

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



Name of facility:		Correctional Reception Center	
Physical address:		11271 State Route 762, Orient, OH 43146	
Date report submitted:		June 11, 2015	
Auditor Information		James Curington	
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Date of facility visit:		May 18, 2015 – May 22, 2015	
Facility Information		Correctional Reception Center	
Facility mailing address: <i>(if different from above)</i>			
Telephone number:		614-877-2441	
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:		David McCartney	Title: Operational Compliance Manager
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Agency Information			
Name of agency:		Ohio Department of Rehabilitation and Correction	
Governing authority or parent agency: <i>(if applicable)</i>		State of Ohio	
Physical address:		770 West Broad St., Columbus, OH	
Mailing address: <i>(if applicable)</i>			

<i>different from above)</i>			
Telephone number:	614-752-1159		
Agency Chief Executive Officer			
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Agency-Wide PREA Coordinator			
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AUDIT FINDINGS

NARRATIVE:

The Correctional Reception Center (CRC) of the Ohio Department of Rehabilitation and Correction (ODRC) located at 11271 State Rd. 762, Orient, OH 43146 was scheduled for a 2015 Prison Rape Elimination Act (PREA) Audit, May 20 - 22, 2015. This PREA Audit was scheduled by the ODRC through the American Correctional Association (ACA) in conjunction with an American Correctional Association Accreditation Audit May 18 – 20, 2015. James Curington, certified PREA auditor, was notified by the ACA of his participation in the ACA Audit beginning Sunday, May 17 and his appointment as PREA auditor May 20 – 22. This auditor compliments both the ODRC and the ACA for this weeklong process which opens the facility to a thorough review (both ACA standards and PREA standards) which, in this auditor’s opinion, compliments and supplements both audit processes.

The audit process for the Correctional Reception Center started with contact from the Agency PREA Coordinator and his staff, supplying the PREA auditor a wealth of documents, materials, information, and the PREA Audit: Pre-Audit Questionnaire Adult Prisons and Jails to assist the auditor in his review of the institution for compliance with PREA standards. Specifically, there were 43 folders with said documents, materials and information addressing all 43 PREA standards.

The PREA Audit Instrument, used for adult prisons and jails, was supplied by the National PREA Resource Center (PRC) through its website. The Audit Instrument (and its seven sections, A-G) is outlined as follows: A) the Pre-Audit Questionnaire, B) the Auditor’s Compliance Tool, C) the Instructions for the PREA Audit Tour, D) the Interview Protocols, E) the Auditor’s Summary, F) the Process Map, and G) the Checklist of Documentation. This instrument is the basis for the auditor’s assessment process. Part A, the Pre-Audit Questionnaire Adult Prisons and Jails was completed by the ODRC and the CRC with documentation/materials which can easily be uploaded for review. As part of this narrative, the auditor wishes to thank the ODRC and the CRC for the completeness and thoroughness of information included in the Pre-Audit Questionnaire and thumb drive (from the ACA Audit Report to the “zero-tolerance” policy).

Following the protocols, including the posting of notices and making contacts with the ACA and ODRC/CRC, the auditor began reviewing the materials forwarded in the weeks prior to the audit. The auditor, beginning with the Pre-Audit Questionnaire, reviewed every item by opening each of the 43 standard folders and reviewing what was contained in those folders and supplemental information available on the Internet. With this posting of notices; making contacts; scheduling; agenda; methodological/systematic review of the above-mentioned documents, materials, and tools; the pre-audit review was accomplished.

The site visit audit process began Sunday evening with an informal dinner gathering between the CRC staff, including the Warden, the ACA audit team and the PREA auditor. This informal get-together for the dual audit of the CRC was a good opportunity to meet and discuss with one another their backgrounds, experiences, and interests, as well as the upcoming week's activities.

Overall the audit schedule/agenda was followed:

Monday) Meet with the Warden and key staff, introduce ourselves and discuss the weeks' time frame, tour the Correctional Reception Center, review the ACA standards; and stay late to meet and greet the night shift.

Included on the tour were the following:

Rick Chuvalas	Warden
George Frederick	Deputy Warden of Operations
Karrie Hupka	Deputy Warden of Special Services
David McCartney	ACA/PREA Coordinator
Andrew Albright	Chief, Bureau of Agency Policy and Operational Compliance
Michelle Burrows	Marion CI PREA Compliance Manager
Barbara Skeen	ACA Chairperson
Jim Csenar	ACA Auditor
Jim Curington	ACA Auditor and PREA Chairperson
George Smith	Major
Jeff Martin	Unit Management Chief
Brad Caughman	Warden's Assistant, Scribe for Barbara Skeen
Steve Thornton	Labor Relations Officer, Scribe for Barbara Skeen
Mavis Wingard	Inspector, Scribe for Jim Curington
Liann Bower	Agency PREA Administrator

The tour included all areas of the facility, most of which were completed the first day. However, it is noted that visits and revisits were continually made throughout the week to become as familiar as possible with the facility and its operations. The team toured the facility from approximately 8:30 a.m. to 2:30 p.m. Audit tour follow-up visits and revisits were from 5/18-22/2015.

Areas toured:

- 1) Main Entrance
- 2) Administration
- 3) Segregation
- 4) Medical
- 5) Food Service
- 6) Inmate Records/Inmate Intake
- 7) Commissary
- 8) Eastside Housing (312 double/single cells) C1, C2, C3, and D1-2, D3, Housing Unit including D4 Youthful Offender Separate Housing
- 9) Westside housing (620 double cells) R 1-2, A 1-4, B 1-4,
- 10) Visiting Hall, Control Central
- 11) Maintenance, Power plant
- 12) Armory
- 13) Recreation, Education, Chapel.

Tuesday) Visits and revisits to the facility, staff and inmate interviews, and review of the ACA standards.

Wednesday) visit and revisit the various areas of the CRC. A closeout/exit headed by the ACA Chairperson and team was held in the CRC large Chapel in the center of the compound. The exit interview was well attended by the CRC staff, the Director of the ODRC, visitors from headquarters Support Services and others.

The closeout revealed, and the ACA Audit Team recommended, the finding of 100% compliance with Mandatory Standards and 99% + compliance with Non-Mandatory Standards.

It was a special privilege and pleasure to have the Director of the Ohio Department of Rehabilitation and Correction attend and speak at the ACA closeout. Afterword, there was an opportunity for the PREA auditor to visit briefly with the Director and thank him for his commitment to PREA compliance in the state of Ohio.

After the ACA closeout, the PREA auditor continued to work specifically on the formal/scripted interviews for specialized staff, random staff, and inmates. The audit continued on to the night shift where staff of the night shift were formally interviewed.

Thursday) scripted and formal interviews of staff and inmates continued along with a review of the PREA standards. The folders, and the provisions, of each of the 43 PREA standards with other applicable materials which included, compliance documentation, ODRC policy, CRC policy, previous ACA report, supporting data, etc. were reviewed with input from the Warden, the Institutional PREA Manager, the Agency PREA Coordinator, the Agency PREA Administrator and other key CRC staff as needed.

Friday) final visits were made to the key areas of Reception and Youthful Offender Housing. The tour, visits and revisits were important for the PREA auditor to assess the reception process, and the youthful offender housing and conditions of confinement. As an overview, the PREA auditor was positively impressed with these two crucial aspects of inmate incarceration.

The Youthful Offender Reception Process and the Youthful Offender Housing was positive, professional, and PREA compliant.

The final count of formal and scripted interviews for staff was 35. Sixteen random staff were interviewed and 19 specialized staff were interviewed. Final count for inmates who were formally interviewed from script was 27 (5 youthful offenders) which included inmates from each housing unit. In addition to the formal interviews, 25 other inmates (6 youthful offenders) were informally interviewed referencing conditions of confinement and PREA standards.

