

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



Name of facility:		Ross Correctional Institution	
Physical address:		16149 State Route 104, Chillicothe, Ohio 45601	
Date report submitted:		April 23, 2015	
Auditor Information		James Curington	
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Email:		jecjrboy@aol.com	
Telephone number:		352-538-2636	
Date of facility visit:		3/30-4/2, 2015	
Facility Information		Ross Correctional Institution	
Facility mailing address: <i>(if different from above)</i>			
Telephone number:		740-774-7050	
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
Name of PREA Compliance Manager:		Lorrie Perry	Title: Operational Compliance Manager
Email address:		Lorrie.Perry@odrc.state.oh.us	Telephone number: 740-774-7050
Agency Information			
Name of agency:		Ohio Department of Rehabilitation and Correction	
Governing authority or parent agency: <i>(if applicable)</i>		State of Ohio	
Physical address:		770 West Broad St., Columbus, OH	
Mailing address: <i>(if different from above)</i>		Same	
Telephone number:		614-752-1159	
Agency Chief Executive Officer			

Name:	Gary C. Mohr	Title:	Director
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Agency-Wide PREA Coordinator			
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AUDIT FINDINGS

NARRATIVE

A Prison Rape Elimination Act (PREA) Audit was scheduled for Ross Correctional Institution (RCI) by the Ohio Department of Rehabilitation and Correction (ODRC), and the American Correctional Association (ACA). This PREA audit was to be held the week of March 30 through April 3, 2015. Also, a reaccreditation audit for ACA was scheduled to run concurrently with the PREA audit. The PREA auditor served as a team member of the ACA audit team, then, following the ACA audit, continued by himself to complete the PREA audit by the end of the week. In this PREA auditor's opinion, this offered a great opportunity to review the operations of Ross Correctional Institution and to obtain the insight of ACA team members. James Curington was identified as the certified PREA auditor and notified of his appointment in February 2015. This was/is the second opportunity and privilege to audit an ODRC correctional institution.

The combined audit process began with scheduling of the auditors for arrival at Ross CI in Chillicothe, Ohio. The ACA auditors were to arrive March 29, 2015 and meet for a welcome dinner/gathering that evening. Contacts, arrangements and the agenda were made through the ODRC and Ross Correctional Institution in conjunction with the ACA.

The PREA Pre-Audit Reporting Form was completed by the PREA auditor and sent to the PREA Resource Center (PRC) by email (auditreporting@prearesourcecenter.org). Notices were coordinated by the American Correctional Association, and were posted throughout the facility for inmates, staff and the public. These notices were observed by the PREA auditor during the tour.

Facility and agency information was supplied by the Agency PREA Coordinator, and the Institutional PREA Compliance Manager. This information was contained on a thumb/flash drive, which was presented to the PREA auditor weeks before the scheduled tour date. The information supplied was divided into two large sections: first, the PREA Audit: Pre-Audit Questionnaire Adult Prisons and Jails dated February 24, 2015 (20 pages) and second, the largest section contained four parts; the first part consisting of 43 folders addressing each of the 43 PREA Standards; a second part containing the American Correctional Association Audit Report 2012 (44 pages), a third part with the facility layout and camera locations (23 pages), and a fourth part with population reports (35 pages). The team completing and forwarding this wealth of information was talented, thorough, comprehensive, and indicative of the commitment of the ODRC to be PREA compliant.

The Questionnaire, in its thoroughness, addressed all 43 standards and approximately 140 of the 180 subsections. The Questionnaire also offered opportunities to download/upload and review: policy;

documents; and additional information such as forms, processes, lists, checklists, contracts, curricula, videos, handbooks, and more. This questionnaire and its 11 topic divisions: 1) agency information, 2) facility information, 3) prevention planning, 4) responsive planning, 5) training and education, 6) screening for risk of victimization and abusiveness, 7) reporting, 8) official response following an inmate report, 9) investigations, 10) discipline, and 11) medical and mental health; was thoroughly reviewed by the PREA auditor.

The second part of the information provided was an immense conglomeration, including folders of individual documentation on each of the 43 PREA Standards; the latest American Correctional Association Audit Report of 2012 indicating 100% mandatory compliance and 99.5% non-mandatory compliance with all applicable ACA Standards; the facility layout of the camera/video system enhancing security throughout the Ross CI; and the population reports addressing security, housing, limited privilege housing, and transfer/movement. This information was also reviewed by the PREA auditor both during the pre-audit phase and the audit/tour phase. The Agency PREA Coordinator, the Agency PREA Compliance Administrator and the Ross CI PREA Manager receive a special thanks for the thoroughness and completeness of the materials supplied to this auditor and most especially for assisting in review during the audit/tour phase.

The PREA document, Audit Instrument for Adult Prisons and Jails furnished by the national PREA Resource Center (PRC) was used for this audit. To summarize, there are seven sections, a through g, they are: a) the Pre-Audit Questionnaire, b) the Auditor's Compliance Tool, c) the Instructions for the PREA Tour, d) the Interview Protocols, e) the Auditor's Summary Report, f) the Process Map, and g) the Checklist of Documentation.

Following the initial steps of the audit; posting of notices, making contacts, scheduling, agenda, and a methodical/systematic approach to, and review of, the above mentioned documents, materials, and tools, the pre-audit review began in the middle of March by the PREA auditor.

Sunday, March 29, the auditors (ACA, PREA) met with the Warden and key staff in Chillicothe, Ohio for dinner to discuss the upcoming ACA and PREA audits. This was an opportunity to personally meet with the Warden and some of his staff, and to discuss the agenda and direction for accomplishing this weeklong review. The planned starting time was to meet at 7:30 a.m. and to proceed to Ross CI. The audit team was escorted by the Business Administrator, Mr. Dwight Presler who was very knowledgeable and helpful throughout the audit process.

