**PREA AUDIT: AUDITOR’S SUMMARY REPORT**

**ADULT PRISONS & JAILS**

---

<table>
<thead>
<tr>
<th>Name of facility:</th>
<th>Toledo Correctional Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical address:</td>
<td>1000 East Central Avenue, Toledo, Ohio 43608</td>
</tr>
<tr>
<td>Date report submitted:</td>
<td>June 30, 2014</td>
</tr>
</tbody>
</table>

**Auditor Information**

| American Correctional Association: | Emmitt L. Sparkman |
| Address: | 206 North Washington Street, Suite 200, Alexandria, VA 22314 |
| Email: | elscorrections@gmail.com |
| Telephone number: | 800-222-5646 |
| Date of facility visit: | June 11-13, 2014 |

**Facility Information**

| Facility mailing address: | Same As Above |
| Telephone number: | 419.726.7977 |
| The facility is: | □ Military  □ County  □ Federal  □ Private for profit  □ Municipal  □ State  □ Private not for profit |
| Facility Type: | □ Jail  x Prison |

Name of PREA Compliance Manager: Nicole Walters  
Title: PREA Compliance Manager

Email address: Nicole.Walters@odrc.state.oh.us  
Telephone number: 419.726.7977 Ext. 7210

**Agency Information**

Name of agency: Ohio Department of Rehabilitation and Corrections

Governing authority or parent: State of Ohio
AUDIT FINDINGS

NARRATIVE:

The PREA Audit of the Toledo Correctional Institution (ToCI), Ohio Department of Rehabilitation and Correction (OhDRC) was conducted June 11, through 13, 2014. OhDRC officials provided the PREA Pre-Audit Questionnaire and attached documents on May 13, 2014 through an established Agency link. The information was thorough and greatly assisted the Auditor prepare for the on-site ToCI PREA Audit. The Auditor and OhDRC officials communicated by telephone and email frequently after the PREA Pre-Audit documents were received sharing information and conducting follow up necessary to conduct the on-site PREA Audit. OhDRC officials were very responsive to the Auditor questions and request for more information. Policy issues identified during the Pre-Audit Questionnaire review were presented to and addressed by OhDRC officials. A tentative schedule was developed and agreed upon prior to the on-site PREA Audit commencing. The auditor was a member of the American Correctional Association (ACA) team that conducted a Re-Accreditation Audit of ToCI on June 9, through 11, 2014 immediately prior to the on-site ToCI PREA Audit. An alpha listing of inmates, lists of inmates with PREA classifications, and lists of staff by position and work schedule/shift was provided during the ACA Re-Accreditation Audit to identify the staff and inmates to be interviewed by the PREA Auditor.

OhDRC Central Office staff participating in the PREA Audit included Andrew Albright, Chief, Bureau Agency Policy and Operational Compliance, Liann Bower, PREA Compliance Administrator, Charlotte E. Owens, PREA Implementation Plan Director and Paul Shoemaker, Deputy Chief Inspector.
The Auditor toured ToCl during the ACA Re-Accreditation Audit June 9, through 11, 2014 and revisited areas of the facility during the on-site PREA Audit. Art Beeler, the ToCl ACA Re-Accreditation Audit Chairperson and a certified PREA Auditor, assisted conduct staff and inmate interviews on June 11, 2014 prior to leaving ToCl at the conclusion on ACA Re-Accreditation Audit. The required facility interviews for staff and inmates were conducted with a total of 27 staff and 23 inmates interviewed. Interviews with the OhDRC's Director, Contract Administrator, Human Resource Director and PREA Coordinator had been completed during earlier Agency PREA audits. The auditor received the additional information during the audit required by the revised Agency Director Interview Protocol (one additional question was added). The inmate interviews included one from each ToCl Housing Units and inmates with the following designations; LGBTI, disabled, prior victimized, with reported abuse, PREA classifications and limited English. Staff interviews included a sample of volunteers and contractors. The auditor found staff and inmates to be PREA knowledgeable. Investigative, training, and personnel records were reviewed. ToCl has two full time investigators and a correctional captain that assist with investigations as needed. The Ohio State Highway Patrol (OSHP) has a full time investigator assigned to ToCl and that has an excellent working relationship with the ToCl Investigators and the Administration. There were a total 11 sexual harassment allegations during the audit period; (8) inmate on inmate (3) inmate on staff with (1) under investigation (3) substantiated, (2) unsubstantiated and (5) unfounded. Sexual abuse allegations during the audit period were 10; (8) inmate on inmate, and (2) inmate on staff with (0) substantiated, (2) unsubstantiated, (7) unfounded, and (1) under investigation. All sex abuse allegations were reviewed by the OSHP Investigator and 4 accepted for investigation. The 4 allegations accepted for investigation by the OSHP were investigated and the allegations unfounded. Two inmates were sent to the designated outside hospital for safe/sane forensic medical examinations. Two inmates during interviews provided information about sexual harassment allegations. Follow up with a ToCl Investigators found the allegations had been investigated or were under investigation. Information provided by one of the inmates to the auditor during interviews was followed up on by the Investigator. Investigative files were found to be thorough with a tracking system in place to monitor investigations and inmates and staff potentially susceptible to retaliation for reporting sexual abuse and sexual harassment allegations. An offender with a PREA Classification submitted documentation to the American Correctional Association making complaints about his treatment at ToCl. The inmate's correspondence was not received until after the on-site PREA audit had been completed. The auditor was not able to interview the inmate during the on-site PREA Audit because he had been transferred. Follow up with ToCl officials was made by the auditor and satisfactory information was provided regarding the inmate's confinement at the facility. His transfer to another OhDRC facility was due to a reduction from a higher security Level 3 to a lower security classification Level 2.