The on-site visit was completed about 10 a.m. Friday, May 22. That morning, in addition to the Youthful Offender Housing visit and the Receiving area visit, the auditor met with the Warden and key staff and discussed the procedures to follow having completed the Pre-Audit Review and the On-Site Audit Review. It was indicated that the auditor would review his final notes and prepare an interim report. If the interim report indicates all applicable standards compliant or exceeds, it would become the final report. The auditor related to the Warden that there were no decided/decisive Non-Compliant PREA standards but again, all materials, notes, documentation and interviews needed be reviewed to accomplish the writing of the report. An interim/final report would then be submitted to the PRC with a Post-Audit Report.

Throughout this review and throughout this summary of audit findings, the auditor used materials/tools/actions (meaning the Pre-Audit Questionnaire, the ODRC policy and documents, auditor notes and reviews, the audit tour and visits during the week, and the interviews with staff, visitors, others and inmates) along with "good correctional judgment" to assess each standard and its' provisions of Compliance, Non-Compliance, Non-Applicability or an Exceeds Compliance rating/finding.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Correctional Reception Center of the Ohio Department of Rehabilitation and Correction is located in Pickaway County about 15 miles south of Columbus, Ohio. The CRC is the main reception center of the state of Ohio accepting the admissions of state sentenced inmates from 63 of 88 Ohio counties. The goal of this facility is intake assessments for reception inmates to include medical, mental health, education, social services, classification, and overall general orientation into the correctional system. The assessments made at the CRC establish the baseline for public safety/security levels, programmatic needs, and as the title of the agency describes "rehabilitation and correction". Additionally the intake process in the last 12 months has taken 11,670 inmates and has appropriately distributed/assigned them throughout the ODRC. An average day at the CRC generally sees the processing of 30 to 70 inmates from the court's commitments into the ODRC.

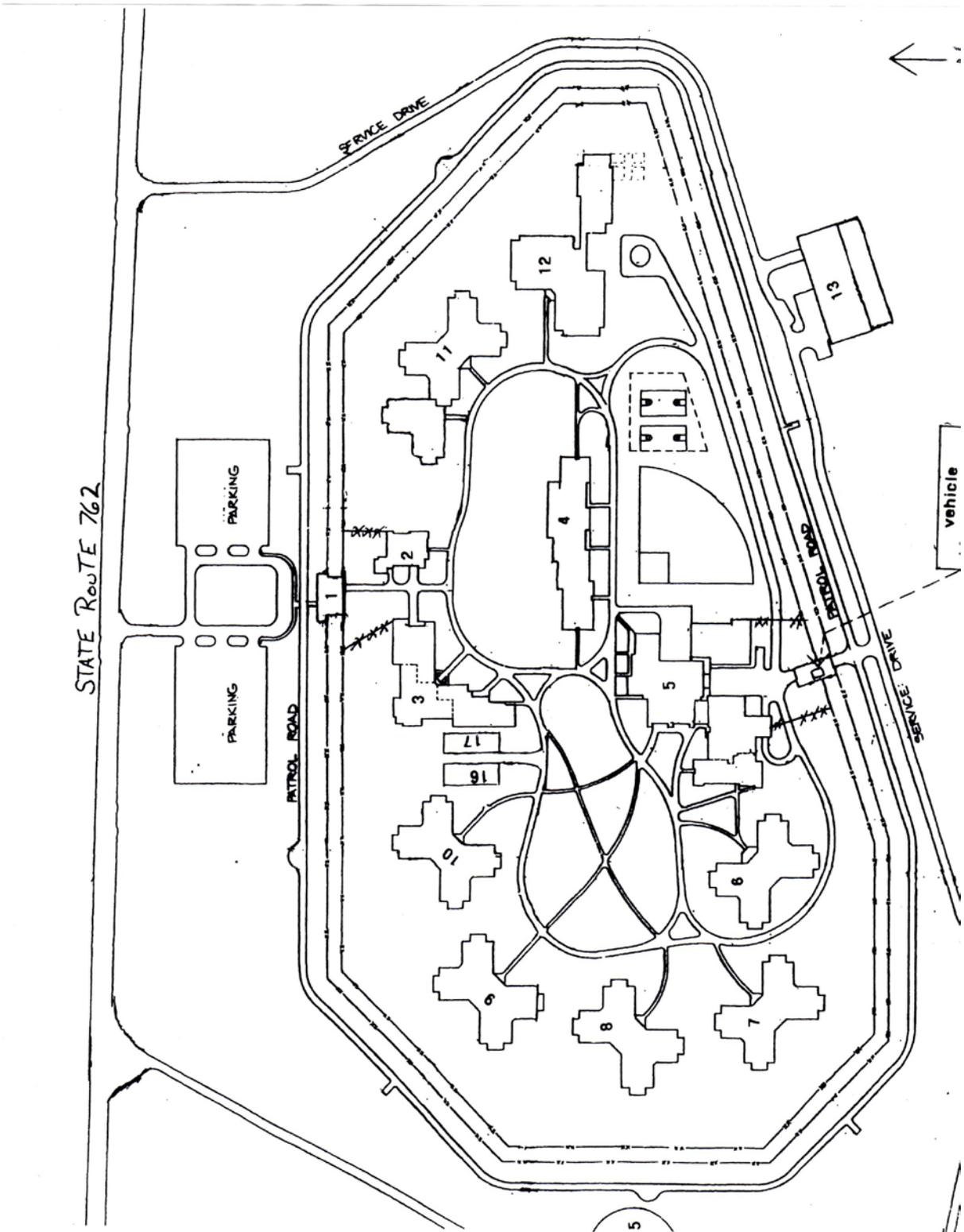
The institution itself opened September 22, 1987. The facility was built on 50 acres of land, 35 acres inside the fence and 15 acres outside the fence with an original design capacity of 1562 inmates (average daily population for the last 12 months 1718). Note: although the population is more than the design capacity, there was no feel of overcrowding during the weeklong PREA Audit, on-site visit and review. The reasons assessed by the auditor being; first, the majority of inmates are usually received inmates and will be transferred to parent/permanent institutions when reception and orientation is complete; second, there is adequate and appropriate staffing and this staff is knowledgeable, professional and works hard; and third, there is a sense of order, custody and control by the leadership and management team the CRC.

The compound is oblong, oval like shaped, and is enclosed by two chain-link fences and a perimeter road which is patrolled by two armed vehicles. The Security fence features include; motion detection, microwave alarms, razor wire, and riverbed rocks surrounding the 15 buildings which are set in a campus style layout. There are two entries to the compound; sallyport/reception at the back (south) of the facility and the pedestrian entrance with the Armory at the front (North) of the facility.

The facility is essentially divided into an Eastside and a Westside with housing cell complexes on each side. The Eastside has two large housing complexes (312 single/double cells). The first housing complex having general population units C1, C2, a Residential Treatment Unit (RTU) C3; a second housing cell complex having treatment units D1, D2, D3, and a separately secured juvenile offender housing unit D4. The Westside has 5 housing cell complexes (620 double cells, 39 segregation cells). First) reception housing R1 and R2, second) reception housing A1 and A2, third) reception housing A3 and A4, fourth) reception housing B1 and B2, fifth) general population B4 and B4. These two sides separated by three multipurpose buildings; the administration/segregation/medical building, the Chapel/education/recreation building, and the maintenance/food service/commissary intake/reception building. Please see the following aerial view and diagram of the CRC.

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The majority of the inmate population is assigned to the reception process with access to some educational, social service, religious, and wellness/recreational programs. A cadre of 200 minimum/medium inmates are assigned to the CRC and work in areas such as food service, maintain the grounds, perform housekeeping/janitorial services, assist in recreation programs, maintenance operations, and can in fact participate in reentry programs that have a positive impact on the community. There are also a few specialized program/housing areas such as the Residential Treatment Unit (RTU), Youthful Offender Unit, and Sex Offender Risk Reduction Unit.

