

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



Name of facility:		Marion Correctional Institution	
Physical address:		940 Marion – Williamsport Rd., Marion, OH 43302	
Date report submitted:		July 17, 2015	
Auditor Information James Curington			
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Telephone number:		352-538-2636	
Date of facility visit:		June 15 – 19, 2015	
Facility Information Marion Correctional Institution			
Facility mailing address: <i>(if different from above)</i>			
Telephone number:		740-382-5781	
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
Name of PREA Compliance Manager:		Michelle Turner	Title: Operational Compliance Manager
Email address:		Michelle.Turner@odrc.state.oh.us	Telephone number: 740-382-5781 ext. - 2224
Agency Information Ohio Department of Rehabilitation and Correction			
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:

The Ohio Department of Rehabilitation and Correction (ODRC), through the American Correctional Association (ACA), scheduled a Prison Rape Elimination Act (PREA) Audit for Marion Correctional Institution (Marion CI or MCI) located in Marion, Ohio. The date of the audit was June 17-19, 2015. This audit was to be held in conjunction with an ACA Standards and Accreditation Audit scheduled June 15-17, 2015. James Curington, certified PREA auditor, was notified in April 2015 of this dual audit and his participation beginning Sunday June 14, with an introductory meeting of Marion CI key staff and an ACA audit team.

This was the sixth ODRC dual PREA audit and ACA audit that this auditor was involved in this year, 2015. The auditor would like to complement the ODRC and the ACA for this weeklong process which opens the facility to a thorough review of ACA accreditation standards and PREA standards which, in this auditor's opinion, compliments and supplements both audit processes. Additionally, there is a positive effect on the audit process when multiple reviews and assessments are made of facilities covered by statewide policies and procedures. Simply, experience with like standards, assessments, processes, documents, rules and regulations, and laws contribute to understanding, comprehensiveness and thoroughness.

The audit process for the Marion Correctional Institution started with contact from the Agency PREA Coordinator and his staff. As with previous audits, the PREA auditor was supplied with an electronic thumb drive which contained a wealth of documents, materials, information, and the PREA Audit: Pre-Audit Questionnaire Adult Prisons and Jails to assist the auditor in his review of the institution for compliance with PREA standards. Materials supplied included an electronic folder for each of the 43 PREA standards. These folders included materials supporting and defining the Pre-audit Questionnaire, and individual institutional information on each of the PREA standards.

The auditor would also like to complement the Bureau of Agency Policy and Operational Compliance which also supplied a most helpful hardcopy document, the "Bureau of Agency Policy and Operational Compliance PREA Documentation List – 2015". This 60 page hardcopy document addressed each of the 43 PREA standards outlining the ODRC Operation Support Center Documentation ("a" side), and Institutional Documentation ("b" side) Compliance Methods. This PREA document is easily readable in a lined, block style, with effective dates and uses icons for documents, outcome measures, interviews, videos, the tour, and links.

The PREA audit instrument used for Adult Prisons and Jails was supplied by the National PREA Resource Center (PRC) through its website. The audit instrument (and its seven sections, A-G) is outlined as follows: A) the Pre-Audit Questionnaire, B) the Auditor's Compliance Tool, C) the Instructions for the PREA Audit Tour, D) the Interview Protocols, E) the Auditor's Summary, F) the Process Map, and G) the Checklist of Documentation. This instrument is the basis for the auditor's assessment process. Part A, the Pre-Audit Questionnaire Adult Prisons and Jails was completed by the ODRC and the Marion Correctional Institution, with documentation/materials that can be electronically downloaded loaded for review (materials from A-Z, ACA Audit Report to "zero-tolerance policy").

Following the protocols of posting notices, making contacts with the Marion Correctional Institution, the ACA, and the ODRC, the auditor reviewed the above noted electronic and hard copy information. In the weeks preceding, the auditor began by reviewing every item submitted on thumb drive opening each of the 43 folders and the background for compliance with the 43 PREA standards. Institutional information was also downloaded from the Pre-Audit Questionnaire. The auditor contacted the Institutional PREA Manager to set up a tour and on-site agenda, and the auditor also submitted a Pre-Audit Report to the PRC. This was the beginning process of the auditor's methodological/systematic review of Marion Correctional Institution.

