



Department of
Rehabilitation & Correction

Mike DeWine, Governor
Annette Chambers-Smith, Director

02/11/2020

Sheriff Richard Jones
Butler County Resolutions Complex
442 S. Second Street
Hamilton, OH 45011

RE: 2019 Annual Jail Inspection

Dear Sheriff Richard Jones:

In accordance with Section 5120.10 of the Ohio Revised Code and Executive Order 92-03 of the Department of Rehabilitation and Correction, the Butler County Resolutions Complex, a full service jail, was inspected on 10/29/2019. The inspection was restricted to assessing compliance with a group of standards, selected from the Standards for Jails in Ohio promulgated by the Department of Rehabilitation and Correction. The group of standards being inspected focused on Reception & Release, Classification, Security, Housing, Sanitation and Environmental Conditions, Communication, Visitation, Medical and Mental Health Services, Food Service, Recreation and Programming, Inmate Discipline, Administrative Segregation, Grievance, Staffing, and Staff Training. The inspection consisted of this Inspector receiving and/or reviewing requested documentation and/or materials, touring selected areas of the jail, and having discussions with various jail staff.

The total actual general housing capacity for the Butler County Resolutions Complex is 371. On the date of the jail inspection, there were 108 inmates incarcerated in the Butler County Resolutions Complex. The Ohio Department of Rehabilitation and Correction recommended housing capacity for the jail is 245, which is based upon total available living space and other requirements. Officials should maintain prisoner counts within the Department's recommended capacity figure.

The Butler County Resolutions Complex (Full Service Jail) is in compliance with 109 standards, 49 "Essential", and 60 "Important".

5120:1-8-01 (A)(1); -01 (A)(3); -01 (A)(4); -01 (A)(7); -01 (A)(9); -01 (A)(12); -02 (B)(1); -02 (B)(2); -02 (B)(4); -02 (D); -03 (A)(2); -03 (A)(3); -03 (A)(4); -03 (A)(5); -03 (A)(6); -03 (A)(7); -03 (B)(2); -03 (B)(4); -03 (B)(5); -03 (B)(6); -03 (B)(7); -03 (B)(8); -03 (B)(10)(a); -03 (B)(10)(b); -03 (B)(10)(c); -03 (B)(10)(d); -03 (B)(11)(b); -03 (B)(11)(c); -03 (B)(12); -03 (B)(15); -03 (B)(16); -03 (B)(17); -04 (A)(4); -04 (B); -04 (C); -04 (D); -04 (E); -04 (F); -04 (G); -04 (H); -04 (J); -04 (K); -05 (A); -05 (B); -05 (C); -05 (G)(1); -05 (G)(2); -05 (H)(3); -05 (I); -05 (J); -05 (K); -05 (L); -05 (M); -05 (N); -05 (O); -05 (P); -05 (Q); -06 (B); -06 (C); -06 (F); -06 (G); -07 (A); -07 (D); -07 (H); -07 (I); -09 (A); -09 (B); -09 (C); -09 (E); -09 (F); -09 (G); -09 (H); -09 (J); -09 (K); -09 (M); -09 (P); -09 (Q); -09 (R); -09 (U); -09 (V); -09 (W); -09 (X); -10 (A); -10 (B); -10 (C); -10 (D); -10 (E); -10 (F); -10 (G)(1); -10 (G)(2); -11 (A); -11 (B); -11 (E); -12 (B); -12 (C); -12 (F); -12 (G); -12 (H); -15 (B); -15 (D); -15 (E); -16 (A); -17 (D); -17 (E); -17 (G); -18 (B); -18 (C); -18 (D); -18 (E);

The Butler County Resolutions Complex did not comply with 7 standards, 4 "Essential", and 3 "Important". This letter is intended to serve as a basis for developing plans of action for bringing the facility into compliance with the deficiencies noted during the inspection.

5120:1-8-03 (B) Each full service jail shall have written policies and procedures, and practices which evidence, that the following minimum standards are maintained. (9) (Essential) Inmates in physical restraints shall be personally checked by staff every ten minutes. The report of the use of physical restraints shall be reviewed and signed off by a non involved supervisor or higher ranking personnel. The use of physical restraints shall be reviewed for policy compliance by the jail administrator or designee.

Comments: On the day of the inspection, the policy provided does not meet all aspects of the standard. Jail officials should update policy to meet all aspects of the standard and revise the 10 minute check form.

5120:1-8-05 (E) (Essential) The jail shall be inspected annually by local or state health authorities and a written report shall be provided. There shall be a written plan to correct jail-related deficiencies.

Comments: On the day of the inspection, no policy was provided to demonstrate compliance as to how deficiencies are corrected. Jail officials should develop or download a policy to demonstrate compliance.

5120:1-8-07 (E) (Important) The jail shall provide general visitation hours that provide inmates the opportunity for thirty minutes of visitation per week. If the jail utilizes video visitation, it will provide weekly general visitation hours that are supported by the video visitation system utilized, no less than twenty minutes per visit. A schedule of visiting hours shall be posted in inmate and visitor areas.

Comments: On the day of the inspection, policy does not address video visitation which is offered at the jail. Jail officials should update policy to comply with the standard.

