

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



Name of facility: Franklin Medical Center	
Physical address: 1800-1900 Harmon Avenue, Columbus, Ohio	
Date report submitted: April 29, 2015	
Auditor Information Amy Fairbanks	
Address:	206 N. Washington Street Alexandria, VA 22314
Email:	sac@aca.org
Telephone number:	734-222-0000
Date of facility visit: April 20-22, 2015	
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: Joshua Suerdieck	Title: Operational Compliance Manager
Email address: Joshua.Suerdieck@odrc.state.oh.us	Telephone number: 614-445-5960 ex. 2024
Agency Information	
Name of agency: Ohio Department of Rehabilitation and Correction	
Governing authority or parent agency: (if applicable) State of Ohio	
Physical address: 770 West Broad Street, Columbus, Ohio 43222	
Mailing address: (if different from above) same	
Telephone number: 614-752-1159	
Agency Chief Executive Officer	
Name: Gary C. Mohr	Title: Director
Email address: Gary.Mohr@odrc.state.oh.us	Telephone number: 614-752-1164
Agency-Wide PREA Coordinator	
Name: Andrew Albright	Title: Chief, Bureau of Agency Policy and Operational Compliance
Email address: Andrew.Albright@odrc.state.oh.us	Telephone number: 614-752-1708

AUDIT FINDINGS

NARRATIVE:

On April 20-21, 2015 an audit was conducted at the Franklin Medical Center, Ohio Department of Rehabilitation and Correction, to determine compliance with the Prison Rape Elimination Act standards finalized August 2012.

A complete tour of the facility was conducted on April 20, 2015. The following areas and operations were visited and observed:

Zone A:

Inmate living areas (convalescent care, inpatient care -including death row inmates, end of life care, female housing - including pregnant females)

Food services

Facility maintenance

Laundry

Recreation areas

Nursing stations, pharmacy, medical supplies

Zone B:

Five housing units (which had designated segregation cells – 3 total)

Recreation areas

Library

Food services

Admissions area

Visiting area

Medical area- including infirmary beds (four)

Medical appointments/specialty clinic operations:

Waiting area for each custody, including death row and females

Physical Therapy

Dental Suite

Medical station/exam areas

Documents reviewed for this audit included policy, institutional supplement, contracts, staff training records, personnel files, volunteer training records, sexual abuse & harassment investigations, and training curriculums. Documentation for each standard was provided by the facility prior to the visit.

Formal interviews were scheduled through random selection of staff and inmates from schedules and rosters provided by the staff the evening prior to the audit.

Facility staff interviews were conducted with the following:

Warden

Deputy Warden (head of Sexual Abuse Response Team - SART)

FMC PREA Manager

Mental Health Director
Health Services Administrator
Personnel Manager
Chief of Unit Managers
Case Manager/victim advocate
One night shift nurse (Zone A)
One afternoon shift nurse (Zone B)
Six day shift officers (including the Union President)
Four afternoon shift officers
Night shift lieutenant and two corrections officer
Inspector/investigator
Hospital officer
Admissions officer
Two food service staff (contract)
Dental aide (contract)

Inmate interviews were conducted with thirteen inmates selected randomly from each housing area: two wheelchair bound inmates; one hard of hearing inmate; four female inmates; five male inmates, one inmate deemed vulnerable; four inmates interviewed spontaneously during the tour.

The auditor was allowed free access to all areas of the facility, access to interview inmates selected randomly and intentionally, and to see any documentation requested. Posters were visible throughout the facility announcing the audit. No letters were received from the inmate population in response to the postings regarding the audit.

DESCRIPTION OF FACILITY CHARACTERISTICS:

On August 15, 2011, Director Gary C. Mohr issued an Executive Order establishing the creating of the Franklin Medical Center. Previous to this order, the institution was the Corrections Medical Center and Franklin Pre-Release Center. The Franklin Medical Center has several missions. This facility provides medical and recuperative treatment, palliative care, pregnancy care, numerous specialty clinics, re-entry programming, and general population for men. As a result, it houses every custody level, males and females up to death row in Zone A; minimum and a few medium custody inmates in Zone B. Although it is considered one facility, Zone A and Zone B are separate operations. At the start of the audit, the count was 610.