The on-site audit process began with a Sunday visit to the city of Marion, Ohio and a drive-by of the Marion CI. Later that evening, there was an informal dinner with key MCI staff at a local restaurant near the hotel. This informal get-together for the dual audit was a good opportunity to meet and discuss backgrounds, experiences, and interests, as well as the week's upcoming activities/agenda.

Monday, June 15

The ACA audit team, which included the PREA auditor as a member of the ACA team, met with the Warden and (after appropriate security approvals) drove around the perimeter of MCI getting an opportunity to review the facility and the grounds from the perimeter road. After driving the perimeter road, the ACA team/PREA auditor met with the Warden and his Key staff, inside the main facility administrative conference room, to introduce themselves and discuss upcoming time frames, the tour, file review, and shift meetings. At the conclusion of the short meeting, a tour of the facility began with the following staff in attendance:

Jason Bunting	Warden
Michelle Turner	PREA Manager
Kristine Faine	Deputy Warden of Operations
Terry Chatman	Deputy Warden of Special Services
Rebecca Schaeffer	Business Administrator
Sam Grissom	Chief of Security
Michell Dunkel	Unit Management Chief
Andrew Albright	Agency PREA Coordinator
Dan Lipperman	Agency ACA Administrator
Liann Bower	Agency PREA Administrator

John Galley	ACA Chairman
James Curington	PREA Auditor
Nick Blythe	ACA Auditor
David Bobby	Regional Director
Ed Voorhies	Managing Director of Ohio State Corrections
Carol Miley	Inspector Secretary
Ben Holly	Correctional Officer
Chrissy Borkosky	Unit Secretary

The tour included all areas of the institution (much of which was done on the first day, but also included visits and revisits throughout the week).

Areas toured included:

Outside Perimeter Tour

Warden's Office/Administrative Building

Medical/Mental Health/Infirmary

Visiting Area

Cafeteria/Kitchen

Commissary

Laundry

Shop/Warehouse Area including: Welding, Prison News Network, Lifeline, Barber School, Mailroom, Maintenance, Automotive Vocational, Ohio Penal Industries Shops

Camp

Chapel

Library

Recreation/Gymnasium/Fields

All Housing Units

With the conclusion of the formal tour, the auditors proceeded to the Administrative Conference Room to review mandatory standards for ACA compliance. Also, the team revisited areas of the institution and visited with specialized staff.

Tuesday, June 16

The audit team reviewed the standards for the ACA portion of the audit and continued to visit areas of the institution. The team also continued to speak with many staff and inmates regarding the operations of Marion CI.

The audit team was present all day at the facility and returned at 9:30 p.m. to visit with the oncoming night shift.

Wednesday, June 17

The audit team returned to the facility and continued to visit and revisit areas of MCI. At 11 a.m., the auditors proceeded to the ACA closeout/exit session, which was held in the MCI Chapel with a large group of employees in attendance. The ACA audit team found 100% compliance with the ACA Mandatory Standards and 98+% compliance with the ACA Non-Mandatory Standards. After this closing, the PREA in-depth review of PREA standards and scripted interviews began. Additionally, the PREA auditor stayed and worked through until 11 p.m. to interview and meet with inmates and the third shift employees (midnight shift).

Thursday, June 18

Scripted and formal interviews of staff and inmates continued through Thursday morning. Thursday afternoon began the review of the PREA standards with the Warden, Agency and institutional staff.

Friday, June 19

The auditor re-toured parts of the Main Unit, the Camp and grounds within the perimeter fencing. Inmates were informally interviewed, programs and housing units were re-examined, and attention was paid to quality of life issues for the inmates at Marion CI. There continued to be an atmosphere of good communication, eye contact and conversation between staff and inmates, a purpose to movement and duty assignments by both inmates and staff, and a very positive daily routine. As discussed with the Warden, several times, the only possible negative issues were centered around the large population that exists at Marion Correctional Institution, 2500+/-inmate population. Twenty-nine (29) inmates were formally interviewed from PRC scripts and in addition, 45 inmates were informally interviewed or involved in conversation about the conditions of confinement at the facility. Thirty (30) staff were formally interviewed from PRC script and many more were talked to informally.

