PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS

NATIONAL PREA RESOURCE CENTER

BJA Bureau of Justice Assistance U.S. Department of Justice

[Following information to be populated automatically from pre-audit questionnaire]			
Name of institution:	**Lake Erie Correctional Institution**		
Physical address:	**501 Thompson Road, Conneaut**		
Date report submitted:	**19 January 2016**		
Auditor Information			
Address:	**David Haasenritter, PO Box 1265, Midlothian, VA 23113**		
Email:	**David.k.haasenritter.civ@mail.mil**		
Telephone number:	**540 903 6457**		
Date of institution visit:	**21 – 23 September 2015**		
Institution Information			
Institution mailing address: *(if different from above)*	**SAA**		
Telephone number:	**440-599-4100**		
The institution is:	☐ Military	☐ County	☐ Federal
	X Private for profit	☐ Municipal	☐ State
	☐ Private not for profit		
Institution Type:	☐ Jail	x Prison	
Name of PREA Compliance Manager:	**JoAnn King**	**Title:**	**Assistant Warden of Support Services**
Email address: JoAnn.King@cca.com		**Telephone number:**	**440-599-4100 ext 64103**
Agency Information			
Name of agency:	**Corrections Corporation of America**		
Governing authority or parent agency: *(if applicable)*	**NA**		
Physical address:	**10 Burton Hills Blvd., Nashville, TN 37215**		
Mailing address: *(if different from above)*	**SAA**		

Telephone number:	**615-263-3000**		
Agency Chief Executive Officer			
Name:	**Damon Hininger**	**Title:**	**President and Chief Executive Officer**
Email address:	**Damon.hininger@cca.com**	**Telephone number:**	**615-263-3301**
Agency-Wide PREA Coordinator			
Name:	**Lisa Hollingsworth**	**Title:**	**Senior Director PREA Programs and Compliance**
Email address:	**Lisa.hollingsworth@cca.com**	**Telephone number:**	**615-263-6915**

AUDIT FINDINGS

NARRATIVE:

The PREA audit of the Lake Erie Correctional Institution was conducted on September 21 – 23, 2015 by David Haasenritter. Approximately three weeks prior to the audit, the auditor received the PREA questionnaire and additional documents through a disk. The documents and questionnaire were well organized, highlighted, and tabbed. This along with providing the information three weeks in advance of the audit enabled the audit to move forward very efficiently. The night before the audit the institution provided a roster of all inmates housed at the institution; lists of inmates for specific categories to be interviewed; and a lists of all staff by duty position and shifts that were used to identify inmates and staff to be interviewed (random and specific category).

The auditor contacted Just Detention International (JDI) in reference any information previously submitted by inmates at the Lake Erie Correctional Institution and reviewed both the Corrections Corporation of America (CCA) website and Ohio Department of Rehabilitation and Correction (ODRC) prior to the audit. Both websites are very informative and one of the easiest to find PREA information of all agencies this auditor has audited. CCA PREA page lists: general information on PREA; agency zero tolerance policy; how to report; information on investigations; and where questions and inquiries can be forwarded to (PREA Coordinator phone and mailing address). It also has a number of links to include: PREA standards; PREA Resource Center website; CCA PREA policy; CCA 2013 and 2014 PREA Report; and CCA Institution PREA information. The CCA Institution PREA information link lists each CCA institution with information on that institution's PREA Compliance Manager; third party reporting methods; PREA policy; PREA audit dates; and PREA audit reports if completed and posted.

Following the entrance meeting with staff, the auditor toured the entire institution on September 21, 2015, and went back to certain areas in the institution on September 22 – 23, 2015. While touring, random inmates and staff were informally interviewed and questioned about their knowledge of PREA. While touring several inmates and staff were questioned about their knowledge of PREA standards, procedures for reporting, services available and their responsibilities. All staff and inmates informally interviewed during the tour acknowledged receiving training and procedures for reporting sexual abuse, sexual harassment and/or retaliation for reporting. During the tour the auditor reviewed staffing; logs; physical plant; sight lines; camera coverage; tested the inmate

phone system for reporting allegations and for emotional support services; and institution operations. Following the tour, the auditor began the formal interviews, review of investigations, checking of cameras, and random checks of personnel, medical, and training records. A total of 33 staff was formally interviewed in the course of the audit (11 random, three contractor/volunteers, and 18 specialized staff). The interviews of the Agency Head/Designee had been previously completed by another auditor and the notes from those interviews were shared with the auditors prior to the on-site visit. The PREA Coordinator was also previously completed by another auditor and this auditor also previously interviewed her. Staff interviewed were well versed in their responsibilities in reporting sexual abuse, sexual harassment, and staff negligence; first responder duties; evidence preservation; and how to conduct searches of transgender and intersex inmates. CCA and ODRC have continued to build a culture of zero tolerance.

A total of 34 prisoners were formally interviewed: 17 random (at least one from each housing unit); five LGBTI, two disabled; one non-English speaking; two who disclosed sexual victimization during screening; one who disclosed later during confinement (in treatment); and four who reported sexual abuse while confined. Additionally, two inmates refused to be interviewed. Majority of the inmates interviewed acknowledged receiving PREA training and written materials (posters, pamphlets, and inmates handbooks) outlining the agencies zero tolerance policies towards sexual abuse; knew the reporting procedures; reported staff of the opposite gender announced when entering a housing area (through a buzzer); and that they had been asked questions from the screen upon arrival if arriving in the last three years. All but one inmate who was asked stated they felt safe at the institution. One inmate stated this should have been in place ten years ago, and another stated it is safer at Lake Erie Correctional Institution than other prisons. Inmates arrival at the facility ranged from within the last week to nine years ago. The auditor found the inmates very aware of PREA.

There were 19 allegations of a sexual abuse and sexual harassment at Lake Erie Correctional Institution during the audit cycle. All had administrative investigations; six were forwarded to Ohio State Highway Patrol for criminal investigations and prosecution as applicable. There were 12 inmate-inmate allegations: one inmate-inmate sexual harassment substantiated; four inmate-inmate sexual harassment unsubstantiated; one inmate-inmate sexual abuse substantiated; and seven inmate-inmate sexual abuses unsubstantiated. There seven staff-inmate allegations: two staff-inmate sexual harassment unsubstantiated; four staff-inmate sexual abuses substantiated; and one staff-inmate sexual abuse unsubstantiated. Note, two of the staff-inmate sexual abuse substantiated was one incident investigated as two cases because there were two different victims. One inmate-inmate allegation was received from another facility when the inmate reported the incident occurred at Lake Erie Correctional Institution.

When the on-site audit was completed, the auditor conducted an exit meeting. While the auditor could not give the institution a final finding, the auditor did provide a preliminary status of his findings. The auditor thanked CCA, ODRC, and Lake Erie Correctional Institution staff for their hard work and commitment to the Prison Rape Elimination Act.

During the interim report writing period, the auditor reviewed modified policies; additional documents; and conducted phone interviews with staff. The CCA PREA

Coordinator and ODRC staff was very helpful in coordinating all the additional documentation.

DESCRIPTION OF INSTITUTION CHARACTERISTICS:

Lake Erie Correctional Institution is a medium custody prison, privately owned and operated by Corrections Corporation of America (CCA). The institution, which was constructed in 2000, is situated on 52 acres of land in Conneaut, Ohio approximately 70 miles northeast of Cleveland. CCA took over operation in January 2012 and the institution operates under contract and policies with the Ohio Department of Rehabilitation and Correction (ODRC). All inmates at Lake Erie Correctional Institution are received, after reception services, from the Ohio Department of Rehabilitation and Correction. Ohio Department of Rehabilitation and Correction (ODRC) contracts Corrections Corporation of America (CCA) to operate the Lake Erie Correctional Institution.