The first day of the tour began Monday, March 30, 2015 with a vehicle "drive around tour", visual review of the perimeter/facility of the Ross Correctional Institution (security control was contacted and permission was granted). Following the perimeter road excursion, the auditors headed to the front gate for security identification and security precautions then entered Ross CI. The first day meeting began in the Warden's conference room with the following persons in attendance:

Gail Zeek	ACA Auditor, Chairperson
Nick Blythe	ACA Auditor
Jim Curington	ACA Auditor, PREA Auditor
Ed Voorhies	Managing Director
Andrew Albright	Bureau Chief

Michelle Burrows	Audit Administrator
Mark Hooks	Warden
Lorrie Perry	RCI Operational Compliance Manager
Jenni Williams	Deputy Warden Special Services
Jeffery Howard	Deputy Warden Operations
Dwight Presler	Business Administrator 3
Brent Posey	Major
Aaron Clemons	Captain
Jeff Mustard	Unit Management Chief
Gary Sorrell	Investigator
Paul Waugh	Acting Investigator
Todd Diehl	Institution Inspector
Melody Haskins	Warden Assistant
Lori Gillum	Warden Secretary
Linda Seidal	Administrative Professional 1
Kim Gibson	Administrative Professional 1
Lisa Bethel	Health Care Administrator
Jennifer Haywood	Labor Relations Officer
Becky Casto	S W Regional AA
Anna Zimmerman	Senior Human Capital Management Analyst

After the entrance meeting, the tour began. Escorting the three auditors on the tour were:

Mark Hooks	Warden
Jenni Williams	Deputy Warden Special Services
Jeff Howard	Deputy Warden Operations
Ed Voorhies	Managing Director
Andrew Albright	Bureau Chief
Lorrie Perry	RCI Operational Compliance Manager
Lori Gillum	Warden Secretary

Linda Seidal	Administrative Professional 1
Kim Gibson	Administrative Professional 1
Michelle Burrows	Audit Administrator
Dwight Presler	Business Administrator 3
Bryan Smith	Health and Safety Officer

The tour of the Ross Correctional Institution proceeded as follows:

Inmate Health Services

Medical Building

Isolation

Special Housing Unit

Food Service

Security Administration

Dorms H-5, H-1, H-2

Mental Health

Recreation

With follow-up compound visits on Tues and Wednesday including:

Dorms H-2, H-4, H-6, H-7, H-8

J Dorm

B Building (Administration)

Chapel

Educational

Vocational

Reception

Maintenance

Warehouse/Garage

The tour included all areas of the facility with particular emphasis on intake, housing units, segregated housing units, healthcare areas, recreation and dining areas. During this tour the auditors were able to ask staff questions specific to each of the areas, look for signs referencing PREA, observe privacy issues, listen for opposite gender announcements and assess the safety and security of staff and inmates. It was noted that the facility was clean and orderly and appeared audit ready.

Staff were professional and when questioned, were knowledgeable and attentive.

Inmates were orderly, had some freedom of movement, and appeared appropriately dressed, courteous, with satisfactory to good attitudes/morale.

Following the tour, the auditors began document/file folder review for the accreditation portion of the audit. This time also gave the PREA auditor, who was involved in this process, the opportunity to discuss with the two ACA auditors, strengths and weaknesses of the facility, operations, and ACA standards compliance, which also affects PREA review. The reviews of Monday continued to 10:30 p.m. that evening, with auditors participating in roll call/shift change meetings and evening interviews with the 10 p.m. to 6 a.m. shift.

Tuesday, March 31, the second day of the auditors visit to RCI, began with follow-up visits and/or visits to areas that may have been missed the first day. The auditors also continued with ACA accreditation, PREA overview, program reviews, disciplinary hearings, food service, maintenance, and visits with specialized staff. The PREA auditor stayed later that day and continued with inmate and staff formalized interviews.

Wednesday, April 1, the ACA audit team held a closeout/exit for the ACA audit. The audit result for applicable standards was 100% compliance for the mandatory standards and 99+% for the non-mandatory standards. The facility received very positive remarks about its operation and management from the audit team.

After the morning exit, the PREA auditor continued with his review. During this period of time, the auditor continued with formal interviews of staff and inmates and again stayed into the evening (10 p.m.) visiting each housing area and informally talking with inmates.

The interview protocols are essential to the assessment process. The questions used for adult correctional facilities, essentially address all the standards (41 of 43). From Sunday, March 29 when first meeting with the Warden and key staff, through Thursday, April 2, the auditor talked to over 50 staff and approximately 70 inmates. Of these interviews, 26 staff were formally interviewed according to the protocols established by the PREA Resource Center for random staff and specialized staff, and 27 inmates were interviewed according to the protocols for inmates. These questions were from script and almost all staff and inmates were aware of the questions. The auditor actually saw inmate questions posted in inmate housing, and many staff had brought copies of the questions with them. The auditor feels this speaks to the thoroughness that Ross CI prepares for PREA compliance and meeting the standards.

Thursday, April 2 the auditor finished interviewing and touring and concluded the visit/tour with an informal meeting with the Warden and key staff at noon that day. This short exit review included thanking the Warden, agency staff, and facility staff for their help and cooperation and explaining to them the report and procedures to follow. It was indicated that this time that there were no decided/decisive non-compliant standards and that any issues that the auditor noted had been handled, addressed, or corrected. Notes, materials, documentation, and interviews would be further reviewed for

a report (auditor's summary) and if all applicable standards met PREA compliance, then that report would be a final report and submitted to the PRC and Ross CI.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Ross Correctional Institution of the Ohio Department of Rehabilitation and Correction is located in the city of Chillicothe, Ohio, about 50 miles southeast of Columbus, Ohio. It is located at 16149 State Rd. 104 on about 100 acres of land across the highway from Chillicothe Correctional Institution and near a Reentry Center, a large high school and a very large Veterans Administration hospital.

Ross Correctional Institution is a very large facility that was opened in 1987, by the ODRC. The compound is approximately 60 acres enclosed by a rectangular perimeter road and two chain-link fences with razor ribbon, motion detectors, and two 24/7 mobile armed patrols. Within the compound there is a North and South side originally designed as a mirror reflection. One can visualize housing units with large recreation yards divided at each end of the rectangular compound with Administration, support facilities (dining, health, maintenance, Chapel, education/vocational, industry, etc.) and Operations in the middle of the compound.

It is noted that there are nine housing units, eight similar two-story secure cellblocks, housing units with 1008 two man cells, approximately 250 cells in each cell block, and one large Open Bay dormitory (17,000 ft.²). RCI has housed an average daily population of 2064 male inmates over the last 12 months. This is a level 3 custody facility on a 1 to 5 agency security scale (5 being super Max). Inmates are supervised by 339 Correctional Officer staff who work 6 a.m. to 2 p.m., 2 p.m. to 10 p.m., and 10 p.m. to 6 a.m., shifts. Inmate programs run throughout the day, seven days a week.