An exit meeting was held the afternoon of June 13, 2014 at the conclusion of the on-site audit. The auditor provided a preliminary review of findings and informed the staff that final findings were not given until the audit process was completed.
DESCRIPTION OF FACILITY CHARACTERISTICS:

The Toledo Correctional Institution (ToCI) is an all-male, adult, close-custody (Level 3) and Maximum (Level 4) facility located near the northeast corner of downtown Toledo, Ohio. The institution grounds cover approximately 45 acres and are relatively close to residential areas. Upon arrival at ToCI, all staff and guests enter through a Front Entry Building. The Front Entry Building has separate visitor and staff check-in stations, and visitor restroom facilities. The ToCI secure Armory and Key Control is located in the Front Entry Building.

The Administration Building (first floor) begins with the Warden’s Suite and Business/Personnel wings, both comprised of several offices, conference rooms and restroom facilities. Master Control Center is also a part of the Administration Area and serves as the hub for all movement within the institution grounds. Master Control contains several touch screen computers, video camera monitors, fence alarm systems, key watch systems, telephone switchboard, and radio charging stations. All equipment and keys used daily are distributed from this central point. ToCI has recently installed over 140 surveillance cameras throughout the physical plant to monitor staff and inmates. The surveillance cameras do not provide viewing of inmate restroom and showering areas. ToCI management plans to install additional cameras to monitor inmate stairways and hallways at ToCI. Upper and Mid Management can monitor cameras from their computers. The camera surveillance system has controls that limit staff access to their area of responsibility.

Inmate Food Services consists of two dining halls, each equipped with stainless steel security tables to seat 120 inmates, and a full service kitchen. Food Service is operated by a private contractor, Aramark.

The OPI Correctional Industries has a designated location at the institution. Currently, OPI does not have an industry in operation.

The Master Chemical Distribution Department is located in the main hallway leading to Receiving & Discharge (R&D) and serves as the central distribution point for chemicals, sanitation supplies, and various safety items. The Institutional Powerhouse is located between the Master Chemical Distribution Department and R&D. This area includes generators, boilers, and a water cooled ventilation system.

The R&D Department, located beyond the Powerhouse, serves as the central point for all inmate movement in and out of the prison. All inmate transports originate from this area. R&D consists of five group holding cells, an inmate property vault, ID office, and restroom facilities. Inmates begin receiving PREA information when arriving at the R & D Department. PREA posters in English and Spanish are posted in the R&D Department.

Inmate housing begins with A-Block, a close-security general population, housing unit. Each housing block (A, B, and C) has 288 inmate cells, on two separate floors with two ranges of cells per floor. Each block is also divided into three separate pods, with each pod holding 48 cells.

Movement within each housing block is monitored by its own control center. Unit Management offices are located within the short hallways leading to each housing block.
B-Block includes space for medical, library, unit management, and programming separate from the general population inmates. C-Block houses Level 4A and 4B general population inmates.

D-Block differs from the other housing blocks. D-Block 1&2 (lower level) is general population with 40 cells, as well as home to the Operations Department and the Commissary. D-Block 3&4 (upper level) is designated as the segregation unit. D-Block upper can hold up to 186 inmates in two-man cells. It is equipped with its own outside recreation cages, as well as indoor recreation areas. The majority of Segregation was single celled during the on-site PREA Audit with approximately 87 offenders assigned.

The Recreation Department is located at the north end of the first floor in the Administration Building with indoor space, and a large outdoor recreational yard that includes a softball diamond, basketball courts, and handball court. Recreational services include basketball, volleyball, ping-pong, board games, isometric exercise equipment, a music program, and arts and crafts.

The inmate laundry and quartermaster are located just outside of the recreation complex. The cleaning, repair, inventory, and distribution of inmate clothing/uniforms and bedding take place in this department.

The Inmate Visitation Room completes the first floor of the Administration Building. The large, open visiting room (equipped with small tables, individual chairs, and a children’s reading area) is bordered by non-contact booths, attorney rooms, and an inmate search and processing room.