Two 14-foot metal fabric fences, with numerous strands of man barrier, surround the institution. The interior fence has a shaker wire detection system and the perimeter is further enhanced by two armed vehicle patrols operating 24/7. The only breach in the perimeter is the vehicle/supply gate. There are nine buildings inside the secure perimeter, with the tenth building (administration), being part of the secure perimeter. There are six dormitories with approximately 300 inmates each, a building with a 50 cell (48 double and two single) segregation unit and attached Medical/Mental Health Unit, an inmate activities building (Gym and Chapel), and one long, large building comprised of Education/Vocation, OPI (Prison Industry), Food Service and Dining, Maintenance, and Commissary. Medical is open 24 hours. The six dorms provide communal toilets, sinks, and showers; segregation cells have toilet and sinks, with the showers at the end of the tier. There are a total of 501 cameras. They are located on the outer perimeter, visitation, offender housing, medical, and high inmate traffic zones. Cameras are monitored in central control. Recordings are stored for 30 days unless otherwise saved.

Population on the day of the audit was 1,754. Per the pre-audit questionnaire there were 1,516 inmates with length of stay more than 30 days in the last 12 months; 1516 inmates admitted in last 12 months; and 238 inmates were admitted prior to August 20, 2012. Inmate ages range from 18 – 75.

The CCA mission is "advancing corrections through innovative results that benefit and protect all we serve." The mission Lake Erie Correctional Institution is "Provide a safe and secure institution for all who reside and work within the confines of Lake Erie Correctional Institution by utilizing the written rule, policies, post orders and the Ohio Plan for a unit managed prison."

SUMMARY OF AUDIT FINDINGS:

On September 21-23, 2015, the onsite visit was completed. Within a week of the audit being completed, the auditor determined two standards had not met standards. On October 23 (during the 30 day interim report writing period), CCA and Lake Erie Correctional Institution completed corrective action plans on each of the standards and the auditor started the final report. The results of Lake Erie Correctional Institution audit is listed below:

Number of standards exceeded: 7
Number of standards met: 33
Number of standards not met: 0
Non-applicable: 3

§115.11 - Zero Tolerance of Sexual Abuse and Sexual Harassment; PREA Coordinator

X 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)

Corrections Corporation of America (CCA) operates the Lake Erie Correctional Institution to house Ohio Department of Rehabilitation and Correction (ODRC) inmates. Both CCA and ODRC have very good written policy mandating zero tolerance towards all forms of sexual abuse and sexual harassment and that outlines the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The Lake Erie Correctional Institution uses mainly the ODRC policies. There are two main ODRC written policies related to PREA: 79-ISA-01 Prison Rape Elimination; and 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation. Both 79-ISA-01 and 79-ISA-02 was revised in November 2014. These policies outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. Other agency policies such as 79-ISA-03 Sexual Abuse Review Team; 79-ISA-04 PREA Risk Assessment and Accommodation Strategy; and 79-ISA-05 Lesbian, Gay, Bisexual, Transgender, Intersex; some with variances/updates supplement the main PREA policies. Agency policies and procedures were well organized and are continually revised. Additionally, the institution has a local zero tolerance policy dated January 2015, and also reference CCA PREA Policy 14-2.

CCA employs an upper-level, agency-wide PREA coordinator and a PREA compliance manager. Ms. Lisa Hollingsworth is the PREA Coordinator. She is very knowledgeable of PREA standards and is one of the top PREA Coordinators I have met. Ms. Hollingsworth has the authority to develop, implement, and oversea PREA compliance. She is very active in coordinating PREA, consistently sending updates to CCA facilities, especially as FAQs are posted on the PREA website. She conducts training and meetings to keep unit PREA Compliance Managers up to date on any changes and best practices. She is consistently looking for ways to improve CCA PREA program. Indirectly supervises 55 compliance managers. For Lake Erie Correctional Institution, she also works with the ODRC PREA team which includes Mr. Andrew Albright, another one of the top PREA Coordinators I have met.

Ms. JoAnn King serves as the Assistant Warden of Support Services and Lake Erie Correctional Institution PREA Compliance Manager. She was knowledgeable of PREA standards and was actively involved in PREA activities. She claimed to have enough time to perform her PREA duties. She coordinates and conducts training, provides info to staff at staff calls, advises the Warden, contacts PREA Coordinator for clarification and coordinates with institution leadership. She is assisted by Ms. Joy Conley who was very knowledgeable of the PREA standards and facility PREA operations and policy. During the interviews of inmates, Ms. Conley was mentioned a number of times as the staff member that provided information and assisted.

§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)

X Not Applicable

CCA is a private provider and does not contract with other agencies for the confinement of inmates; therefore this standard is not applicable. ODRC contracts require CCA to implement and comply with PREA.

§115.13 – Supervision and Monitoring

☐ 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)

CCA ensures each institution it operates develops document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse by monitoring and reviewing the staffing plans. ODRC policy 79-ISA-01 establishes procedures to develop and monitor staffing plans uses the criteria found in standard 115.13 (a) to include generally accepted correctional practices; any judicial findings of inadequacy; any findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal or external oversight bodies; all components of the institution's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); composition of the inmate population; number and placement of supervisory staff; institution programs occurring on a particular shift; any applicable State or local laws, regulations, or standards; prevalence of substantiated and unsubstantiated incidents of sexual abuse; and other relevant factors to develop and review the staffing plan. Lake Erie Correctional Institution had approximately 501 cameras located on the outer perimeter, visitation, offender housing, medical, and high inmate traffic zones. Recordings are stored for 30 days unless otherwise saved. The staffing plan is reviewed annually by the Warden and PREA Compliance Manager at the

institution; and CCA PREA Coordinator and Vice President for Operations. The auditor reviewed the 2014 and 2015 annual review. The 2014 plan addressed camera upgrades from 2013.

ODRC policy 79-ISA-01 and CCA requires the staffing plan be complied with and when it does not the institution shall document and justify all deviations from the plan. Through review of the staffing plan and shift documents, interview of staff and the leadership, it was determined Lake Erie Correctional Institution had no deviations from the staffing plan in the last 12 months. Lake Erie Correctional Institution uses overtime to ensure the staffing plan is complied with. If and when the staffing plan is not met, a notification is sent through the Warden to the CCA Corporate office.

The ODRC policy 50-PAM-02 requires unannounced rounds by supervisors and prohibits staff from alerting other staff members that supervisory staff rounds are occurring. Unannounced rounds by intermediate-level or higher-level supervisors are documented in logs, and are done randomly on all shifts. The auditor reviewed about 21 days of logs prior to the audit, and logs on site. Staff and inmate interviews and the logs confirmed the unannounced rounds by supervisors are done on all shifts and staff were not alerting other staff the unannounced rounds were being conducted.

CCA agency head was interviewed prior to this audit and confirmed that a five year capital expenditure plan had been approved to enhance camera coverage at all CCA facilities.

§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)

X Not Applicable

Lake Erie Correctional Institution is an adult male institution and does not house youthful inmates; therefore this standard is not applicable. ODRC policy 71-SOC-05 covers the standard of separating youthful inmates from adult inmates and ensuring youthful inmates have access to programs and work opportunities. Youthful inmates are housed at specific facilities in the system.

§115.15 – Limits to Cross-Gender Viewing and Searches

☐ 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)

ODRC Policy 310-SEC-01 Inmate and Physical Plant Searches, outlines institutions shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances; and shall document all cross-gender strip searches and cross-gender visual body cavity searches. Based on documents reviewed and interviews of staff and inmates, Lake Erie Correctional Institution has not conducted cross-gender strip searches or cross-gender visual body cavity searches in the last 12 months.

ODRC Policy 79-ISA-05 LGBTI Policy, states institutions shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status; and if the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. Staff are required to be trained how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Through interviews of staff and inmates it was determined staff do not search or physically examine a transgender or intersex inmates for the sole purpose of determining the inmate's genital status, and only medical staff if needed would make that determination.

Review of training records, lesson plans, and interviews of staff demonstrated staff had been trained to conduct how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Majority of staff could demonstrate during the interviews how to conduct searches of transgender and intersex inmates in a professional manner, the best of all audits by this auditor to date.

The Lake Erie Correctional Institution does not house female inmates, thus are NA with standards 115.15(b) and part of (c).

ODRC Policy 79-ISA-01 states the institution shall enable inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks; and requires staff of the opposite gender to announce their presence when entering an inmate housing unit. It provides guidance how opposite gender staff is to announce their presence when entering an inmate housing unit. Observation during the audit, and staff and inmate interviews confirmed that female staff announces themselves when they enter the housing units.