The Mission of the Correctional Reception Center is to maintain a safe and secure environment for staff and inmates conducive for rehabilitation and protection of the community.

Demographics for the Correctional Reception Center:

Rated capacity: 1562 (current capacity 1863)

Current population: 1509 (05/18/2015 daily population report #715680); youthful offender 33

Average daily population: 1718

Age range of offenders: 16 to 65 (16 and 17 year-olds separated from adult offenders)

Gender: Male

Security: close security. Levels 1 (minimum) – Level 5 (maximum). Majority Level 3

Staffing: 537.5 total 312 Correctional Officers, 122 Other, 33.5 Medical, 54 Mental Health, 2 Commissary, 9 Education Services, 5 Recovery Services (10/14/2014 memo from Regional Director and Deputy Director Administration)

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 8

Number of standards met: 33

Number of standards not met: 0

Non-applicable: 2

§115.11 - Zero tolerance of sexual abuse and 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 Correctional Reception Center is the primary reception facility in the ODRC. This auditor has assessed an "exceeds standards" compliance. The auditor is continually impressed with the commitment, enthusiasm, and efforts the agency has put forth in its commitment to eliminating rape in prison and with ODRC's "zero tolerance" policy.

The Correctional Reception Center and the Agency (ODRC) are committed to eliminating rape in prison and following the PREA law. The Agency has a policy 79-ISA-01 Prison Rape Elimination, and the institution has a policy CRC-ISA-01 Institution Zero Tolerance; both policies direct and outline "zero tolerance" of sexual abuse and sexual harassment in prison.

The CRC policy details the following:

- 1) Authority, Ohio Revised Code 5120.35.
- 2) Purpose, for protection, detecting, and responding to sexual misconduct.
- 3) Applicability, all persons employed; inmates, volunteers, and contractors.
- 4) Interviews, 21 definitions from abuse to voyeurism.
- 5) Policy, implement the Agency "zero tolerance" policy at the CRC.
- 6) Procedures,
 - A) Sexual misconduct protection.
 - B) Sexual misconduct detection.
 - C) Responding to reports of sexual misconduct.

Including inmate education, employee training, with attachments (investigator protocol, allegations of sexual abuse, first responder flowchart, and sexual abuse first responder checklist).

The Agency/CRC policy includes definitions of prohibited behaviors, sanctions, strategies, and responses.

The auditor reviewed personnel organizational charts outlining the PREA Coordinator's position, the Agency's organizational structure and the PREA Manager's position in the institutional organizational structure. They do have time, in their positions, to coordinate Agency and facility efforts. The Institutional PREA Compliance Manager reports to the Warden.

The auditor reviewed the Pre-Audit Questionnaire, policies, documents, and had interviews with the Agency PREA Compliance Coordinator and the Institutional PREA Compliance Manager to assess an "exceeds" rating for this standard 115.11.

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

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

The auditor reviewed the ODRC Policy 79-ISA-01 Prison Rape Elimination which states “all new or renewed contracts for the confinement of department inmates must include a provision that the contractor will adopt and comply with PREA standards. In addition, any new contractor shall provide for contract monitoring to ensure that the contractor is complying with PREA standards” and the addendums to the contracts for housing Ohio inmates with the Corrections Corporation of America and the Management Training Corporation outlining that these two private agencies will adopt and comply with PREA national standards.

Review of the policy, contracts, addendums, and the telephonic interview with the Contract Administrator and interviews with the Agency PREA Compliance Coordinator confirmed compliance with this standard.

§115.13 – Supervision and Monitoring

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

The Correctional Reception Center which receives all-male inmates and youthful offenders for the ODRC is focused on, committed to, and trained in, establishing and securing the safety of each individual inmate who is admitted by the CRC. Review of the staffing of the facility, review of the performance/professionalism of the staff and leadership of higher level and intermediate staff and review of the day-to-day supervision and monitoring operations of the facility confirms this “securing the safety” of individuals.

The Agency through its’ Policy, 79-ISA-01 Prison Rape Elimination requires that each facility operate, develop, document and make its best efforts to comply, on a regular basis, with the staffing plan. The authorized staffing levels for the CRC are as follows: total staffing 537.5; correctional officer 312, other 122, medical 33.5, mental health 54, commissary 2, education services 9, recovery services 5.

§115.14 – Youthful Inmates

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

The Correctional Reception Center is responsible for not only intake of the ODRC's youthful offenders but also for housing the ODRC's youthful offenders under the age of 18. There were 27 offenders the first day the auditor visited and 33 on the last day (five days later) when the auditor departed from the on-site visit. Inmates were mostly age 17 with one 16-year-old interviewed. The CRC houses all male youthful offenders for the ODRC. The ODRC Policy 71-SOC-05 Youthful Offender Program states "youthful offenders under 18 years of age shall be assigned to the designated specialized units at the Correctional Reception Center (CRC), or if female to the Ohio Reformatory for Women", (except as provided for youthful offenders that may be violent or predatory or there is another overriding security, medical or mental health need). When housing a youthful offender outside the specialized unit, a youthful offender special review must be made and submitted to the Regional Operations Manager at the Operation Support Center. The policies and procedures of the ODRC clearly outline the emphasis of separate youthful offender housing and supervision.

The auditor spent considerable time with the youthful offenders, in the Youthful Offender Housing, with correctional officers and staff supervising youthful offenders, and with the administrative and support staff responsible for the youthful offenders. With the auditor's caveat that there should be no youthful offenders in an adult facility, it is obvious that an institution with the appropriate staff could not be reasonably built for the 27 male youthful offenders that are housed at the CRC. Additionally, the access to specialized staff, health treatment, mental health, educational staff, counselor staff, recreation staff, and youthful offender trained correctional officer staff can only be afforded for an institution within an institution. Essentially, Youthful Offender Housing and supervision at the CRC is an institution within an institution. There is one unit at the CRC that has been used for housing that provides sight and sound separation between youthful and adult offenders. Inmate rooms, casual areas, showers, and sleeping quarters, are all separate from adult offenders.

There was no sight, sound, or physical contact with any adult inmate in the Youthful Housing Unit at the CRC. In the past 12 months there have been zero (0) number of youthful inmates placed in the same housing unit as adult inmates at the CRC.

Youthful inmates dine separately from adult inmates. Programs are separate including education, recreation, library, commissary, etc.

Most of the programming/work is accomplished through the state requirement that under 18-year-olds must be involved in full-time high school education. All under 18 age inmates at the CRC were enrolled in the ODRC's CRC High School, part of the

Ohio Central School System (a formally Chartered District for the ODRC established by the Ohio Department of Education under Revised Code 3313.61 in 1973).

The auditor observed the supervision and monitoring of the youthful inmates in outside recreation and in the dining hall. Youthful inmates were always directly supervised by staff and any sight and sound contact with adult inmates was merely incidental. Appropriate physical separation was maintained.

The facility documents any instance in which youthful inmate's access to large muscle group exercise, legally required education services and other programs was denied (in exigent circumstances). Note there have been zero (0) number of youthful inmates who have been placed in isolation in order to separate them from adult inmates.

§115.15 – Limits to Cross-Gender Viewing and Searches

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

The auditor reviewed the ODRC Policy 79-ISA-01 Prison Rape Elimination; Policy 79-ISA-05, Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI); Policy 310-SEC-01 Inmate and Physical Plant Searches; and staff training. Staff was/is well trained, professional, and knowledgeable in performance of their security duties. 100% of all security staff are trained in cross gender patdown searches and searches of transgender and intersex inmates in a professional and respectful manner.

There have been zero (0) number of cross gender strip and cross gender visual body cavity searches of inmates at the CRC.

The CRC is an all male facility.

