

PREA AUDIT: AUDITOR'S SUMMARY REPORT

COMMUNITY CONFINEMENT FACILITIES



Name of facility: Kate Barnard Community Corrections Center			
Physical address: 3300 Martin Luther King Blvd., Oklahoma City, OK 73111			
Date report 01/19/201			
Auditor Information Marilyn (Lynn) McAuley			
Address: American Correctional Association, 206 North Washington St., Suite 200 Alexandria, VA 2314			
Email: mom@kideral.com			
Telephone number: 208-794-1901			
Date of facility visit: 12/17/2015			
Facility Information			
Facility mailing address: <i>(if different from above)</i>			
Telephone number: 405-425-2905			
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"/> X State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input type="checkbox"/> Community treatment center	<input checked="" type="checkbox"/> X Community based confinement facility	<input type="checkbox"/> Other:
	<input type="checkbox"/> Halfway house <input type="checkbox"/> Alcohol or drug rehabilitation center		
Name of Facility Head: Sharon Harrison		Title: District Supervisor	
Email address: Sharon.harrison@doc.state.ok.us		Telephone number: 405-425-2905	
Name of PREA Compliance Manager (if applicable): Lydia McBride			
Email address: Lydia.mcbride@doc.state.ok.us		Telephone number: 425-425-2909	
Agency Information			
Name of agency: Oklahoma Department of Corrections			
Governing authority or parent agency: <i>(if applicable)</i> State of Oklahoma			
Physical address: 3400 Martin Luther King Blvd., Oklahoma City, OK			
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AUDIT FINDINGS

NARRATIVE:

The Prison Rape Elimination Act (PREA) Audit for the Kate Barnard Community Corrections Center (KBCCC) from initial notification through this auditor’s Summary Report Community Confinement Facilities PREA Audit final report began in November 2014 with the notice that the Oklahoma Department of Corrections through the American Correctional Association (ACA) had scheduled a PREA Audit with a tour date of December 15-17, 2014, of the Kate Barnard Community Corrections Center, Oklahoma City, Oklahoma. PREA Certified Auditor Marilyn (Lynn) McAuley was notified by ACA e-mail of her appointment and schedule.

The audit process started with contact from Millicent Newton-Embry, Agency-Wide PREA Coordinator, Oklahoma Department of Corrections, Oklahoma City, Oklahoma and KBCCC District Supervisor Sharon Harrison. Deputy Supervisor Harrison sent a USB thumb drive to the auditor. The thumb drive contained essential information; the daily facility count for twelve months prior to the audit; the check list file for each standard including copies of compliance documents; copy of the ACA Visiting Committee Report (VCR) for the October 24-25, 2013 Standards Compliance Reaccreditation Audit; Agency and Facility Mission Statements; KBCCC staff list with degree of contact; Plot Plan with camera location; and the PREA Audit: Pre-audit Questionnaire Community Confinement Facilities. A tremendous amount of material was included on the USB thumb drive. The daily facility count identified the daily population for the 1st, 10th, and 20th day of the month for the past twelve months. The 39 standards folders (one for each standard) contained substantiated compliance documentation for each of the standards addressing: interviews, health appraisals of the incoming inmates, and treatment of offenders with intersex conditions, gender identity disorder, gender dysphoria, and staff personnel discipline forms. ACA Standards Compliance Reaccreditation Report provided medical and investigative reports. The Pre-audit Questionnaire provided the necessary information to complete a good portion of the PREA Audit: Auditor Compliance Tool, Community Confinement Facilities, and PREA Compliance Audit Instrument Checklist of Policies/Procedures and other Documents, Community Confinement Facilities in advance of the site visit. The Questionnaire provided a lot of material that was comprehensive, specific, and very helpful to the auditor.

The PREA Resource Audit Instrument used for Community Confinement Facilities was furnished by the National PREA Resource Center. To summarize, there are seven sections, A through G, comprised of the following: A) Pre-Audit Questionnaire, sent by Oklahoma Department of Corrections; B) the Auditor Compliance Tool; C) Instructions for the PREA Audit Tour; D) the Interview Protocols; E) the Auditor’s Summary Report; F) the Process Map; and G) the Checklist of Documentation.

Following the protocols of making contacts, and checking on the posting of notices (posting was initiated through the American Correctional Association and the facility, Kate Barnard Community Corrections Center) the auditor, on her own, began review of the Pre-Audit Questionnaire and the material sent prior to discussion and the audit visit. Each item on the thumb drive was reviewed. Of particular interest to the auditor was the detailed information in the Pre-Audit Questionnaire completed by the facility PREA Compliance Manager (PCM), and the PREA Agency-Wide Compliance Coordinator and KBCCC District Supervisor in December 2014. Also, in this preliminary review, special interest was taken in the compliance documentation provided for each standard. The information from the standards files was used to complete a good portion of the information on the PREA Compliance Audit Instrument Checklist of Policies/Procedures and other Documents in advance to identify additional information that might be required.

The Oklahoma Department of Corrections contracted with ACA to do the PREA Audit of Mabel Bassett Correctional Center December 15-17, 2014 and Kate Barnard Community Corrections Center December 17-19, 2014. It was decided that management from the two facilities and the auditor would meet Sunday evening, December 14, at an informal dinner in Oklahoma City with Debbie Morton, Acting Warden of Mabel Bassett Correctional Center and Division of Community Corrections Sharon Harrison, District Supervisor of Kate Barnard Community Corrections Center and key staff. Also attending the dinner were Millicent Newton-Embry, Agency PREA Coordinator, Reginald Hines, Division Manager, Lydia McBride, Assistant District Supervisor, Kate Barnard Community Corrections Center (PREA point of contact) Glenroy Hines, Chief of Security, Kate Barnard Community Corrections Center, Carla King, Deputy Warden, Mabel Bassett Correctional Center.