In addition, this facility operates the specialty clinic hub for the state. This operation maintains several holding areas to accommodate the males/females and various custody levels.

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 0

Number of standards met: 42

Number of standards not met: 0

Number of standards not applicable: 1

**Standard
number here**

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

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

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

This is addressed in 79-ISA-01 Prison Rape Elimination, 79-ISA-02, and 79-ISA-01 FMC Prison Rape Elimination. ODRC does have an agency wide PREA coordinator and FMC has a PREA compliance manager. The agency interview with Director Gary C. Mohr was conducted on February 2, 2015 by certified PREA auditors Thomas Eisenschmidt and Jim Curington. The agency interview with Andrew Albright, Chief, Bureau of Agency Policy and Operational compliance was conducted on February 2, 2015 by certified PREA auditors Thomas Eisenschmidt and Jim Curington. The Agency PREA Coordinator and PREA Administrator were present to address any concerns during the audit.

**Standard
number here**

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

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

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

79-ISA-01 Prison Rape Elimination addresses this standard. This facility does not have contracts for confinement of private agencies. The Agency has two contracts, Lake Erie Correctional Institution and North Central Correctional Institution. The interview with Agency Contract Administrator Kevin Stockdale, Deputy Director of Administration was conducted on February 2, 2015 by certified PREA auditors Thomas Eisenschmidt and Jim Curington.

**Standard
number here**

§115.13 – Supervision and Monitoring

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-IS0-01 Prison Rape Elimination and 50-PAM-02. The staffing plan, showing camera upgrades relative to PREA was reviewed. Numerous video monitoring enhancements have occurred throughout the facility in key areas to assist with the goal of inmate safety. Placement of additional cameras has been requested. The staffing plan is closely monitored and well documented. All staff and inmates questioned supported that unannounced rounds by supervisory staff are being conducted.

Standard number here	§115.14 – Youthful Inmates
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Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

52-RCP-01 Reception Admission Procedures, 71-SOC-05 Youthful Offender Management and procedure 55 SPC-01 FMC address this standard. No youthful offenders were housed at Franklin Medical Center, nor have been for the time period relevant to this audit. For the Agency they are housed at Madison Correctional Institution and the Ohio Reformatory for Women. A review of rosters and the tour supports that no youths are housed at this facility. However, due to the functions of the specialty clinic, the medical center and housing for pregnant females, the potential to house a youthful offender exists. The facility is prepared to address this situation.

Standard number here	§115.15 – Limits to Cross-Gender Viewing and Searches
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Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

The criterion for this standard is addressed in 310 SEC-01 Inmate and Physical Plant Standards and 79-ISA-01 Prison Rape Elimination. There were no transgender inmates housed at this facility at the time of the audit. Cross-gender strip searches and visual body cavity searches are documented in the rare event that this may occur but it is concluded that there have been none at this facility. All inmates questioned indicated they are able to shower, change clothes and use toilet facilities without opposite gender staff viewing them. Training records and staff interviews supports that specialized training for pat-searches of transgender and intersex inmates is given and searches would be conducted in a professional

and respectful manner. Female staffs and male staffs announce their presence verbally or by activating an audible sound. All inmate interviews confirmed this was occurring.

**Standard
number here**

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

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

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

This is addressed in 64-DCM-02 Inmates with Disabilities and 79-ISA-01 Prison Rape Elimination. The training curriculum addresses these needs as well. Inmates watch a video in English or Spanish educating them on their rights and how to report sexual misconduct or retaliation. There is a contract to address hearing impaired needs and a language line is available. Materials were available in English and Spanish. As this facility deals with a significant number of inmates with disabilities, chronic and acute illness, policies and practices to ensure their opportunities, education and safety were clearly addressed.