The Mission of Ross CI is quoted as follows:

"The Mission of Ross Correctional Institution is to promote public safety within the facility and surrounding communities while improving the quality of life for staff and offenders through:

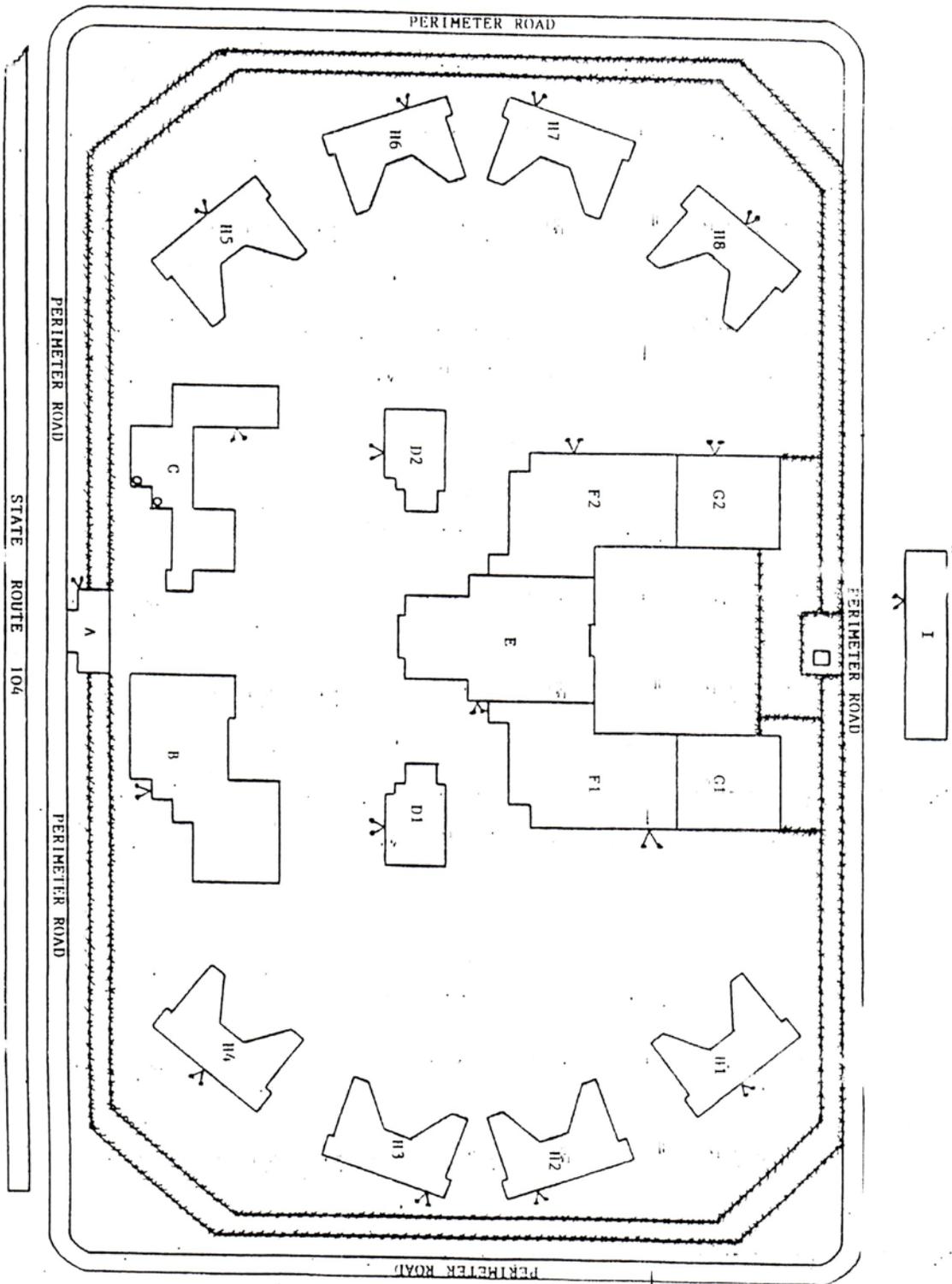
- Excellence in Security by ensuring a safe and humane prison environment through daily violence reduction efforts;
- Successful offender reentry to the community by providing community service and meaningful inmate jobs, education and programming opportunities.
- Responsible fiscal management;
- Compliance with American Correctional Association standards;
- Opportunities for staff professional growth and development;
- Healthy and productive relationships with local support agencies."

Please see the attached photo and diagram of the facility, which gives a good overview.

RCI ACA/PREA AUDIT TOUR



- Tour Route:
- 1. Medical
 - 2. Isolation
 - 3. Food Service
 - 4. H-5-A



Facility demographics:

Rated capacity: 2578; actual population, 2088

Security: medium/close; level 3, 1926; level 2, 137; level 1, one

Age range: 18, or greater

Average length of stay: four years, nine months, one day

Staff total: 497; correctional officer staff, 339; custody/unit management, 24; support, 134

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 2

Number of standards met: 38

Number of standards not met: 0

Non-applicable: 3

§115.11 - Zero tolerance of sexual abuse and coordinator

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

The auditor's finding for this standard is "exceeds". Having reviewed prevention planning 115.11, Zero Tolerance of Sexual Abuse and Sexual Harassment; PREA Coordinator, and the subsections a, b, and c, it was clear that the state of Ohio has "zero tolerance" for all forms of sexual abuse and sexual harassment within its facilities and those under its contracts. This was outlined in the Prison Rape Elimination policy number 79-ISA-01 (10 pages), and the policy Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation number 79-ISA-02 (14 pages). These two policies outlined the authority, purpose, applicability, definitions, policy, and procedures. Simply stated, the purpose of policy 01 is "to establish in the Department of Rehabilitation and Correction, a zero tolerance stance against prison sexual misconduct".

Tables of organization were furnished for the ODRC and Ross Correctional Institution. As directed in the policy and on the agency table of organization, there is an agency PREA Coordinator designated by the Director to oversee agency efforts to comply with PREA standards in all facilities. On the table of organization for Ross CI, there is a PREA Compliance Manager who reports directly to the Warden.

