

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



Name of facility: Mansfield Correctional Institution	
Physical address: 1150 North Main St., Mansfield, OH 44903	
Date report submitted: May 31, 2015	
Auditor Information James Curington	
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Date of facility visit: April 27 to May 1, 2015	
Facility Information	
Facility mailing address: <i>(if different from above)</i>	
Telephone number: 419-526-2000	
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
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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>	

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Agency Chief Executive Officer			
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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 the Mansfield Correctional Institution (Mansfield CI or ManCI) of the Ohio Department of Rehabilitation and Correction (ODRC) on April 29 – May 1, 2015. This was to be part of a dual audit. An American Correctional Association (ACA) Adult Correctional Institution Accreditation Audit was scheduled for April 27 – 29, 2015.

The American Correctional Association has contracted to schedule audits, both ACA audits and PREA audits, for/with the Ohio Department of Rehabilitation and Correction. The ACA notified PREA certified auditors, Mr. Upendra Katragadda and Mr. James Curington that they would be the PREA Audit Team and be part of the ACA audit three person team for the Mansfield Correctional Institution dual audit. Included in the notification was the fact that the auditor(s) is responsible for the submission of the audit preliminarily pre-audit information, the measures/agenda and that the interim/final report which is due 30 days after completion of the site visit (listing the appropriate time frames if a corrective action plan is required). Also outlined in the ACA notification was the auditor(s) use of the approved audit tool(s) provided by the National PREA Resource Center (PRC) for the final report and the submission of supplemental Pre-Audit and Post-Audit Information forms. Additionally, the notification indicated that the lead auditor for the PREA audit would be James Curington.

This was one of several audits in which a combined audit process was being used by the ODRC. The auditor did feel that the dual audit/weeklong visit did present some complications and coordinating issues but that there were clearly decided and positive advantages to spending a full week at the facility. The combined audit process consisted of the ACA audit the first part of the week and the PREA audit the second part of the week. The PREA audit began after the ACA closeout Wednesday at noon. The auditors' agenda was outlined as follows: at the beginning of the week the auditors would; on Sunday, April 26 be part of the ACA audit dinner meeting; on Monday, April 27 tour (ACA and PREA) the facility, review mandatory ACA standards, and visit with the night shift beginning at 9:30/10 p.m.; on Tuesday, April 28 continue to revisit and visit areas of the institution, review ACA accreditation files, and interview staff and inmates; on

Wednesday, April 29 finish the ACA standards and present an exit/closeout to Mansfield CI staff. Beginning Wednesday afternoon the two PREA auditors would continue visiting/touring the facility and interviewing the staff and inmates into the night shift. Thursday, April 30 the PREA team would continue with interviews, institutional review, and review the 43 PREA standards with the Warden, Agency PREA Coordinator, and key staff. Friday, May 1 the auditors would make a final tour of Mansfield Correctional Institution and have interviews with inmates, with the Warden and with his key staff. This was the schedule for the dual audit.

The PREA audit process began with contacts between the auditors, Mansfield Correctional Institution, the ODRC, and the ACA. It was during this pre-audit timeframe that notices were posted (observed by the auditors during the tour and institutional visits), travel information, pre-audit information, and schedules were reviewed.

Mansfield Correctional Institution information and ODRC information was supplied by the Agency PREA Coordinator, his staff, the Mansfield CI PREA Manager and ManCI staff. ODRC is especially expert in preparing its institutions for PREA audits. This was the lead auditor's fourth audit at an Ohio facility and has continually been impressed by the enthusiasm, professionalism, and attention to detail exhibited by the ODRC and the institutions they review. It is truly an open and intensive review.

Information was submitted weeks ahead of time on thumb/flash drives, institutional websites, and recommended documents furnished by the ODRC. Information on the flash drives was divided into several sections including the following:

Mansfield CI PREA Audit: Pre-Audit Questionnaire Adult Prisons and Jails 4/2/2015

Mansfield CI Pre-Audit Questionnaire documentation

Mansfield CI PREA Summary Report

ODRC Agency Interviews

ODRC PREA Document List 2015

ODRC PREA Incident Packets

ACA 2012 Audit Report

This documentation included 43 folders, a folder addressing each of the 43 PREA standards. The auditors found this information comprehensive and indicative of the commitment of ODRC and Mansfield CI to be PREA compliant.

The Mansfield CI PREA Pre-Audit Questionnaire addressed the 43 PREA standards with information specific to the institution and overview information relevant to the ODRC. The Questionnaire is color coded blue for institutional specific materials and red for agency materials (these materials include: policies, documents, forms, checklists, contracts, curricula, videos, handbooks, and more that can be uploaded/downloaded for review).

The audit information/materials and the Questionnaire, with its 11 sections and topic divisions, and other noted materials/documentation were carefully reviewed by the auditors in the weeks before the site visit.

The PREA document, Adult Instrument for Adult Prisons and Jails, furnished by the National PREA Resource Center was used for this audit. To summarize, in this PREA document there are seven sections; a through g and they are: a) Pre-Audit Questionnaire, b) the Auditor's Compliance Tool, c) the Instructions for the PREA Tour, D) the Interview Protocols, e) the Auditor Summary Report, F) the Process Map, and G) the Checklist of Documentation which were used by the PREA auditors to make their assessment.

With the posting of notices, making contacts, scheduling, agenda, and a methodological/systematic review of the above mentioned documents, materials and tools, the pre-audit review was accomplished by the PREA Audit Team.

As outlined in the agenda, the schedule was set and Sunday night began the Mansfield CI site visit. The auditors met with key staff at dinner and had a chance to meet them informally and discuss the tour for the next day and the upcoming week's activities. Overall the audit followed the schedule:

Monday; ManCI tour, review of ACA standards, stay late for night shift.

Included on the tour were the following:

Alan Lazaroff	Warden
Lyneal Wainwright	Deputy Warden of Special Services
Randy Gearheart	Compliance Manager
Matt Swavel	Health and Safety Officer
Angie Hunsinger	Deputy Warden of Administration
Harold May	Deputy Warden of Operations
David Bobby	Northwest Regional Director
Andrew Albright	Internal Audit Administrator

The tour included all areas of the facility, most of which were completed the first day. However, the following day some areas that were missed the previous day were visited including the Mansfield Correctional Camp, a minimum custody unit about 1/3 mile from the main Mansfield compound.