The Lake Erie Correctional Institution Special Housing Unit (SHU) has showers in each of the cells. The cell door has a window which can see a majority of the cell, but not

the shower area. The showers are up against a wall with a window viewed from the hallway directly where inmate groin areas would be when they would shower. The window allows female staff to observe and view male inmate's buttocks, or genitalia when walking the hallway of the SHU. ODRC initially believed seeing the inmates shower in the cell could fall under when such viewing is incidental to routine cell checks. Female staff announce when they enter the SHU. The auditor believed the window violates standard 115.15 (d) reference inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their buttocks, or genitalia. The auditor recommended some type of covering go over the window and/or designate specific shower times and not have female staff walk the hallway during those times. It was agreed the covering could be one that still shows shadows. ODRC was concerned security and safety would be decreased with the cover. The auditor contacted the PREA Resource Center and DoJ for guidance. During the report writing period the Lake Erie Correctional Institution covered all the windows with a curtain flap to block the view, instituted procedures on when the curtain could be lifted. The auditor reviewed a photograph of the curtain flap and procedures. The auditor approved the corrective action and Lake Erie Correctional Institution began installing the curtains over those windows, and during the interim report writing period all the modifications were completed (completed October 23rd). Photos of all the changes not observed by the auditor during the audit were provided to the auditor.

§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)

ODRC Policies 79-ISA-01 and 64-DCM-02 Inmates with Disability, ensure inmates with disabilities and who are limited English proficient have access to PREA information and programs. CCA/Lake Erie Correctional Institution has taken steps to ensure that inmates who are limited English proficient or disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. CCA does have a contract with Language Line Solutions for language translator service for inmates who are limited English proficient. Some of the languages includes: Spanish, French, Chinese, Korean, and Farsi. Additionally, CCA uses three "qualified interpreters" who are designated staff who has demonstrated a satisfactory level of competency in both Spanish and English languages. PREA handouts and inmate handbooks are in English and Spanish. English and Spanish PREA posters are posted throughout the institution for inmates and staff to see. Staff and inmates stated inmates are not used as interpreters when addressing sexual abuse and sexual harassment allegations. The institution did have a TDD phone for those who are hearing impaired.

The auditor interviewed one partially deaf and one partially blind inmate. Each had a good knowledge of PREA and had been provided PREA information in formats that allowed them equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The auditor interviewed one inmate who was limited English proficient, Spanish being his primary language. The auditor used one of the designated Spanish staff interpreters to do the interview. The inmate was comfortable with the staff interpreter. The inmate stated he had been provided PREA information in Spanish, and had a good understanding of PREA information and programs.

§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)

ODRC Policy 34-PRO-07 outlines policy and procedures to ensure staff and contractors are not hired or promoted who has engaged in sexual abuse in a prison, jail, lockup, community confinement institution, juvenile institution, or other institution; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or been civilly or administratively adjudicated to have engaged in sexual activity facilitated by force, overt or implied threats of force, or coercion. ODRC Policy 34-PRO-07 also requires the institution to consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. Prior to the audit reviewed background checks conducted on staff and employees, and during the audit reviewed additional background checks and employee application packets. Through review of personnel records and staff interviews it was determined Lake Erie Correctional Institution staff and contractors are not hired or promoted who has engaged in sexual abuse in a prison, jail, lockup, community confinement institution, juvenile institution, or other institution; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or been civilly or administratively adjudicated to have engaged in sexual activity facilitated by force, overt or implied threats of force, or coercion.

ODRC Policy 34-PRO-07 requires background checks for staff; and to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Prior to the audit reviewed one background check of an employee and a spreadsheet listing all the employees last background check and next scheduled background check. During the audit reviewed five additional background checks and employee application packets

that demonstrated background checks were done prior to employment, and none had a background check more than five years old. The spreadsheet demonstrated most background checks were done between 2013 and 2015. CCA forms and process are used for background check of employees. Interviews of Human Resource staff and employee application packets also demonstrated contact with prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. There was 108 new employee background checks in the last 12 months before the audit.

ODRC Policy 34-PRO-07 and CCA Policy 1-19 General Administration – Roles of Consultants, Contract Employees, and Employees of Other Agencies requires criminal background records check before enlisting the services of any contractor who may have contact with inmates. Prior to the audit reviewed one background check conducted on contractor. During the audit reviewed two additional contractor background checks and interviews of staff demonstrated background checks were done prior to contractor working at the institution. There were 13 background checks of contractors conducted in the last 12 months before the audit. Contractor background checks used ODRC forms and process.

ODRC Policy 79-ISA-01 establishes the procedures to conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates. Prior to the audit and during the audit reviewed background checks conducted on employees and contractors, and the spreadsheet that tracked last and next scheduled background checks and all employees and contractors had a background check less than five years old, most done between 2013 and 2015. Interviews of Human Resource staff demonstrated the process of conducting background checks every five years were in place.

CCA Policy 3-20-2 Career Opportunities states shall ask all applicants and employees who may have contact with inmates directly about previous sexual misconduct as described in PREA standard 115.17 (a) in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees; and imposes upon employees a continuing affirmative duty to disclose any such misconduct. CCA policy 3-20-2 and ODRC policy 34-PRO-07 requires information be provided on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. Prior to the audit received one document each for applicant, staff promotion and annually demonstrating they addressed previous sexual misconduct as described in PREA standard 115.17 (a) in written applications or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. Both of these policies were confirmed through interviews and review of additional personnel documents to include examples of employee annual affirmation during the audit. During the audit reviewed three additional applicant and five employees files that demonstrated applicants and employees who may have contact with inmates directly are asked about previous sexual misconduct as described in PREA standard 115.17 (a) in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees; and imposes upon employees a continuing affirmative duty to disclose any such misconduct.

CCA Policy 14-2 states material omissions regarding sexual misconduct, or the provision of materially false information, shall be grounds for termination.

§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)

Through review of CCA Policies 14-2 and 7-1 Record Drawing and Alterations/Additions, and interviews of CCA Agency Head representative, PREA Coordinator, PREA Compliance Manager, and Warden it was determined that the CCA considers the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. The agency head was interview prior to this audit and confirmed that a five year capital expenditure plan had been approved to enhance camera coverage at all CCA institutions. During the review of the staffing plan, the video monitoring system is also reviewed to ensure coverage enhances the ability to protect inmates from sexual abuse. When reviewing the staffing plan and camera plan, info from the substantiated and unsubstantiated incidents of sexual abuse to assist in the assessment Lake Erie Correctional Institution has 501 cameras throughout the facility. The cameras are monitored and are recorded, stored for 30 days, longer if saved. There have been an increase in the number of cameras (100 in 2014), camera upgrades and modifications since August 2012 at the Lake Erie Correctional Institution.

§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)

ODRC Policy 79-ISA-02 outline evidence protocols for administrative proceedings and criminal prosecutions; requirements for forensic medical exams; and when requested by the victim, a victim advocate to accompany and support the victim through the forensic examination, investigatory interviews, emotional support, crisis intervention, information, and referrals. Lake Erie Correctional Institution investigator handles all the administrative proceedings regarding PREA allegations. Criminal investigations are conducted by the Ohio State Highway Patrol. ODRC has an MOU with the Ohio State

Highway Patrol to conduct all criminal PREA investigations, and includes PREA investigator training requirements, and it provides the responsibilities of each organization. There is a uniform evidence protocol that maximizes the potential for usable physical evidence for administrative and criminal prosecutions. The protocols were reviewed and found to be in line with DoJ's National Protocol for Sexual Assault Medical Forensic Examinations. Majority of the staff interviewed were very knowledgeable of the evidence protocols, and could explain the protocol for obtaining useable evidence when an inmate alleged sexual abuse. Ninety-six hours is used for collection of evidence through a sexual assault medical forensic examination for penetration vaginally or anally; 24 hours for oral penetration. The auditor conducted interviews with Lake Erie Correctional Institution investigators and previously with Ohio State Highway Patrol investigators. The Lake Erie Correctional Institution investigators had a good understanding of the investigative procedures and responsibilities and evidence protocols. Previous interviews with Ohio State Highway Patrol investigators demonstrated a good working relationship between the two organizations and that the investigators were trained.

