; KAR 44-5-115**

A wide range of treatment services are offered to every victim without financial cost while at the facility. When mental health determines that follow up services are warranted relative to a sexual assault, referrals will be made in accordance with recommendations reported by the SAFE/SANE counselor and/or other hospital emergency department staff.

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115.83	ONGOING MEDICAL AND MENTAL HEALTH CARE FOR SEXUAL ABUSE VICTIMS AND ABUSERS
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; ECF GO 20-101 Inmate Sexual Assault Prevention-Intervention; KAR 44-5-115</b> Interviews with staff and inmates verified this standard is compliant.	

115.86	SEXUAL ABUSE INCIDENT REVIEWS
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment; IMPP 12-118 Serious Incident Review Board</b> Agency policy meets this standard. Committee members shall consist of, but are not limited to, a representative of the following departments: Warden or designee, Agency PREA Coordinator (if a substantiated case), Facility PREA Compliance Manager, Unit Manager, and Shift Supervisor involved, Investigator, Mental Health and/or Medical Services involved in situation. All staff involved is consulted prior to the actual review for their input. None reviews were completed during this review period.	

115.87	DATA COLLECTION
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
<b>Auditor comments, including corrective actions needed if does not meet standard</b>	
<b>IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment</b> This is covered in Agency Policy The KDOC publishes an annual report regarding PREA-related incidents and, where necessary, plans to improve the Department's prevention,	

detection and response efforts. The Department regularly conducts sexual abuse/assault incident reviews to determine if changes to or improvements in environmental, procedural, staffing and monitoring technology factors are required.

115.88

DATA REVIEW FOR CORRECTIVE ACTION

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

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

**Annual KDOC PREA Report 2014;** <http://www.doc.ks.gov/publications/kdoc-facilities-management>  
The agency reviews the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies; and to identify problem areas and take corrective actions. An annual report with comparisons and corrective actions is published, and posted on the IDOC website listed above.

115.89

DATA STORAGE, PUBLICATION, AND DESTRUCTION

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

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

**IMPP 10-103D Coordinated Response to Sexual Abuse and Harassment;**  
<http://www.doc.ks.gov/facilities/prea>

An annual report with comparisons from previous years and corrective actions is published.

**AUDITOR CERTIFICATION:**

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

\_\_\_\_Leslie Wagers, Gregg Ort, \_\_\_\_Delbert Longley  
Auditor Signature

\_\_\_\_7-22-15\_\_\_\_  
Date