Each of the 43 standards and subsections, ranging from 1-12 sub-sections per standard, outlined by the PREA Auditor Compliance Tool were reviewed by the auditor. It should be noted that there are 189 subsections which were all assessed as part of the compliance document. The PREA auditor used the suggested seven categories of assessment: 1) Questionnaire, 2) Policy, 3) Auditor Notes, 4) Documents and Other Documentation, 5) Interviews, 6) On-Site Tour and 7) Reviews/Auditor Review.

The style of the audit is to use the documents supplied by the PREA Resource Center in evaluating the overall 43 standards and their subsections by the suggested category methods and good correctional judgment.

This auditor has the experience of five past Ohio PREA audits and feels able to assess standards as exceeding, meeting or not meeting standards for the 43 PREA standards.

Also supplied by the Agency was the 2015 Ohio PREA Observations, Adult Correctional Institutions, Bureau of Agency Policy and Operational Compliance. This review contains PREA Compliance Review Observations, PREA Review Interview Checklist, and PREA Compliance Review Tour Checklist (31 pages).

DESCRIPTION OF FACILITY CHARACTERISTICS:

Marion Correctional Institution is a 2538 bed, all male, correctional facility located at 940 Marion-Williamsport Rd., Marion, OH 43302. It is a minimum/medium very large correctional institution located in the city limits of Marion, Ohio. The institutional grounds, consist of approximately 1243 acres originally designated as farming use and is close to city residential and business areas. The institution is part of the Ohio Department of Rehabilitation and Correction Agency.

Marion Correctional Institution has had a long history beginning in 1942 with the government acquiring land, creating an ordinance plant, a metals plant operation, a prisoner of war camp then, when the state of Ohio acquired the land from the US government, they established the Marion Training School for Boys. On June 2, 1954 the Marion Training School officially became the Marion Correctional Institution. In its 60 year history as a correctional institution, Marion CI has had only seven Wardens/Directors over its existence and a brochure celebrating 60 years and the Diamond Anniversary indicates "there have been only six past wardens. This Loyalty has driven MCI's legacy of focus on providing consistent opportunities for staff and inmates." This culture of longevity in leadership was noted by the auditor as a strength in its executive/chain of command operation. The leadership was strong, but was also inclusive of all staff, and although there was a strong chain of command, there were many channels of communication available to staff and inmates that were in evidence in the review of MCI.