There is a MOA with Ohio State University Medical Center for professional medical services to include use of Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) to conduct forensic exams. CCA/Lake Erie Correctional Institution has an MOA Hillcrest Hospital in Cleveland effective July 2015 which includes using a SANE for all forensic exams. Per ODRC 68-MED-15 Bureau of Medical Services Co-payment Procedures the services are provided at no costs to the inmate when requested. There have been two forensic exams done in the last 12 months; one by a SANE and one by a qualified medical practitioner. Documentation for the forensic exam in both cases were reviewed prior to and during the audit. The auditor contacted Hillcrest Hospital and verified inmate victims would receive forensic exams conducted by SANE personnel. If alleged vaginal or anal sexual abuse occurred within 96 hours, or oral sexual abuse within 24 hours, security escorts the victim to medical department for medical staff to assess and stabilize while awaiting transfer to hospital for a forensic exam.

There is a MOU with the Cleveland Rape Crisis Center to provide inmate victims of sexual abuse a victim advocate services. Services include accompanying and supporting the victim through the forensic medical examination process and investigatory interviews, emotional support, crisis intervention, information, and referrals. The Cleveland Rape Crisis Center provided Lake Erie Correctional Institution a phone number and address to write which is clearly posted in each housing area. The auditor did dial the number to test the system during the audit. Additionally, Lake Erie Correctional Institution has trained staff to provide victim advocate services as a "qualified agency staff member" if needed by staff or inmates who have been sexually abused. Five staff were trained, lesson plans and training records reviewed. The one day training is provided by staff from the Office of Victim Services, Ohio Family Violence Prevention Center and a SANE.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

X 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)

ODRC Policy 79-ISA-02 requires an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment, that all allegations of sexual abuse or sexual harassment are referred for investigation by the appropriate authority. ODRC Policy 79-ISA-02 and the MOU with Ohio State Highway Patrol describe the responsibilities for each agency. Through a review of the investigative file and interviews of the Warden and investigative staff; it was determined the Lake Erie Correctional Institution ensures that an administrative and/or a criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Referrals of allegations are first investigated by the institution.

There were 19 allegations of a sexual abuse and sexual harassment at Lake Erie Correctional Institution during the audit cycle. All had administrative investigations; six were forwarded to Ohio State Highway Patrol for criminal investigations and prosecution as applicable. There were 12 inmate-inmate allegations: one inmate-inmate sexual harassment substantiated; four inmate-inmate sexual harassment unsubstantiated; one inmate-inmate sexual abuse substantiated; and seven inmate-inmate sexual abuses unsubstantiated. There seven staff-inmate allegations: two staff-inmate sexual harassment unsubstantiated; four staff-inmate sexual abuses substantiated; and one staff-inmate sexual abuse unsubstantiated. Note two of the staff-inmate sexual abuse substantiated was one incident investigated as two cases because there were two different victims. One inmate-inmate allegation was received from another facility when the inmate reported the incident occurred at Lake Erie Correctional Institution.

ODRC and Ohio State Highway Patrol evidence protocols are published on the ODRC website. The auditor reviewed both documents prior to the audit. Interviews with investigators demonstrated the responsibilities were clearly established and understood by both agencies. CCA policy regarding referral of allegations of sexual abuse and sexual harassment for criminal investigation are available on the CCA website.

§115.31 – Employee Training

X 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)

ODRC policies 79-ISA-01 and 39-TRN-10 Employee Orientation Training addresses PREA staff training requirements. Lake Erie Correctional Institution employees receive PREA training annually through scheduled training, staff policy reviews, staff meetings, and staff recall meetings. Annual training uses the ODRC training curriculum. The PREA training curriculum was reviewed and verified that the training provided to employees is very comprehensive. Review of the lesson plan and slides demonstrated the training covered: zero-tolerance policy for sexual abuse and sexual harassment; how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; inmates' right to be free from sexual abuse and sexual harassment; the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment in confinement; the common reactions of sexual abuse and sexual harassment victims; how to detect and respond to signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with inmates; how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. Some training has been though e-learning on line and includes a test that requires a score of 80 percent to pass. The questions are not basic and test the knowledge of the staff. Employees have to acknowledge they understood the training prior to taking the test. For classroom training, staff signs a roster stating they understood the PREA training they received. Staff interviewed were well versed in the CCA and ODRC zero tolerance policy; their responsibilities in reporting sexual abuse, sexual harassment, and staff negligence; first responder duties; evidence preservation; and how to conduct searches of transgender and intersex inmates. The staff is the best trained at searches of transgender and intersex inmates this auditor has audited. Employees sign an acknowledgement form that they have received and understood the training they received during pre-service training. The questionnaire stated all 294 staff was trained. Prior to the audit documents demonstrating all staff completed the training and their most recent test score was provided and reviewed. During the audit, the auditor randomly selected an additional five training records for review, all staff members had been trained and there was documentation the staff signed stating they understood the training received.

CCA and ODRC training is tailored to the gender of the inmates at the institution.

§115.32– Volunteer and Contractor Training

☐ 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)

All contractors and volunteers who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. ODRC Policy 79-ISA-01 and the PREA training curriculum outline training requirements for volunteers and contractors who have contact with inmates. Prior to the audit the PREA slides; and a contractor and volunteer training records and memorandum stating they understood the training was provided. The PREA Pre-Questionnaire stated 92 new contractors and volunteers had received the training during the last 12 months. While on-site the auditor randomly reviewed four contractor and volunteer training records, each have signed they understand the PREA training they received. Three volunteers and contractors were interviewed. Interviews of the contractors and volunteers demonstrated their knowledge of PREA, their responsibilities and the agency zero tolerance policy.

§115.33 – Inmate Education

X 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)

ODRC policy 79-ISA-01 and 52-RCP-10 Inmate Orientation requires that all inmates receive PREA information upon arrival and PREA education as part of the Admission and Orientation program. During intake inmates are provided information through a PREA handout and inmate rule book (both available in English and Spanish) that explains the agencies zero tolerance policy regarding sexual abuse and sexual harassment; and how to report such incidents. Additionally, the staff covers basic PREA information and shows an ODRC inmate education video. The ODRC Director sets the tone for ODRC zero tolerance for sexual abuse and harassment by presenting first in the video. The video includes use of sign language and close caption in the inmate PREA video, and institution information is provided in English and Spanish. The video was viewed by the auditor and was very well done. During institution orientation (within 30 days of arrival) they receive additional training which expands on the previous information provided. Most inmates receive the comprehensive education within seven days. Inmates acknowledge receiving the PREA information in writing. Posters and inmate handbooks are provided to inmates or posted in the housing units in formats accessible to all inmates to ensure that key information is continuously and readily available or visible to inmates. Information on the posters and in the handbook include: inmate rights; how to report; what to expect after you report; and how to protect yourself against sexual assault. ODRC policy 64-DCM-02 requires information be provided in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills.

During the tour and interviews most inmates acknowledged the information being provided upon arrival and orientation, and posters displayed throughout the institution. The inmates interviewed definitely knew the agency zero tolerance policy; the difference between sexual abuse and sexual harassment; and that they have the right to be free from retaliation for reporting such incidents. Prior to the audit, the auditor reviewed one example of an inmate documenting training (June 2015), and randomly reviewed eight inmate records onsite which demonstrated inmates received PREA information upon arrival, training within 30 days of arrival, and acknowledged through signature they have received and understood the training. Those who had not received comprehensive training prior to August 20, 2013, received the training on January 16, 2014.

§115.34 – Specialized Training: Investigations

X 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)

ODRC policy 79-ISA-01 requires the institution's investigator receives specialized training in addition to the general education provided to all employees. Ohio hosted a three day PREA investigator training by the Moss Group, and requires all its investigators to be trained by either the Moss Group training or PREA Investigator training by National Institute of Corrections (NIC). One investigator completed the NIC PREA Investigating Sexual Abuse in a Confinement Setting course and the other completed the training provided by the Moss Group and the CCA investigator course. Both specialized training for investigators covered all requirements of the standard to include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The agency maintains documentation that the both investigators have received both the general and investigative PREA training.

The lesson plans, slides and sign in sheets were reviewed and interview of each agency investigators demonstrated they understood the how to conduct a sexual abuse investigation in a confinement setting and what their roles were. This auditors previous interview of investigators from Ohio State Highway Patrol verified their knowledge of conducting investigations. The Moss Group training included Ohio State Highway Patrol as verified by sign-in sheets.