The second floor of the Administration Building includes Library Services (including law library), Educational and Vocational classrooms, the Maintenance Department, Religious Services, Medical and Mental Health, Staff Training Facilities, and the Records Office.

The Warehouse and Garage facilities are outside the secure perimeter of ToCI. The Warehouse serves as the institution's central storage and distribution facility and houses the mail room. Maintenance and repair of all institutional vehicles and equipment is provided at the location.

The former Toledo Correctional Camp is on the TOCI grounds. The TOCI Camp is closed and not in operation.

**SUMMARY OF AUDIT FINDINGS:**

Number of standards exceeded: 6

Number of standards met: 35

Number of standards not met: 0

Number of standards not applicable: 2
§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

ToCl exceeds the standard. The Agency has a written policy mandating zero tolerance toward all forms of sexual harassment for facilities it operates directly or has under contract. The policy outlines how it implements the zero policy approach to preventing, detecting and responding to sexual abuse and sexual harassment. Definitions of prohibited behaviors regarding sexual assault and sexual harassment are included in the policy with identified sanctions for those found to have participated in prohibited behaviors. There is a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates.

Andrew Albright is the Agency-Wide PREA Coordinator. His official title is Chief, Bureau of Agency Policy and Operational Compliance Office. He has other Central Office staff assigned to his Department with PREA responsibilities; Liann Bower, PREA Compliance Administrator and Charlotte Owens, PREA Implementation Plan Director. These officials are very knowledgeable of PREA standards and assist OhDRC facilities. All appear to have the time and authority to develop, implement and oversee OhDRC facilities efforts to comply with PREA Standards.

Nicole Walters is the ToCl PREA Compliance Manager. She only assumed the position full time approximately 30 days prior to the PREA Audit after the previous employee resigned. Ms. Walters was very knowledgeable of PREA standards and very involved at ToCl performing her duties. She was very committed and conscientious about her duties. Ms. Walters indicated she had sufficient time and authority to perform her duties.

§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)

ToCl meets the standard. OhDRC contracts with private corporations to operate two facilities. The contracts ensure private facilities comply with PREA standards and require PREA Standards monitoring.
§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)

ToCl meets the standard. The auditor reviewed the TOCl staffing plan. The Warden has been successful in obtaining approval for additional correctional officers and supervisor positions. He also had approximately 140 surveillance cameras installed throughout the correctional facility to assist with monitoring staff and inmates. Plans are to install additional cameras in the inmate stairways and hallways. He has successfully increased staffing in Level 4 Housing Units from one to two correctional officers. He has also obtained approval from OhDRC to use overtime to operate Level III double cell housing units with two correctional officers. A staffing deviation occurring in August 2012 for budget reasons was documented. The inmate population in past years reached 1600 and has been reduced to approximately 1010 inmates. This has had a positive impact on TOCl operations. Staff and Inmate interviews confirm supervisory staff makes unannounced rounds and the rounds are documented.

§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

This standard is non-applicable to TOCl. TOCl does not house inmates under 18 years of age.

§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)
ToCl meets the standard. Policies and procedures limit cross-gender strip and visual cavity searches of inmates except in exigent circumstances or when performed by medical practitioners. There have been no cross gender strip searches and visual body cavity searches by inmates during the audit period. ToCl has implemented policies and procedures that enable inmates to shower, perform body functions and change clothing without viewing of their body by the opposite gender except in exigent circumstances or when viewing is incidental during routine cell checks. ToCl Housing Units have a light and noise system for female staff to announce their entry in a Housing Unit. Inmate interviews confirmed female staff utilizes the announcement system. Surveillance cameras do not monitor shower, restroom areas or inside inmate cells. A policy is in place prohibiting staff from searching or physically examining transgender or intersex inmates for the sole purpose of determining an inmate's genital status. There has been none of these type searches conducted in the last 12 months. All ToCl staff has received training on conducting cross gender pat-searches and searches of transgender and intersex inmates in a respectful manner and consistent with security needs.

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

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

ToCl meets the standard. ToCl has taken the necessary measures to ensure inmates with disabilities and who are limited English proficient receive information and can take advantage of the program to prevent, detect, and respond to sexual abuse and sexual harassment. PREA documents including Inmate Handbooks are printed in English and Spanish. PREA videos are in Spanish and close captioned with sign language. A visually impaired inmate interviewed by the auditor expressed concerns regarding his ability to utilize the OhDRC PREA Hot Line. When notified by the auditor, ToCl staff immediately implemented a speed dial component to the PREA Hot Line and educated the inmate how to utilize the Hot Line. The speed dial addition to the Hot Line addressed his visual impairment. OhDRC also has a Braille Program to assist visually impaired inmates. Policy prohibits the use of inmate interpreters, inmate readers, and other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate’s safety, the performance of first responder duties, or the investigation of the inmate’s allegations. Policy does not allow inmates to interpret for other inmates unless an inmate signs a waiver. There have been no incidents in the last 12 months where inmate interpreters, readers or other types of inmate assistants were utilized to interpret for another inmate.
§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)