Female staff announced themselves when entering male housing units. Additionally, there is installation throughout the ODRC of a PREA announcement/alert signal which can be activated by staff of the opposite gender when entering a housing unit.

At the CRC, inmates can perform bodily functions, change clothes, and shower without being viewed by staff of the opposite gender.

In the past 12 months, there have been zero (0) number of cross gender strip and cross gender visual body cavity searches of inmates. The CRC/ODRC does not conduct cross gender strip and cross gender visual body cavity searches of inmates except in exigent circumstances per policy 310-SEC-01 Inmate and Physical Plant Searches.

Interviews of staff and inmates, as well as the facility tour confirms compliance.

§115.16 – Inmates with Disabilities and Inmates English Proficient

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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)

The auditor reviewed the following policies, documents, and materials:

- 1) Policy 64-DCM-02 Inmates With Disabilities
- 2) Policy 79-ISA-01 Prison Rape Elimination
- 3) contract for Deaf Interpreter, Deaf Service Coordinator
- 4) Department of Administrative Services (DAS) contract for interpreter services, including telephonic service, American Sign Language service on-site, spoken language services on-site, and written translation services
- 5) Inmate education and books in English and Spanish (Fight Back Through Awareness)
- 6) inmate education video
- 7) PREA all staff electronic e-learning PREA and curriculum

These all assisted in assessing compliance. The review also supported the Agency's and Institution's commitment to making sure that all staff and inmates know that disabled inmates are to be given equal opportunity to participate in the Agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

Interviews with disabled inmates, randomly selected inmates, and interviews with staff supported compliance with this PREA standard.

Agency policy prohibits the use of interpreters except in limited circumstances.

In the past 12 months there have been zero (0) number of instances where inmate interpreters have been used concerning PREA response or investigation.

§115.17 – Hiring and Promotion Decisions

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

The ODRC/CRC Policy 31-SEM-02 Standards of Employee Conduct and Policy 34-PRO-07 Background Investigations outline policy and procedure for hiring and promotion background checks.

Agency policy dictates background checks to be conducted every five years for employees and contractors. Policy also states that material omissions regarding sexual abuse/sexual harassment and material false information shall be grounds for termination.

Civil service applications were reviewed for the required disclosures and acknowledgments, for thorough background checks and law enforcement background checks. Hiring and promotion decisions were also reviewed. It is the opinion of this auditor that the ODRC/CRC does a good job establishing policy outlining and directing employees and prospective employees on how to comply with PREA hiring and promotion standards.

The ODRC Standards of Conduct requires employees to self-report any criminal activity, sexual abuse, and or sexual harassment behavior/activity.

The Human Resources/Personnel Department at each facility coordinates with the ODRC Central Office for background information, background checks, and personal history checks required to employ staff at the institution. The CRC complies with this standard.

In the past 12 months there have been seventy (70) persons who have had criminal background record checks who may have contact with inmates. There have been four contracts for services where criminal background checks were conducted.

The auditor reviewed this background check process and interviewed the Human Resource staff confirming compliance.

§115.18 – 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 Correctional Reception Center has modified its youthful offender D4 cellblock housing and living space including its programming, library, common areas such that this housing is separated from any adult offender sight, sound, and contact. The modifications were such that it became more youth friendly with counseling rooms, study areas, program offices and indoor recreation/dayroom accommodations. The auditor visited this housing and activity area four times during the audit. Each visit revealed full-time programming, clean and appropriate accommodations, and a youthful offender oriented living quarters. D4 cellblock has 32 cells and can hold up to 64 youthful offenders (two per cell).

Technology improvements have been made throughout the CRC including cameras in the Youthful Offender Unit. There are 227 cameras in the CRC; 28 exterior cameras, and 199 interior cameras. These are monitored in the Warden's office, Major's office,

Inspector's office, and Unit Management Chief's office (digital, pan, tilt, zoom, 30 day recordings).

The staffing plan indicates that the CRC uses its plan to supplement Policy 79-ISA-01 Prison Rape Elimination and 23-BUD-01 Staffing Requirements. The CRC has used the following to calculate staffing levels and the need for video monitoring:

- 1) generally accepted correctional practices
- 2) judicial findings of inadequacy
- 3) investigative agency findings of inadequacy
- 4) oversight bodies finding of inadequacy
- 5) physical plant blind spots or areas where staff or inmates may be isolated
- 6) the composition of the inmate population
- 7) the number and placement of supervisory staff.

Interviews with the Warden, intermediate and higher level staff, and Human Resources confirmed compliance with this standard.

§115.21 – Evidence Protocol and Forensic Medical Examinations

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

This standard has been reviewed several times at the ODRC facilities and this auditor and other auditors have found that not only does this standard comply with PREA but in many cases exceeds standards.

This auditor's review and assessment is that this standard substantially exceeds the requirement outlined for 115.21 Evidence Protocol and Forensic Medical Examinations. This is based on the commitment of the ODRC to do the best investigations/evidence collections (beginning with the Ohio State Highway Patrol) and to do the best forensic medical examinations (beginning with the Ohio State University).

The Ohio State Highway Patrol is used to handle every investigation of sexual abuse. There is a Memorandum of Understanding (MOU) with the OSHP. The MOU between the Director of the ODRC and the Director of the Ohio Department of Public Safety states that there will be a uniform process for evidence collection and the investigation of PREA related incidents. This protocol is adapted from the Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examination Adult/Adolescents". Furthermore, this MOU encompasses all investigative/evidence collection steps outlined in standard 115.21.

The Ohio State University is used for forensic medical examinations and has a contract with the ODRC. This contract also establishes the appropriate protocols. There have been three (3) forensic medical exams conducted during the past 12 months and in all exams, SANEs/SAFEs have been used.

The Sexual Assault Response Network of Central Ohio (SARNCO) for Pickaway County is used to provide response services and Victim Support Services (VSP) to those incarcerated at the CRC and who report being sexually assaulted/abused.

Documents and policies 79-ISA-01, 79-ISA-02, 68-MED-15, Medical Protocol B-11, MOU's with OSHP and SARNCO, VSP certificates, investigative policy, evidence protocol, and interviews with specialized health staff, mental health staff, random staff, and inspectors from the OSHP support an "exceeds" designation.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

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

The ODRC ensures that an administrative and/or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (that are not unfounded). There is a "PREA Incident Packet" for the staff to complete which helps ensure, and documents, referrals and follow-up as required.

The ODRC/CRC Policy 79-ISA-02 Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation requires an incident report, responder duties, and the protocol for reporting. Reporting proceeds through the Allegation of Sexual Abuse Flowchart to notify the Shift Commander, notify Medical Services, notify the Investigator, notify the OSHP, notify the PREA Compliance Manager, and notify the Victim Support Person. Special note, there is an OSHP state trooper office at the CRC to assist with communication/referrals.

The first responder action and follow up with the Incident Report, Appendix D/Sexual Abuse-First Responder Checklist and Appendix C/Allegation of Sexual Abuse-First Responder Flowchart are the basis for ensuring referrals.

During the past 12 months there have been 54 allegations of sexual abuse and sexual harassment that were received. All of these allegations resulted in referrals and investigations. Two investigations were for criminal investigation. Interviews with the Institutional Investigator and the OSHP Investigator/Trooper confirmed excellent communications, teamwork, and appropriate follow-up of investigative protocols.

Interviews with staff and inmates confirmed that this standard is met.

Agency policy for referring allegations of sexual abuse or sexual harassment for investigation is published on the agency website.

§115.31 – Employee Training

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

The Correctional Reception Center and the Agency ODRC completely and thoroughly trains its employees in PREA. Employees are actually tested as to the knowledge they acquired during the training. The auditor has continued to be impressed by the sophistication of the training programs presented to staff within the Agency.