The team toured the facility from 9:00 a.m. to 2:30 p.m.

Audit Tour 4/27/2015 (follow-up 4/28-29/2015):

Lower Vocational including Chemical Distribution Center, Masonry, Recycling

Upper Vocational including Ohio Penal Industries, Mail Office, Upper Room

Quartermaster and Barber Shop

Commissary

Food Service
Medical
Receiving & Discharge and ID/Vault
Maintenance
Laundry
Special Management Unit 1-4 including Rules Infraction Board
Units 5 A & B – Limited Privilege Housing
Mental Health Programs Building
General Population Housing Unit 4
General Population Housing Unit 3
Chapel
Education
Library
South Recreation
North Recreation
College
General Population Housing Unit 2
General Population Housing Unit 1
Operations Building
Administration Building
Visiting Room
Lock Shop
Armory
Garage
Farm
Mansfield Correctional Camp
Firing Range/Training House

Tuesday; continued to tour, visit and revisit areas of the facility, and review ACA standards.

Wednesday; visit and revisit included areas of interest and emphasis; and then the auditors proceeded to the ACA closeout/exit, the ACA closeout was held in the Mansfield Chapel with a large group of employees, the audit found 100% compliance with ACA mandatory standards and 99+% compliance with ACA non-mandatory standards. After this closing, began the PREA in-depth review and scripted interviews, and the auditors stayed late for the night shift.

Thursday; scripted and formal interviews of staff and inmates, PREA standards review. The review of the PREA standards included compliance documentation, policy review, and comments and insight from the Warden, Institutional PREA Manager, the Agency PREA Coordinator, the Agency PREA Administrator and other key staff.

Friday; final tour and review of the on-site visit Mansfield CI, Warden's interview, PREA Compliance Manager Interview and other interviews.

Overall comments on the interviews - interviewing is essential to the assessment process. Every formal interview contributed insight into whether or not PREA compliance was being accomplished. The formal interviews address almost all of the PREA standards. There are really no right or wrong answers just helpful insights such that the auditors can assess compliance or not. Staff generally were very professional and exhibited a high degree of knowledge about PREA and Mansfield CI's commitment and goal of meeting PREA compliance.

A final tally of formal interviews was taken by the audit team. There were 35 staff who were formerly interviewed according to script (random staff interviews, specialized staff interviews, Warden Interview, PREA Compliance Manager Interview). There were 51 inmates formerly interviewed according to script (random inmates, at least one from each housing unit, and especially selected/designated inmates). It should be noted in addition to these formal interviews the auditors informally interviewed/talked to an additional 25 staff and about 25 inmates.

The on-site visit was completed about 10 a.m. Friday, May 1. At this time the auditors met and discussed with the Warden and key staff the procedures to follow the PREA audit review and the audit on-site visit. It was indicated that the auditors would review their final notes and prepare an interim report. If the interim report had all compliant standards it would become the final report. The auditors indicated and related to the Warden and key staff there were no decided/decisive non-compliant PREA standards. But again all materials, notes, documentation, and interviews must be reviewed to accomplish the writing of the report. An interim/final report will then be submitted to the PRC with the Post-Audit Report.

Throughout the Summary of Audit Findings, the two certified PREA auditors used the following materials/tools/actions (the Pre-Audit Questionnaire, the State of Ohio Revised Code, the Ohio Department of Rehabilitation and Correction policy and documents, the auditors' notes, the auditors' reviews, the auditors' tours and the auditors' interviews of staff, inmates, and others) along with "good correctional judgment" to assess compliance, non-compliance, non-applicability, and exceeds compliance of the PREA standards and their provisions.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Mansfield Correctional Institution, is located in Richland County, North-central Ohio, at 1150 North Main St., Mansfield, OH, about 5 miles north of the city of Mansfield's downtown. Mansfield is an older, heavy manufacturing/industrial city founded in 1808, Incorporated in 1857 with a population of approximately 50,000 (metropolitan area 125,000), the largest city in North/mid n Ohio. Mansfield has a notable history as a crossroads and railway transportation center and has an association with the Mohicans (Mohican River), an early history of farming (Johnny Appleseed and the Amish), and with manufacturing growth during the Industrialization Era.

The area around ManCI and north of the city was at one time only rolling hills, farm land and home to the Ohio State Reformatory (OSR, circa 1896-1990), a classically designed very large French style château, granite prison) but since has developed into a large business/industrial area with two large prisons, Mansfield Correctional Institution and Richland Correctional Institution, with the old OSR turned into a museum and tourist attraction.

Mansfield Correctional Institution was built in the late 1980's, and opened in September 1990. ManCI is a large, adult male, close security correctional facility with a minimum security camp. The institution has 1100 acres of state land and grounds, much of which is used for farming/cattle farming. The main compound is an enclosed doubled fenced area of 57 acres surrounded by an oval-like shaped perimeter road. Within the perimeter road and fencing is a campus style, concrete/brick and steel facility. The facility contains 18 housing cellblocks and one Special Management Unit (SMU) of four pods. In the main part of the compound are units 1 through 4 with cellblocks A, B, C and D (16 cellblocks, general population). In a separately fenced area, with a small security control center, is housing consisting of a) Special Housing Unit (SHU) 5 with cellblocks A and B (2 cellblocks, limited privileged housing) and b) a Special Management Unit with four pods (SMU 1, 2, 3, 4). At one time, this separately fenced area had contained Ohio's death row holding inmates for transport to Southern Ohio Correctional Facility in Lucasville where the execution chamber is maintained.

Also, included within the perimeter fencing are the following multipurpose-complex buildings: an Operations/Administration Building-complex, an upper and lower vocational/dining and kitchen/clinic/maintenance and laundry/Ohio Penal Industries (OPI) building-complex, a Mental Health building, and a recreation/education/library/chapel building-complex. These buildings and dormitories are attached to each other or attached by inner fencing to form a secure inner complex within the secure perimeter.

There is an entry security building on the west side of the perimeter fencing. This is the main pedestrian entrance to the compound buildings and housing and to the over 2100 inmates.

On the same property, 1/3 mile to the east of the main unit, is the Mansfield Correctional Camp (ManCC). This is a minimum security, level 1 custody (lowest), 400 bed, dormitory style, camp. Essentially, there is one large building with a control room, offices, multipurpose rooms, kitchen and dining hall, and two dormitory housing wings (dorm A and dorm B). There is also an Education building from Ashland College within the fenced area.