5120:1-8-09 (D) (Essential) Health appraisal. Within fourteen days, a licensed nurse, physician, physician's assistant, EMT or paramedic shall complete a health appraisal to determine the medical and mental health condition for each inmate in custody. Such appraisal shall at least include the following:

- (1) Review of receiving screen.
- (2) Collection of additional data to complete the medical, dental and mental health history.
- (3) Laboratory and/or diagnostic tests to detect tuberculosis and other suspected communicable diseases as designated by the health authority.
- (4) Recording the height, weight, pulse, blood pressure and temperature.
- (5) Medical examination as determined by the examiner.
- (6) Mental health assessment.
- (7) Initiation of therapy when determined necessary by the examiner.
- (8) Development and implementation of a treatment plan.
- (9) Other test and examination as determined by the examiner or health authority.

Comments: On the day of the inspection, the jail was not in compliance with the standard. The jail officials should make sure tuberculous test are given to all inmates that are admitted to the jail. Jail Official's need to develop Policies and Procedures to meet the intent of the standard.

5120:1-8-09 (N) (Essential) Suicide prevention program. The health authority shall have a plan for identifying and responding to suicidal and potentially suicidal inmates. The plan components shall include:

- (1) Identification - The receiving screening form contains observation and interview items related to the inmate's potential suicide risk. Circumstances include but are not limited to: profound incidents/issues, court dates, loss of significant others either by accident, natural causes or by suicide, sentencing, divorce, rejection, bad news, after a humiliating issue, etc. may be high risk periods for inmates.
- (2) Training - Staff members who work with inmates are trained to recognize verbal and behavioral cues that indicate potential suicide and how to respond appropriately. The plan includes initial and annual training.
- (3) Assessment - The plan specifies a suicide risk assessment and level system. The assessment needs to be completed every time an inmate is identified as being or potentially being suicidal, or if circumstances change. Only a qualified mental health professional may remove inmates from suicide risk status.
- (4) Housing - The plan must designate the housing beds/units for the suicidal or potentially suicidal inmates.

(5) Monitoring - The plan specifies the procedures for monitoring an inmate who has been identified as potentially suicidal. A suicidal inmate is checked at varied intervals not to exceed ten minutes. Regular documented supervision is maintained. Inmates are placed in a designated cell, all belongings removed and other prevention precautions initiated, as appropriate.

(6) Referral - The plan specifies the procedures for referring a potentially suicidal inmate and attempted suicides to a mental health care provider or facility, and includes timeframes.

(7) Communication - The plan specifies for ongoing communications (oral and written), notifications between health care and correctional personnel regarding the status of suicidal inmates.

(8) Intervention - The plan addresses how to handle a suicide in progress, including first-aid measures.

(9) Notification - The plan includes procedures of notifying the jail administrator, outside authorities and family members of completed suicides. The plan shall consider safety and security issues when it comes to notification.

(10) Reporting - The plan includes procedures for documenting, monitoring and reporting attempted or completed suicides. Completed suicides are immediately reported to the coroner/medical examiner and the division of parole and community services within thirty days of the incident.

(11) Review - The plan specifies procedures for medical and administrative review if a suicide or a serious suicide attempt occurs.

(12) Critical incident debriefing - The plan specifies the procedures for offering critical incident debriefing to affected staff and inmates.

Comments: On the day of the inspection, the jail was not in compliance with the standard. Jail Official's should make sure officers are doing ten minute checks and documenting them appropriately.

5120:1-8-17 (F) (Important) There shall be a written policy and procedure governing the screening, training and use of volunteers in the jail.

Comments: On the day of the inspection, the policy provided did not address the training aspect for volunteers. Jail officials should update policy to address all aspects of the standard.

5120:1-8-18 (A) (Important) Jail support staff with routine contact shall receive training in pertinent agency policies and procedures prior to or in conjunction with assignment to jail duties.

(1) During the first year of assignment receive twenty-four hours of training including legal aspects of corrections, basic security concepts, emergency preparedness, interpersonal communications, first aid/CPR, unarmed self-defense, and "Standards for Jails in Ohio."

(2) Two hours of in-service training each subsequent year of employment addressing specific job assignments and/or jail related issues.

Comments: On the day of the inspection, documents provided did not specify the length of time to determine 24 hours had been complete prior to the first year of assignment for jail support staff. (Not correctional officers). Furthermore, no training was done on interpersonal communications. Jail officials should download documentation supporting all necessary training is being completed for jail support staff.

Plan of action forms are enclosed. Completed form(s) and/or corrective materials addressing the noted deficiencies must be completed and submitted through the Ohio Jail Management System (OHJMS) at www.OHJMS.Intelligrants.com within 45 days of receipt of this correspondence. Please feel free to contact the Bureau if you need assistance or clarification in this effort. The Bureau remains available to discuss the aspects of this report or to provide reference materials or assistance as desired.

Sincerely,

Steve D. Holland

Stephen Holland, State Jail Inspector
Bureau of Adult Detention
1580 St Rt 56
London, Ohio 43140
Phone: (614) 981-2040
Email: stephen.holland@odrc.state.oh.us