Records, policies and documents reviewed and supplied by the CRC and the Agency included the following: Training Policy 39-TRN-10 Employee Orientation Training (10 pages); 79-ISA-01 Prison Rape Elimination (11 pages); CRC PREA staff training; institutional transfer orientation/training; PREA e-learning; PREA Training Information Center, intranet; PREA Appropriate Supervision of LGBTI, outline training; and references about employee training from the questionnaire completed by the CRC. In addition, from these listed documents/materials, the auditor used the formal scripted interviews of staff to confirm training. All items listed in the standard 115.31 (10 bullets outlined) were asked of each random staff member from each shift and all responded affirmatively. These 10 topics are also addressed in the test which each staff member receives. Thus, not only were staff trained, they were knowledgeable in the training they received.

In the past 12 months, 470 staff employed by the facility, who have contact with inmates, were trained. All staff received training at a minimum, in annual in-service training required of each employee.

§115.32– Volunteer and Contractor Training

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

This standard requires that volunteers and contractors who have contact with inmates, (a) receive appropriate training, (b) understand how to report sexual abuse, and that the Agency maintain documentation of this training.

The auditor reviewed the seven-page Training Script, the Training Acknowledgment Form (which is maintained), and the Institutional Training Session Reports (which the

institution documents and maintains). The following is detailed on the acknowledgment form:

- 1) ODRC's zero tolerance for sexual abuse
- 2) Zero tolerance for sexual harassment
- 3) How to report sexual abuse and sexual harassment
- 4) Sexual abuse and sexual harassment prevention
- 5) Sexual abuse and sexual harassment protection
- 6) How to respond to sexual abuse and sexual harassment
- 7) The legal prohibition on any sexual activity with inmates
- 8) The identifiers of possible sexual assault victims
- 9) Sexual assault prevention strategies.

The above documentation, training, and interviews with contractors and volunteers confirm compliance with this PREA standard.

In the past 12 months, 114 volunteers and contractors have been trained in the Agency's policies and procedures regarding sexual abuse/sexual harassment prevention, detection, and response.

§115.33 – Inmate Education

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

Inmate education begins immediately upon reception at the CRC. The auditor had the opportunity to observe this reception process and it was clear that the staff at the CRC was professional, courteous, and knowledgeable of their responsibilities when dealing with inmates admitted to the ODRC/CRC.

The ODRC Policy 79-ISA-01 Prison Rape Elimination details the educational information following:

- 1) Oral and written information outlining "zero tolerance" policy, prevention, self-protection, reporting, treatment and counseling.
- 2) Within 30 calendar days of arrival at the reception center the inmate is educated on the right to be free from sexual misconduct and the right to be free from retaliation for reporting such incidents and this includes the agency's policies and procedures for responding to such incidents.
- 3) Oral information on sexual misconduct is also given to inmates upon arrival at the parent/assigned institution. Additionally, information is provided within the Inmate Handbook.
- 4) Documentation of the inmate's participation in orientation education is accomplished. Acknowledgment checklists are used for the inmates.

- 5) The Institution PREA Compliance Manager shall ensure that information is readily available.
- 6) All materials are approved by the Agency PREA Coordinator.
- 7) Appropriate provisions for inmates not fluent in English and those with disabilities are made such that all inmates can understand and be accommodated, as appropriate, for PREA training.

The Correctional Reception Center has posted throughout the facility and placed in Inmate Handbooks, key PREA information addressing prevention, detection, reporting, and an educational slogan "Fighting Back Through Awareness". Clearly this is an effort to provide a safe, humane, and appropriately secure environment. Sexual misconduct among inmates and by staff and inmates is strictly prohibited within the CRC and the ODRC. It was noted that inmates were informed verbally and in writing that they have "the right not to be sexually abused or harassed".

As noted, the CRC is the ODRC's main reception center and as such, in the past 12 months, 11,670 inmates have been admitted to the CRC and all 11,670 inmates have been educated to PREA.

Inmate and staff interviews confirmed this inmate education.

§115.34 – Specialized Training: Investigations

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

Documents reviewed by the auditor:

- 1) ODRC Policy 79-ISA-01 Prison Rape Elimination including investigations in confinement settings, interviewing techniques for sexual abuse victims, proper use of Garrity warnings, sexual abuse evidence collection and the criterion for evidence required.
- 2) National Institute of Corrections, PREA e-learning center, video training
- 3) Institutional Investigator training and certificate
- 4) OSHP State Trooper training and certificate
- 5) Specialized Investigator training agenda.

Documentation is maintained on all investigator specialized training. There is one Institutional Investigator at the CRC and one OSHP Trooper assigned to the CRC who has an office at the CRC.

Interviews with the Institutional Investigator and the OSHP Trooper/Investigator, assigned to the CRC, confirmed the above and compliance with this standard.

§115.35 – Specialized training: Medical and mental health care

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

All medical and mental health care practitioners who work at the Correctional Reception Center received specialized training. 100% of the staff, numbering 80, received the specialized training. This training includes the specialized e-learning PREA Medical and Mental Health Professionals Training as follows:

- 1) student performance objectives
- 2) sexual abuse detection/assessment
- 3) detection of victims
- 4) potential responses to victims
- 5) how to respond to victims
- 6) preventing incidents of sexual abuse
- 7) reporting sexual misconduct
- 8) what is your role?
- 9) Preserving forensic evidence (one)
- 10) health care staff mandatory reports by law
- 11) preserving forensic evidence (two)
- 12) on-site examination
- 13) on-site examination of delayed reporting of sexual abuse
- 14) compassionate and comprehensive treatment for patients
- 15) crisis services.

The Agency Policy 79-ISA-01 Prison Rape Elimination, the contract Medical/Mental Health Training, the health care protocols, and the above list all provide for and ensure the proper training.

Documentation is maintained that all medical and mental health staff have completed the required training.

Interviews with specialized staff confirmed the above specialized training meets standard compliance.

§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)

The PREA auditor was positively impressed with the reception and orientation of inmates at the CRC to include not only the ODRC's zero tolerance training on how to report sexual abuse/harassment, prevention, detection, response, and strategies for sexual assault prevention, but also including the screening for risk of victimization and abusiveness of all inmates received.

The auditor's assessment of "exceeds" for this standard was based on the review of the reception process, the questionnaire information furnished, the auditor notes made while observing the process, the documentation furnished by both the ODRC and the CRC, and the interviews with intake, risk assessment staff, and inmates (random inmates and inmates in the reception process).

Documentation reviewed included policies 79-ISA-01 Prison Rape Elimination; 79-ISA-04 PREA Risk Assessment and Accommodation Strategies; the classification transfer list and assessment; the PREA Risk Assessment Process; the 30 day review; and the special assessment process. The ODRC has an automated classification process with numerous evaluation screens covering, at a minimum, the 10 criteria outlined in standard 115.41 (d) with opportunity for further evaluation/assessment. The documentation also outlines time frames of 72 hours for assessment upon admission and 30 day follow-up review.

Most impressively, the CRC has received 11,670 inmates and has assessed 11,670 inmates in the past 12 months as documented by the Pre-Audit Questionnaire and the Departmental Offender Tracking System (DOTS) spot checked by the auditor.

Interviews with specialized staff, random staff, and inmates confirms compliance and speaks to this highly developed classification/assessment process which exceeds requirement of this standard.

§115.42 – Use of Screening Information

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

The CRC uses the Departmental Offender Tracking System (DOTS) in the PREA Risk Assessment Process to place inmates at the appropriate parent/permanent facility. As mentioned above, the 11,670 inmates processed in the last 12 months have been through this comprehensive review and designated to the 26 facilities throughout the ODRC.

Unit Management is utilized by the ODRC to make use of the screening information at the CRC with a follow-up by the Unit Management/Intake Team at the receiving institution to "double check" the assessment of each individual inmate. Individual determinations on how to ensure the safety of each inmate is made, reviewed and continually reassessed.