§115.35 – Specialized Training: Medical and Mental Health Care

☐ 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)

ODRC policy 79-ISA-01 outlines the training required for medical and mental health practitioners to include how to detect and assess signs of sexual abuse and harassment, how to preserve physical evidence, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how to report allegations of sexual abuse and harassment. ODRC and CCA have developed a very comprehensive training for its medical and mental health practitioners. The auditor was provided a training printout demonstrating medical and mental health staff had received specialized medical and mental health training in 2014 and 2015, and annual basic training each year. The auditor checked three training records of medical staff on site in addition to what was provided with the questionnaire. Interviews of medical and mental health staff demonstrated they understood: how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. ODRC requires medical and mental health staff to pass a test. Medical staff does not conduct forensic medical examinations.

§115.41 – Screening for Risk of Victimization and Abusiveness

☐ 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)

ODRC policy 79-ISA-04 requires Lake Erie Correctional Institution to conduct a screening for risks of sexual victimization and abusiveness within 72 hours of arrival by medical staff; and a follow-up screening for risks of sexual victimization and abusiveness between 15 and 30 calendar days from inmate arrival by unit management team. ODRC 79-ISA-04 requires the institution reassesses inmate's risk level again when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. The auditor reviewed two screening forms (one initial screen and one follow-up screen) prior to the audit. The auditor had two staff (one medical and one unit management team) that performs the screen to conduct a screen of the auditor to demonstrate the process of filling out the screening form. The process was done very professionally. All the criteria referenced in the standard are on the form and inmates

are asked all of the questions required to be asked to the inmate. The screen also requires the screener to make his/her own assessment of whether the inmate is gender non-conforming. The screening instrument is objective in determining if the inmate is at risk for victimization or abusiveness. On-site the auditor randomly selected eight inmates and reviewed their initial and reassessments within 30 days screening forms. The auditor also reviewed one transgender inmate screening forms which included one done six months following arrival. All inmates are assessed during intake screening for their risks of being sexually abused by other inmates or sexually abusive towards other inmates. Staff interviews confirmed appropriate controls have been implemented to ensure that sensitive information is not released and exploited by staff or other inmates. Risk screening records are maintained in classification and only a limited number of staff has access to these files. The screening instrument was restricted to staff making housing, work and program assignments. Inmates are not disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked. During inmate interviews, all inmates who arrived within the last three years remembers receiving the initial screen upon arrival, some remember a second screen.

§115.42 – Use of Screening Information

X 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)

ODRC policy 79-ISA-04 outlines the use of the screening form to include: using the information from the risk screening to determine housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive; and making individualized determinations about how to ensure the safety of each inmate. ODRC policy 79-ISA-05 states the agency shall consider on a case-by-case basis whether to assign a transgender or intersex inmate to an institution for male or female inmates, housing and programming assignments, based on the inmate's health and safety, inmate's own views with respect to his or her own safety, and whether the placement would present management or security problems; reviewing twice a year placement and programming assignments for each transgender or intersex inmate to review any threats to safety experienced by the inmate; allowing transgender and intersex inmates the opportunity to shower separately from other inmates; and not placing lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated institution, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.

Through a review of screening forms, housing and program decisions, inmate and staff interviews, it was determined Lake Erie Correctional Institution uses the screening

information to determine housing, bed, work, education, and program assignment with the goal of keeping inmates at high risk of being sexually victimized separate from those at high risk of being sexually abusive. The decisions are made on a case-by-case basis using information from the screen, assigned PREA classification, and good correctional judgment. The process is clearly defined in the policies and implemented in the use of PREA and classification forms. Additionally, the screening form is computerized and automatically provides flags when an inmate is programmed for a cell and cell mate that is not compatible.

There were inmates who were transgender and gay and they acknowledged they were treated with respect and were not housed in dedicated housing area. ODRC and CCA do not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status. Transgender or intersex inmate's own views with respect to his or her own safety are given serious consideration when making housing, programs and other decisions; and transgender and intersex inmates are given the opportunity to shower separately from other inmates. Transgender inmates interviewed stated they were given an opportunity to shower separately from other inmates but elected not to. Reviewed one transgender screening packet that included a section that the inmate is asked who should do pat down searches; what gender institution the inmate wished to be housed; and if the inmate wanted to shower separate from the general population. An accommodation plan is also included and addresses housing, work, education and programs.

§115.43 – Protective Custody

☐ 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)

ODRC policy 79-ISA-04 states inmates at high risks for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers; if placed in segregated housing involuntarily they shall have access to programs, privileges, education, and work opportunities to the extent possible; that the institution shall document any access to programs, privileges, education, or work opportunities that was restricted, duration of restriction and why; and that every 30 days, the institution shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population. Interviews of the Warden, PREA Compliance Manager, and segregation staff verified inmates at high risk of sexual victimization would not be placed in involuntary segregation unless other measures have been assessed. Other measures included moving housing areas or facilities. It was confirmed through investigative paperwork and during interviews with the Warden and staff who supervise

segregated inmates that no inmates at high risk for sexual victimization had been placed in involuntary segregated housing during the past 12 months prior to the audit.

§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)

ODRC policy 79-ISA-02 require and provide multiple internal and external ways for inmates to report sexual abuse, sexual harassment and retaliation by other inmates or staff for reporting sexual abuse and sexual harassment. Inmate handbooks, PREA handouts, education video and posters throughout the facility provide specific internal and external ways for inmates to report sexual abuse, sexual harassment and retaliation by other inmates or staff for reporting sexual abuse and sexual harassment. Interviews of inmates and staff verified the inmates and staff knew of the multiple internal and external ways to report incidents of abuse or harassment, and retaliation. The auditor tested the numbers posted during the tour. Inmates can report verbally and in writing to staff; a 24 hour toll free hotline to ODRC Support Center and ODRC Agency hot line; write the CCA Managing Director for Institution Operations. ODRC has a MOU with Franklin County Juvenile Detention Institution that allows inmates to contact as a public or private outside agency that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. The auditor called the Franklin County Juvenile Detention Institution and discussed the process with staff that monitors the phone line. The inmates would leave a recording which is checked and forwarded daily. These reporting systems were demonstrated through interviews of inmates, staff and review of policies, inmate handbooks and posters demonstrate these inmate reporting systems. The auditor during the tour tested the numbers listed in the housing units. The auditor did talk to staff at Franklin County Juvenile Detention Facility who confirmed they would take and forward reports along with provide victim advocates over the phone and in person to provide emotional support. Additionally, inmates or their family members/friends can contact the CCA Managing Director for Institution Operations or the ODRC hotline by phone or email. CCA and ODRC websites provides information for third party reporting.

CCA and ODRC policies and staff fliers provide information on PREA to include ways for staff to privately report sexual abuse and sexual harassment of inmates. During interviews some of the staff knew they could privately report sexual abuse and harassment of inmates to the CCA Ethics and Compliance hotline or by using an ODRC form marked confidential and submitted directly to the PREA Compliance Manager or PREA Coordinator.

No one is detained solely for civil immigration purposes.

§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)

X Not Applicable

Lake Erie Correctional Institution does not have an administrative process to address inmate grievances regarding sexual abuse. All PREA allegations are processed through the investigative process in accordance with ODRC and CCA policies.

§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)

ODRC policy 79-ISA-01 states inmates shall be provided access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations; and the institution shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. Cleveland Rape Crisis Center is used for outside confidential support services. Mailing addresses are provided to the inmate on posters in the housing units and in the inmate handbook. Additionally, the inmate can request to use a unit staff member office phone to make a call to the Cleveland Rape Crisis Center. The MOU with Cleveland Rape Crisis Center describes all the services to be provided which includes confidential support services. Inmate interviews confirmed the inmates were informed and know of the confidential support services provided. Inmates can also requests lists of other Rape Crisis Centers in Ohio with mailing addresses and phone numbers. Posters with the information are posted mainly in the housing units, but also others areas of the institution. The posters stated the Cleveland Rape Crisis Center provided confidential services and communications were not monitored. Inmate interviews confirmed a few inmates knew of the confidential support services provided, most knew there was a service available

but not exactly what was provided based on they did not need or believed they would not need the specific information.