ToCI meets the standard. Reviewed personnel records revealed OhDRC has established a system of conducting criminal background checks for new employees, contractors and volunteers that may have contact with inmates to ensure persons are not hired or promoted who have engaged in sexual abuse in a prison or other confinement setting, been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, coercion, or if the victim did not consent or was unable to consent or refuse; or have civilly or administratively adjudicated to have engaged in sexual activity in the community facilitated by force, coercion, or if the victim did not consent. OhDRC policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone or to enlist services of any contractor, who may have contact with inmates. Policy that is consistent with federal, state, and local law requires the OhDRC make its best efforts 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. Criminal background checks are conducted every 5 years for current employees, contractors, and volunteers who may have contact with inmates. OhDRC policy establishes that unless prohibited by law, information on substantiated allegations of sexual abuse or sexual harassment is provided other institutional employers for former employees applying for work. The ToCI PREA Compliance Manager maintains files on employees, volunteers and contractors to ensure the required criminal background checks are conducted every 5 years. OhDRC policy establishes that material omissions regarding sexual harassment and sexual abuse misconduct are grounds for termination.

§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)

ToCI meets the standard. The OhDRC Director interview confirmed the effect of the design, acquisition, expansion or modification is considered when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities and how it will affect the ability to protect inmates from sexual abuse. ToCI has considered how technology would enhance its ability to protect inmates from sexual abuse and installed over 140 cameras in the correctional facility. Additional surveillance
cameras are being requested for installation in inmate stairways and hallways to further protect staff and inmates.

§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)

ToCI exceeds the standard. ToCI conducts administrative investigations and the Ohio State Highway Patrol is responsible for all criminal investigations. Evidence is collected in accordance with the Ohio State Highway Patrol Sexual Evidence and Collection Analysis Protocol, the Ohio Department of Health Sexual Evidence Collection Kit Protocol and the National Protocol for Sexual Assault Medical Forensic Examinations Adult/Adolescents (Second Addition-April 2013). Forensic Medical Examinations are offered inmates at St. Vincent’s Hospital in Toledo at no cost to the victim. There have been two forensic medical examinations in the last 12 months and the examinations were conducted by SAFES or SANES at the St. Francis Hospital. ToCI has a trained Victim Services Person (VSP) and a Memorandum of Understanding with the YWCA Hope Center Victim Services Program to provide inmate victim services. Efforts are underway to recruit and train additional ToCI staff as Victim Services Persons. The ToCI PREA Operational Compliance Manager provided documentation on June 23, 2014 after the on-site PREA audit that 10 eligible volunteers had requested to become additional Victim Services Persons at ToCI and 5 will be selected to complete the training scheduled for July 18, 2014 to become qualified Victim Services Persons. The OhDRC and ToCI have a Memorandum of Understanding with the Ohio State Highway Patrol that complies with the investigation requirements.

§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)

ToCI meets the standard. OhDRC and ToCI policy requires an investigation of all sexual abuse and sexual harassment allegations. The policy regarding referral of allegations of sexual abuse and sexual harassment for a criminal investigation is published on the OhDRC website. A review of the ToCI records found allegations of sexual harassment and sexual abuse referred to the Ohio State Highway Patrol were documented and
maintained on an electronic log. The Ohio State Highway Patrol Investigative Policy was available for review.

§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)

ToCI exceeds the standard. All ToCI employees receive training on the OhDRC Zero Tolerance Policy to prevent, detect, respond and report allegations of sexual abuse and sexual harassment. Employees are given and required to pass a post test after receiving the training. Staff interviewed was very knowledgeable of the OhDRC Zero Tolerance Policy and their responsibilities. Reviewed training documents confirmed the required information is contained in the curriculum. The ToCI Training Department maintains documents signed by all employees acknowledging training was received.

§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)

ToCI meets the standard. ToCI contractors and volunteers are trained on the OhDRC Zero Tolerance Policy prior to having contact inmates. Contractors and volunteers that have not completed the training cannot have contact with inmates until it is successfully completed. Interviewed contractors and volunteers were knowledgeable of the OhDRC Policy and their responsibilities. As with full time employees, contractors and volunteers are required to pass a post after receiving training on PREA requirements. The ToCI Training Department maintains documents signed by contractors and volunteers acknowledging training was received.