The auditor stayed in Oklahoma City, Oklahoma and was transported to KBCCC daily with the Department's Agency-Wide PREA Coordinator. The site visit began at 2:00 p.m. on Wednesday, December 17, 2014 with arrival at KBCCC. The Auditor and PREA Coordinator entered KBCCC and proceeded to the District Supervisor's office after signing in to enter KBCCC. During a brief meeting with the District Supervisor, PREA Coordinator, Deputy District Supervisor/PREA Compliance Manger, a briefing was held with facility key staff. The auditor was given a package including; KBCCC list of Employees with Offender Contact; KBCCC Alpha Resident Roster; PREA 2014 Staff Training Curriculum (33pages); Crew Sign in/out Sheets 12/16/14 titled PREA Compliance Audit Book with an Introduction to the Facility, Offender Manual in English and Spanish, Audit Questionnaire, Oklahoma Prison Rape Elimination Act OP-030601; Commission on Accreditation for Corrections Standards Compliance Reaccreditation Audit Visiting Committee Report October 24-25, 2013; and various PREA Forms. At this time, a review of the inmate population was made and random residents were selected from each housing unit for interview by the auditor. Random selection resulted in 12 of 259 (5%) residents inmates selected to be interviewed in South and East Housing Units. Utilizing the PREA Compliance Audit Instrument for PREA Audit Tour the tour started with Administration and Security Control.

The tour of the Kate Barnard Community Corrections Center 13 buildings proceeded as follows: East Housing Unit; South Housing Unit; Caustics Trailer, Programs Building, Library/Maintenance Tool Room, Kitchen, Recreation Building, Medical and Dental; Visitation. During the tour of the facility auditor observed the areas, interviewed administration, program and security staff and residents and checked for "blind-spots" in all levels of custody.

The official tour was completed Wednesday afternoon, but followed up with revisits Thursday and Friday to Medical, Housing, Oklahoma Department of Corrections Investigation Office, Maintenance and Closed Records. The auditor established interviews in a administrative room in the administrative area, medical offices, offices of specialized staff and housing units. The auditor interviewed Investigation staff in the Investigation office at Oklahoma Department of Correction's building. Utilizing the PREA Compliance Audit Instrument – Interview Guide for Specialized Staff twelve (12) staff were interviewed. As per the PREA Compliance Audit Instrument – Interview Guide for a Random Sample of Staff twelve (12) staff were selected including 10 correctional officers who have contact with adult residents. Staff interviews were also set up with the selection of random staff from each shift, specialized staff to include intermediate or higher-level facility staff, medical and mental health staff, administrative staff, volunteers and contractors, investigative staff, staff that perform screening for risk of victimization and abusiveness, staff who supervise inmates in segregated housing, incident review team members, intake staff, staff charged with monitoring retaliation, and others designated by the interview protocols. The PREA auditor proceeded with interviews after the tour and continued Thursday and Friday. Interviews, review, and observations included meeting directly with each resident and reviewing screening materials, documents, and resident file screens as appropriate. This process re-emphasized to the auditor, Kate Barnard Community Corrections Center's commitment to PREA law. The auditor left the facility and continued to discuss and review operations with the PREA Coordinator in route until 8:00 p.m. Wednesday evening.

The following day, Thursday, December 18, 2014 the auditor began at 7:30 a.m. with a review of the 39

PREA Standards and the Pre-Audit Questionnaire with the auditor completing the following PREA Audit tools: Auditor Compliance Tool and PREA Compliance Audit Instrument Checklist of Policies/Procedures and other documents provided by the PREA Manager. Assisting the second day was: Millicent Newton-Embry, Agency-Wide PREA Coordinator, Sharon Harrison, District Supervisor KBCCC, Lydia McBride, Assistant Supervisor/PREA Compliance Manager KBCCC, and Victoria Hamilton, KBCCC Secretary and Glenroy Hines Chief of Security. Following these intensive reviews of selected standards and the questionnaire, the auditor again began interviews continuing until about 6:00 p.m. that evening.

The KBCCC is a female facility and has 46 authorized positions with 39 filled (84.8%) and seven (7) vacant (15.2%) positions. Over 30 of the 39 staff at KBCCC are female for 77% of staff being female. While at Kate Barnard Community Corrections Center, 27 staff was formally interviewed from scripted questions. The interviews included Specialized Staff; the PREA Compliance Manager; medical and mental health staff; human resources staff; SAFE and SANE staff; volunteers and contractors who have contact with residents; investigative staff; staff who perform screening for risk of victimization and abusiveness; incident review team member; staff member charged with monitoring retaliation; first responders, both security and non-security staff; agency contract administrator; and intake staff. The interview process included interviewing 12 randomly selected KBCCC staff and 12 randomly selected residents from each of the two housing areas with 8 units total. In addition to these formal interviews, many informal discussions were held with staff and residents who assisted in providing information for this PREA compliance audit. The auditor commented on how much information was received in these formal and informal interviews.

Friday, starting at the facility at 8:00 when the auditor met with the KBCC PRES compliance team to discuss any concerns, problems, issues, or circumstances that, in their view, would relate to the good order, management, and operation of the Kate Barnard Community Correction Center. A final review of the PREA Audit: Pre-Audit Questionnaire and the PREA Compliance Audit Instrument Checklist of Policies/Procedures and other Documents confirmed KBCCC had provided the necessary access to documentation for the auditor to confirm that all 39 PREA Community Confinement Facilities Standards met the criteria to be considered compliant. There were no issues rising to the level of PREA noncompliance. The auditor concluded the interview and tour process. The auditor indicated that she would have an interim/final report within 30 days. At this time she would have reviewed her notes and have had discussions with the PREA Compliance Manager and PREA Coordinator and arrive at conclusions on each standard. The auditor noted there were no red flags that had come to the auditor's attention and moreover, she was positively impressed with the Kate Barnard Community Corrections Center's commitment to the PREA audit process.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Kate Barnard Community Corrections Center (KBCCC) opened in June 1977, as the Kate Barnard Community Treatment Center with a capacity of 96 residents. The treatment center was designated to house first time incarcerated non-violent male offenders serving a sentence of five (5) years or less. The facility, a former motel located near the intersection of Highway 74 and Interstate 44 in Oklahoma City, was converted to a female facility with a capacity of 162 beds in 1992 due to major infrastructure issues and the offenders were relocated to the Hillside Community Correction Center (HCCC). The HCCC had formerly been the Mabel Bassett Correctional Center (MBCC) located just a few yards southeast of the Oklahoma Department of Corrections (ODOC) Administrative Office Building. In 2002, the ODOC

purchased the Central Oklahoma Correctional Facility, a privately operated facility, located in McLoud, Oklahoma, and in 2003 the MBCC relocated to this facility. The former MBCC was then converted to the Hillside Community Corrections Center(HCCC). On April 25, 2013, HCCC was renamed the Kate Barnard Community Corrections Center (KBCCC) to honor her role in ODOC history.