**Standard
number here**

§115.17 – Hiring and Promotion Decisions

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

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

Elements of this standard are addressed in 34-PRO-07 Appendix A, approved variance 2/6/2014 Background Investigations, 31-SEM-02 Standards of Employee Conduct and 79-ISA-01 Prison Rape Elimination. An interview with Kim Rowe, Chief Bureau of Personnel was conducted on February 2, 2015 by certified PREA auditors Thomas Eisenschmidt and Jim Curington. A review of five random personnel files supports that background checks are conducted prior to offering a position. There have been no instances where they had to provide information on substantiated allegations of sexual abuse or harassment however if there was a concern, they would consult legal counsel before proceeding to ensure that divulging information would not violate any laws. Contract staff are checked prior to employment as well.

**Standard
number here**

§115.18 – Upgrades to Facilities and Technology

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

As noted, significant upgrades to video monitoring has occurred with more plans to be implemented. No substantial expansions or modifications have occurred since the implementation of PREA standards.

**Standard
number here**

§115.21 – Evidence Protocol and Forensic Medical Examinations

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-01 Prison Rape Elimination, 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation, 68-MED-15 Bureau of Medical Services Co-Payment Procedures, B11 Medical Care Guidelines for Sexual Conduct or Recent Sexual Abuse and Victim Support Lesson Plan. There is an MOU with the Ohio State Highway Patrol regarding investigations. This is addressed in OSP 103.7, Attachment P and OSP 100.01. SANE/SAFE exams are offered at the outside hospital. A MOU is in place with the Sexual Assault Response Network of Central Ohio. In addition, select staffs have been provided extra training to function as a victim support person.

**Standard
number here**

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation and it available on the website drc.ohio.gov/web/prea. It is also addressed in Appendix A Investigator Protocol and OSP 103.07 Sexual Assault Evidence

Collection and Analysis. Fourteen completed investigations were reviewed for abuse and harassment complaints received from April 2014 to April 2015. They were thoroughly and professionally conducted. Staff interviews confirmed that all allegations of sexual abuse and harassment are referred to the facility investigator and are investigated.

Standard number here	§115.31 – Employee Training
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- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-01 Prison Rape Elimination and 39-TRN-10 Employee Orientation Training. A review of the training curriculum, training records and staff interviews supports that all employees who have contact have been trained regarding the requirements of PREA. Employees are required to complete a quiz and pass for the training they received. Training does address the gender specific needs as well as transgender issues. The intranet provides staff a PREA information center. The training curriculum is complete and visual making it easier for a staff person to review it.

Standard number here	§115.32– Volunteer and Contractor Training
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- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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

Contract and volunteer training records were reviewed. They support that volunteers and contract staff receive the training. Interviews with contract staff support this as well. They are required to document that they understood the training.

Standard number here	§115.33 – Inmate Education
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- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-01 Prison Rape Elimination and the inmate handbook. It is also addressed in 64-DSM-02 Inmates with Disabilities and 52-RCP-10 Inmate Orientation. Inmates are initially provided education upon arrival in the intake area. Within seven days orientation is conducted which includes watching a video. The investigator personally conducts orientation with newly arriving inmates regarding PREA as well. Documentation and interviews with inmates support that this process is being conducted. Materials are provided in English and Spanish. Posters were observed throughout the facility.

Standard number here §115.34 – Specialized Training: Investigations

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

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

This is addressed in 79-ISA-01 Prison Rape Elimination and Investigator Training Curriculum (NIC). Training records were reviewed. Interviews with the facility investigator support compliance with this standard. He was knowledgeable regarding Miranda and Garrity warnings and their implications and impact on the investigation process.