§115.54 – Third-Party 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)

CCA and ODRC website outlines CCA and ODRC methods to receive third party reports of sexual abuse and sexual harassment. ODRC Web site has a PREA section on their home page, and the PREA section is easily accessible. It provides an email to report sexual misconduct on behalf of an offender. Posters at the institution provides the inmates a telephone number and email family friends can report sexual misconduct to include retaliation as a third party. Discussion with inmates demonstrated they knew how third party reporting could be accomplished. Posters are located in all entrance buildings and visitation room for visitors to see.

CCA has a PREA section on their web site, and the PREA section is easily accessible. On the PREA page there is a section that specifically addresses how inmates and others can report to include third party. It provides a phone number to the National Sexual Assault Hotline and CCA's Ethics and Compliance Helpline; along with information to write to the Warden at the institution. It has on line section that allows an individual to file a report or get an update on a report on line. It also states "It is not required that any personal information be provided. However, the more information that can be provided regarding dates, times, locations, witnesses, and as much detail about the alleged incident as is known serves to assist staff and law enforcement in their efforts to successfully conduct the investigations."

§115.61 – Staff and Agency Reporting Duties

☐ 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)

ODRC policy 79-ISA-02 require that all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and for

staff not to reveal any information related to a sexual abuse report to anyone other than extent necessary. Health practitioners are required to report sexual abuse and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. The institution reports all allegations of sexual abuse and sexual harassment, including third party and anonymous reports, to the institution investigator. Review of investigative files; and interviews of staff and inmates verified staff immediately report to the institution's designated investigator any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and that staff does not reveal information related to a sexual abuse report other than to people authorize to discuss the report. Health practitioners during interviews stated they are required and would report sexual abuse. Random interviews with staff revealed that staff is very aware of their responsibilities to report incidents of sexual abuse or harassment to the investigator or their supervisor and know not to reveal any information about a sexual abuse incident to other staff. Interviews with inmates and staff did not reveal any incident of sexual abuse or harassment not reported to the institution's designated investigator.

§115.62 – Agency Protection Duties

☐ 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)

ODRC policy 79-ISA-02 requires staff to take immediate action to protect any inmate they learn is subject to substantial risk. Interviews with staff demonstrate they know the steps to take to protect an inmate subject to risk of imminent sexual abuse. Security staff immediately employs protection measures as separate the inmate from where or whom at risks with; pass the information is passed to the Investigator, PREA Compliance Manager and Warden. The Warden, PREA Compliance Manager, and investigator confirmed there have been no incidents in the past 12 months, where it was necessary for the institution to take any action in regards to an inmate being at substantial risk of sexual abuse.

§115.63 – Reporting to Other Confinement Facilities

☐ 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)

ODRC policy 79-ISA-02 requires when an allegation that an inmate was sexually abused while confined at another institution, the Warden that received the allegation shall notify the Warden where the alleged abuse occurred within 72 hours after receiving the allegation; that all sexual abuse allegations reported by another institution regarding any inmate that was confined at the Lake Erie Correctional Institution be fully investigated. Interviews with the Warden, PREA Compliance Manager, and investigator confirmed their knowledge of the policies and responsibilities to report any allegations and investigate any allegations that may have occurred at Lake Erie Correctional Institution. The Warden would call first and then follow up with an email to document providing the information. No inmate reported abuse to Lake Erie Correctional Institution staff while confined at another institution. There was one report of a sexual abuse allegation at Lake Erie Correctional Institution by an inmate at another institution in the last 12 months.

§115.64 – Staff First Responder Duties

☐ 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)

ODRC policy 79-ISA-02 and Lake Erie Correctional Institution Sexual Abuse Response Plan outlines procedures to respond to an allegation of sexual abuse for both security and non-security staff. ODRC has a Sexual Abuse First Responder Flow Chart and First Responder Check Sheet that is a very good guide to follow to ensure all PREA procedures and steps are followed. ODRC Policy 310-SEC-13 Protection of a Crime Scene provides specific procedures for preserving and protecting crime scene, and collection of evidence. All staff carry a PREA card which outlines first responder duties and steps. Prior to the audit Lake Erie Correctional Institution provided two incident reports and two first responder completed checklists for review. Random interviews with staff and inmates; and review of investigations and first responder checklists confirmed both security and non-security staff knew what to do upon learning an inmate was sexually abused to include separating the alleged victim and abuser; how to preserve the crime scene; and what actions inmates should not take in order not to destroy physical evidence. Good training has prepared the staff to properly respond. Review of investigations further demonstrated staff knew what to do as the first responders to allegations of sexual abuse. One inmate interviewed stated the first responder was very helpful. In that case the correctional officer observed the alleged sexual abuse and responded immediately and appropriately.

§115.65 – Coordinated Response

☐ 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)

Lake Erie Correctional Institution Sexual Abuse Coordinated Response Plan serves as Lake Erie Correctional Institution plan to coordinate actions taken in response to an incident of sexual abuse, amongst staff first responders, medical and mental health practitioners, investigators, and institution leadership. The plan includes definitions; responsibilities and responses to an alleged sexual abuse incident for first responders, medical and mental health practitioners, investigators, and institution leadership. The response plan also covers inmate housing after an alleged sexual abuse, conducting investigations, administrative and criminal sanctions, and monitoring for retaliation. Interviews with staff (first responders, medical and mental health practitioners, investigators, and institution leadership), and review of the Sexual Abuse Incident Checklists, investigative and medical files confirmed staff were knowledgeable about the PREA plan and the coordinated duties and collaborative responsibilities. Lake Erie Correctional Institution plan was reviewed and found to be very thorough, one of the better plans this auditor has reviewed.

§115.66 – Preservation of Ability to Protect Inmates from Contact with Abusers

☐ 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)

CCA for Lake Erie Correctional Institution has a collective bargaining agreement with the Security, Police, Fire Professional of America and its Local 60. The agreement is effective June 21, 2015 – August 31, 2018. Management rights in the agreement does not limit CCA's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted up to and including termination. One staff member was fired for sexual misconduct during the audit period.

§115.67 – Agency Protection Against Retaliation

☐ 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)

ODRC Policy 79-ISA-02 outlines the policy and procedures for monitoring staff and inmates against retaliation. It includes designating which staff members or departments are charged with monitoring retaliation; employing multiple protection measures; monitoring the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff; and conducting periodic status checks through interviews at least every 30 days. Monitoring will occur for at least 90 days following the report of the allegation and may go beyond the 90 days if the monitoring indicates a continuing need. Per 79-ISA-02 monitoring includes periodic status checks (speaking with inmates and staff); reviewing inmate discipline, housing changes, and program changes; negative performance reviews and reassignment of staff. Lake Erie Correctional Institution uses the ODRC monitoring form, which is the same for an inmate and employee.

Lake Erie Correctional Institution designated the investigator to monitor staff and inmates. Interviews of the Warden, PREA Compliance Manager, monitor, and inmates demonstrated monitoring was being conducted. Prior to the audit two examples of monitoring of inmates and one for monitoring staff was provided, each demonstrating record checks for 30, 60, and 90 days on each case. Only discipline reports and housing changes were checked for inmates; negative performance reviews and post reassignments for staff. There were no face-to-face discussions. During the interview of the monitor it was confirmed he did not conduct face-to-face checks with those he was monitoring. For at least 90 days following a report of sexual abuse, Lake Erie Correctional Institution monitors the inmates and staff records but does not meets with the inmate or staff and monitors the conduct and treatment of inmates who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff. During the audit and during the report writing period the monitor conducted face-to-face meetings along with checking disciplinary reports, housing changes, program changes and job changes. The auditor reviewed four monitoring sheets that were done during the audit and report writing period. The auditor found this standard as meet standard on October 23, 2015.

Lake Erie Correctional Institution uses multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. Review of monitoring demonstrated use of housing changes, transfer of inmate victims or abusers, and emotional support services.

Lake Erie Correctional Institution reports zero retaliations have occurred.