§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)
ToCI exceeds the standard. Inmates upon arrival at ToCI receive verbal PREA information that includes sexual abuse and sexual harassment prevention, self-protection and treatment. The Intake area where inmates are initially processed has PREA Posters displayed in Spanish and English. Inmate Handbooks are issued inmates during Intake that contain PREA information and are in English and Spanish. All arriving inmates participate in a 7 day orientation that includes a PREA Education Video. The Education Videos are in Spanish and English and include close caption and sign language. The ToCI inmate television channel frequently offers the PREA Education information. PREA posters in English and Spanish were observed by the auditor posted throughout ToCI areas. Interviewed inmates confirmed PREA Education information is on the TOCI television channel several times a week. The auditor verified that PREA education information is accessible in formats for inmates that are; limited English proficient, hearing impaired, visually impaired, otherwise disabled, or has limited reading skills. ToCI maintains documentation that all inmates have participated in PREA education sessions. All interviewed inmates were very knowledgeable regarding the OhDRC Zero Tolerance Policy and how to report incidents of sexual abuse or sexual harassment. The auditor observed the initial intake of arriving inmates and an orientation session the following day. The intake process and orientation was very informative and well presented.

§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)

ToCI exceeds the standard. The (2) ToCI and (1) Ohio State Highway Patrol (OSHP) investigators all have received OhDRC Investigation Training that has a Post Test. A ToCI Captain that on occasion assists with investigations has also received the investigator training. The ToCI and OSHP investigators have received the National Institute Corrections training on conducting investigations in a confinement setting.

§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)

ToCI meets the standard. All ToCI Medical and Mental Health Care Staff have received general and specialized PREA training. Training records were provided to verify the
Training was received. Forensic medical examinations are not conducted by ToCl Medical and Mental Health Care Staff.

§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)

ToCl meets the standard. All inmates arriving at ToCl are screened during intake for risk of victimization and abusiveness utilizing the OhDRC PREA Risk Assessment Form. The screening is completed within 72 hours and begins the day of arrival with ToCl Medical Staff initiating the PREA Screening Form asking questions regarding victimization potential. Part 2 of the Screening is completed by the Case Manager Classification Specialist who routes the form to the responsible Unit Manager or Unit Administrator Manager to finalize the screening. The OhDRC PREA Risk Assessment Form includes questions for the inmates regarding their LGTBI status and perceived status by others that meets the objective determination component and affords an inmate the opportunity to self-identify as LGTBI if he chooses to do so. The guidance from the Department of Justice requiring the screening process to include a defined subjective component with screening staff required to make a determination whether the inmate appeared gender non-conforming was not given and provided the auditor until June 19, 2014 after the on-site ToCl PREA Audit. Andrew Albright, Chief, Bureau Agency Policy and Operational Compliance, provided documentation the OhDRC PREA Risk Instrument will be revised by the next OhDRC PREA Audit and will include a question that addresses the required subjective component. The auditor has determined due to the Department of Justice issuing the guidance after the on-site ToCl PREA Audit, lack of a defined subjective component will not impact ToCl meeting the standard. ToCl re-assesses inmates risk for victimization or abusiveness within 30 day of arrival at the correctional facility and 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. During the on-site PREA audit, the auditor observed ToCl Medical Staff initiate the screening process on inmates arriving at the correctional facility. Policy prohibits inmates from being disciplined for refusing to answer questions or for not disclosing complete information regarding whether the inmate has a mental, physical, or developmental disability, whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming, whether the inmate has previously experienced sexual victimization and the inmate's own perception of vulnerability.
§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)

ToCI meets the standard. The ToCI Unit Administrator Manager uses the screening information to determine housing, bed, work, education, and programming assignments attempting to separate inmates at high risk for being sexually victimized from those at high risk of being sexually abusive. Individualized decisions are made about how to ensure the safety of each inmate. Housing and program assignments for transgender or intersex inmates are on a case by case basis.

§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)

ToCI meets the standard. Inmates at high risks for sexual victimization are not placed in involuntary segregation unless an assessment of all available alternatives has been made with the determination there is no alternative means of separation from likely abusers. ToCI has not placed any inmates in involuntary segregation due to their high risk for sexual victimization. Policy requires that inmates involuntary placed in segregation due to high risk for sexual victimization are reviewed every 30 days to determine whether there is a continuing need for separation from the general population.

§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)

ToCI meets the standard. ToCI has multiple means for inmates to report sexual abuse, sexual harassment, retaliation by staff or inmates for reporting sexual abuse and sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. Inmates can verbally or in writing report sexual abuse, sexual harassment, retaliation by staff or inmates for reporting sexual abuse and sexual harassment and staff neglect or violation of responsibilities that may have contributed to
such incidents. How to report information for inmates is on posters throughout ToCl and is contained in Inmate Handbooks and provided via the Inmate PREA Education video.

There is a Memorandum of Understanding between the OhDRC and the Franklin County Juvenile Detention Center for reporting abuse or harassment to an Agency that is not part of the OhDRC. Inmates can telephone an administrative area of the Franklin County Juvenile Detention Center at no cost and leave a voice mail. Franklin County Juvenile Center staff checks the voice mails daily and forwards any messages to a designated official in the OhDRC Chief Inspector's Office. The inmate can remain anonymous.