ManCI (main) is a close custody, level 3 facility where all the inmates are maintained within the secure perimeter. The inmates live, sleep, eat, learn, recreate, participate in programs, work, and "do their time" here. Note, of the 2176 inmates at the main unit, 98% are close custody, level 3, with a very few level 4's (maximum) awaiting transfer.

The ManCC (camp) is a level 1 minimum-security operation and supplies inmates for outside the

fence work assignments and jobs (warehouse, garage, farm and other). Programs and notably reentry programs are available and assigned as needed to this inmate population. The inmate count of 342 is all level 1.

Unit management staff with its Chief, managers, counselors, and caseworkers assign and direct programming for the inmate population.

The Mission of Mansfield Correctional Institution is quoted as:

"The Mansfield Correctional Institution shall serve the public by working to reduce recidivism among those we touch."

Facility Demographics

Rated Capacity: 2,387

Actual Population: 2518 (main unit 2176, camp 342)

Average Daily Population for the last 12 months: 2,557

Average Length of Stay: 4.78 years

Security/Custody: Security-Close Custody / Custody- Level 3 (ODRC scale 1-5, 5
administrative maximum, 4 maximum, 3 close, 2 medium, 1 minimum)

Age Range of Offenders: 18-77

Gender: Male

Full-Time Staff: 630

110 Administrative/Support, 35 Program, 448 Security, 37

Please see attached photo-layouts for the overview of ManCI. The first overview is the main unit and the second overview is the correctional camp.





SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 6
Number of standards met: 34
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)

Two certified PREA auditors reviewed the Pre-Audit Questionnaire, the ODRC policies 79-ISA-01 Prison Rape Elimination, 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation; the local Zero Tolerance policy addendum; and the Tables of Organization for ODRC and ManCI.

It is clear from these policies that the Ohio Department of Rehabilitation and Correction and the Mansfield Correctional Institution are committed to eliminating rape in prison and have zero tolerance of sexual abuse and sexual harassment in prison. There is a cultural change, noting that inmates have the right not to be abused or sexually harassed, noting that there should be some privacy in prison, and noting that staff and inmates should report, report, report and "break the silence".

The questionnaire, the policy, the posters throughout the facility concerning PREA (Break the Silence), and the interviews with the Agency Head, the Agency PREA Coordinator, the Warden and many staff and inmates confirm an exceeds assessment by the audit team.

§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 Ohio Department of Rehabilitation and Correction (ODRC) contracts with two private agencies for confinement of some of its' inmates.

Policy 79-ISA-01 Prison Rape Elimination outlines that " all new or renewed contracts for the confinement of department inmates must include a provision that the contractor will adopt and comply with PREA standards. In addition, any new contract or contract renewal shall provide for contract monitoring to ensure that the contractor is complying with PREA standards." (Page 5 of 11).

The auditors reviewed the addendums to the contracts for housing inmates with the Corrections Corporation of America and the Management Training Corporation requiring that these two private companies comply with PREA national standards to prevent, detect, and respond to prison rape.

ODRC monitors these two companies to ensure that they meet their responsibility under ODRC policies on sexual abuse and sexual harassment prevention, detection, and response.

The PREA lead auditor telephonically interviewed the Contract Administrator and ODRC Director in Feb. 2015 which, with the policy and documents, support compliance.

§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)

The Pre-Audit Questionnaire, policy, notes, documents, interviews, the tour, and review by the auditors were all utilized to assess compliance with this standard.

ODRC policy 79-ISA-01 Prison Rape Elimination, directs that each institution shall develop, document and make its best efforts to comply with a staffing plan that provides for adequate levels of staff and where applicable, video monitoring to protect inmates (also directed by policy is the consideration of the 11 items in standard 115.13 part a).

Mansfield CI shift rosters, documents for deviation from staffing plan, the deviation form, and the template for staffing assisted with verification.

The form for annual review of staffing was completed and examined by the auditors.

Policy 50-PAM-02 Communications/Weekly Rounds, page 2 addressed weekly rounds by higher-level staff and shift rounds by Captains and Lieutenants. Housing unit visiting logs verified these rounds.

Interviews with the Warden, intermediate and higher-level staff confirmed compliance with this standard 115.13.

§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

There are no inmates under age 18 at Mansfield Correctional Institution.

§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)

Mansfield Correctional Institution is an all-male adult facility.

There have been zero (0) number of cross gender strip and cross gender visual body cavity searches at Mansfield CI in the last 12 months.

There have been zero (0) number of cross gender strip and cross gender visual body cavity searches of inmates that did not involve exigent circumstances and/or performed by non-medical staff.

Mansfield CI does not conduct cross gender strip or cross gender visual body cavity searches, except in exigent circumstances, as outlined in ODRC policy 79-ISA-01 Prison Rape Elimination, and policy 310-SEC-01 Inmates and Physical Plant Searches.

100% of Mansfield CI security staff have been appropriately trained in searches complying with PREA. Video training, training scripts, and training logs were reviewed by the auditors.

ODRC policy 79-ISA-01 Prison Rape Elimination, page 8; and policy 79-ISA-05 Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) policy, page 4 address privacy and announcement of one's presence when entering a housing unit of the opposite gender. Specifically, female staff announced their presence on entering male housing units at Mansfield CI. Moreover, all inmates are able to shower, perform bodily functions and change clothes without non-medical staff of the opposite gender viewing them. The LGBTI policy prohibits staff from searching or physically examining a transgender or intersex inmate for determining genital status (no such searches have occurred). PREA alarms/lights have been installed and are being activated in each wing or pod of the cellblocks at Mansfield CI.

Interviews of staff and inmates, as well as the facility tour, confirms compliance.

§115.16 – Inmates with Disabilities and Inmates English Proficient

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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)

Mansfield CI and ODRC have established procedures to provide disabled inmates 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.

The ODRC policy 64-DCM-02 Inmates With Disabilities (6 pages), addresses disability needs on page 3, interpretation needs on page 5, and accommodations on page 6.

The auditors' review of policies, contracts (Affordable Language Services, LTD), inmate education videos, staff training videos, Inmate Handbooks in Spanish and English, contracts for the deaf and hard of hearing, assisted in verifying compliance.