The CRC makes housing and program assignments for individual inmates ensuring safety. The Agency/CRC (the Central Office is involved) also makes assessments for transgender or intersex inmates to an Ohio facility on a case-by-case basis.

Interviews with staff and inmates, documented reviews and review of classification/assessment lists support compliance with this standard.

§115.43 – Protective Custody

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

The ODRC has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives have been made. There have been zero (0) number of inmates at the CRC who were held in involuntary segregated housing during the past 12 months.

The ODRC Policy 79-ISA-04 Risk Assessment and Accommodation Strategies directs and instructs staff on how to handle and ensure safety of specialized inmates. The CRC has been able to make, through its Unit Management Team, appropriate individual assignments and/or transfers such that involuntary segregated housing has not been used at the CRC.

Staff and inmate interviews confirm compliance with this standard.

§115.51 – Inmate Reporting

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

The ODRC and the CRC have established procedures for inmates to report sexual abuse/sexual harassment. The inmates, upon admission to the CRC, are informed verbally and in writing how to report (“Orientation Handout”).

The auditor used the Pre-Audit Questionnaire, the Agency policies, notes, documents, interviews, the tour, and review of this information to confirm compliance.

The Pre-Audit Questionnaire indicated that the Agency has procedures established allowing multiple internal ways for inmates to report privately to Agency officials about sexual abuse/sexual harassment, retaliation, or staff neglect/violation of responsibilities.

The ODRC Policy 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation outlines the procedures (VI. Procedures, A. Reporting of Sexual Misconduct and Retaliation). Also the Inmate Handbook, posters, the inmate education video and video script detail ways to report as listed below.

The ways to report internally are as follows:

- 1) verbally to any staff member
- 2) in writing to any staff member
- 3) to the Operation Support Center - 614-995-3584

The way to report externally:

Outside Agency Hotline 614-728-3155 (no cost to call from inmate phone).

Family and friends can report allegations of sexual abuse, sexual harassment, and retaliation on an inmate's behalf: by calling 614-995-3584 or by emailing DRC.ReportSexualMisconduct@odrc.state.oh.us

Inmates shall be given the opportunity to remain anonymous, upon request, to the outside agency.

There will be no retaliation for reporting incidents of sexual abuse or harassment.

The Agency has a policy mandating sent reports of sexual abuse/harassment verbally, in writing, anonymously, and from third parties. Staff are required to document verbal reports.

Staff can privately report sexual abuse/harassment of inmates by filling out an Incident Report and taking it to the PREA Compliance Manager or sending it to the Agency PREA Coordinator. Staff is trained in the above procedures.

§115.52 – Exhaustion of Administrative Remedies

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

The Ohio Department of Rehabilitation and Correction does not use the inmate grievance process for reports of allegations of sexual abuse or sexual harassment (memo to the file by the Agency PREA Coordinator).

§115.53 – Inmate Access to Outside Confidential Support Services

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

The CRC provides inmates with access to outside advocates through the Sexual Assault Response Network of Central Ohio (SARNCO). The auditor telephonically discussed with SARNCO the Memorandum of Understanding (MOU) providing services per PREA Audit Standards 115.21 (d) (e), and 115.53 (a) (b) (c).

Copies of the agreement have been maintained by both parties. The facility informs inmates, prior to giving them access to outside support services, the extent to which communications will be monitored.

Inmate and staff interviews, the CRC Orientation Handout, the PREA posters with hotline numbers, and the Inmate Handbook confirm inmate access to outside confidential support services.

§115.54 – Third-Party Reporting

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

Third-party reporting is outlined on posters in common areas of the facility, at the entrance to the facility, in inmate visiting areas, and through handouts to inmates, visitors, and staff. These posters and handouts contain confidential hotline numbers, numbers to the Agency Reporting Center, and other options for inmates/families/friends to report; and importantly, as the posters instruct to “Break the Silence”.

To “Break the Silence”, to report, to eliminate rape in prison is the proactive position that the Ohio Department of Rehabilitation and Correction is taking in changing an outdated, unsafe, uninformative culture of silence, (do not discuss, or look the other way) that has sometimes been normal procedure. The auditor feels the openness and frankness with which the ODRC has approached eliminating rape in prison is admirable and “the right thing to do”. This could be said of many of the PREA standards, but clearly the third-party reporting standard establishes and supports a very strong position i.e. third parties (friends, families, staff, inmates, and others) can report to the ODRC, to the hotline, and to the Ohio State Highway Patrol.

§115.61 – Staff and Agency Reporting Duties

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

The ODRC and the CRC requires all staff to report immediately and according to Policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation and Prevention of Retaliation, any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurs at the CRC.

This report must be made immediately. Furthermore, this Policy 79-ISA-02, Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation stipulates that retaliation and third-party/anonymous reports shall be reported to the Institutional Investigator.

The Agency form, Sexual Abuse – First Responder Checklist, assists in the steps to be taken when a security or non-security staff member is made aware of sexual abuse. Reporting is required. Staff is advised and directed to “complete the Incident Report”.

The question was asked during formal and scripted interviews, “Does the Agency require all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility?”. This question was repeatedly asked and was responded to in the affirmative by all staff interviewed.

§115.62 – Agency Protection Duties

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

The ODRC Policy 79-ISA-02, Prison Sexual Misconduct, Reporting, Response, Investigation and Prevention of Retaliation, states (in section F, page 13) how to handle reports of substantial risk of imminent sexual abuse. All reports require immediate action to protect the inmate.

- 1) All reports shall immediately be forwarded to the Investigator, Unit Management Chief, and Shift Supervisor.
- 2) When considering the protection of inmates, staff shall consider housing, transfers, and removal of alleged abusers.

- 3) Risk of imminent sexual abuse shall be investigated by a staff member assigned by the Managing Officer.
- 4) Inmates shall not be placed in involuntary segregation unless there is no alternative.
- 5) Appropriate paperwork will be completed.
- 6) The Managing Officer's designee shall provide a documented response within 48 hours
- 7) A documented final decision will be made within five calendar days.
- 8) A copy of the Imminent Risk of Sexual Abuse Form will be sent to Unit Management for special screening in the PREA Risk Assessment System.

In The past 12 months there have been zero (0) number of times at the CRC that an inmate was subject to substantial risk of imminent sexual abuse.

§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)

The ODRC Policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation outlines, upon receiving an allegation that an inmate was sexually abused while confined at another institution, appropriate notifications will be made. The Warden or his designee receiving the allegation, shall notify the Warden or his designee of the institution where the alleged abuse occurred. Such notification is to be provided as soon as possible but no later than 72 hours after receiving the allegation. This notification is to be documented. The Managing Officer that receives such notification shall ensure that the allegation is investigated.

In the past 12 months the CRC has received 24 allegations, during admission, of abuse while confined at another facility. Twelve (12) notifications were received from other facilities. The auditor, on checking documentation and with interviews of the Warden and Institutional Investigators, noted that contact/communication was appropriately made and follow-up at the CRC was accomplished.

§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)

It is the policy of the ODRC to provide a safe, humane, and appropriately secure environment, free from the threat of sexual misconduct for all inmates. Any employee that receives a verbal or written report of sexual misconduct or retaliation from an inmate, an anonymous source, or a third party shall immediately notify the Shift Commander and complete the Incident Report.

First responder duties for the CRC staff is outlined in the Agency Policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation. The Agency policy, as well as an Institutional policy, contains forms, flow charts and checklists to assist in the accomplishment of these first responder duties.

Initial Response and Protection Section of Policy 79-ISA-02 (section B page 5) and Institution Policy CRC-ISA-02 Institution First Responder, addresses first responders. The policy directs the following:

- 1) The first responder, non-security, will separate victim and abuser, advise victim not to destroy evidence, and complete the Incident Report (notification).
- 2) The first responder, security, will separate victim and abuser, preserve and protect the crime scene, review time periods, contact medical services, notify Institutional Investigator/OSHP, notify PREA Compliance Manager, notify victim support, and complete the Incident Report.