The mission of the Oklahoma Department of Corrections is "To Protect the Public, Protect the Employees, and Protect the Offenders." The mission of KBCCC Female Offender Community Corrections and Residential Services is to provide supervisions for community level female offenders. The facility will transition female offenders back into the community and support efforts to reduce the incarceration rate of female offenders by providing meaningful employment and work – skill development opportunities, gender – responsive programming and evidence – based re-entry services.

Kate Bernard Community Corrections Center (KBCCC) is a 260-bed female, community-based supervision facility. Work (WR) and Prisoner Public Works Program (PPWP) level offenders are housed in KBCCC. The PPWP program allows for residents to work a variety of jobs at municipalities, counties, or other state agencies to work on projects that benefit public purpose. Residents are monitored by the agency with which they work while out in the public and have an opportunity to seek, obtain, and maintain employment in the community prior to release from incarceration. The resident earns money in this program to pay program support fees, court cost obligations as well as mandatory savings which will be release to the resident when paroled or discharged. Residents are required to participate in a mandatory saving plan, pay court ordered fees, restitution and, if applicable, pay co-pay for their medical/dental services. Observations during the facility tour, review of documentation and interviews with residents confirm a requirement to be in one of the programs to be housed at KBCCC.

Resident housing and security in this facility is of particular importance. Housing for offenders is provided in two (2) separate housing units, identified as south and east housing units with two (2) floors on each quad South Housing unit has four (4) quads identified as A, B, C, and D. There are two (2) showers in A quad, one (1) on each floor. There is one (1) shower in B quad located at the first floor. Each room in A and B quads has a toilet. There are two (2) showers and three (3) toilets each in C and D quads. East Housing unit has four (4) quads identified as E, F, G, and H. Housing units consist of two-person cells. There is one (1) shower in F quad located on the first floor. There are two (2) showers and three (3) toilets each in G and H quads located on the main floor. There are two (2) showers in E quad, one (1) on each floor. There are small monitoring centers in each house unit that provides an area for officers to staff these posts when not roving the grounds or the living areas. These offices have windows for viewing at all times. Observation during the tour confirmed that residents are allowed **XXXX**.

In addition, there are a number of other buildings located on the grounds, some are used by the Community Corrections Center and some are used for other purposes, such as file storage and administrative offices. There are buildings housing: visitation, which is also used for large group meetings, including the monthly parole board meeting; a medical building; maintenance buildings, the recreational building with the salon, physical fitness equipment, vending machines, and smaller life skills classroom and the kitchen & cafeteria building. There are also smaller trailers which house the library, an educational class trailer, and one for toxics and caustics. Support services include food service, warehouse, kitchen; Education, Vocational, Training, library, Health Services, visiting room, laundry, maintenance, and other support services.

The facility is staffed with at least three correctional officers on duty at all times with a Lieutenant at main control center the access point for all visitors, staff and offenders to enter into the facility. The main control center contains all the logs and the monitor screen with the live feeds of the nine video cameras located on the facility grounds. There are five (5) exterior fixed cameras on points along the fence line and one (1) exterior fixed camera outside Maintenance. There are three (3) interior cameras with; 1 fixed in the kitchen/dining area, 1 pan in the visitation building and 1 fixed in the south holding cell located in central control. According to the PREA Compliance Audit Instrument-Interview Guide for

Agency Head interview approximately five years ago the Oklahoma Department of Corrections began efforts to install video camera systems in all seventeen minimum through maximum security facilities to enhance the overall security and safety of staff and offender using "camera overlays" serving as blueprint for where cameras will be installed for optimum utilization. This project continues to be a work in progress and KBCCC is in the planning stage.

Facility demographics.

Rated capacity: 260

Actual capacity: 259

Age range of population: 19 – 66

Security: Minimum/Medium/Maximum

Number of full-time staff: 39; (4) Administrative, (10) Support, (4) Program, and (21) Security

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 1

Number of standards met: 37

Number of standards not met: 0

Number of standards non-applicable: 1

§115.211 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

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

The Oklahoma Department of Corrections established an Oklahoma Prison Rape Elimination Act with OP-030601 in November 2014. It is the policy of the Oklahoma Department of Corrections (DOC) to provide a safe humane and secure environment for all offenders. The agency supports and administers a program of education, prevention, detection, response, investigation and tracking of all reported acts of sexual assault and harassment. Punishment for the perpetrator is enforced. This plan requires DOC maintain a zero tolerance for offender-on-offender sexual assault, staff sexual misconduct and sexual harassment toward offenders. Every allegation of sexual assault, misconduct and harassment is thoroughly investigated. PREA posters will be displayed throughout each facility and will be visible to all staff, offenders and visitors.

The auditor got a good outline of this Zero Tolerance Policy, beginning with 1) administration and designation of staff, 2) offender management and services, 3) offender screening and assessment, 4) reporting allegations, 5) investigation, 6) training and education and 7) data collection followed up with additional administrative considerations. Staff participation in the program is essential in implementing, monitoring and improving the Zero Tolerance Policy while identifying aggressive behavior and taking the necessary steps to ensure the safety and security of Oklahoma correctional institutions. Oklahoma's Prison Rape Elimination Act Policy is essential to the operations at KBCCC and is adhered to at all times to ensure continuity and professionalism throughout the system as confirmed by observations, review of documentation and interviews with staff, contractors, volunteers and inmates.

Through discussions with staff and inmates, observation of bulletin boards, posters, handouts and materials, review of inmate and staff handbooks, and personnel policies, it is clear that Kate Barnard Community Corrections Center is committed to Zero Tolerance of sexual abuse and sexual harassment.

The Zero Tolerance Policy says the agency shall designate a PREA Agency-Wide Coordinator to oversee agency efforts to comply with PREA standards. Each facility (minimum security and above) assigns one staff member as the facility PREA Compliance Manager with overall responsibility of coordinating facility efforts to comply with PREA standards. Ms. Millicent Newton-Embry is the Agency-Wide PREA Coordinator. Ms. Lydia McBride, KBCCC Assistant District Supervisor is the facility PREA Compliance Manager and per review of organizational charts it was noted that she has direct access to the Warden. The State-wide PREA coordinator and the KBCCC PREA Compliance Manager when interviewed using the structured PREA Audit Tools indicated they have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

Of particular note is the staff and inmates knowledge of the zero tolerance of sexual abuse and sexual harassment when interviewed by the auditor. The Zero Tolerance Policy is posted in the housing units and the subject is a major part of training to new staff and existing staff on a regular basis.