During the pre-audit review of the Questionnaire and Policy, during the audit tour and audit interaction with both the agency PREA Compliance Coordinator, PREA Administrator, and the Institutional PREA Manager, and supported by the interviews, ODRC and Ross CI work as a team to accomplish PREA compliance with all applicable standards and have a "zero tolerance" towards all forms of sexual abuse and sexual harassment.

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

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

The ODRC contracts with other facilities to hold inmates for the state of Ohio. These contracts include language that directs PREA compliance. Pre-audit review of the Questionnaire and policies, as well as other documentation, including contracts, confirmed compliance with 115.12 sections a and b.

The agency's Contract Administrator was telephonically interviewed and confirmed these contract requirements.

§115.13 – Supervision and Monitoring

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

Ross CI is a level 3 (on a scale of level 1 to level 5, super Max) close security institution with a current population of 2064 inmates supervised by 497 staff of which 339 are Correctional Officer staff. The average daily number of inmates at Ross is 2064, the staffing plan is predicated on this number.

Ross CI staffing plan directs two officers per housing unit on the first and second shift and one officer on the third shift (10 p.m. to 6 a.m.).

Agency ensures that the plan uses the 11 items listed in 115.13 (a) to help develop adequate staffing. This was confirmed by the Warden interview, the PREA Compliance Manager interview, and the Human Resource Officer's informal interview.

Any deviation from the staffing plan which requires a "critical complement" is documented and justified. Rosters were reviewed by the PREA auditor along with schedules and shifts.

The agency PREA Coordinator reviews staffing plans, video monitoring, and other resources at least annually.

Intermediate and higher level staff conduct unannounced rounds in all occupied inmate areas on every shift. These shift rounds, as well as prohibition against alerting staff of these rounds, is in the policy; Inmate Communication/Weekly Rounds. Administrative staff and Warden/duty Wardens are required to make weekly rounds. All rounds are documented.

Interviews were made from the scripted interviews of higher and intermediate staff concerning unannounced rounds. Records and documentation of such rounds were also reviewed.

§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)
- Not Applicable

No inmates under age of 18 at Ross CI.

§115.15 – Limits to Cross-Gender Viewing and Searches

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

Eight items in this standard were included in the documentation with the PREA Audit Pre-Audit Questionnaire supplied by Ross CI. These items included the policies; Prison Rape Elimination 79-ISA-01, Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) 79-ISA-05, Inmate and Physical Plant Searches 310 SEC-01 a, and c; the list of staff training; patdown training; PREA patdown script video training; and PREA update training.

Inmate and Physical Plant Searches policy directs that the institution shall document all cross gender strip searches and cross gender visual body cavity searches. Moreover, it outlines the institution shall not conduct cross gender strip searches or cross gender visual searches of body cavities, except in exigent circumstances. There have been zero (0) number of these searches at Ross CI. There are no female inmates at Ross CI.

Staff (female) at Ross CI announce their selves when entering an inmate housing unit. Additionally, there is installation throughout the ODRC of a PREA announcement/flashing signal which is activated by staff of the opposite gender when entering the housing units. This installation was not complete at Ross CI. However, as mentioned, the female staff announced.

Ross CI has implemented policies, i.e. screens for showers such that inmates can perform bodily functions and change clothing without staff of the opposite gender viewing them.

Policy also dictates that transgender or intersex inmates shall not be searched or physically examined to determine genital status. There are no transgender or intersex inmates at Ross CI.

Staff was well trained and were very professional throughout the audit/audit tour. Random interviews with inmates and staff confirmed compliance with this standard.

§115.16 – Inmates with Disabilities and Inmates English Proficient

who a

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

The ODRC has established procedures to provide disabled inmates with equal opportunity to participate in and benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. This auditor reviewed contracts (Affordable Language Services LTD) for the deaf and hard of hearing, contracts for language, the Spanish Inmate Handbook, and the inmate education video, Sign Language. Policy, Inmates with Disabilities 64-DC-02, addresses its purpose, including definition of Americans with Disabilities Act (ADA)

The curriculum for staff training was also reviewed and clearly outlined the agency's commitment to making sure that all staff know disabled inmates are to be given equal opportunity to participate in the agency's efforts to comply with PREA. Disabled inmates were interviewed and aware of accommodation procedures.

The agency prohibits the use of the inmate interpreters/readers, as outlined in its Prison Rape Elimination policy. In the past 12 months, there had been no instances where inmates were used as interpreters or readers at Ross CI.

Random staff and inmate interviews confirmed knowledge of this PREA standard.

§115.17 – Hiring and Promotion Decisions

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

ODRC/Ross CI complete a very thorough and comprehensive background check on employees and contractors. The agency does not hire or promote anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community or who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, or juvenile facility.

Ohio's policy on Prison Rape Elimination 79-ISA-01 outlines the background checks, including a checklist addressing general information, fingerprints, education, law enforcement, employment, personal reference and the investigators signature. Moreover, employees give their authority for release of information in order to provide free access to background and history of their "personal life". The auditor reviewed this very strong background check with human resource staff, and assesses compliance for this PREA standard.

In the past 12 months, there have been 48 persons hired who have had criminal background record checks. There have been four contract persons where criminal background checks were conducted.

Agency policy dictates background checks are to be conducted at least every five years for current employees and contractors. Agency policy states also that material omissions regarding misconduct or material false information shall be grounds for termination, (Prison Rape Elimination 79-ISA-01, and 31-SEM-02 Standards of Employee Conduct).

§115.18 – Upgrades to Facilities and Technology

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

Ross Correctional Institution has not acquired any new facilities or made substantial expansions of existing facilities since August 20, 2012.

However, Ross Correctional Institution has enhanced and updated its video monitoring/electronic surveillance system. As part of standard 115.13, and standard upgrades to technology, Ross has been upgrading, on a regular basis, its video monitoring to protect inmates against sexual abuse. The PREA auditor observed Ross Correctional Institution's camera locations, 104 cameras in inmate housing, throughout buildings of the facility, 13 on the North and South recreation yards and outside in the warehouse. The Ross Correctional Institution future camera placements include, Administration, Receiving and Discharge, North recreation, South recreation, the outside garage, and some areas of the perimeter fence security. It is estimated that it will require approximately 25 additional cameras to complete this further upgrade. Planned overall camera upgrade is up to a total of 193 to 212.