OhDRC policy mandates that staff accept reports of sexual assault and sexual harassment made verbally, in writing, anonymously and from third parties. The ToCl Training Curriculum includes the means inmates can report sexual abuse, sexual harassment, retaliation by staff or inmates for reporting sexual abuse and sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents and all staff receive this training. Staff can privately report sexual abuse or sexual harassment of inmates by completing an incident report and delivering or sending the document to the OhDRC PREA Coordinator who will keep the staff member's name confidential. Staff and inmates interviewed were familiar with the reporting systems.

§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 Non-Applicable

The standard is non-applicable to ToCl. The OhDRC Inmate Grievance System is not utilized for allegations regarding sexual abuse.

§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)

ToCl meets the standard. Outside access to victim advocates is provided through the Toledo YWCA Hope Center Victim Assistance Program. The Inmate Handbook and posters throughout ToCl provide inmates the telephone numbers and mailing addresses
to contact the YWCA Hope Center. Confidential telephone calls to the YWCA Hope Center are made on staff telephones. Confidential telephone calls cannot be made on the current inmate telephone system. Telephone calls are at no cost to the inmate. Inmates are informed about the extent of monitoring telephone calls and the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply for disclosures of sexual abuse made to outside advocates, including the limits of confidentiality under relevant federal, state or local law. The auditor reviewed the documents given inmates that revealed this information. ToCI maintains a copy of the MOU with the Toledo YWCA Hope Center.

§115.54 – Third-Party Reporting

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

ToCI meets the standard. The method for the OhDRC and ToCI to receive reports of inmate sexual abuse and harassment on the behalf of inmates from a third party is located in PREA Section of the Agency website. The website information includes the telephone number and email for the third party to report sexual misconduct to include retaliation. Interviewed inmates were familiar with how third party persons could report sexual misconduct.

§115.61 – Staff and Agency Reporting Duties

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

ToCI meets the standard. OhDRC policy requires all staff to report immediately any knowledge, suspicion or information received regarding an incident of sexual abuse or sexual harassment that occurs. The policy includes staff is required to report immediately retaliation against staff or inmates who reported sexual abuse or sexual harassment, report any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation, and not to reveal any information to anyone except to the extent necessary. All incidents of sexual abuse are reported to the Ohio State Highway Patrol.
§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)

ToCI meets the standard. OhDRC policy requires immediate action if staff learns an inmate is at substantial risk of imminent sexual abuse and take action to protect the inmate. ToCI reported two incidents where inmates were determined at substantial risk of imminent sexual abuse and immediate action was taken to protect the inmates.

§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)

ToCI meets the standard. OhDRC policy requires that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Warden receiving the allegation will notify the Warden where the allegation occurred within 72 hours after receiving the allegation. An interview with the ToCI Warden confirmed he was familiar with the requirement. During the audit period, ToCI reported no arriving inmates alleged being sexually abused while confined at 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)

ToCI meets the standard. OhDRC policy details the procedures for security and non-security staff responsibilities as a first responder to an allegation of sexual abuse. All staff is trained on first responder responsibilities. Interviews with security and non-security staff verified their familiarity with first responder duties. Staff was aware of the ToCI First Responder Checklist to be utilized by all first responders to an allegation of sexual abuse. There were two reported allegations where the time period allowed the collection of physical evidence. Reviewed documents indicated staff first responders followed required procedures.
§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)

ToCI meets the standard. The ToCI Sexual Abuse Coordinated Response Plan was reviewed. The plan outlines the response to a sexual abuse allegation by staff first responders, medical and mental health practitioners, investigators and facility leadership. Interviews with staff verified their familiarity with the plan and coordinated duties and responsibilities.

§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)

ToCI meets the standard. OhDRC reported no collective bargaining agreements were entered to or renewed since June 2012. Existing collective bargaining agreements allows OhDRC to remove alleged staff sexual abusers from contact with inmates or place the employee on paid administrative leave pending the outcome of an investigation or until a determination if and to what extent discipline is warranted.

§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)

ToCI meets the standard. OhDRC has a policy that protects all inmates and staff from retaliation who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations. The ToCI Investigator is responsible for monitoring possible retaliation. An interview with the ToCI Investigator confirmed he is monitoring retaliation and has an electronic tracking system to assist him. He uses the tracking system for 90 day monitoring of conduct and treatment of inmates who reported sexual
abuse and of inmates who were reported to have suffered sexual abuse for any changes that may suggest possible retaliation by inmates or staff. He also monitors staff that make reports. His monitoring includes periodic status checks on inmates and staff. The investigator acknowledged monitoring would be extended beyond the 90 days if there was a continued need.

§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)

ToCi meets the standard. There were no incidents during the audit period of using segregation to protect an inmate who alleged to have been sexually abused.