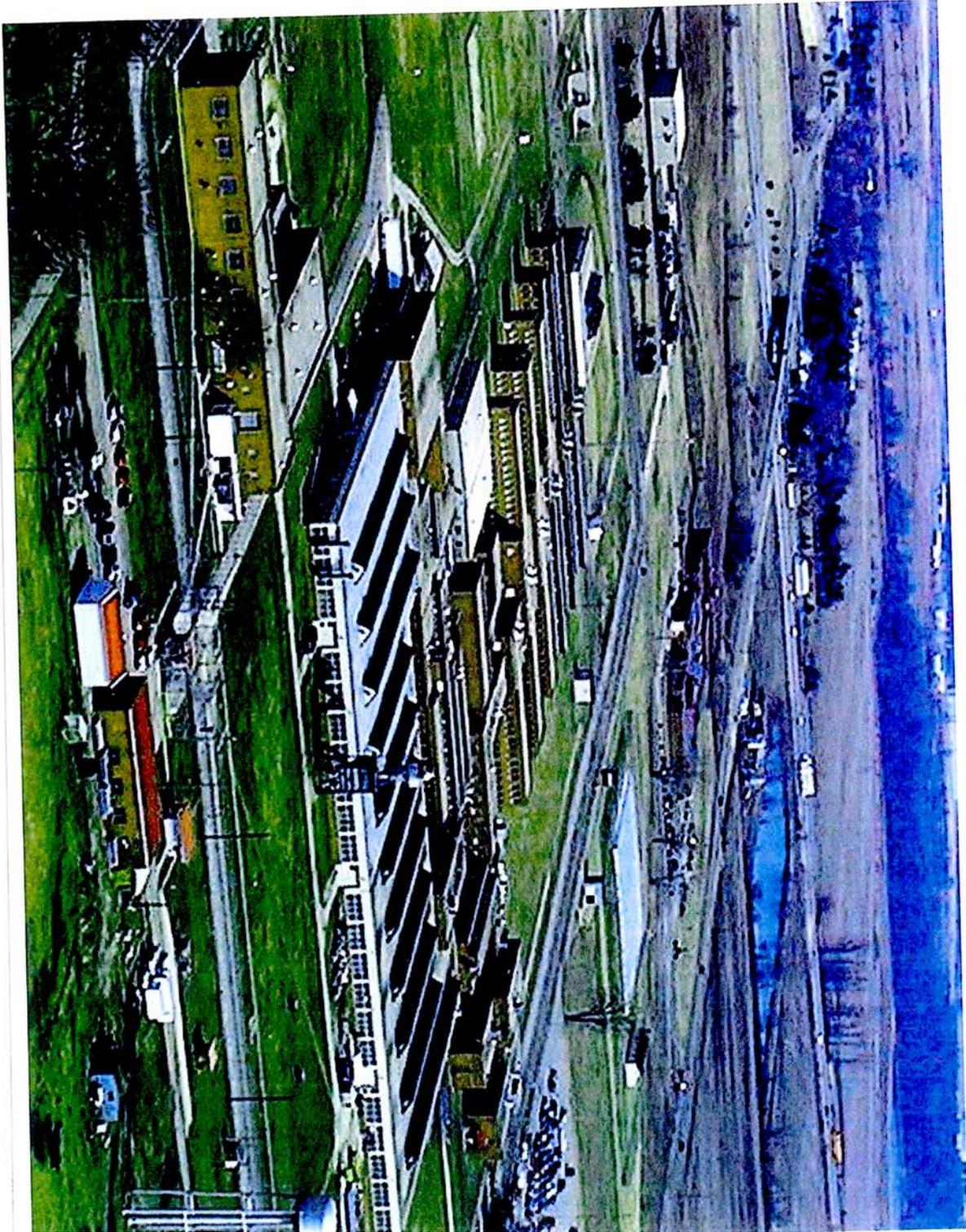
The facility is composed of a Main Unit of approximately 2100 inmates and the camp of approximately 400 minimum-security inmates. The units are secured and surrounded by double chain-link 14 foot high perimeter fencing. Seven brick towers were originally built to assist with the perimeter security however, as security levels changed and the facility was designated as a minimum, medium, the towers were taken out of use (reducing the cost of manning seven towers 24/7, 365 days a year). The chain-link rectangular perimeter fencing of approximately 1 ½ miles is supplemented with rolls of razor ribbon on each fence, riverbed rocks (ankle breakers), a motion/shaker system, and a microwave alarm system. There is also an armed mobile vehicle that patrols the 1 ½ mile perimeter road outside the fencing.