Interviews with the Agency Director and Ross CI Warden emphasized ODRC's commitment to surveillance technology.

§115.21 – Evidence Protocol and Forensic Medical Examinations

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

This Evidence Protocol and Forensic Medical Examinations standard is assessed as exceeding standards by this auditor.

The state of Ohio/ODRC has made a superb effort in proceeding with evidence protocols coordinated with the Ohio State Highway Patrol, with a statewide Memorandum of

Understanding (MOU), to investigate all sexual abuse cases in ODRC, and with Memorandums of Understanding (MOU) between a facility(s) and various local crisis centers for victim assistance. Ross CI has a MOU with the Sexual Abuse Response Network of Central Ohio (SARNCO). The flowcharts, the Uniform Evidence Protocol, the policies and procedures outlined in Prison Rape Elimination 79-ISA-01, and Prisons Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation 79-ISA-02, show the investigative flow from first responder to the Ohio State patrol and outline victim support services from first response to follow up procedures.

Subsections of 115.21 (a-f) are addressed in the questionnaire, policy, contracts, medical protocols, which are all documented. Specifically, investigations were done by the Ohio State Highway Patrol and forensic exams were performed by a SANE/SAFE Ohio State University Hospital or Adena Regional Medical Center, Chillicothe, OH. There were seven (7) forensic medical exams conducted during the past 12 months, these were all done by SANE/SAFE hospital staff.

Interviews with the PREA Compliance Manager, specialized health and mental health staff, random staff, and the inspector, all support and confirm compliance with these most appropriate policies and procedures, meeting and exceeding this PREA standard requirement.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

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

Policies are in place at Ross Correctional Institution, and throughout the agency to ensure referrals of allegations for investigation. The policy, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation 79-ISA-02 has a checklist for security and non-security first responders. First responder non-security is to separate the victim and abuser, advise victim not to take actions that could destroy evidence, notify the shift commander, and complete the incident report. First responder security is to separate the victim and abuser, preserve and protect the crime scene, and then follow listed steps, contact medical services, notify the Ohio State Highway Patrol, notify the Institution Investigator, notify the PREA Compliance Manager, notify the Victim Support Person (VSP) and complete the incident report.

There is a thorough "PREA incident packet" for staff to complete. During the past 12 months, there have been 33 allegations of sexual abuse and sexual harassment, 10 have been referred for criminal investigation. All investigations were completed and documentation maintained.

Interviews also supported compliance for this standard, specifically addressed by the agency head, and specialized staff.

§115.31 – Employee Training

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

The four subsections (a, b, c, d) of 115.31 were reviewed by sampling the training records and the training curriculum. Policy was reviewed and interviews were completed.

It was clear from the interviews of random staff that all 10 items outlined for training had been addressed and that the employees were familiar and knowledgeable concerning that training.

Acknowledgment forms for employees were spot checked.

A test is given by ODRC/RCI to each employee that has contact with inmates and must be passed before assuming duties and responsibilities. In the past 12 months, 565 staff were trained or retrained on PREA requirements.

Staff receive training at a minimum of once a year. Additionally, current/new information is posted and made available through the Intranet/employee handbook.

§115.32– Volunteer and Contractor Training

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

All volunteers and contractors who have contact with inmates, have been trained in their responsibilities under PREA and trained in the Ohio Department of Rehabilitation and Correction policy Regarding Sexual Abuse/Sexual Harassment, Prevention, Detection, and Response. Interviews were conducted with volunteers and contractors, and they were well aware of the agency's zero tolerance policy regarding sexual abuse and sexual harassment.

Acknowledgment forms were required to be signed by volunteers/contractors indicating that they read and understood the training they received. In the past 12 months, there were 247 volunteers and contractors who were trained in the agency's policies and procedures concerning PREA.

The agency maintains documentation confirming training that volunteers and contractors receive.

§115.33 – Inmate Education

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

The RCI has posted throughout the facility and placed in inmate handbooks, PREA information addressing “fighting back through awareness”. This is part of the ODRC’s effort to provide a safe, humane and appropriately secure environment. The agency and Ross CI clearly state that they have a zero tolerance for sexual misconduct, and furthermore, sexual misconduct among inmates and by staff towards inmates is strictly prohibited. This is followed up with this statement “you have the right not to be sexually abused or harassed”.

Orientation checklists are used to track distributed information to inmates including information on prevention, detection, response, and investigation. During the last 12 months 1371 inmates were given this information at intake. There were zero (0) number of inmates who did not receive PREA information. There is a statement in the questionnaire that RCI’s entire inmate population has received PREA education.

Inmate PREA education is available in formats accessible to all inmates, including those who are: limited in English proficiency, deaf, visually impaired, or otherwise disabled.

Key information was posted throughout the facility.

Random inmate interviews revealed that inmates were well aware of PREA prevention/detection, self-protection, response, treatment, and investigation.

§115.34 – Specialized Training: Investigations

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

ODRC policy requires that all agency investigators are trained in conducting sexual abuse investigations in confinement settings. This training also includes the Ohio State Highway Patrol. OSHP officers are assigned to each ODRC facility.

Investigator training curriculum, agendas, and other specialized training, such as National Institute of Corrections PREA Learning Center training was reviewed.

Training certificates for both institutional and OSHP investigators were reviewed, noting completion and training hours. There is one trained agency investigator and one trained OSHP investigator assigned to Ross CI. Interviews with the investigators confirmed this specialized training.

§115.35 – Specialized training: Medical and mental health care

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

The agency policy 79-ISA-01, Prison Rape Elimination, as well as the medical/mental health curriculum, and the medical/mental health training, and the contract medical/mental health training, all provide for and relate to the training of medical and mental health practitioners who work regularly in the facilities.

All medical and mental health care practitioners who work at Ross CI received training (100%, 22 staff). Documentation is maintained showing that medical and mental health practitioners have completed the required training.

The agency medical staff at this facility do not conduct forensic medical exams. Forensic medical exams are conducted at Ohio State University Hospital or at the local hospital, Adena Regional Medical Center.