§115.68 – Post-Allegation Protective Custody

☐ 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)

ODRC 79-ISA-04 states involuntary segregated housing for inmates who have alleged to have suffered sexual abuse may be used only after an assessment of all available housing alternatives has shown there are no other means of protecting the inmate; and use of protective custody to protect alleged victim is only used as a last resort for a very short time. If placed in segregated housing involuntarily they shall have access to programs, privileges, education, and work opportunities to the extent possible; and that the institution shall document any access to programs, privileges, education, or work opportunities that was restricted and that every 30 days, the institution shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population. There were no inmates who have alleged to have suffered sexual abuse in protective custody during the audit. Interviews of the Warden, PREA Compliance Manager, staff and inmates, there were no instances of using segregation housing to protect inmates who had alleged to have been sexually abused in the last 12 months.

§115.71 – Criminal and Administrative Agency 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)

Based on review of ODRC 79-ISA-02; the 19 PREA investigations; interviews of Lake Erie Correctional Institution Warden, PREA Compliance Manager; and investigator it was determined investigations into allegations of sexual abuse and sexual harassment are done promptly, thoroughly, and objectively for all allegations. Investigation files were organized and properly documented. Administrative and criminal investigations are documented in written reports. Both ODRC and CCA maintain a copy of each

investigation. Written reports are maintained as long as the alleged abuser is incarcerated or employed by the agency, plus five years IAW CCA/Lake Erie 1-15 Retention of Records and as long as the alleged abuser is incarcerated or employed by the agency, plus ten years under ODRC policy. Ohio State Highway Patrol investigative reports are held indefinitely. Lake Erie Correctional Institution conducts administrative investigations and Ohio State Highway Patrol conducts criminal investigations. ODRC's policy regarding referral of allegations of sexual abuse and sexual harassment for criminal investigation are available on the ODRC website. Lake Erie Correctional Institution and Ohio State Highway Patrol investigators have received special training in sexual abuse investigations. The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as inmate or staff. Neither ODRC nor CCA require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. Investigators interview victims and witnesses; review camera, phone call monitoring, physical evidence, DNA evidence, and inmate records. The departure of the alleged abuser or victim from the employment or control of the ODRC nor CCA does not provide a basis for terminating an investigation.

There were 19 allegations of a sexual abuse and sexual harassment at Lake Erie Correctional Institution during the audit cycle. All had administrative investigations; six were forwarded to Ohio State Highway Patrol for criminal investigations and prosecution as applicable. There were 12 inmate-inmate allegations: one inmate-inmate sexual harassment substantiated; four inmate-inmate sexual harassment unsubstantiated; one inmate-inmate sexual abuse substantiated; and seven inmate-inmate sexual abuses unsubstantiated. There seven staff-inmate allegations: two staff-inmate sexual harassment unsubstantiated; four staff-inmate sexual abuses substantiated; and one staff-inmate sexual abuse unsubstantiated. Note two of the staff-inmate sexual abuse substantiated was one incident investigated as two cases because there were two different victims. One inmate-inmate allegation was received from another facility when the inmate reported the incident occurred at Lake Erie Correctional Institution.

Lake Erie Correctional Institution investigator starts all investigations and conducts administrative investigations. If an allegation appears to be criminal in nature, the investigator will call Ohio State Highway Patrol who conducts all criminal investigations. Administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse. All investigations are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

§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)

A review of ODRC 79-ISA-02 and investigations; and interviews with the investigator and administrative staff confirm the Lake Erie Correctional Institution has no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. When the investigator was asked what standard of evidence was used in determining if an allegation is substantiated, the agencies policy was recited confirming compliance with the standard. The 19 investigations reviewed (three prior to the on-site) confirmed no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

§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)

ODRC 79-ISA-02 requires facilities to inform the inmate as to whether the allegation of sexual abuse has been determined to be substantiated, unsubstantiated, or unfounded; if investigated by an outside agency, request the outside investigative agency inform the inmate as to whether the allegation of sexual abuse has been determined to be substantiated, unsubstantiated, or unfounded; if the allegation is against a staff member, the facility shall inform the inmate whenever the staff member is no longer posted within the inmate's unit, no longer employed at the institution, has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; if the inmate allegation is against an inmate be whenever the alleged abuser has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; and that all notifications will be documented.

Prior to the audit, Lake Erie Correctional Institution provided copies of notifications to the inmates to include: the determination of a case investigated by the facility (one); the determination of a case investigated by the Ohio State Highway Patrol (one); and one notification that a staff member was resigned. All was provided in writing. During the audit, the auditor reviewed all the investigations in the last year and determined in all allegations of sexual abuse and harassment: inmates were informed in writing the outcome of the investigations whether the allegation had been determined to be substantiated, unsubstantiated, or unfounded; if the case had been referred for prosecution; if the abuser had been indicted; and if the staff member no longer worked at the institution. Lake Erie Correctional Institution uses the CCA form of notification of cases it investigated, and the Ohio State Highway Patrol used a memorandum. Interview of four inmates who alleged sexual abuse, confirmed they were informed of results of the investigation and any applicable action taken.

§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)

Per ODRC Policy 79-ISA-01, CCA/ Lake Erie Correctional Institution Policy 3-3 Code of Conduct and CCA Code of Conduct Handbook; CCA Policy 14-2; and interviews with Lake Erie Correctional Institution staff, staff are subject to disciplinary sanctions for violating agency sexual abuse or sexual harassment policies; termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse; and disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. In the past 12 months one staff member was terminated due to violation of the agency's sexual abuse and sexual harassment policy. This case was referred to Ohio State Highway Patrol for criminal investigation and prosecution. In another case the correctional officer resigned and the case was referred to Ohio State Highway Patrol for criminal investigation and prosecution, and the former staff member was indicted.

§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)

Per ODRC Policy 71-SOC-01 Recruitment, Training and Supervision of Volunteers; ODRC Policy 79-ISA-01; and ODRC Standards of Conduct for Contractors, Volunteers, and Interns; and interviews with Lake Erie Correctional Institution staff, contractors, and volunteers; contractors or volunteers are prohibited from engaging in sexual abuse, and those that do are prohibited to have contact with inmates and requires they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The Warden reported that have been no allegations of sexual abuse by contractors or volunteers during the audit cycle. Interviews with contractors and volunteers confirmed they knew the punishment for engaging in sexual abuse or sexual harassment of inmates or staff.

§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)

Per review ODRC policy 79-ISA-02, ODRC policy 56-DSC-01 Inmate Disciplinary Process, Ohio Administrative Codes 5120-9-06 and 5120-09-08 (Inmate Rule of Conduct and Disciplinary Procedures), and interviews with Lake Erie Correctional Institution staff, inmates are subject to disciplinary sanctions following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse; sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories; and considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior. In the past 12 months there have been no disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. There were no inmate substantiated findings for sexual abuse. ODRC prohibit all sexual activity between inmates and discipline inmates for such activity.

§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)

ODRC Policy 79-ISA-02 and 79_ISA-04 requires all new inmates receive a PREA screen upon arrival, along with a medical and mental health screen. If any of these identify someone as having experienced prior sexual victimization or previously perpetrated sexual abuse, whether in a prison/jail setting or in the community, they will be offered a medical and mental health follow-up meeting within 14 days. Prior to the audit, the audit reviewed two referrals (one who reported prior sexual victimization and one who previously perpetrated sexual abuse) within six days of the PREA screen. During the audit, through the review of additional PREA screens and medical and mental health

records, it was determined inmates who reported prior sexual victimization or previously perpetrated sexual abuse were offered consults with medical and mental health practitioners within 14 days of the screen. Interviews of medical and mental health staff confirmed follow-up meetings would be scheduled and conducted. Interviews of inmates confirmed follow-up meetings were scheduled and conducted. Interdisciplinary progress notes are well documented of the follow-up and any future requirements/treatment. Interviews of medical and mental health staff confirmed any information related to sexual victimization or abusiveness that occurred in the institution is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments.