Staff of the CRC are knowledgeable of, and trained in, their duties and responsibilities concerning PREA. Random interviews with staff, interviews with specialized staff, training review, and testing results confirmed this knowledge.

§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)

The CRC has a written Institutional Plan which parallels the ODRC Overview Policy, to coordinate actions taken in response to an incident of sexual abuse.

This response includes a flowchart for first responders who receive an allegation of sexual abuse verbally, in writing, anonymously, or through a third-party. In addition to the first responder steps outlined in 115.64, the following is designed for security staff and non-security staff:

- 1) Non-security staff, in addition to a first response, will notify the shift commander and complete the Incident Report, this requiring a first security staff response which will begin with the following "2" (if not already accomplished)
- 2) Security staff, separate the alleged victim and abuser, preserve and protect the crime scene, advise victim not to destroy physical evidence, ensure alleged abuser does not take actions that could destroy physical evidence, notify medical

services, notify Institutional Investigator/OSHP, notify Institutional PREA Compliance Manager, notify Victim Support Person (VSP), and complete the Incident Report. This procedure is outlined in policies 79-ISA-02, and CRC-ISA-02, mentioned in the above Standard 115.64.

Further, the Sexual Abuse Review Team (SART) as required in Policy 79-ISA-03 titled Sexual Abuse Review Team, reviews allegations/incidents to determine whether there needs to be a change in policy or practice to better prepare, detect, and respond to the incidents of sexual abuse.

Interviews with the Warden and specialized staff confirmed not only a coordinated response but a coordinated effort to continually improve the CRC's PREA safety and security.

§115.66 – Preservation of ability to protect inmates from contact with abusers

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

The ODRC reported there is no collective bargaining agreement effective at this time. However, an agreement is to be effective in the near future and will contain appropriate provisions for the agency to protect inmates from contact with abusers.

§115.67 – Agency protection against retaliation

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

The ODRC Policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation and Prevention of Retaliation; protects all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations, from retaliation by other inmates or staff. Knowledge of this emphasis on protection from retaliation is further addressed in the Employee Handbook and in the CRC Inmate Handbook. It is also supported and emphasized by posters and notices throughout the facility. The inmates and staff have been trained/educated on this protection from retaliation. Questions in the formal/scripted interviews of random staff and random inmates asked if each were aware that they

had the right to be free from retaliation. Both staff and inmates responded affirmatively and knew that retaliation is prohibited.

The Institutional Investigator is responsible for monitoring retaliation. The Institutional Investigator reviews at 30, 60, 90 days, exceeding expectations of the standard.

Interviews with the Warden and the Institutional Investigator, and the ODRC's commitment and efforts to prevent retaliation confirm an "exceeds standards".

§115.68 – Post-Allegation Protective Custody

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

Involuntary segregation in the ODRC is used only as a last resort for protection of inmates who have alleged to have suffered sexual abuse.

The ODRC has a Policy 79-ISA-04 Risk Assessment and Accommodation Strategies which directs and assists Unit Management staff in providing alternatives to involuntary segregation. There is also an electronic assessment screen in the Department Offender Tracking System (DOTS) that is used to follow up on alternatives/options and individualized treatment/placement/classification.

In the past 12 months there has been zero (0) number of inmates who were assigned to involuntary segregation at the CRC. Additionally, the CRC has limited special housing/segregated housing/confinement housing and has the ability to exercise alternatives instead of protective custody.

§115.71 – Criminal and Administrative Agency Investigations

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

The CRC, as with all facilities in the ODRC, has a policy related to criminal and administrative agency investigations. This particular standard has 12 sub-standards (a-l) which are addressed either through the policy of the ODRC, the policy of the Ohio State Highway Patrol or through the laws of the State of Ohio.

The ODRC Policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation and Prevention of Retaliation details what needs to be accomplished to

complete an investigation. Additionally, there is a Memorandum of Understanding (MOU) between the Ohio Department of Rehabilitation and Correction and the Ohio Department of Public Safety/Ohio State Highway Patrol to collaboratively provide a uniform process for evidence collection and the investigation of PREA related incidents.

The Ohio State Highway Patrol (OSHP) has offices in each ODRC facility. This is the professional and expert collaboration between the ODRC and the OSHP working together to handle every PREA allegation. The MOU between the two agencies details the following:

- 1) PREA incident investigations
- 2) victims of sexual abuse forensic medical examinations
- 3) victim advocate/rape crisis center assistance
- 4) specialized training
- 5) investigator evidence collection
- 6) investigator interviews
- 7) credibility of victims, witnesses
- 8) documentation
- 9) substantiated allegation referral
- 10) the departure of victim or abuser from employment or control of the facility

Substantiated allegations that appear to be criminal are referred for prosecution. At the CRC there were zero (0) number of sustained allegations of conduct that appeared to be criminal that were referred for prosecution since August 20, 2012.

For all criminal investigations, records are held indefinitely. The State Record Retention Schedule requires that special investigative case files be retained 10 years after an inmate has reached final release (expiration of sentence, death) or 10 years after an employee is no longer employed by the agency.

Interviews with the Warden, specialized staff, and the Ohio State Trooper assigned to the CRC, supports an "exceeds" assessment of this standard.

§115.72 – Evidentiary Standard 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)

As defined in the ODRC Policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation, the agency "imposes a standard no higher than a preponderance of the evidence for administrative investigations".

Interviews with the Institutional Investigators support compliance for this evidentiary standard.

§115.73 – Reporting to Inmate

- 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 ODRC has a policy requiring that an inmate who makes an allegation of sexual abuse is informed verbally or in writing as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. The CRC uses and adheres to this policy.

In the past 12 months there were 20 criminal and/or administrative investigations of alleged inmate sexual abuse that were completed. Of the alleged sexual abuse investigations that were completed, all 20 inmates were notified verbally or in writing the results of the investigation.

The auditor reviewed incident reports, PREA incident packets, documentation of notification, and interviewed the Institutional Investigator confirming notification/reporting to the inmate.

§115.76 – Disciplinary sanctions for staff

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

The ODRC Policy 79-ISA-01 Prison Rape Elimination and Personnel Policy 31-SEM-02 Standards of Employee Conduct stipulates that staff is subject to disciplinary sanctions up to and including termination for violating the agency sexual abuse or sexual harassment policy.

It is also noted, pursuant to the Ohio Revised Code, sexual conduct with an inmate or anyone under the supervision of the ODRC is considered a criminal act. The ODRC will refer and pursue all cases for criminal prosecution.

In the past 12 months, there have been zero (0) number of staff from the CRC that have violated the agency sexual abuse or sexual harassment policy. There have been zero (0) number of staff that have been reported to law enforcement or licensing boards and there have been zero (0) number of staff that have been terminated or

resigned while being investigated for termination, for violating the agency sexual abuse or sexual harassment policy.

§115.77 – Corrective action for contractors and volunteers

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

As in Standard 115.76 there are Standards of Conduct for Contractors/Volunteers. Policy number 71-SOC-01 Recruitment, Training and Supervision of Volunteers states “the managing officer or designee may terminate a volunteer for any alleged violation of the standards of conduct for contractors/volunteers or any activity which threatens the orderly operation of security of the facility or APA region or safety of the volunteer, staff or offenders”.

Standards of Conduct for contractors, volunteers and interns also includes direction that advises:

- a) no person shall allow themselves to show partiality for or become involved emotionally, physically, or financially with offenders or their families;
- b) no person shall discriminate based on sex, race, color, age, religion, national origin, disability, or sexual orientation;
- c) no person shall become involved in unauthorized relationships. The Managing Officer or designee may terminate for such conduct.