Staff training and curriculum was reviewed and clearly outlines the agency's commitment to making sure that all staff know that disabled inmates are to be given equal opportunity to participate in the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

Interviews with disabled inmates, randomly selected inmates, and interviews with staff supported compliance with 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)

Hiring and promotion decisions have been reviewed by this lead auditor at several Ohio correctional facilities. In his assessment Ohio/ODRC does a good job in establishing policy outlining and directing employees and prospective employees to comply with hiring and promotion decisions of standard 115.17.

ODRC/ManCI policy 31-SEM-02 Standards of Employee Conduct (9 pages) and policy 34-PRO-07 Background Investigations (7 pages) outline policy and procedure.

Civil service applications were reviewed with the required disclosures/acknowledgments for thorough background checks, and law enforcement background checks.

Agency policy dictates background checks are conducted every five years for employees and contractors. Policy also states that material omissions regarding sexual abuse/harassment and material false information shall be grounds for termination.

The Standards of Conduct requires employees to self-report any criminal, sexual abuse, and/or sexual harassment behavior/activity.

The Human Resources/Personnel Department at each facility coordinates with the ODRC Central Office for the background information, background checks, and personal history checks required to employ staff at the institution. Mansfield CI

complies with this standard. In the past 12 months there have been 71 persons who have had criminal background checks that may have contact with inmates. In the past 12 months there have been three persons who have contracted for services and have had completed background checks. Background sample checks were reviewed by the auditors.

The auditors reviewed this background check process and interviewed the Human Resources staff. The auditors assess compliance for this standard.

§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)

Mansfield Correctional Institution has not made any substantial expansion or modification of the existing facility since August 20, 2012.

Mansfield CI is continually updating its video monitoring system and electronic surveillance system. Presently there are 162 cameras ManCI. In their staffing plan, (review standard 115.13) they address efforts to comply daily with their staffing plan but also, the plan advises that they promote video monitoring for protection from sexual abuse/harassment. The institution plans to update cameras and to install an additional 20 cameras at the Mansfield Correctional Camp.

Also notable, the facility has been diligent in reviewing blind spots and areas where inmates may be isolated. The auditors were impressed with this conscientious review.

Interviews with the Warden, Human Resources, and security staff confirmed compliance with the standard.

§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 is one of those standards, Evidence Protocol and Forensic Medical Examinations that has impressed not only this audit team but also the previous other audit teams assessing compliance. Because of the commitment of the ODRC to do the best investigations/evidence collections (i.e. the Ohio State Highway Patrol) and the best health care/forensic medical examinations (i.e. Ohio State University, or if medically

required, local community SAFE/SANE exams and the use of rape crisis centers), in this assessment, Mansfield CI is an “exceeds”.

The Ohio State Highway Patrol (OSHP) is used to handle every allegation of sexual abuse. There is a Memorandum of Understanding (MOU) with the OSHP. The MOU between the Director of the ODRC and the Director of the Ohio Department of Public Safety partially states, that in order to provide a uniform process for evidence collection and the investigation of PREA related incidents, a MOU between ODRC and OSHP is written, signed and understood such that all PREA incident investigations shall follow a uniform protocol adapted from the Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examination Adult/Adolescents”. Furthermore, this MOU encompasses all investigative/evidence collection steps outlined in standard 115.21.

The Ohio State University (OSU) is used for forensic medical examinations unless a medical emergency requires otherwise. ODRC has a contract with OSU. This too establishes the appropriate protocols. There have been seven (7) forensic medical exams in the past 12 months which have been performed by SAFEs/SANEs.

The Domestic Violence Shelter, Inc. of Richland County is used to provide response services, Victim Support Services (VSP) to those incarcerated within correctional facilities who report being sexually assaulted/abused during their incarceration.

Interviews with specialized health staff, mental health staff, random staff, and inspectors all support and confirm compliance with these policies and procedures, meeting and substantially 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)

Mansfield CI has policies in place to ensure referral of allegations for investigation. Policy 79-ISA-02 Prison Sexual Misconduct Reported, Response, Investigation, and Prevention of Retaliation has a checklist for security and nonsecurity first responders. This Checklist is a step-by-step action process that is thorough and comprehensive and helps ensure the appropriate referrals. Special note: the Ohio State Highway Patrol has an office on-site at Mansfield CI.

When an allegation is made, first responders follow the protocol for reporting, and this proceeds through the appropriate channels to the intermediate and higher level supervisors, Medical/Mental Health Departments, Victim/Support Services, Institutional Investigator/Ohio State Patrol, and the PREA Compliance Manager.

The agency ensures that an administrative and/or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (that are not unfounded). There is a "PREA Incident Packet" for the staff to complete which also insures and documents referrals and follow up as required.

During the past 12 months there have been 19 allegations of sexual abuse and sexual harassment that were received. During the past 12 months 19 allegations resulted in an administrative investigation. During the past 12 months 14 allegations were referred for criminal investigation. The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation. Again note, there is an OSHP office on-site at Mansfield CI.

Agency policy for referring allegations of sexual abuse or sexual harassment for investigation is published on the agency website

§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)

Employee training is a strength of the ODRC and its institutions. ODRC requires a written test of each of its' employees which is indicative of the emphasis placed on the agency's and institution's training. Review of the questionnaire, training policies, curriculum, intranet training, video training, and interviews with employees all support the assessment of a very strong, thorough and comprehensive training program that exceeds standards.

Staff training is outlined in a policy, 79-ISA-01 Prison Rape Elimination.

Mansfield CI trains all employees who have contact with inmates on the following:

- 1) agency zero-tolerance policy
- 2) how to fulfill PREA responsibilities
- 3) inmates' right to be free from sexual abuse
- 4) the right of inmates and employees to be free from retaliation
- 5) the dynamics of sexual abuse in confinement
- 6) common reactions of sexual abuse/sexual harassment victims
- 7) how to detect and respond to signs of threatened and actual sexual abuse
- 8) how to avoid inappropriate relationships
- 9) how to communicate effectively and professionally with inmates including LGBTI
- 10) and how to comply with relevant laws related to mandatory reporting of sexual abuse.

These 10 training bullets were asked as questions during the formal interviews with a random selection of staff from each shift. Additionally, the above 10 training bullets

were documented in the Pre-Audit Questionnaire with page listings in the staff training curriculum, All Staff In-Service Training (pages 2 to 11).