§115.41 – Screening for Risk of Victimization and Abusiveness

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

The Ohio Department of Rehabilitation and Correction has a policy 79-ISA-04, entitled PREA Risk Assessments and Accommodation Strategy. This policy outlines its purpose, to screen inmates for the risk of sexual victimization and abusiveness and to establish the processes for the use and sharing of screening information to make informed decisions for housing, bed, work, education, and program assignments. This process has been refined into an automated PREA assessment process that was put into production September 8, 2014. To quote the PREA Assessment Process:

“Upon admission to any facility, all inmates are immediately assessed by our Medical Department. The assigned nurse initiates the assessment and completes the first screen. The assessment is then put into a queue for the Case Managers.

The Case Managers check their “In-Progress” assessments and complete the second screen. The assessment then goes to the Unit Manager queue.

The Unit Managers check their “Pending UM” cases and determines if the inmate does not need a PREA Classification or they recommend a classification listed below to the Unit Management Chief:...”. This process is thorough and comprehensive. This process addresses all nine subsections (a) to (i) of standard 115.41 that are found outlined in the Compliance Tool. Time frames are listed. The 10 screening criteria are addressed. Histories are

addressed. Personal questions are asked (discipline is not imposed for not answering). Then an assessment is made and information is shared on a need to know basis. A thorough and comprehensive process. In the past 12 months 1371 inmates went through the assessment process.

The PREA auditor reviewed this process. Intake staff, medical and mental health staff, unit staff, and inmates were interviewed. Intake was observed. Policy and the completed assessment screens were reviewed.

Ross CI is part of the Departmental Offender Tracking System, DOTS portal, which serves as the primary information system for information on all offenders under ODRC. This system is updated daily and assists with safety and security of every inmate.

Ross CI is in compliance with this agency procedure and process, and meets this standard.

§115.42 – Use of Screening Information

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

In the PREA Risk Assessments and Accommodation Strategies policy 79-ISA-04 directs that information obtained in the PREA risk assessment system and good correctional judgment will be used by the Unit Management Chief or Acting Unit Management Chief to complete a PREA accommodation strategy to ensure the safety of each inmate. Inmates not assigned to the PREA risk assessment system do not require a PREA accommodation strategy. Thus, according to policy, after initial assessments, accommodation strategies can be assessed for victims and abusers. Additionally, accommodation strategies are outlined in agency policy to address strategies for transgender and intersex inmates. Classification lists are developed and used on a need to know basis and give assessment numbers.

Policy and good correctional judgment also dictate individualized determinations for those at risk.

There are no (0) transgender or intersex inmates at Ross CI.

Interviews with staff and inmates, as well as policy review and classification lists support compliance with this standard.

§115.43 – Protective Custody

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

ODRC/Ross CI has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless all available alternatives have been considered and there is no alternative means of separation from likely abusers. If involuntary segregation is used, review is required every 30 days to confirm a continuing need.

Ross CI uses its risk assessment materials and with North and South compounds and nine housing units, it is able to separate and establish safety for its inmates. There have been zero (0) inmates in the last 12 months, held in involuntary segregated housing. Documentation has been reviewed.

Interviews with the Warden, specialized staff, and the Institutional Investigator indicate that involuntary segregation has been unnecessary and that alternative means have been effective.

§115.51 – Inmate Reporting

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

There are multiple ways for inmates to report privately to agency officials as well as at least one way for inmates to report abuse or harassment to an entity or office that is not part of the agency.

PREA posters, the Inmate Handbook, and the handouts on “fighting back through awareness” indicate that inmates have the right not to be sexually abused or harassed. Incidents of sexual abuse, sexual harassment or retaliation can be reported: verbally to any staff member; in writing to any staff member; to the Operations Support Center; via the agency hotline; and inmates are given the opportunity to remain anonymous upon request to the outside agency (Franklin County Juvenile Detention Center, number listed throughout the facility). Moreover, family and friends can report sexual abuse by calling the Operations Support Center or emailing ODRC Report Sexual Misconduct.

Staff also have the right to privately report sexual abuse and sexual harassment of inmates. Staff has received information in the Employee Handbook/intranet and through the annual training curriculum, how to report.

Interviews with random staff and inmates, verified knowledge and understanding of the reporting process.

§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)
- Not Applicable

All allegations are handled through the ODRC/OSHP process.

§115.53 – Inmate Access to Outside Confidential Support Services

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

Ross Correctional Institution provides access to outside victim advocates for emotional support services through the Sexual Assault Response Network of Central Ohio (SARNCO).

The Memorandum of Understanding (MOU) between Ross CI and the Sexual Assault Response Network of Central Ohio details support services, including: accompanying and supporting the victim through the forensic examination process; accompanying and supporting the victim through the investigatory interviews; providing emotional support; providing crisis intervention services; and providing options for resources.

§115.54 – Third-Party Reporting

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

Third-party reporting is clearly outlined on posters throughout Ross Correctional Institution. The posters indicate “break the silence”. These posters are both in Spanish and English and secured to the walls. Further, posters are located in all entrance buildings and visitation areas and contain the email link to report sexual misconduct and the telephone number to the operations center.

Inmate and staff interviews confirmed third-party reporting was an option of which they were aware.

§115.61 – Staff and Agency Reporting Duties

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

The ODRC/RCI requires all staff to report immediately and according to policy 79-ISA-02, any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred at Ross Correctional Institution. This report must be made immediately.

The fifth question on the formal, scripted, random staff interviews, specifically asked “does the agency require all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility” this question was repeatedly asked and without equivocation always answered in the affirmative. This again is where ODRC is very strong in PREA compliance, very strong in working to eliminate rape in prison, and very committed to PREA certification.

§115.62 – Agency Protection Duties

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

The ODRC policy Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation 79-ISA-02 states in section (f) page 13 of 14, how to handle reports of a substantial risk of imminent sexual abuse. The first and immediate requirement is that if there is a report of an inmate at risk of imminent sexual abuse, one is to notify the Investigator, Unit Management Chief, and shift supervisor. There were zero (0) number of inmates at Ross CI that were determined to be of substantial risk of imminent sexual abuse in the past 12 months.

Interviews with the agency Director, the Warden, and random staff were all asked the question in formal interviews about imminent risk for sexual abuse. Each person questioned responded that they would separate, take immediate action, and notify appropriate staff. Protection and safety of those entrusted to the custody, care and control of the ODRC was evidenced by these interviews, responses, and comments.