Standard number here §115.35 – Specialized training: Medical and Mental Health Care

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

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

This is addressed in 79-ISA-01 Prison Rape Elimination, Medical/mental health training curriculum and 39-TRN-10 Employee Orientation Training. Staff interviews and training records support compliance with this standard. As noted, forensic exams are not conducted at this facility.

Standard number here §115.41 – Screening for Risk of Victimization and Abusiveness

- Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-04 PREA Risk Assessment and Accommodation Strategies. The screening tools meet all the requirements of the standard. Initial screening starts with medical staff upon arrival to the facility. A second screening occurs within 72 hours. Re-assessment occurs within 30 days by the unit staff. Controls are in place regarding who can access this information. This process is all contained within a database. Inmates are not disciplined for refusing to answer. Inmate interviews confirmed that they were asked these questions upon arrival to the facility.

Standard number here §115.42 – Use of Screening Information

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-05 Lesbian, Gay, Bisexual, Transgender, Intersex Policy and 79-ISA-04 PREA Risk Assessment and Accommodation Strategies. There are no transgender inmates housed at Franklin Medical Center at the time of the audit. Staff interviews support that in the event of a transgender being housed at this facility, he/she will be provided the opportunity to shower separately and his/her views will be considered regarding safety. The facility is prepared to address inmates who may arrive for a specialty clinic to ensure a predator is not placed with a victim in the waiting rooms.

Standard number here §115.43 – Protective Custody

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-04 PREA Risk Assessment and Accommodation Strategies. Staff and inmate interviews confirm support that no inmates have been placed in segregation due to their vulnerable status or allegation of sexual misconduct. Several other options are available due to the mission of the facility that can be utilized if this was to occur.

Standard number here §115.51 – Inmate Reporting

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation, staff training, the inmate handbook, posters and the education video presented to inmates. This is a MOU with Franklin County Juvenile Detention Facility for inmates at Franklin Medical Center to report allegations via a "hotline". Staff and inmate interviews support that both staff and inmates can report privately, anonymously and have several avenues available. No inmates detained for civil immigration solely are housed at this facility. The hotline was called; a specific message was left which was conveyed to the facility. The hotline allows for anonymous reports. The second hotline which reports to the ODRC central office was tested from an inmate phone and demonstrated immediate report to the facility.

Standard number here §115.52 – Exhaustion of Administrative Remedies

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

The facility is Exempt from this standard.

Standard number here §115.53 – Inmate Access to Outside Confidential Support Services

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-01 Prison Rape Elimination, posters, inmate handbook. There is an MOU with the Sexual Assault Response Network of Central Ohio. Inmates are informed that the telephone will continue to be monitored when making a call to this number.

Standard number here §115.54 – Third-Party Reporting

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

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

Instructions on Third party complaints and filing of complaints can be made through the website www.drc.ohio.gov/web/prea . Friends and Family posters are available in the front lobby providing information as well.

Standard number here §115.61 – Staff and Agency Reporting Duties

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

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

This is addressed in 79-ISA-01 Prison Rape Elimination, 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation and 79-ISA-04 PREA Risk Assessment and Accommodation Strategies. At the time of the audit, it was reported that there have been no instances of an inmate in imminent risk of sexual abuse. Staff interviews indicate that they are aware of limits of revealing information regarding alleged sexual harassment or sexual abuse complaints. Medical staff interviews support that they let inmates know of their duty to inform and the limitations of confidentiality. All staff knew who investigates PREA complaints at the facility.

Standard number here §115.62 – Agency Protection Duties

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

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

As noted, there have been no instances of an inmate in imminent risk of sexual abuse. Staff indicated during interviews that they were aware of their obligation to take immediate action.

No Standard number here §115.63 – Reporting to Other Confinement Facilities

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

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

This is addressed in 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation. A clear process is outlined. No reports had been received from another facility. Reports have been made to other facilities in the time frame required.