§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)

ToCi meets the standard. A review of conducted investigations reveals the allegations of sexual abuse and sexual harassment were promptly, thoroughly, and objectively investigated. ToCi and the Ohio State Highway Patrol (OSHP) Investigators have received specialized training in sexual abuse investigations. ToCi investigators initiate administrative and criminal investigations and criminal allegations are referred to the OSHP for investigation. The ToCi investigators and OSHP investigators have a cooperative relationship. The OSHP investigator keep the ToCi investigators informed as criminal allegations are investigated. Reviewed investigations indicated the credibility of alleged victims and witnesses is assessed on an individual basis. ToCi and OSHP both maintain written reports for as long as the alleged abuser is incarcerated or employed by OhDRC plus 5 years.

There were a total 11 sexual harassment allegations during the audit period; (8) inmate on inmate (3) inmate on staff with (1) under investigation (3) substantiated, (2) unsubstantiated and (5) unfounded. Sexual abuse allegations during the audit period was 10; (8) inmate on inmate, and (2) inmate on staff with (0) substantiated, (2) unsubstantiated, (7) unfounded, and (1) under investigation. All sex abuse allegations were reviewed by the OSHP Investigator and 4 accepted for investigation. The 4 allegations accepted for investigation by the OSHP were investigated and the allegations unfounded.
§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)

ToCI meets the standard. Policy states that only the preponderance of evidence is required when determining whether allegations of sexual misconduct are substantiated. The interviewed investigator confirmed that no standard higher than the preponderance of evidence is required to determine whether allegations of sexual abuse or sexual harassment are substantiated.

§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)

ToCI meets the standard. Policy requires inmates alleging sexual abuse are notified whether the allegation was substantiated, unsubstantiated or was unfounded. The policy went into effect January 1, 2014. Reviewed investigations completed after January 1, 2014 revealed inmates alleging sexual abuse were informed of the investigation outcome. Policy requires following an allegation that a staff member committed sexual abuse against inmate, that unless the allegation is unfounded, the inmate is informed whenever the staff member is no longer posted within the inmate’s unit, the staff member is no longer employed, or OhDRC learns the staff member has been indicted on a charge related to sexual abuse within OhDRC or learns the staff member has been convicted on a charge related to sexual abuse within OhDRC. Policy also requires that following an inmate’s allegation that he has been sexually assaulted by another inmate, OhDRC informs the alleged victim whenever the abuser has been indicted on a charge related to sexual abuse within OhDRC or learns the alleged abuser has been convicted on a charge related to sexual abuse within OhDRC. There has been no allegations regarding staff on inmate sexual abuse during the audit period. No inmates have been indicted or convicted following an allegation of sexual abuse at ToCI during the audit period.
§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)

ToCI meets the standard. Policies provide staff is subject to disciplinary sanctions up to and including termination for violating OhDRC sexual abuse and sexual harassment policies. Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. Disciplinary sanctions for violations of OhDRC and ToCI policies relating to sexual abuse (other than actually engaging in sexual abuse) and sexual harassment 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.

There have been no ToCI staff found to have violated sexual abuse and sexual harassment policies during the audit period.

§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)

ToCI meets the standard. Policy prohibits contractors or volunteers who have engaged in sexual abuse from having contact with inmates and requires reporting to law enforcement agencies, unless the activity was clearly not criminal and reporting to relevant licensing bodies. ToCI reported there had been zero allegations of sexual abuse by contractors and volunteers.

§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)

ToCI meets the standard. The OhDRC has written disciplinary procedures and rules of conduct that an inmate is subject to disciplinary sanctions following an administrative finding an inmate engaged in inmate on inmate sexual abuse or following a criminal
finding of guilt for inmate on inmate sexual abuse. The sanctions commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. The disciplinary procedures require consideration whether an inmate’s mental illness contributed to his behavior when determining what type of sanction, if any, should be imposed. ToCI offers therapy, counseling and other interventions designed to address and correct underlying reasons or motivation for abuse and considers whether to require offending inmates to participate in such interventions as a condition of access to programming or other benefits. OhDRC only disciplines inmates for sexual contact with staff if the staff member did not consent to such contact. A variance for Policy 79-ISA-02 was requested, recommended and approved on June 13, 2014 clarifying OhDRC only disciplines inmates for sexual contact with staff if the staff member did not consent to such contact. For the purpose of disciplinary action, OhDRC policy specifies a report of sexual abuse in good faith based upon a reasonable belief that the alleged conduct occurred does not constitute falsely reporting or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. OhDRC prohibits sexual activity between inmates and disciplines inmates for such activity. Consensual sexual activity does not constitute sexual abuse if it is determined the activity was not coerced.

There were no administrative or criminal allegations substantiated that inmate on inmate sexual abuse occurred at ToCI during the audit period.