Mandated PREA training rosters were reviewed. The Pre-Audit Questionnaire related that in the past 12 months, 581 staff employed by Mansfield CI, who have contact with inmates, were trained. Training has been tailored to this male institution.

Additional training continues at roll calls/shift changes, through the intranet and the employee's annual in-service training. The agency documents employee training and, as mentioned above, testing is required (completed/passed PREA).

§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. The Contractor/Volunteer Training Script was reviewed by the auditors.

Interviews were conducted with volunteers and contractors and all were knowledgeable 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 had read and understood the training they received. In the past 12 months there have been 305 volunteers and contractors who have been trained in the agency's policies and procedures regarding Sexual Abuse/Harassment, Prevention, Detection, and Response.

§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)

Inmates at Mansfield CI are educated about the agencies "zero-tolerance" policy and PREA.

Agency policy 79-ISA-01, Prison Rape Elimination, addresses inmate education, (part D. Inmate Education) it outlines seven steps as follows:

- 1) oral and written information references zero-tolerance policy, prevention, self-protection, reporting, treatment and counseling
- 2) within 30 calendar days of arrival at a reception center an inmate is educated on the right to be free from sexual misconduct and the right to be free from retaliation for reporting such incidents and this must include the agency's policies and procedures for responding to such incidents.
- 3) Oral information on sexual misconduct shall be given to all inmates upon their arrival at parent institutions/placement institutions. Additionally, information shall be provided within the Inmate Handbook.
- 4) Documentation of the inmate's participation in orientation and education sections will be accomplished. Acknowledgment checklists are used.
- 5) The institution PREA Compliance Manager shall ensure that information is readily available.
- 6) All materials are approved by the Agency PREA Coordinator.
- 7) Appropriate provisions for inmates not fluent in English and those with disabilities to understand will be accommodated as appropriate for PREA training.

The auditors reviewed the above listed.

Mansfield CI has posted throughout the facility, and placed in inmate handbooks, key PREA information addressing prevention, detection, reporting, and an educational slogan "fighting back through awareness". There clearly is an effort to provide a safe, humane and appropriately secure environment. Furthermore, sexual misconduct among inmates and by staff on inmates is strictly prohibited. This information is emphasized by the following statement "you have the right not to be sexually abused or harassed".

1907 inmates were admitted to Mansfield Correctional Institution and received comprehensive education on PREA within 30 days of intake. There were zero (0) inmates who did not receive training according to the Pre-Audit Questionnaire.

Random inmate interviews revealed that inmates were well aware of PREA and were receiving the appropriate PREA education.

§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)

The auditors' reviewed the following:

ODRC policy 79-ISA-01, Prison Rape Elimination (pages 5-6, employee training);

National Institute of Corrections, PREA Learning Center, video training;

Mansfield CI investigative training;

OSHP specialized training;

Mansfield CI agenda for Special PREA Training for Correctional Investigators.

ODRC 79-ISA-01 Prison Rape Elimination policy states “all investigators shall receive specialized training, which shall include, but not be limited to, conducting investigations in confinement settings, interviewing techniques for sexual abuse victims, proper use of Garrity warnings, sexual abuse evidence collection and the criteria and evidence required to substantiate any case for administrative action or prosecution referral. This training shall be documented on the PREA training session report. The training may be received through the National Institute of Corrections (NIC). Completion of the training shall be documented with a Certificate of Completion.”.

Interviews with the Mansfield Correctional Institution Investigator and the Ohio State Highway Patrol Officer confirmed compliance.

§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, the medical/mental health training, and the contract medical/mental health training, all provide for and insure the training of medical and mental health practitioners who work regularly in the facilities.

All medical and mental health care practitioners who work at Mansfield CI received training (100%, 40 staff). This training includes: PREA Medical and Mental Health Professional Training, ODRC’s Zero-Tolerance, how to report sexual abuse/harassment, prevention, detection, response, legal prohibition on any sexual activity with inmates, identifiers of possible sexual assault victims, and strategies for sexual assault prevention.

Documentation is maintained showing that medical and mental health practitioners have completed the required training.

Interviews with specialized staff confirmed the above specialized training and compliance with this standard.

§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)

Two certified auditors were involved with the assessment of Mansfield CI compliance with PREA standards. Two sets of eyes reviewed the Risk Assessment Process, including the Pre-Audit Questionnaire and the pre-audit information, the ODRC policies and documents, toured, and reviewed operations. In the auditors opinion, the Unit Management staff, the medical staff, the mental health staff, the counselors, and all involved in this assessment process at Mansfield CI know how to assess and evaluate the inmates incarcerated at this facility. The application and screening of the inmates clearly outlines an appropriate risk assessment for both victim and abuser. The ODRC policy 79-ISA-04, Risk Assessments and Accommodation Strategies clearly outlines appropriate risk assessment for both victim and abuser.

It was impressive to see staff interview inmates at Mansfield CI. The ODRC policy 79-ISA-01 clearly sets forth that “all inmates shall be screened and assessed upon admission to the department and for all subsequent intrasystem transfers for the risk of being a victim of sexual abuse or of their likelihood of committing sexual abuse”. The ODRC has an automated PREA assessment process. This electronic process has as many as nine screens covering at a minimum 10 criteria outlined in standard 115.41 (1d) with opportunity for further evaluation/assessment. This process is thorough and comprehensive and it includes the Departmental Offender Tracking System (DOTS), which serves as the primary information system on all offenders incarcerated in the ODRC.

Within 72 hours of their intake, 1907 inmates entering Mansfield CI, within the past 12 months, were screened for the risk of sexual victimization or the risk of being sexually abusive to other inmates.

Interviews with specialized staff, random staff, and inmates confirms compliance and moreover speaks to a sophisticated and highly developed classification/assessment process.

This standard is assessed as exceeding requirements.

§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)

Unit Management staff uses the PREA assessment as one of the keys in preventing, detecting, responding, and eliminating rape in prison. This staff along with the medical/mental health staff and key staff who need to know, use this risk assessment and screening information to appropriately place inmates in the housing, work, and program assignments to secure the safety of all inmates at Mansfield CI. ODRC policies 79-ISA-01 Prison Rape Elimination; 79-ISA-03 Sexual Abuse Review Team; 79-ISA-04 Risk Assessment and Accommodation Strategies; and 79-ISA-05 Lesbian Gay Bisexual Transgender and Intersex were reviewed.