§115.212 - Contracting with other entities for the confinement of inmates

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

Oklahoma OP-030401 Private Prison Monitoring Requirements states any contract between DOC and a private prison contractor whereby the contractor provides for the housing, care, and control of offenders in a non-departmental facility operated by the contractor will contain in addition to other provisions, terms and conditions specific facility requirements of 57 O.S. 561-3 and 563. 1-2. Also, contractors must comply with Oklahoma Department of Corrections procedures as specified in the contract and as updated in the contract renewal.

Employees of Private Businesses and Governmental Entities Contracting with the Oklahoma Department of Corrections, requires compliance with agency policy, specifically, Zero Tolerance towards all sexual abuse and sexual harassment. Per this policy the contractor shall be required to comply with all PREA Prison and Jail standards and will be monitored by the host district

Contracts and examples of contracts were reviewed. The interview with the Agency Contract Manager was reviewed. Contract employees were interviewed and it was clear from this review and interviews that Zero Tolerance and compliance with PREA law is substantiated. Contracts themselves each contained PREA statement documents of compliance requirements. Review of OP-030401 and OP-030402 and interviews with staff confirmed compliance with this PREA Standard.

§115.213 – Supervision and Monitoring

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

The Kate Barnard Community Correction Center is a female community based supervision facility that houses both Work Release (WR) and Prisoner Public Works Program (PPWP) level offenders with staffing and perimeter security outlined in the description of the facility. The District Supervisor and staff, including the Human Resource Department's comprehensive involvement, have assured staffing according to the needs and priorities set by the agency. The District Supervisor and the Human Resource Manager at KBCCC routinely review the staffing plan, recruitment policies, and institutional needs to assure the safety of staff and residents.

The KBCCC Staffing Plan includes adequate levels of staffing and video monitoring to protect offenders against sexual abuse. The Staffing Plan is monitored and updated annually. During the past twelve months the reasons for any deviating from the staffing plan was hiring freeze, facility emergency, employee walkout and staff shortages. At time of PREA audit KBCCC had 39 of the available positions filled for 84% meeting the staffing plan requirements. During the he post orders address supervision duties and responsibilities including unannounced rounds.

Compliance Documents reviewed included; KBCCC Position Budgeting Report, Facility Plot Plan with Camera Locations, Facility Brochure, Central Control Log and OP-010300. Interviews with staff and residents confirmed the felt safe at KBCCC.

§115.215 – Limits to Cross-Gender Viewing and Searches

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

Oklahoma DOC PO-030601 states when the gender of the housing unit changes to the opposite gender a notification will be made to offenders announcing the staff member's presence when entering the housing unit, an offender shall be able to shower, perform bodily functions and change clothing without non-medical staff of the, opposite gender viewing them except in exigent circumstances, strip searches and visual body cavity searches will be conducted by gender specific staff and cross-gender strip searches shall be documented.

Policy and procedures governing cross gender viewing and searches were reviewed as well as actual searches conducted during the audit visit. Policy does allow cross gender strip and cross gender visual body cavity searches of inmates in emergency situations. However, no cross gender viewing or searches are conducted absent exigent situations. Interview of offenders and staff confirmed there were no cross-gender pat searches being done.

Interviews, observations and review of procedures of KBCCC 030601 confirmed staff of the opposite gender announces their presence when entering resident housing. It was confirmed by interviews with staff and residents that residents can perform bodily functions, change clothing and shower without staff of the opposite gender completely viewing them. Residents and staff felt there was a confident sense of privacy. All staff received training in conducting counts, and unannounced rounds to help assure compliance with the standard that limits cross gender viewing and searches.

§115.216 – Inmates with Disabilities and Inmates who are Limited English Proficient

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

Oklahoma OP-030601 and KBCCC-030601-01 provides disabled inmates 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 and provide inmates with limited English proficiency equal opportunity. Agency policy prohibits use of inmate interpreters or other types of inmate assistants except in limited circumstances where there may be an extended delay in obtaining an effective interpreter. In the past 12 months, there have been zero (0) use of inmate interpreters, readers or other types of inmate assistants. One of the offenders interview was limited English proficient and was assisted by an interpreter.

§115.217 – Hiring and Promotion Decisions

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

Oklahoma DOC has five OPs pertaining to criminal background checks, promotions, hiring of employees and contractors, and policy concerning criminal background checks of current employees and contractors. These policies were reviewed by the auditors. These reviews reveal that before the hiring of any new employee who has contact with inmates, a criminal background check is done. Additionally, agency policy requires criminal background record checks be conducted at least every five years and that there is a system in place to do the record checks. Personnel files were reviewed, the District Supervisor and Human Resource Manager were interviewed and it was evident that the agency policy and PREA law were being followed concerning hiring, promotional decisions and background checks. In the past 12 months 13 persons hired who may have contact with residents at KBCCC had background record checks.

§115.218 – Upgrades to Facilities and Technology

- 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)

The KBCCC did not acquire any new facilities or make any substantial expansions or modifications of existing facilities since August 20, 2012.

The facility is planning on upgrading and expanding the video monitoring system and by policy the electronic surveillance system or other monitoring technology shall consider how such technology may enhance the agency's ability to protect staff and residents. There are approximately 9 video cameras located in KBCCC. There are five (5) exterior fixed cameras on points along the fence line and one (1) exterior fixed camera outside Maintenance. There are three (3) interior cameras with; 1 fixed in the kitchen/dining area, 1 pan in the visitation building and 1 fixed in the south holding cell located in central control. According to the PREA Compliance Audit Instrument-Interview Guide for Agency Head interview approximately five years ago the Oklahoma Department of Corrections began efforts to install video camera systems in all seventeen minimum through maximum security facilities to enhance the overall security and safety of staff and offender using "camera overlays" serving as blueprint for where cameras will be installed for optimum utilization. This project continues to be a work in progress and KBCCC is in the planning stability to protect offenders from sexual abuse.

No cameras directly interfere with inmates' ability to shower, dress, and perform bodily functions with some privacy. Comprehensive supervision and limited access to blind spots, or unsupervised areas assist with prevention of sexual assault/sexual abuse. During the interview with the agency head he advised over two million dollars has been spent on the installation of video cameras and recording systems to protect offenders from a variety of issues including sexual abuse and the project is continuing.