Volunteers/contractors who engage in sexual misconduct/harassment are to be notified in writing, and appropriate notification made if criminal, or if charges support notification to relevant licensing boards.

In the past 12 months there have been zero (0) number contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates.

§115.78 – Disciplinary sanctions for inmates

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

Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse.

Inmate Rules of Conduct 5120-9-06 lists rules violations/disciplinary violations. Dispositions for rule violations are defined in the Administrative Codes 5120-9-07 and 5120-9-08.

In the past 12 months there have been two (2) administrative findings of inmate-on-inmate sexual abuse that have occurred at the CRC. There have been zero (0) number of criminal findings of guilt for inmate on inmate sexual abuse at the CRC.

The CRC offers therapy, counseling, and other interventions designed to address and correct underlying reasons or motivation for abuse.

The Agency prohibits all sexual activity. Sexual abuse is determined only if there is coercion.

§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)

The CRC as the Reception Center for most of the state of Ohio has a large medical and mental health staff to assist in the evaluation and assessment when inmates are received. There are 33.5 medical and 54 mental health staff (10/14/2014 allocated positions from Regional Director and Deputy Director Administration) which assist and work as a team to bring services to the inmates at this facility.

All inmates admitted to the CRC who have disclosed any prior sexual victimization during a screening (pursuant standard 115.41) are offered a follow-up meeting with a medical or mental health practitioner. Additionally, prison inmates who have previously perpetrated abuse as indicated in this screening, are offered a follow-up meeting with a mental health practitioner. This is directed by the ODRC Policy 79-ISA-04, PREA Risk Assessment and Accommodation Strategies.

Special note: youthful offenders age 16 and 17 are received and housed at this facility and the screening, as observed, is very individualized, youth appropriate, and professionally administered. This can be said for the complete intake/reception process.

The Pre-Audit Questionnaire indicates that 100% of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. Inmates who have previously perpetrated sexual abuse as indicated during screening were offered a follow-up meeting with a mental health practitioner.

These follow-up meetings with victims and abusers are offered within 14 days of screening.

Information related to sexual victimization or abusiveness is strictly limited. Informed consents, as necessary and appropriate, are obtained by the medical/mental health staff.

The auditor reviewed policy, risk assessments, and mental health follow-up. Formal interviews were held with medical and mental health staff. These document reviews, observations and interviews both with staff and inmates, support an "exceeds".

§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)

The CRC has 24/7 medical and mental health care. Hospital Medical emergencies can be transported to the Franklin Medical Center at the Ohio State University in Columbus Ohio and the CRC has a contract with EMS ambulance services to provide transportation and assistance if necessary (ACA Audit Handbook page 17).

The CRC has a Residential Treatment Unit (RTU) for care of offenders dealing with mental illness and/or self-injurious behavior.

Inmate victims receive unimpeded access to emergency medical treatment and crisis intervention.

Treatment services are provided to every sexual abuse victim without financial cost.

Interviews with Medical Services and Mental Health Services confirm access to emergency medical and mental health.

§115.83 – Ongoing medical and mental victims and 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)

The facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail etc. Policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation, outlines that ongoing medical and mental health care

for those victimized by sexual abuse is available and this is also outlined and detailed in the Correctional Reception Center Inmate Handbook (revised November 2014).

Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted diseases as medically appropriate.

The CRC is an all-male facility.

§115.86 – Sexual abuse incident reviews

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

The CRC has a Sexual Abuse Response Team (SART) that reviews all sexual abuse incidents, unless determined to be unfounded, within 30 calendar days of the conclusion of the investigation. Moreover, the Warden at the CRC is having the SART meet monthly in order to be proactive as an advisory group to the Warden. This is in addition to the follow-up incident review that is required by policy.

The ODRC Policy 79-ISA-03 specifically directs that the Managing Officer will establish a team that includes, at a minimum, the following:

- 1) Deputy Warden of Operations – Chair
- 2) Institutional Investigator
- 3) Victim Support Person (VSP)
- 4) Deputy Warden of Special Services
- 5) Institutional PREA Compliance Manager
- 6) Other staff that may have relevant input, Unit Management, Medical and Mental Health staff, line supervisor.

The SART uses a Sexual Abuse Case Review Form DRC-11832 to address checklist issues such as inmate concerns, committee considerations (change in policy or procedure, motivation, physical barriers, inadequate staffing, and monitoring technology), committee recommendations, committee referrals, committee signatures, committee recommendations approved, and the Warden's comments/actions ordered.

In the past 12 months there have been two (2) incidents of alleged sexual abuse investigations that have been completed and both these investigations were followed by incident reviews.

Interviews with the SART, specialized staff, the Warden, as well as document review (ODRC Policy 79-ISA-03, the PREA Incident Packet, Sexual Abuse Case Review and Pre-Audit Questionnaire) were used to assess meets compliance.

§115.87 – Data Collection

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

This auditor has done several ODRC Institutional PREA Audits. The Data Collection, Data Review for Corrective Action, and Data Storage, Publication, and Destruction, have all been handled by Central Office Support Services (with facility input). Their data collection has been professional, comprehensive, thorough, and impressive.

The Prison Rape Elimination Policy 79-ISA-01 addresses eight steps of data collection and monitoring:

- 1) Monthly reports of allegations by the Institutional Investigators.
- 2) Automated reporting modules sent to the Agency PREA Coordinator and aggregated annually.
- 3) Review of aggregated data, identifying problems, taking corrective action, and preparing an Annual Report.
- 4) Review and comparisons of the ODRC annual data and corrective actions of previous years.
- 5) Ensure aggregate data from private facilities and make such available to the public.
- 6) Remove/redact personal identifiers.
- 7) Certain information entered into the Department Offender Tracking System (DOTS), identifying victims and abusers
- 8) Maintain and secure records as outlined in the State of Ohio/ODRC Retention Schedule.

The ODRC provided the Department of Justice (DOJ) data from the previous years. The data includes all information that is necessary to answer questions from the Survey of Sexual Violence (SSV) conducted by the DOJ.

Interviews with the Agency Director and Agency PREA Coordinator confirm an “exceeds” compliance with this standard. Furthermore, interviews, observations, documents, and policies demonstrates the ODRC’s commitment to eliminating rape in prison.

§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)

The Annual Internal Report on Sexual Assault Data (Annual Report) for 2012 and 2013 prepared by the ODRC Agency PREA Coordinator was reviewed. This report contained data collected as outlined in PREA Standard 115.87. The data includes accurate, uniform data for every allegation of sexual abuse. The Annual Report outlined its' purpose – to make use of this information to identify problem areas and formulate corrective measures. The report itself was divided into four sections; 1) an Introduction, 2) Data, 3) Problem Areas, and 4) Identification and Corrective Measures. In addition to these four sections, is a summary Conclusion. The report is signed by the Agency PREA Coordinator and approved by the ODRC Agency Director. This data collection and review is indicative of Ohio's effort to be a leader in preventing/eliminating rape in prison.

Agency information and the Annual Report is available through the public website <http://www.drc.ohio.gov/web/prea.htm>.

§§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)

The ODRC Policy 79-ISA-01 Prison Rape Elimination, Section F, Data Collection and Monitoring ensures that the incident-based aggregate data of Standard 115.87 is: a) securely maintained; b) the data from the agency facilities and from privately contracted facilities is readily available through the agency's public website; and c) personal identifiers are redacted.

The Ohio Department of Rehabilitation and Correction, Record Retention Schedule requires that Agency Reports produced from within the Department of Rehabilitation and Correction be retained "permanently".

These documents along with interviews with the Agency Director, Agency PREA Coordinator, and others confirms compliance.

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.

James Curington

June 11, 2015

Auditor Signature

Date