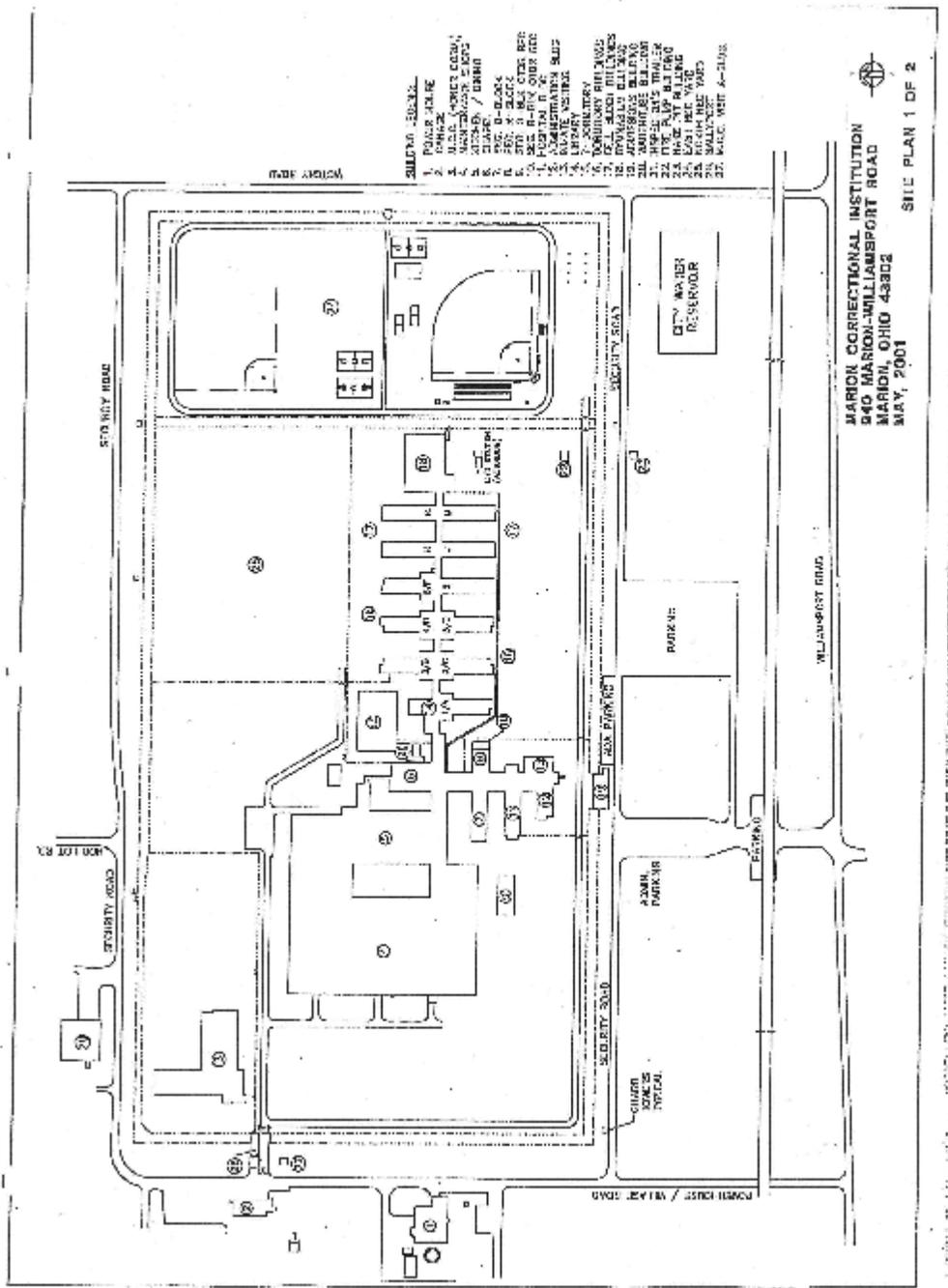
The operational offices/warehouses/dining/gymnasium/recreation and housing units for the Main Unit (2100 inmate population) consist of a very large multi-story (2-3 levels for offices, 2 levels for inmate housing, cellblock and dorm style) brick building of the traditional telephone pole configuration design under a single roof. The inmate housing in the main stockade consists of both cell and dormitory style housing. Cell housing units have an upper and lower range with a capacity of 58 to 128 offenders. Dormitory housing is a single floor with a capacity between 48 to 114 offenders. These 22 housing areas in the telephone pole designed wings, include: Merit housing, long-term housing, interfaith program housing, veterans housing, sanctions housing, American Disabilities Act housing, medical housing, and segregation. This is a multipurpose complex within the large doubled fenced, rectangular, security perimeter.

The Camp Unit (400 inmate population) with offices, inmate dormitory housing, dining hall, recreation, and etc. is a concrete block/brick two-story building about 50 yards away and separately fenced from

the main facility. Housing at the camp consists of a North dorm which includes the Marion Reintegration Center (inmates about to be released), and an East dorm which is titled Marion Correctional Camp Inmates. This camp unit is within the large doubled fenced, rectangular, security perimeter.

Additionally, within the doubled fenced rectangular security perimeter are a recreation area and outbuildings. The large recreation area includes recreation pavilions, four baseball fields, additional recreation fields, gardens (a beautiful Chapel garden), and other open space. Please see attached (a) aerial photo and (b) schematic.