§115.82 – Access to Emergency Medical and Mental Health 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)

Per ODRC B-11 Medical Care Guidelines for Sexual Conduct or Recent Sexual Abuse, inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment; inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate; and qualified medical practitioners are on duty 24 hours. Upon returning from the hospital a registered nurse evaluates and documents the inmate's health status, and refers mental health services. The inmate is prioritized for sick call and if the emergency room complete testing sexually transmitted diseases, testing is done at the facility. Per 79-ISA-02 requires inmate victims of sexual abuse shall receive timely, unimpeded access to outside emergency medical exams without financial costs. The services at no costs are provided regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Forensic exams are done for up to 96 hours for vaginal or anal penetrations and 24 hours for oral penetrations since the time of the incident. The facility provided documents for one case of an inmate alleging sexual abuse to include documents showing the inmate being sent to the emergency room, the hospital documentation of the exam and treatment, and follow-on care by a registered nurse when he returned to the facility. Interview with the medical staff and inmates confirmed this practice and that the requirements of this standard are adhered to. Treatment is provided to the victim without financial costs and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. One inmate interviewed stated medical and mental health staff and treatment could not have been better.

§115.83 – Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers

☐ 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)

Per ODRC 79-ISA-02 the institution shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile institution; treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident; and conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

Per ODRC 67-MNH-15 Mental Health Treatment the evaluation and treatment of sexual abuse victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.

Per ODRC B-11 Medical Care Guidelines for Sexual Conduct or Recent Sexual Abuse, the institution shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile institution; inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment to include offered tests and treatment for sexually transmitted infections as medically appropriate. Lake Erie Correctional Institution is a male institution and thus non-applicable 115.83 (d) and (e) which deals with pregnancy testing and medical services.

Interviews with staff and inmates; and medical and mental health documentation demonstrate there is on-going medical and mental health care for sexual abuse victims and abusers. Medical and mental health conducts follow-up care for sexual abuse incidents. One victim praised the treatment he has received from the mental health staff in dealing with the incident. Lake Erie Correctional Institution provides victims with medical and mental health services consistent with the community level of care. Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. If the tests are not done at the hospital it is done at the institution. Follow-up from the tests are normally done at the institution mental health evaluations are conducted on all known inmate on inmate abusers within 60 days of learning such abuse, and treatment is offered. Treatment is

at no costs to the inmates and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

§115.86 – Sexual Abuse Incident Reviews

☐ 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)

ODRC Policy 79-ISA-03 identifies the minimum members of the review team, and covers the process for sexual abuse incident reviews to include a form the review team uses that addresses whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the institution; whether physical barriers in the area may enable abuse; the adequacy of staffing levels in that area during different shifts; and whether monitoring technology should be deployed or augmented to supplement supervision by staff. All investigations that required an incident review was conducted. The auditor reviewed all the incident reviews in the past 12 months. Three incident reviews identified a need to change policy and upgrade physical plant/camera deficiency. Two incidents occurred at the same location, so the recommended changes were the same and implemented. One incident resulted in a camera being moved and an increase in staff rounds in that area. The Warden reviews and signs each report. By ODRC policy the institution implement the recommendations for improvement, or shall document its reasons for not doing so. Incident review team members were interviewed and were knowledgeable of the process.

§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)

CCA Policy 14-2 and ODRC policy 79-ISA-01 requires the collection of uniform data that provides the minimum data necessary to answer all questions from the most recent

version of the Survey of Sexual Violence conducted by the Department of Justice. Lake Erie Correctional Institution provided both the DOJ SSV4 Survey of Sexual Victimization 2013 Other Correctional Facilities Summary Form completed by CCA for the Lake Erie Correctional Institution and the 2014 CCA annual report; and the DOJ SSV2 Survey of Sexual Victimization 2013 State Prisons Systems Summary Form submitted by ODRC for all of ODRC, the 2013 ODRC annual report, and the 2014 ODRC data for 2014 private facilities.

CCA collects accurate uniform data for every allegation of sexual abuse at facilities under its control using a standardized instrument (Incident Reporting Tracking System). The policy requires information is entered in the Incident Reporting Tracking System on all allegations. The system allows the agency to prepare an annual PREA report, monitor trends, and take corrective action, and the institution submit the annual DOJ Survey of Sexual Violence (if requested). Review of previous DoJ Survey of Sexual Violence reports, annual agency PREA reports, and data submitted by the institution demonstrated the agency collects uniform data to be used by CCA. CCA does not contract its inmates to other facilities (115.87 (e)).

ODRC collects accurate uniform data for every allegation of sexual abuse at facilities under its control using a standardized instrument. Prior to the new instrument the facility submitted each investigative packet to the ODRC PREA Coordinator. The system allows the agency to prepare an annual PREA report, monitor trends, and take corrective action, and the institution submit the annual DOJ Survey of Sexual Violence (if requested). Review of previous DoJ Survey of Sexual Violence reports, annual agency PREA reports, and data submitted by the institution demonstrated the agency collects uniform data to be used by ODRC. ODRC contracts its inmates to other facilities and provides those statistics separately.

§115.88 – Data Review for Corrective Action

X 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)

CCA Policy 14-2 and ODRC policy 79-ISA-01 requires the agency to review all of the data collected from all its facilities and aggregates that data annually to assess and improve the effectiveness of its sexual abuse program and practices. Lake Erie Correctional Institution provided CCA 2014 annual report and ODRC 2013 annual report. Based on interviews with the PREA Compliance manager, PREA Coordinator and review of the CCA website, CCA reviews the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies; and to identify problem areas and take corrective actions. An annual report is published and

posted on the CCA website. The 2014 annual report was thorough, provided corrective measures taken and addressed the agency progress in addressing sexual abuse. The 2014 Annual Report noted 14 facilities were audited and was found to be in compliance with the National PREA standards. It also highlighted reinforcing the knock and announce standard by placing "Opposite Gender Must Announce Upon Entry" stickers at the entry to all inmate housing units, which was observed at Crossroads Correctional Center. The report includes a comparison of the current year's data and with the previous year's data. The 2014 report showed Lake Erie Correctional Institution four unsubstantiated and one unfounded inmate on inmate sexual abuse; two substantiated, two unsubstantiated, and two unfounded staff on inmate sexual abuse; four unsubstantiated and one unfounded inmate on inmate sexual harassment; and four unsubstantiated, and one unfounded staff on inmate sexual harassment cases.

The CCA website is the most informative and one of the easiest to find PREA information of all agencies this auditor has audited. CCA PREA page lists: general information on PREA; agency zero tolerance policy; how to report; information on investigations; and where questions and inquiries can be forwarded to (PREA Coordinator phone and mailing address). It also has a number of links to include: PREA standards; PREA Resource Center website; CCA PREA policy; CCA 2013 and 2014 PREA Report; and CCA Institution PREA information. The CCA Institution PREA information link lists each CCA institution with information on that institution's PREA Compliance Manager; third party reporting methods; PREA policy; PREA audit dates; and PREA audit reports if completed and posted.

ODRC reviews the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies; and to identify problem areas and take corrective actions. An annual report with comparisons from previous years and corrective actions is published, signed by the Director, and posted on the ODRC website. The annual report was thorough, provided corrective measures taken and addressed the agency progress in addressing sexual abuse. The ODRC website is one of the more informative and easiest to find PREA information in all audits this auditor has done to date. The home page has a PREA link to its PREA page that lists its PREA related policies, posters, DoJ Surveys, PREA audit reports, and ODRC Annual Assessment (includes link to all documents). The PREA page also has email link to report sexual misconduct for an inmate.

§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)

CCA Policy 14-2, review of the CCA website, and interviews of staff it is determined data is properly stored, maintained and secured. Access to data is controlled. Aggregate data on all its facilities is available to the public through its website. All CCA institution 2013 and 2014 data is in the annual report and posted on the website. CCA maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of the initial collection in accordance with the CCA Retention Records Schedule. Before making aggregated sexual abuse data publicly available, CCA removes all personal identifiers.

Based on ODRC policy 79-ISA-01, review of the website, and interviews of staff it is determined data is properly stored, maintained and secured. Access to data is controlled. Aggregate data on all its facilities under its control (includes two private prisons) is readily available to the public through its website. ODRC maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of the initial collection in accordance with the ODRC Retention Records Schedule. Before making aggregated sexual abuse data publicly available, ODRC removes all personal identifiers.

AUDITOR CERTIFICATION:

I certify that

X The contents of the report are accurate to the best of my knowledge

X No conflict of interest exists with respect to my ability to conduct an audit of the agency under review

X I have not included in the final report any personally identifiable information about any offender or staff member, except where the names of administrative personnel are specifically requested in the report template.

Auditor Signature

19 January 2016

Date