§115.221 – Evidence Protocol and Forensic Medical Examinations

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

Oklahoma is responsible for administrative and criminal sexual abuse investigations. Oklahoma OP-030601, OP-040117 and OP-140118 requires the facility maintain or attempt to enter into MOU or other agreements with community service providers who are able to provide offenders with confidential emotional support services related to sexual abuse and ODOC has a MOU pending with Unzer Center and signed MOU with YWCA Oklahoma City for these services. These policies assure PREA trained investigators follow a uniform evidence protocol through the use of the Sexual Abuse Checklist operating memorandum. Emergency medical healthcare along with forensic examinations by SANE/SAFE staff are procured from International Association of Forensic Nurses. The facility offers all inmates who experience sexual abuse, access to forensic medical examinations. Forensic medical examinations are offered without financial cost to the victim. There have been no forensic medical

examinations by SANE/SAFE staff during the past 12 months. The auditor reviewed OP-030601, OP-140117-8 and other document provided by KBCCC, interviewed staff including Investigation staff, and reviewed electronic information on the two SANE/SAFE exams performed during the last 12 months, and interview residents to be able to confirm this PREA Standard is compliant at KBCCC.

§115.222 – Policies to Ensure Referrals of Allegations for Investigations

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

Oklahoma's PREA Policy ensures referrals of all allegations for investigation. Documentation is made of all reports of sexual abuse and sexual harassment. These are investigated and reported with findings; documentation is maintained. Agency OP-040117 Investigations and Reporting Procedures indicate the immediacy of reporting these incidents and crimes to the Office of the Inspector General (OIG). The PREA Plan also outlines sexual abuse response and investigation and offender protection investigations, all of which are also outlined for inmates in the offender orientation. Interviews with the investigative staff, random staff and inmates indicate knowledge and familiarity with these policies. The number of criminal and/or administrative investigations of alleged inmate sexual abuse and harassment that were received in the past 12 months was 3. During the past 12 months, the number of allegations resulting in administrative investigations were 3 and during the past 12 months, the number of allegations referred for criminal investigation were 1. Agency policy and the institutional procedure comply with PREA requirements relating to allegations and the investigation of such. The agency and institution both document all allegations of sexual abuse and referrals of allegations of sexual abuse and sexual harassment for criminal investigation. Review of policies and substantiating compliance documents, interviews with staff and residents confirm this standard is compliant at KBCCC.

§115.231 – Employee Training

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

Oklahoma's PREA Policy addresses all ten points of the PREA Employee Training Standard. Training records, staff interviews and curriculum review indicated that staff at the MBCC was well-trained. Staff is knowledgeable about the Zero Tolerance Policy for sexual abuse and sexual harassment. They were clear on how to perform their responsibilities in detection, reporting and responding. Staff has received PREA written documentation outlining the Oklahoma's mission statement, the officers' code of ethics and a list of pertinent, timely items such as first responder duties, emergency situations and safe prisons program. A 2 ½" X 3 ½" laminated card identifying the Department's policy on Zero Tolerance and the other side identifies the requirement of Coordinated Response to an Incident of

Sexual Abuse for First Responder and Supervisory Staff. This PREA tool was designed for each staff member to be placed with their DOC identification card. The Employee training covers information and notices detailing Zero Tolerance Policy for sexual assault/abuse, red flags suicide prevention and response techniques all emphasize and support the training efforts for KBCCC correctional staff. Quarterly PREA training is given to employees who may have contact with inmates.

The auditor, in reviewing staff training rosters and acknowledgements and interviewing staff training, noted that there is teamwork exhibited by the facility as a whole and there is an importance placed on professionalism and the efforts in complying with PREA standards, ACA standards and in the daily performance of duties. Random staff interviews and random inmate interviews also clearly indicated a thorough and consistent training program.

Note: an emphasis on how much attention has been paid to PREA training is shown by having 51 employees trained or re-trained on PREA requirements. This auditor considers this, 115.31, to "exceed standards".

§115.232– Volunteer and Contractor Training

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

Per Oklahoma OP-030601 all DOC staff, contract staff, non-departmental offender work crew supervisors, volunteers and interns shall be trained and understand the agency's Zero tolerance for sexual abuse or harassment and retaliation against an offender or employee in any form as a result of reporting an allegation of sexual abuse/harassment.

The auditor interviewed individuals in a random number of volunteer and contractor categories and found they have been trained in their responsibilities and requirement of the zero tolerance policy. The HR records show all volunteers and contractors who have contact with inmates have been trained in their responsibilities under Oklahoma's policies which include procedures regarding sexual abuse/harassment prevention, detection, and response. In the past 12 months, 371 volunteers and contractors were trained in the agency's policies and procedures regarding sexual abuse/harassment prevention, detection and response. The MBCCC uses a number volunteers so this standard is a priority for the facility and is confirmed by the auditor.

§115.233 – Inmate Education

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

Oklahoma DOC policy ensures every offender receive a written copy of DOC's orientation material during assessment and reception both verbal and written about sexual abuse and harassment, agency's Zero tolerance standard, prevention/intervention, self-protection, how to report acts or suspicions of sexual abuse, assaults or harassment by offenders or staff to include reporting utilizing the offender PREA hotline. Documentation of the training is maintained by the facility.

Admission and Orientation was observed, the Resident's Orientation material was reviewed and interviews with staff and inmates revealed that inmates receive training and information about the Zero Tolerance Policy and how to report instances of, or suspicions of abuse or harassment. Residents received training at intake, handouts during intake, and video training during orientation. Training is updated as required. The number of residents who received information at admittance was 805. The number of residents admitted during the past 12 months whose length of stay in the facility was for 30 days or more, who received comprehensive education were 1,473. The number of inmates in the facility, who did not receive comprehensive education within 30 days, was zero (0). Inmate PREA education is available in different formats to accommodate all inmates. Key information about the agency's PREA policy is continuously and readily available through posters, handouts and other written formats.

Compliance Documents provided by KBCCC and reviewed by the auditor included; OP-030601, Offender Orientation Posters (English and Spanish), Offender PREA Training for the Deaf and Hard of Hearing Offenders, Photos of Displayed Posters. Of particular interest was attending a resident orientation where the District Supervisor gave the presentation on Zero Tolerance OP-030601. The agency maintains documentation of resident participation in PREA education and resident interviews confirmed PREA education.