§115.63 – Reporting to Other Confinement Facilities

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

The policy, Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation 79-ISA-02, gives direction to ODRC/RCI staff at a receiving institution about an allegation that an inmate was sexually abused while confined at another institution. The Warden/managing officer/designee that received the inmate is to notify the managing officer/designee of the institution or facility where the alleged abuse occurred, as soon as possible, but no later than 72 hours after discovery. Additionally, if an allegation was received from another facility, the allegation would be investigated.

In the last 12 months, there has been zero (0) number of allegations that Ross CI has received an inmate that required notification to another facility.

§115.64 – Staff First Responder Duties

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

First responder duties for ODRC/Ross CI staff are outlined in the policy Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation 79-ISA-02. This policy is 14 pages long containing appendices and flowcharts. As stated in standard 115.22: first responder non-security will separate victim and abuser, advise victim not to destroy evidence, complete incident report (notification); first responder security will separate victim and abuser, preserve and protect the crime scene, review time periods, contact medical services, notify investigator/OSHP, notify PREA Manager, notify victim support, and complete incident report. In the past 12 months, there have been 24 allegations that an inmate was sexually abused.

Ross CI has a First Responder policy 1.1, for institutional detailed action and direction.

Formal and informal interviews with random staff and specialized staff confirm knowledge and understanding of first responder duties.

Recognition of first responders, security and non-security, by the ODRC and the training that they receive, support compliance with this standard.

§115.65 – Coordinated Response

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

Ross CI has its own PREA policy titled: Institutions Sexual Abuse Coordinated Response Plan, RCI number 1.1. This plan states its authority, purpose, applicability, definitions, policy, and procedure. Under procedure, section E, Institutional Leadership, it is stated “all cases of sexual abuse, and unless determined to be unfounded, shall be reviewed by the Sexual Abuse Review Team (SART) within 30 calendar days of the conclusion of the investigation. In accordance with the department policy 79-ISA-03 Sexual Abuse Review Team, the Deputy Warden of Operations and the Deputy Warden of Special Services shall provide input from institutional leadership by participating in the review. The Warden shall implement the recommendations from the SART or shall document the reasons for not doing so”.

Interviews with the Warden, and facility leadership confirmed a very active role in coordinating actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and themselves

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

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

Central Office (agency headquarters) reported there has been no collective bargaining agreement entered into or renewed since August 2012. The ODRC and collective bargaining units are in the process of finalizing and voting on a correctional officer agreement.

§115.67 – Agency protection against retaliation

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

ODRC has a whole section (section D) of its policy Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation 79-ISA-02, addressing retaliation.

Most important is its lead-in statement that assures protection from retaliation for all inmates and staff who report sexual misconduct or cooperate with sexual misconduct investigations. This emphasis on protection from retaliation was evident in the specific questions asked of random staff and specific questions asked of random inmates. All were knowledgeable of the prohibition against retaliation for reporting sexual abuse.

Policy further outlines that for at least 90 days following a report of sexual misconduct, the Institutional Investigator shall monitor conduct of the inmates and staff who reported such abuse. Monitoring occurs every 30 days during a 90 calendar day follow-up period. A continued monitoring beyond 90 days can occur if need is determined.

§115.68 – Post-Allegation Protective Custody

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

As with Standard 115.43, ODRC/RCI uses involuntary segregation as a last resort for protection of an inmate who has alleged to have suffered sexual abuse. The policy PREA Risk Assessments and Accommodation Strategies 79-ISA-04 directs that inmates at high risk for victimization shall not be placed in involuntary segregation. The policy further goes on to describe the fact that an assessment of all available alternatives must be made and there must be no alternative means of separation from likely abusers before any such involuntary segregation may be used.

There is a PREA involuntary segregation screen that staff from Ross CI, or any facility uses when inmates are placed in involuntary segregation.

The number of inmates who allege to have suffered sexual abuse, who were held in involuntary segregated housing in the past 12 months were zero (0) in all categories for Ross Correctional Institution. If Ross CI does place an inmate in involuntary segregated housing a review is made every 30 days, however, there has been no need for this.

Interviews with the Warden, specialized staff, and the inspector confirms the above zero (0) number.

§115.71 – Criminal and Administrative Agency Investigations

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

ODRC has a policy related to criminal and administrative agency investigations. This policy Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation

79-ISA-02, details under the section; Investigation, General Provision, what needs to be accomplished to complete the investigation. This procedure is completed by the Ohio State Highway Patrol. Substantiated allegations that appear to be criminal, are referred for prosecution. At Ross CI there were zero (0) number of substantiated allegations that were referred for prosecution. The OSHP/ODRC retain written reports. These reports are maintained for at least as long as the alleged abuser is incarcerated by the agency +5 years and by the OSHP "pretty much forever".

Specifically, an incident report is prepared and the investigator goes through the steps directed by policy and outlined on the checklist of an allegation of sexual abuse. This involves four sections: one, incidents summary first responder information; two, victim information perpetrator information; three, action and follow-up; four, investigation and outcome.

Interview questions with the Warden, the PREA Coordinator, the PREA Manager, specialized staff, and the inspectors, all confirmed this process as well as their knowledge and responsibilities concerning investigations. The interviews, PREA incident packets, the MOU with Ohio State Highway Patrol, and the retention schedules were reviewed, supporting compliance.

§115.72 – Evidentiary Standard for Administrative Investigations

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

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

§115.73 – Reporting to Inmate

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

Inmates who make an allegation that he or she suffered sexual abuse in the ODRC are informed verbally or in writing, whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. Two important points are made here by policy 79-ISA-02, and that is; if an inmate alleges that he has suffered abuse in the institution, the institutional investigator shall inform the inmate of the determinations/outcome of the allegation, additionally, if the Ohio State Highway Patrol conducted the investigation, the ODRC/RCI will request information in order to inform the

inmate of the determination made. There have been 24 criminal and/or administrative investigations of alleged inmate sexual abuse which were completed by the facility in the last 12 months. All inmates were notified. Written notices of response were reviewed by the PREA auditor.

Interviews with the Warden, specialized staff, and the Institutional Investigator, all reveal that reporting to inmates was being accomplished as prescribed by this PREA standard.

§115.76 – Disciplinary sanctions for staff

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

Standards of Employee Conduct policy 31-SEM-02 states that sexual conduct with an inmate under the supervision of the ODRC is considered a criminal act.