Standard number here §115.64 – Staff First Responder Duties

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

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

This is addressed in 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation and 79-ISA-02 FMC Sexual Abuse Coordinated Response Plan Appendix B. A clear process is outlined. A review of completed investigations supported that all requirements were followed. Staff interviews support that they are knowledgeable regarding what to do and who to contact in the event they are a first responder.

Standard number here §115.65 – Coordinated Response

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

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

This is addressed in 79-ISA-02 FMC Sexual Abuse Coordinated Response Plan. See comments above for 115.64.

Standard number here	§115.66 – Preservation of ability to protect inmates from contact with abusers
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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

No new contracts or renewed contract with collective bargaining units has occurred. Ohio Civil Service Employees Association (OCSEA) March 2012 contract is currently in effect.

Standard number here	§115.67 – Agency protection against retaliation
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation. The facility investigators are responsible for monitoring retaliation. A system was in place to ensure this. The investigator indicates he uses a variety of methods to ensure retaliation is not occurring. These measures are documented.

Standard number here	§115.68 – Post-Allegation Protective Custody
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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

79-ISA-04 PREA Risk Assessment and Accommodation Strategies addresses this requirement. See comments for 115.43.

Standard	§115.71 – Criminal and Administrative Agency Investigations
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number here

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation. As noted, there is an MOU in place with the Ohio State Highway Patrol regarding their involvement with investigations that meets the requirements of this standard. A review of the completed investigations revealed compliance with the requirements of this standard. The current retention record meets the requirements of this standard.

Standard number here §115.72 – Evidentiary Standard for Administrative Investigations

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation.

Standard number here §115.73 – Reporting to Inmate

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation. Documentation was provided to demonstrate compliance with this standard. However, no allegations regarding a staff person have been made since the implementation of PREA at this facility.

Standard number here §115.76 – Disciplinary sanctions for staff

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 31-SEM-02 Standards of Employee Conduct and 79-ISA-01 Prison Rape Elimination. No staffs have been disciplined for sexual misconduct towards inmates based on a review of the completed investigations for the past year.

Standard number here §115.77 – Corrective action for contractors and volunteers

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-01 Prison Rape Elimination and 71-SOC-01 Recruitment, Training and Supervision of Volunteers. A review of an investigation from 2014 supports compliance with this standard.

Standard number here §115.78 – Disciplinary sanctions for inmates

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation, 56-DSC-01 Inmate Disciplinary Process, and Inmate Rules of Conduct 5120-9-06, 5120-9-08.

Standard number here §115.81 – Medical and mental health screenings; history of sexual abuse

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

Addressed in 79-ISA-04 PREA Risk Assessment and Accommodation Strategies, 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation and 67-MNH-02.

Standard number here	§115.82 – Access to emergency medical and mental health services
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Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation, 67-MNH-09 Suicide Prevention and Medical Protocol B11Medical Care Guidelines for Sexual Conduct or Recent Sexual Abuse. Documentation was provided that demonstrated timely access to emergency medical treatment at no cost.

Standard number here	§115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers
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Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation, 67-MNH-02 Mental Health Screening and Mental Health Classification, 67-MNH-04 Transfer and Discharge of the Mental Health Caseload, and 67-MNH-15 Mental Health Treatment.

Standard number here	§115.86 – Sexual abuse incident reviews
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Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-03 Sexual Abuse Response Team. Review of committee reports and interview with team members support compliance.

Standard number here §115.87 – Data Collection

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-01 Prison Rape Elimination and the Survey of Sexual Violence 2013 as well as documentation provided regarding the two private facilities.

Standard number here §115.88 – Data Review for Corrective Action

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-01 Prison Rape Elimination. Data reviewed (2014 Annual review Analysis of 2012 & 2013) supports compliance.

Standard number here §115.89 – Data Storage, Publication, and Destruction

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

This is addressed in 79-ISA-01 Prison Rape Elimination and retention schedule. No personal identifiers were used.

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.

Amy Fairbanks

Date: April 29, 2015