The Audit Team used PREA classification reports for abusers, for potential abusers, for victims, for inmates with special needs/medical class and the Special Abuse Response Team's review to assist with understanding Mansfield CI's use of screening information.

Albeit, this is a very large population, Mansfield CI makes determinations about how to insure the safety of each inmate on an individualized basis. The Unit Management Team makes assignments of housing/programs for transgender or intersex inmates in the facility on a case-to-case basis.

The auditors interviewed staff and inmates confirming/supporting compliance.

§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)

The ODRC policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless assessment of all available alternatives have been made. This is directed by agency policy 79-ISA-04 30 Risk Assessment and Accommodation Strategies.

Mansfield CI has had zero (0) number of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months while awaiting assessment or while awaiting placement or for other reasons.

§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)

The Audit Team used the Pre-Audit Questionnaire, the agency policies, notes, documents, interviews, the tour, and review of this information to confirm compliance.

The Pre-Audit Questionnaire indicated that the agency has procedures established allowing multiple internal ways for inmates to report privately to agency officials about sexual abuse/sexual harassment, retaliation, or staff neglect/violation of responsibilities.

ODRC policy 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation outlines the procedures (VI. Procedures, A. Reporting of Sexual Misconduct and Retaliation). Also the Inmate Handbook, posters, the inmate education video and video script detail ways to report as listed below.

The ways to report internally are as follows:

- 1) verbally to any staff member
- 2) in writing to any staff member
- 3) to the Operation Support Center - 614-995-3584

The way to report externally:

Outside Agency Hotline 614-728-3155 (no cost to call from inmate phone).

Family and friends can report allegations of sexual abuse, sexual harassment, and retaliation on an inmate's behalf: by calling 614-995-3584 or by emailing DRC.ReportSexualMisconduct@odrc.state.oh.us

Inmates shall be given the opportunity to remain anonymous upon request to the outside agency.

There will be no retaliation for reporting incidents of sexual abuse or harassment.

The agency has a policy mandating sent reports of sexual abuse/harassment verbally, in writing, anonymously, and from third parties. Staff are required to document verbal reports.

Staff can privately report sexual abuse/harassment of inmates by filling out an incident report and taking it to the PREA Compliance Manager or sending it to the Agency PREA Coordinator. Staff is trained in the above procedures.

§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

The Ohio Department of Rehabilitation and Correction does not use the inmate grievance process for reports of allegations of sexual abuse or sexual harassment (Memo to the file by the agency PREA coordinator).

§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)

Mansfield CI provides inmates with access to outside advocates for emotional support services related to sexual abuse (ODRC policy 79-ISA-01 Prison Rape Elimination).

Mansfield CI has a Memorandum of Understanding (MOU) with the Domestic Violence Shelter Incorporated, of Richland County, to provide services to those incarcerated within correctional facilities who report being sexually assaulted/abused during their incarceration.

MOU addresses the following:

- 1) Accompanying and supporting the victim through the forensic examination process.
- 2) Accompanying and supporting the victim through the investigatory interviews at the hospital.
- 3) Providing emotional support.
- 4) Telephone
- 5) Address
- 6) Safety orientation and information.

Copies of the agreement have been maintained by both parties.

The facility informs inmates, prior to giving them access to outside support services, the extent to which communications will be monitored.

§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 in the visiting areas and common areas of Mansfield CI, in the Inmate Handbooks, and on the agency website.

Third-party reporting is also clearly addressed in standard 115.51 addressing inmate reporting.

Inmate and staff interviews confirmed third-party reporting was an option of which they were aware. Visitors also indicated, in informal discussion, that they were aware of third-party reporting.

§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/Mansfield CI requires all staff to report immediately and according to policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurs at Mansfield CI. The report must be made immediately. Further, this policy stipulates that retaliation and third-party and anonymous reports shall be reported to the Institutional Investigator (who is responsible for monitoring retaliation, and working with the OSHP and handling all allegations of sexual abuse).

The form, Sexual Abuse – First Responder Checklist, which assists in the steps to be taken when a security or nonsecurity staff member is made aware of sexual abuse, requires the completion of an incident report which ensures follow-up and the duty to report.

Interviews with random staff included the question, 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 of staff and all responded affirmatively.

§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 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation states (section f, page 13) how to handle reports of a substantial risk of imminent sexual abuse. All reports require immediate

action to protect the inmate. It is noted that it takes some action to assess and implement appropriate protective measures without unreasonable delay.

- 1) All reports shall immediately be forwarded to the Investigator, Unit Management Chief and shift supervisor.
- 2) When considering the protection of staff or inmates, staff shall consider housing changes, transfers, and/or removal of alleged staff or abusers.
- 3) Risk of imminent sexual abuse shall be investigated by a staff member assigned by the managing officer.
- 4) Inmates shall not be placed in involuntary segregation unless there is no alternative.
- 5) Appropriate paperwork will be completed.
- 6) The managing officer's designee shall provide a documented response within 48 hours.
- 7) A documented final decision shall be made within five calendar days.
- 8) A copy of the Imminent Risk of Sexual Abuse form will be sent to Unit Management for special screening in the PREA risk assessment system.

In the past 12 months there have been zero (0) number of times that an inmate was subject to substantial risk of imminent sexual abuse.

§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 agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the receiving facility must notify the head of the facility or appropriate office of the agency/facility where the sexual abuse is alleged to have occurred.

This exact procedure is outlined in the ODRC policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation. Also outlined is that reporting will take place as soon as possible but not longer than 72 hours after receiving the allegation. The facility documents the allegations. During the past 12 months, the facility received 18 allegations that an inmate was abused while confined at another facility. The auditors reviewed the documentation and notification procedures.

Allegations received from other facilities are investigated in accordance with PREA standards. There was one (1) allegation of sexual abuse this facility received from another facility. The auditors reviewed the documentation and investigative process.

§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/Mansfield CI staff are outlined in the policy 79-ISA-02. This policy is comprehensive and thorough and has 14 pages containing flow charts, appendices and forms.

The policy directs:

- 1) The first responder, non-security, separate victim and abuser, advise victim not to destroy evidence, and complete the incident report (notification).
- 2) The 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 the incident report.

In the past 12 months have been 16 allegations that an inmate was sexually abused. Of these 16 allegations, 11 were reported to a security staff member who separated alleged victim and abuser, 7 allegations were made within a time frame that allowed for the collection of physical evidence. Other numbers and allegations presented on the Pre-Audit Questionnaire were reviewed by the auditors. Most importantly, the checklists and incident reports documented the allegations that were made, and the appropriate action, response, and follow-up was accomplished.