§115.234 – Specialized Training: Investigations

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

Oklahoma DOC policy requires specialized training be provided for employees who may respond as part of their job duties to report incidents of sexual assault. DOC Inspector General Agents have documented specific training requirements. The auditor reviewed Oklahoma policy, along with

investigator training curriculum (including a power point) and personnel policy, and found they all reflect that investigators are trained in conducting sexual abuse investigations in confinement settings and the training is documented. The specialty training was verified through investigator interviews and review of training records and the curriculum. There are 13 investigators currently employed by Oklahoma who have received and completed the required training. The agency maintains documentation showing that investigators have completed this training. The Office of the Inspector General (OIG) manages the PREA compliance training.

§115.235 – Specialized training: Medical and mental health care

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

Oklahoma PREA policy requires mental health and medical staff be trained to detect and assess signs of sexual abuse and/or predation, preserve evidence of sexual abuse, respond to sexual assault victims and be fully knowledgeable of DOC procedures in regard to PREA. A comprehensive power point presentation PREA for Medical Services is part of the training requirement. The number of medical and mental health care practitioners who work regularly at the facility are 5 and 100% have received the training required by policy. The agency maintains documentation showing that medical and mental health practitioners have completed the required training. Observations, review of documentation and interviews with staff and inmates confirm KBCCC is compliant with this PREA standard.

§115.241 – Screening for Risk of Sexual 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)

Oklahoma PREA Policy requires all offenders receive a mental health screening and/or evaluation during the initial reception and assessment within 24 hours of arrival, offenders at risk for sexual victimization are identified and monitored, sensitive information is not exploited, and housing assignment made ensuring safety and security. This is a process at Mabel Bassett Correctional Center and the policy requires residents at KBCCC be screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their intake. An Offender Assessment Screening Form addresses the risk of sexual victimization or the risk of sexual abuse of other residents. This form is completed within 72 hours of intake. The intake process was reviewed and the auditor observed the process. The intake process conforms to PREA standards. The form/checklist for screening, include questions regarding mental, physical and developmental disabilities and whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming, and whether or not the inmate has previously experienced sexual victimization. The residents own

perception of vulnerability was also pursued. The screening/intake process was well managed and thorough. This information was further related to the District Supervisor and additional committee staff for appropriate use and placement.

§115.242 – 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)

Oklahoma PREA Policy OP-030601 requires the facility use information from the risk screening evaluation in accordance with OP-30102 in order to inform staff making housing, work, education and program assignments with the goal of keeping offenders at risk of being sexually victimized separate from those at high risk of being sexually abusive. The screening information is collected as data on a Cell Assessment Form and used for offender housing assignment.

Interviews with intake and mental health staff supported by interviews with residents as well as observation and review of documentation supports the use of the screening information as being on a “need to know” basis and consistent with appropriate custody and security.

§115.251 – Resident Reporting

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

The Oklahoma DOC PREA Plan OP-030601 has established procedures allowing for multiple internal ways for inmates to report privately to agency officials. Additionally, KBCCC Offender Orientation issued to each offender provides sexual assault awareness, facts for the offender who sexually assaults other offenders, Rape avoidance and what to do if you are sexually assaulted. Offenders may report allegations directly to staff, the Chief of Security, family members or the Oklahoma State Bureau of Investigation who has a MOU with the Department to provide offenders with confidential reporting. Third parties, including fellow offenders, staff members, family members, attorneys, and advocates, shall be permitted to assist offenders and request for administrative remedies relating to an allegation of sexual abuse. Emergency grievances alleging substantial risk of imminent sexual abuse may be filed. This information is attainable in inmate handbooks, posters, bulletin boards, information handouts, libraries and, of course, through staff.

Interviews with inmates and staff revealed that inmates know how to report sexual abuse and sexual harassment and staff knows how to report sexual abuse and sexual harassment.

Review of documentations show the process is working. Review of OP-030601 and KBCC OP-030601-01 documentation and observation of use of the Offender Manual indicate the offenders are well informed of their rights under PREA.

§115.252 – Exhaustion of Administrative Remedies

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

The Oklahoma Department has an administrative procedure for dealing with inmate grievances regarding sexual abuse along with policy and procedures for filing emergency grievances alleging that an resident is subject to substantial risk of imminent sexual abuse. Agency OP-090124 Offender Grievance Procedure addresses offender grievances and management of offender grievances is available to inmates and staff. Grievances are allowed at any time regardless of when the sexual abuse occurred. Additionally, the Offender Manual and DOC PREA Plan cover these topics. In the past 12 months, there were no grievances filed alleging sexual abuses.

§115.253 – Resident Access to Outside Confidential Support Services

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

Oklahoma PREA Policy OP-030601 requires the facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates address, telephone numbers for local, state, or national victim advocacy or rape crisis organizations with toll-free hotline numbers when available. Also, the Policy requires KBCCC staff inform the offender prior to giving access to victim advocates the extent to which communications will be monitored and extent to which reports will be forwarded to authorities in accordance with mandatory reporting laws.

There are lists of outside confidential support services provided to the resident population. There is a signed Memorandum of Understanding (MOU) or agreement with YWCA and pending MOU with UNZER community service providers that have been willing and able to support inmates with these emotional services related to sexual abuse in this community. Compliance documentation provided by KBCCC and reviewed by the auditor included OP_030601, copies of MOU and Mandatory Reporting Map and Law. The Religious chaplains have been trained in these kinds of support services and work with the resident population to meet their needs. Review of documentation, interviews with staff and inmates confirm the offenders have access to outside confidential support services.

§115.254 – Third-Party Reporting

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

Oklahoma PREA Policy mandates the facility provide a method to receive third-party reports of offender sexual abuse or sexual harassment and publicly distributes information on how to report resident sexual abuse/harassment on behalf of offenders. Oklahoma post advertisements with this information in the facility, developed curriculum used in mandatory PREA training, brochures, pamphlets, handouts and displays this PREA information on the agency's website. The KBCCC provided documentation that third-party reporting is included in the resident orientation and copies of signed document by the resident and resident interviews confirm this PREA standard is compliant.