Additionally, Prison Rape Elimination policy 79-ISA-01 states that all staff are subject to disciplinary sanctions up to and including termination for violating agency sexual misconduct policies.

In the past 12 months, there have been zero (0) number of staff from the facility that have violated agency sexual abuse or sexual harassment policies. There have been zero (0) number of staff that have been terminated or resigned prior to termination. There have been zero (0) number of staff who have been disciplined short of termination, and there have been zero (0) number of staff reported to law enforcement or licensing boards.

§115.77 – Corrective action for contractors and volunteers

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

Similar, as in Standard 115.76, there are Standards of Conduct for contractors/volunteers. The policy; Recruitment, Training, and Supervision of Volunteers number 71-SOC-01, addresses volunteer and contractor termination, specifically, the Managing Officer or designee may terminate a volunteer for any alleged violation of Standards of Conduct for contractors/volunteers. Volunteers/contractors are to be notified in writing and appropriate notification made if criminal or if charges support notification to relevant licensing boards.

Interview with the Warden confirms this corrective action is an option. However, there have been no contractors or volunteers reported in the past 12 months.

§115.78 – Disciplinary sanctions for inmates

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

Inmates at Ross CI are subject to disciplinary sanctions pursuant the ODRC formal disciplinary process following an administrative finding that an inmate engaged in inmate on inmate sexual abuse.

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

In the past 12 months, there have been zero (0) number of administrative findings of inmate on inmate sexual abuse that have occurred at Ross CI. Also, there have been zero (0) number of findings of criminal guilt for inmate on inmate sexual abuse at Ross CI.

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

The agency prohibits all sexual activity between inmates. Sexual abuse is determined only if there is coercion.

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

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

All inmates at Ross Correctional Institution who have disclosed prior sexual victimization during screening are offered follow-up services with medical or mental health staff. Follow-up is within 14 days of intake screening. In the past 12 months 100% of the inmates who disclosed prior victimization were offered follow-up services. The checklist for risk assessment includes this review period

Inmates who have perpetrated sexual abuse as indicated during screening are also offered follow-up services. These services also are within 14 days. In the past 12 months 100% of the inmates who disclosed perpetrated sexual abuse were offered follow-up services. There have been no follow-up request for services by perpetrators.

Medical/mental health information related to sexual victimization or abusiveness is strictly limited. Medical and mental health practitioners obtained informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting.

Interviews with specialized staff confirmed the appropriate screenings and services.

§115.82 – Access to emergency medical and mental health services

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

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

Ross Correctional Institution offers 24/7 medical services and mental health services on the administrative shift and on-call services after hours.

Emergency medical services are at the facility and/or at Adena Regional Medical Center.

Interviews with, and documentation by medical/mental health staff confirmed access to emergency medical and mental health services.

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

§115.83 – Ongoing medical and mental victims and abusers

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

The facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison jail etc. policy 79-ISA-02 and medical protocol, B-11 direct this health care.

Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate at Ross CI, a male facility.

§115.86 – Sexual abuse incident reviews

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

The ODRC/RCI has a policy Sexual Abuse Review Team 79-ISA-03 that specifically addresses procedures at the conclusions of sexual abuse investigations. The team, by policy, is designated by the managing officer and includes, at a minimum, the Deputy Warden of

Operations, the Institutional Investigator, designated victim support person, Deputy Warden of Special Services, and the Institutional PREA Manager. Other staff, such as unit staff, line supervisors, medical and mental health professionals are also suggested.

There is a Sexual Abuse Response Team (SART) at Ross CI. In the past 12 months, there have been 15 instances/investigations of alleged sexual abuse that were followed by a sexual abuse incident review within 30 days, excluding only unfounded incidents. A sexual abuse case review form is completed by the team. This form includes committee considerations about one, changing policy; two, whether the incident was motivated by race, gender identity LGBTI, etc.; three, physical barriers; four, inadequate staffing levels and five, monitoring technology being deployed or augmented. The committee makes recommendations, adds comments and action, and "signed off" by the members of the team. Approval and implementation is noted by the Warden and PREA Manager.

Interviews were held with the incident review team, and all were well aware of their duties and responsibilities.

§115.87 – Data Collection

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

The ODRC collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control. The Prison Rape Elimination policy 79-ISA-01, outlines in this policy and subsection "F" addresses seven steps in data collection and monitoring.

The institutional investigators are directly responsible for collection of data and reporting allegations of sexual misconduct on monthly reports. This information is also shared with the Bureau of Research for analysis.

The information compiled by investigators is coordinated with the agency PREA Coordinator for accuracy and aggregated at least annually.

ODRC obtains incident-based and aggregated data from its private facilities with which it contracts.

The latest Survey of Sexual Violence (SSV) was reviewed by the PREA auditor. This form is prepared and sent annually to the Department of Justice, DOJ.

Interviews (formal and informal) were held with the agency PREA Coordinator, confirming compliance with this standard.

§115.88 – Data Review for Corrective Action

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

The agency reviews data collected in 115.87 to improve the effectiveness of its sexual abuse prevention, detection, response policies, and training.

The Annual Internal Report on Sexual Abuse Data for 2012 and 2013 prepared by the ODRC agency PREA Coordinator was reviewed. This report outlined accurate, uniform data for every allegation of sexual abuse. The report stated in its outline, its purpose and the fact that it made use of this information to identify problem areas, and formulate corrective measures. This report aggregates information for the public and is used to relay facts and information on sexual abuse to the general public.

The report itself was divided into four sections; introduction, data, problem area, identification and corrective measure, and the conclusion. The report is signed by the agency PREA Coordinator, and approved by the Ohio Department of Rehabilitation and Correction Director.

In this auditor's opinion, this type of data and approach to using such data is indicative of Ohio's effort not only to comply with PREA law, but to be a leader in preventing/eliminating rape in prison.

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

§§115.89 – Data Storage, Publication, and Destruction

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

The agency ensures that the incident-based and aggregate data are securely retained. Policy, Prison Rape Elimination 79-ISA-01 outlines in its data collection and monitoring Section F that all documents will be securely retained in accordance with the ODRC records and retention schedule. This is at least 10 years.

The agency makes this information available through its public website mentioned in section 115.88.

The agency also redacts or removes all personal identifiers before making information Public

AUDITOR CERTIFICATION:

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

James Curington _____

April 23, 2015 _____

Auditor Signature

Date