Formal and informal interviews with random staff and specialized staff confirmed knowledge, understanding, and performance of the first responder duties as directed by policy.

§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)

Mansfield CI has an Institutional Sexual Abuse Coordinated Response Plan 79-ISA-02 (A) which parallels the ODRC overview policy. This plan, along with policy 79-ISA-03 Sexual Abuse Review Team, directs the review of allegations/incidents to determine whether there needs to be a change in policy or practice. These policies also direct review to assess better ways to prevent, detect, and respond to the incidents of sexual abuse.

The Sexual Abuse Response Team includes the staff recommendations to the Warden. Documentation of these recommendations are maintained.

Interviews with the Warden and specialized staff, including Incident Review Team members, clearly indicated their personal concern to implement recommendations and changes for the betterment of Mansfield CI.

§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

At the time of the audit, there was no effective collective bargaining agreement. However, it should be noted that finalization for an agreement is in process and does include the agency's preservation of its ability to protect inmates from contact with staff abusers (cannot be protected by contract).

§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 policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation; protects all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations, from retaliation by other inmates or staff. Knowledge of this emphasis on protection from retaliation is not only noticeable in the Employee Handbook and in the Inmate Handbook, on posters displayed throughout the facility, and in the training received by both staff and inmates; but noticeable also during formal interviews with staff and inmates. Both staff and inmates were asked questions about their right to be protected from retaliation and they were aware and knowledgeable of this right/protection.

The Institutional Investigator is responsible for monitoring retaliation. The Institutional Investigator monitors the conduct or treatment of inmates or staff who report sexual abuse every 30, 60, 90 days and more if necessary. The agency and the institution acts promptly to remedy retaliation.

Interviews with the Investigator and Warden support compliance.

§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)

Involuntary segregation is used only as a last resort for the protection of inmates who have alleged to have suffered sexual abuse. ODRC/Mansfield CI uses its policy 79-ISA-04 PREA Risk Assessment and Accommodation Strategies and Unit Management Teams to assist in placing inmates at high risk of victimization in safe circumstances. There is a PREA involuntary segregation assessment screen that staff at Mansfield CI use when inmates are placed in involuntary segregation. There has been zero (0) number of inmates, in all time frames, who have been placed in involuntary segregation at Mansfield CI.

Interviews with the Warden, specialized staff, and the inspector supports compliance.

§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)

The two auditors reviewing Mansfield Correctional Institution were very impressed with the thoroughness and comprehensiveness of criminal and administrative investigations. ODRC policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation details what needs to be accomplished to complete an investigation. Additionally, there is a Memorandum of Understanding (MOU) between the Ohio Department of Rehabilitation and Correction and the Ohio Department of Public Safety Ohio State Highway Patrol to collaboratively provide a uniform process for evidence collection and the investigation of PREA related incidents.

The MOU between the ODRC and the OSHP details the following:

- 1) PREA incident investigations
- 2) victims of sexual abuse forensic medical examinations
- 3) victim advocate/rape crisis center assistance
- 4) specialized training
- 5) investigator evidence collection
- 6) investigator interviews
- 7) credibility of victims witnesses
- 8) documentation

- 9) substantiated allegations
- 10) the departure of victim or abuser from employment or control of the facility.

The Ohio State Highway Patrol has an office at Mansfield Correctional Institution and is referred all allegations.

Substantiated allegations that appear to be criminal are referred for prosecution. At Mansfield CI, there were zero (0) number of sustained allegations of conduct that appeared to be criminal that were referred for prosecution.

For all criminal investigations, records are held indefinitely. Moreover, any state entity or Department of Justice component that conducts administrative or criminal investigations of sexual abuse or sexual harassment do so pursuant to the requirements of PREA standard 115.71. The state record retention schedule states that special investigation case files will be retained ten years after an inmate has reached final release (expiration of sentence, death) or 10 years after an employee is no longer employed by the agency.

Interviews with the Warden, specialized staff, and OSHP support an exceeds assessment of this standard.

§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 ODRC policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation, the agency “imposes a standard no higher than a preponderance of the evidence for administrative investigations”.

Interviews with the investigators support compliance for this evidentiary standard.

§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 incarcerated in the Mansfield Correctional Institution/ODRC who make an allegation that he suffered sexual abuse are informed in writing as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded

following an investigation. This is outlined in the ODRC policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation.

The Institutional Investigator is responsible for inmate notification (and works closely with the OSHP). There have been 16 criminal and/or administrative investigations of alleged inmate sexual abuse that were completed and it was documented that 16 inmates were notified verbally or in writing of the results of the investigation.

The auditors reviewed incident reports, PREA incident packets, allegations of sexual abuse and the investigator response to those allegations.

§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)

Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. This is outlined in the ODRC policies 79-ISA-01 Prison Rape Elimination and 31-SEM-02 Standards of Employee Conduct.

Moreover, pursuant to the Ohio Revised Code, sexual conduct with an inmate or anyone under the supervision of the ODRC is considered a criminal act. The ODRC will refer and pursue all cases for criminal prosecution.

In the past 12 months, there have been zero (0) number of staff from Mansfield CI that have violated agency sexual abuse or sexual harassment policy. There have also been zero (0) number of staff that have been terminated or resigned while being investigated for termination, for violating agency sexual abuse or sexual harassment policy. Additionally, there have been zero (0) number of staff that have been reported to law enforcement or licensing boards for violating agency sexual abuse and/or sexual harassment policies.

§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)

As in standard 115.76, there are Standards of Conduct for contractors/volunteers. Policy number 71-SOC-01 Recruitment, Training and Supervision of Volunteers states,

“the managing officer or designee may terminate a volunteer for any alleged violation of the standards of Conduct for Contractors/Volunteers or any activity which threatens the orderly operation or security of the facility or APA region or safety of the volunteer, staff or offenders”.

Standards of Conduct for Contractors, Volunteers and Interns also includes direction that advises that a) no person shall allow themselves to show partiality for or become emotionally, physically, or financially involved with offenders or their families; b) no person shall discriminate based on sex, race, color, age, religion, national origin, disability, or sexual orientation; c) no person shall become involved in unauthorized relationships. The managing officer or designee may terminate for such conduct.