§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)

ToCI meets the standard. OhDRC requires if medical and mental health screening indicates an inmate has experienced prior sexual victimization whether it occurred in an institutional setting or in the community, staff shall ensure the inmate is offered a follow up meeting with a medical or mental health practitioner within 14 days of the intake screening. Policy also requires if medical and mental health screening indicates a prison inmate has previously perpetrated sexual abuse whether it occurred in an institutional setting or in the community, staff shall ensure the inmate is offered a follow up meeting with a mental health practitioner within 14 days of the intake screening. Documentation provided by ToCI indicated 100 percent of the required follow up meetings took place within the 14 days. Policy specifies that information related to sexual victimization or abusiveness in an institutional setting is limited to medical and mental health practitioners and other staff only as necessary for treatment plans and security and management decisions. Medical and Mental Health practitioners by policy are required to obtain informed consent from inmates before reporting information about prior sexual
victimization that did not occur in an institutional setting. Interviews with medical and mental health staff confirmed their knowledge of this requirement.

§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)

ToCl meets the standard. OhDRC policies and procedures require inmate victims of sexual assault receive timely, unimpeded access to emergency medical treatment and crisis intervention services. ToCl provided documents and staff interviews indicate inmate victims of sexual assault receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Policy requires first responders to take preliminary steps to protect victims and immediately notify medical and mental health practitioners. ToCl Medical is staffed 24 hours a day 7 days a week. Mental Health staff is available for emergency contact after normal business hours. Inmate victims of sexual abuse are offered timely access to sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate. There was one incident of an inmate not being offered access to sexually transmitted infections prophylaxis. The inmate did not report the allegation of inmate on inmate sexual abuse for approximately 3 months and the failure to offer access to sexually transmitted infections prophylaxis was inadvertently overlooked. When the oversight was recognized, it was immediately corrected and additional procedures implemented to prevent a future recurrence. ToCl houses male inmates; therefore, the offering of timely access to emergency contraception does not apply. Policy specifies that treatment services are provide victims without financial cost and regardless whether the victim names the abuser or cooperates with the investigation arising out of the incident.

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

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

ToCl meets the standard. OhDRC Policy and Medical Protocols provide all inmates who have been victimized by sexual abuse in any prison, jail, lockup or juvenile facility are offered a medical and mental health evaluation and treatment as appropriate. Staff interviews and reviewed documentation confirm follow up services and continued care is
provided inmates victimized by sexual abuse. Medical and Mental Health Services are consistent with the community level of care. ToCI houses male inmates; therefore, the requirement for pregnancy testing and information does not apply. Medical protocols provide that inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Policy specifies that treatment services are provided the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Interviews with the Mental Health staff verified mental health evaluations are conducted on all known inmate on inmate abusers within 60 days of learning of such abuse history and treatment is offered when deemed appropriate by mental health practitioners as required by OhDRC policy.

§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)

ToCI meets the standard. OhDRC policy requires a sexual abuse incident review at the conclusion of every sexual abuse investigation, unless the allegation was determined unfounded. There was only one ToCI sexual abuse investigation that met the requirement for a review during the audit period. The ToCI Sexual Abuse Incident Review Team consisted of upper management officials and allowed for input from line supervisors, investigators, and medical and mental health practitioners. A written report was prepared documenting the incident review and included recommendations for improvement. The ToCI PREA Compliance Manager participated in the review and received a copy of the written report. Recommendations from the review were implemented.

§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)

ToCI meets the standard. OhDRC collects accurate and uniform data for every allegation of sexual abuse at facilities under its control using a standardized instrument and set of definitions. The incident based data answers the questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice and provides the necessary information to prepare an annual report, monitor trends, and take corrective
action. OhDRC also receives the incident based and aggregated data from the two private facilities it contracts to house inmates. The auditor reviewed the 2012 DOJ Survey of Sexual Violence submitted by the OhDRC to the Department of Justice.

§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)

ToCl exceeds the standard. The OhDRC reviews data collected and aggregated in order to assess and improve the effectiveness of policies, practices, and training for sexual abuse prevention, detection, and response. The review includes identifying problem areas, taking corrective action and preparing an annual report of findings and corrective action taken for each facility as well as the OhDRC as a whole. The Annual Report was reviewed by the auditor and found to be high quality with data and corrective action from prior years and included an assessment of the progress OhDRC has made addressing sexual abuse. The Annual Report is signed by the Director and posted on the OhDRC website.

§§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)

ToCl meets the standard. OhDRC has policy and requires sexual abuse data collected be securely retained. All aggregated sexual abuse data from facilities under its control including the two private facilities is readily available to the public through the OhDRC website. All personal identifiers are removed before the aggregated sexual abuse data is made available to the public on the website. OhDRC records retention requires maintaining sexual abuse data collected for 10 years after the date of initial collection unless federal, state, or local law requires otherwise.
AUDITOR CERTIFICATION:

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

[Signature]

Auditor Signature

[Date]

Date