§115.261 – Staff and Agency Reporting Duties

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

Agency PREA Policy OP-030601 requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse/harassment that occurred in a facility whether or not it is part of the agency. Staff must also, per policy, report immediately and according to policy retaliation against offenders or staff who reports incidents, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Policy prohibits staff from revealing any information related to sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Review of Oklahoma PREA policy, KBCCC OP-030601-attachment E and Medical Orientation, KBCCC Mental Health Service Orientation for new offenders, interviews with staff and offenders and signed forms confirm staff is aware and follows policy for staff reporting duties as required by the PREA standard.

§115.262 – Agency Protection Duties

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

Oklahoma PREA Policy requires staff to take immediate action to protect the offender immediately when knowledge, suspicion, or information is received regarding an incident of sexual abuse/harassment. The facility did not determine that an inmate was subject to a substantial risk or imminent sexual abuse. The KBCCC staff is very knowledgeable and well trained in their protection duties when an inmate is subject to imminent sexual abuse or risk of imminent sexual abuse. Staff interviews and review of documentation confirmed the PREA standard is taken seriously and is being followed.

§115.263 – 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)

Upon receiving an allegation that an inmate was sexually abused while confined at another facility, it is required by Oklahoma PREA Policy, that the District Supervisor of the facility that received the inmate must immediately notify the facility where the sexual abuse is alleged to have occurred. Through review of policy and in the interview with the District Supervisor, it was noted that the staff is knowledgeable of this procedure. During the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility was zero (0). However, staff has been trained and confirmed they were aware of this requirement during the staff interviews.

§115.264 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)

Oklahoma PO-030601 and KBCCC OP-030601-01 requires that upon learning of an allegation that an resident was sexually abused, the first security staff member to respond to the report shall require; separate alleged victim and abuser; preserve and protect crime scene; collect any evidence; if timeframe allows collect and protect evidence and advise offender to not take any action that could destroy evidence. In the past 12 months 2 offenders alleged that they were sexually abused. The

first responder to these allegations was one (1) security staff that was able to separate the alleged victim and abuser and one (1) time when the time period allowed for the collection of physical evidence. When the first staff responder was not a security staff member, the responder was required to request the alleged victim not take any actions that could destroy physical evidence and then security staff was notified. The allegations were not within the time period that still allowed for the collection of physical evidence. Interview with staff confirmed this policy is being followed and a priority at KBCCC.

The Oklahoma Investigation OP-040117; Evidence Handling; and the Office of the Inspector General Operating Procedure Manual; all detail the policy and action for the first responder to an allegation of sexual abuse. The first security staff member to respond to the report that an inmate was sexually abused is required to separate the alleged victim and abuser, preserve and protect the crime scene, and request the alleged victim take no action to destroy evidence. Policy also requires that efforts be made to ensure the alleged abuser does not take any action that could destroy evidence, and then notify the immediate supervisor or shift commander.

The facility has further emphasized first responder duties by distributing cards and handouts on sexual assault/abuse to include steps to take if a sexual assault occurs. These steps and duties were confirmed by random staff interviews, investigative staff interviews, higher and intermediate level supervisor interviews, and through review of training curriculum and documents. Of particular importance is a 2 1/2" X 3 1/2" laminated card that each staff member wears with their DOC identification. One side of the card identifies the Department's Zero Tolerance PREA and the other side explains Coordinated Response to an Incident of Sexual Abuse as First Responders. Interviews with staff, review of documentation and examination of policies and procedures confirm KBCCC is compliant for this standard.

§115.265 – 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)

Kate Barnard Community Corrections Center KBCCC-030601-01 dictates responding to an allegation of sexual abuse requires a coordinated effort between unit security staff, the Office of the Inspector General, medical and mental health services and victim advocates or victim offender representatives. Procedures have been outlined to provide a systematic notification in the response process following a reported sexual abuse incident. The PREA Plan details coordinated actions to be taken in response to an incident of sexual abuse. Interviews with the District Supervisor and higher-level staff indicated a commitment by the facility leadership for handling a coordinated response.

§115.266 – Preservation of ability to protect residents from contact with abusers

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

Oklahoma is a Union State.

§115.267 – Agency protection against retaliation

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

The Oklahoma Department of Corrections PREA Policy OP-030601 protects all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations, from retaliation by staff or inmates. Also, personnel policies covering sexual harassment and discourteous conduct of a sexual nature, general rules of conduct, sexual misconduct with offenders, discrimination in the workplace, also protect against retaliation. There is a 90 day monitoring time period for retaliation review. An offender 90 day monitoring form, and a staff 90 day monitoring form, as well as other intervention practices confirms the agency's commitment to prevent retaliation.

The KBCCC Sexual Abuse Incident Review Committee meets on a monthly basis and includes; Sharon Harrison District Supervisor, Lydia McBride, Assistant District Supervisor/PREA Compliance Manager, Glenroy Hines, Chief of Staff, Jeff Cecil, Mental Health Staff and Nancy McGee, Health Administrator. This committee is charged with the responsibility of monitoring retaliation by inmates and staff. The District Supervisor is responsible for monitoring staff retaliation.

There have been zero (0) number of times of an incident of retaliation has occurred in the past 12 months.

§115.271 – Criminal and Administrative Agency Investigations

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

Oklahoma PREA Policy OP-030601 and Investigations OP-040117, addresses investigations under general considerations. The OPs follows: 1) a uniform evidence protocol to investigate sexual abuse and sexual harassment, 2) sexual investigations shall be conducted promptly, early, and objectively including third-party and anonymous reports, and 3) the use of investigators who have been specially trained in sexual abuse investigations pursuant the Oklahoma policy. Additionally, the agency's Administrative OP-040117 Reporting Incidents/Crimes to the Office of the Inspector General, establishes policy related to criminal and administrative agency investigations. This policy includes the direction that allegations of conduct which appear to be criminal are referred for prosecution. The Office of the Inspector General addresses and ensures retention of all written reports for as long as the alleged abuser is incarcerated or employed by the agency +5 years.

Review of OPs, Specialized training PowerPoint for IG investigations, specialized training rosters for IG investigations, incident notification checklist, and request for investigation, comprehensive report and sexual assault report and interview with investigation staff confirms this standard is considered a priority and compliant.

§115.272 – Evidentiary Standard for Administrative Investigations

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

Oklahoma Policy OP-030601, OP-040117 and OP-030601 Attachment D imposes a standard of preponderance of the evidence for determining whether or not allegations of sexual abuse or sexual harassment are substantiated. Interviews with specially trained investigators confirmed compliance with this PREA standard.