Volunteers/contractors who engage in sexual misconduct/harassment are to be notified in writing, and appropriate notification made if criminal, or if charges support notification to relevant licensing boards.

In the past 12 months have been zero (0) contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates.

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 are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse. Inmate Rules of Conduct 5120-9-06 list Rule Violations/Disciplinary Violations. Dispositions for Rule Violations are defined in the Administrative Codes 5120-9-07, and 5120-9-08.

In the past 12 months there have been zero (0) findings of inmate-on-inmate sexual abuse that occurred at Mansfield CI.

§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 in Mansfield Correctional Institution who have disclosed any prior sexual victimization during a screening pursuant 115.41 are offered a follow-up meeting with a medical or mental health practitioner. Additionally, prison inmates who have

previously perpetrated abuse as indicated in 115.41 screening are offered a follow-up meeting with a mental health practitioner. This is directed by ODRC policy 79-ISA-04 PREA Risk Assessment and Accommodation Strategies.

In the past 12 months 100% of the inmates who disclosed prior victimization were offered a follow-up meeting with a medical or a mental health practitioner.

In the past 12 months 100% of the inmates who disclosed prior abusiveness were offered a follow-up meeting with a medical or mental health practitioner.

These follow-up meetings to victim or to abuser are offered within 14 days of intake screening.

Information related to sexual victimization or abusiveness is strictly limited. Appropriate informed consents, as necessary, are obtained by the medical/mental health staff.

The auditors reviewed policy, risk assessments, and mental health follow-up. Formal interviews were held with medical and mental health staff. These scripted formal interviews supported an "exceeds" standard.

§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)

Inmates receive unimpeded access to emergency medical treatment and crisis intervention. Mansfield CI offers 24/7 medical services. Mental health services are available to all inmates on-site during the administrative shift and on call 24/7.

Complex emergency hospital healthcare is obtained at the Central Mansfield Medical Center 10 minutes away.

Treatment services are provided for every victim without financial cost.

Interviews were held with random inmates, specialized staff, and all supported/confirmed access to emergency medical/mental health services, compliance.

§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)

Mansfield Correctional Institution, as directed by agency policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation, and by Medical Protocol B-11, offers medical and mental health evaluation as appropriate, to all inmates who have been victimized by sexual abuse in any prison, jail, etc. Ongoing medical and mental health care for those victimized by sexual abuse is outlined in the agency policies, mental health directives and health protocols (79-ISA-02, 67-MNH-02, 67-MNH-04, 67-MNH-15, and Medical Protocol B-11).

A review of the above-mentioned documents and interviews with staff and inmates confirms an assessment of compliance with the standard.

Mansfield Correctional Institution is an all-male facility (female provisions of the standard are not applicable).

§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 policy 79-ISA-03 Sexual Abuse Review Team outlines the policy and procedures to conduct a sexual abuse incident review at the conclusion of every criminal and/or administrative sexual abuse investigation unless the allegation has been determined to be unfounded. The Sexual Abuse Review Team is identified as SART.

The SART shall, at a minimum, consist of:

- 1) Deputy Warden of Operations – Chair
- 2) Institutional Investigator
- 3) designated Victim Support Person (VSP)
- 4) Deputy Warden of Special Services
- 5) Institutional PREA Compliance Manager
- 6) any other staff that may have relevant input (line supervisors, medical and mental health professionals)

This team will consider:

- a) need to change policy or practice
- b) what motivation may have been involved (race, ethnicity, gender, etc.)
- c) the area in the facility where the incident occurred
- d) adequacy of staffing
- e) whether monitoring technology should be deployed.

The Managing Officer shall implement the recommendations outlined for improvement or shall document its reasons for not doing so. There is a Sexual Abuse Case Review form.

The auditors reviewed the PREA Incident Review Packet which included the incident report, the first responder checklist, the VSP activity report, medical exam report and consent form for release, the investigation summary report, the allegation of sexual abuse report packet sections 1 – 6, the inmate notification conclusion, and the sexual abuse case review. After reviewing such, the auditors were impressed with the documentation and materials as recorded.

In the past 12 months there have been 13 investigations of alleged sexual abuse, excluding unfounded, at the Mansfield CI and the SART has reviewed (within 30 days of the conclusion of sexual abuse investigation) all 13 investigations. Implementation of recommendations for improvement was initiated by the Warden.

Interviews with the Warden and SART staff support compliance.

§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/Mansfield CI collects uniform data. The data collected answers questions from the Survey of Sexual Violence (SSV) conducted by the Department of Justice.

The agency aggregates data annually (incident-based samples were reviewed by the auditors).

The ODRC maintains, reviews, and collects data from Mansfield CI.

The agency obtains incident-based/aggregate data from private facilities with which it contracts (Corrections Corporation of America and The Management Training Corporation).

The auditors reviewed the ODRC policy 79-ISA-01 Prison Rape Elimination (section F. Data Collection and Monitoring), the SSV 2013 Report, the Privately Operated Facilities Report, and the ODRC Institutional Aggregate Report (including Mansfield CI

data). The PREA auditors were impressed with the thoroughness and completeness of the agency's data collection.

§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 ODRC Director and the ODRC PREA Compliance Coordinator were telephonically interviewed early in 2015 and were most impressive in their commitment to PREA overall and specifically to data collection and its use to improve the ODRC.

The Annual Internal Report on Sexual Abuse Data for 2012 and 2013 by the ODRC's PREA Coordinator was reviewed. This report outlined accurate, uniform data for the allegations of sexual abuse within the Ohio Department of Rehabilitation and Correction.

The report is available online, and states its purpose, makes use of the uniform and aggregate data to clearly identify problem areas, and to formulate corrective measures. The report itself was divided into four sections; Introduction, Data, Problem Area Identification and Corrective Measures, and the Conclusion. The report is signed by the PRC PREA Coordinator and approved by the ODRC Rehabilitation and Correction Director.

Agency information is available to the public on the 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 auditors reviewed the Pre-Audit Questionnaire, policy, other documentation and interviews to assess compliance.

The ODRC policy, 79-ISA-01, Prison Rape Elimination, outlines and directs 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 retention is at least 10 years.

The agency, ODRC, makes this information available through its public website mentioned in the above section 115.88.

The agency 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

May 31, 2015

Auditor Signature

Date