§115.273 – Reporting to Residents

- 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)

The Agency PREA Policy requires that all inmates who make allegations of sexual abuse shall be informed as to whether the investigative finding was substantiated (sent to prosecution/sustained) or unsubstantiated (administratively closed/not sustained) or unfounded. Additionally, the offender victim shall be notified following the suspect assailant indictment or conviction on the related charge. Interviews with investigators confirm that an inmate who makes an allegation that she suffered sexual abuse at KBCCC is informed verbally or in writing as to whether or not the allegation was determined to be substantiated or unsubstantiated or unfounded following an investigation. During the last twelve months

there were two (2) administrative investigations completed notification sent to two offenders advising the allegations were unfounded. Review of the Notification of Investigation Status signed by the offender confirmed the notification required by policy.

§115.276 – Disciplinary sanctions for staff

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

Disciplinary sanctions for violations of the agency's policy relating to sexual abuse or sexual harassment are commensurate with the nature and circumstances of acts committed per PREA OP-030601. In the personnel policies of the Oklahoma Department of Corrections disciplinary sanctions are listed up to and including termination for violation of agency sexual abuse and sexual harassment policies. Personnel policies; Progress Disciplinary Procedure OP-110215 and PO-110415 showing Cause for Discharge relate to sexual harassment, discourteous conduct of a sexual nature, general rules of conduct in disciplinary action, guidelines for employees and sexual misconduct with offenders, detail the sanctions and actions required. In the past 12 months, there has been zero (0) staff from the facility that has violated agency sexual abuse or sexual harassment policies. Review of documentation shows there were no disciplinary sanctions in 2013 and 2014 to date.

§115.277 – Corrective action for contractors and volunteers

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

Oklahoma DOC OP-030601 requires any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies and the facility shall take appropriate remedial measures, and shall consider 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. In the past 12 months, there has been one contractor terminated for personal contact with an offender. Review of documentations, interviews with staff, investigators and offenders find this standard is a priority and enforced.

§115.278 – Disciplinary sanctions for Residents

- 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)

Oklahoma DOC Policy OP-030601 requires inmates be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse and sanctions shall be 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. The disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Review of OP-060125 Department Offender Disciplinary Procedure, Acts Constituting Violations, Disciplinary Hearing Report, Offense Report and Mental Health Recommendation, interviews with staff and offenders confirm disciplinary sanctions for inmates are according to the PREA standard.

§115.282 – 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)

Agency OP-60125, OP-060125R and OP-060125 Attachment A mandates inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, at no cost to the inmate, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners. The medical department at KBCCC is staffed with a Licensed Practical Nurse on duty at the medical clinic seven days a week. Medical staff is employed by the Oklahoma Department of Corrections. Offenders in need of emergency services are transported to the Oklahoma University Medical Center in Oklahoma City, OK.

§115.283 – Ongoing medical and mental health care for sexual abuse victims and abusers

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

Medical/mental health treatment is outlined in the Oklahoma OP-030601 and in the section 140118.01 Medical Resource Manual, which further addresses ongoing care and follow-up. Review of policy and manual and additional forms including; PREA Response Checklist, Offenders Guide to Sexual Misconduct, Zero Tolerance Acknowledgement, Progress notes- treatment follow up, Treatment Plans, Referrals, and Mental Health Evaluation of Abusers Healthcare. Employees interviewed at the KBCCC confirmed their commitment and dedication to appropriate and personalized total healthcare to the inmates. Random interviews with inmates also confirm compliance. Sexual assault awareness brochures and handout materials received at intake and other information in the resident Orientation document advises the inmate population of the offerings by the Medical and Mental Health Department concerning evaluation, treatment and ongoing medical and mental health care as appropriate for the sexual abuse treatment of inmates, victims and abusers. Agency OP-030601 Attachment B, OP-140118 provided by KBCCC, additional documentation, and resident interviews confirm this PREA is compliant.

§115.286 – Sexual abuse incident reviews

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

Oklahoma PO-030601 and KBCCC OP-030601 Attachment B requires a facility conduct 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. This review must be conducted within 30 days of the conclusion of the sexual abuse investigation.

The KBCCC, in the past 12 months, has reviewed no administrative investigations of alleged sexual abuse or criminal investigations of alleged sexual abuse, excluding unfounded incidents since there were no investigations to review. The facility review team meets monthly and includes is the KBCCC Sexual Abuse Incident Review Committee that meets on a monthly basis and includes; Sharon Harrison District Supervisor, Lydia McBride, Assistant District Supervisor/PREA Compliance Manager, Glenroy Hines, Chief of Staff, Jeff Cecil, Mental Health Staff and Nancy McGee, Health Administrator. This committee is charged with the responsibility of reviewing sexual assaults by residents and staff. The District Supervisor is responsible for this review process.

Review of notification of Review Team meeting, documentation of sexual assault/abuse incident review and interviews with top management, security and specialized staff confirm the Review Team

has been trained and meets the requirements of this standard.

§115.287 – Data Collection

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

The agency's Inspector General Office collects accurate information and data for every allegation of sexual abuse at facilities under its control. The Oklahoma Department of Corrections, through its PREA Policy PO-030601 directs this data collection. The agency aggregates this incident-based sexual abuse data at least annually. The Office of the Inspector General annual report is approved by the Director, available on the agency website and updated annually corroborating this standard.

§115.288 – 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)

The KBCCC OP-030601 requires the agency annual report appear on the agency's website and provide monthly reports to improve the effectiveness of its sexual abuse prevention, detection and response policies and training, including identifying problem areas, and taking corrective action on an ongoing basis. Interviews with the District Supervisor, higher intermediate staff plus review of the monthly and annual reports, substantiates this data collection and review for corrective action.

§§115.289 – 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)

The agency PO-030601 ensures that the incident based information and aggregate data is collected and securely retained for at least ten years after date of initial collection unless Federal, State or local law requires otherwise, considered confidential information and is maintained by the Office of Inspector General. The records retention schedule brochure was

reviewed by this auditor along with a memo from records management indicating security of the Oklahoma government records from creation to final disposition. The Office of the Inspector General makes available to the public its annual report on PREA on the agency's website. The policy on records retention schedule and the report on records management were reviewed and confirm storage, publication, and destruction is per PREA standard.

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 the agency under review.

Marilyn (Lynn) McAuley

January 19, 2015

Auditor Signature

Date