A description of the Marion Correctional Institution would not be complete without its list of extensive programming which keeps the inmates focused and occupied on the positive aspects that the staff at MCI and the Agency is trying to accomplish. The following is noted:

- 1) Activities and Programs, lights on 5:30 a.m. to lights off 11 p.m. (with exceptions).
- 2) Educational and Vocational training.

- 3) Mental Health programming.
- 4) Recovery Services program.
- 5) Religious Services, Chapel schedule programs.
- 6) One Stop Shop.
- 7) Reintegration Center.
- 8) MCI Green Initiative.
- 9) MCI Restoration Acres.
- 10) Kindway EMBARK.
- 11) Morals Interfaith Housing.
- 12) Prison News Network multimedia.
- 13) The Lifeline Reentry Community
- 14) ASSETS Toledo.
- 15) Winebrenner Theological Seminary-Pastoral Training Institute at MCI.
- 16) Tedx Marion Correctional.

These above initiatives, programs, and activities, all are part of the Marion CI philosophy that we must treat offenders individually and differently," personal change is essential in accomplishing the rehabilitative mission and this requires a climate and culture which is conducive to fostering prosocial values and behavior. This type of self-development will undoubtedly lead to reduced recidivism and eventually to personal and societal wealth... Unit managed prisons are the key to delivering these services because Unit Management places key resources in direct contact with offenders. Unit Management staff can therefore be responsive to the concerns of staff and fulfill the needs of offenders. This form of prison management allows us to proactively manage all facilities and maintain safety and security". This quote comes from the ODRC 3 tier system which, 1) at the highest security level is control, 2) at the medium security level is the general population, and 3) at the lowest security level is the reintegration community. This within a hierarchy of safety, stability and order, service delivery, self-development, and personal societal wellness.

This auditor believes that Marion CI is managing and operating along these lines. The auditor believes and assesses that Marion CI is complying with PREA law/standards and moreover accomplishing a positive reintegration into the community of its offenders as outlined in its goals and mission statement.

Mission Statement:

"The MCI Mission is to provide a safe and secure environment for staff, offenders and the community. In addition we will promote professionalism among employees and provide quality service to offenders. In order to prepare offenders for a successful return to the community, innovative programs will be made available." From the Offender Handbook

Demographics for Marion Correctional Institution:

Rated Capacity: 1452; **current capacity:** 2538

Average Daily Population: 2575

Average Length of Stay: 7.84 years

Security Level of: Main Facility, medium/minimum; Camp, minimum. Custody level 1 and 2 on the ODRC 5 level system (1 being the lowest custody level and 5 being the most secure)

Gender: male

Age Range: 18 – 86 (no inmates under age 18)

Staff: 477.5 (11/3/2014 memo to Jason Bunting, Warden, from David Bobby, Regional Director)
Security 283, Other 115, Medical 29, Mental Health 14, Ohio Penal Industries 5, Commissary 2, Farm 7,
Education Services 17.5, Recovery Services 5

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 12

Number of standards met: 28

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)

This first standard addresses three subsections concerning a) the zero-tolerance policy b) the Agency PREA Coordinator for the Ohio Department of Rehabilitation and Correction and c) the Institutional PREA Manager.

Documentation for assessment includes information from the questionnaire, Agency/institutional policy, auditor notes, documents, and interviews. The auditor was especially impressed with the posters, information and the PNN TV network (broadcast) throughout the facility concerning PREA and reflecting "Break the Silence". Also the knowledge of zero tolerance exhibited by staff and inmates when engaged in formal interviews and informal interviews. There is a cultural change, noted by staff and inmates, that inmates have the right not to be abused or sexually harassed in prison. Moreover, it is noted that there should be some sense of privacy (not at the expense of appropriate security), and that staff and inmates should report sexual abuse and sexual harassment.

The Ohio Department of Rehabilitation and Correction and the Marion Correctional Institution are committed to eliminating rape in prison. They have zero tolerance policies at the Agency wide level and the institutional level. Statewide policy 79-ISA-01 Prison Rape Elimination, and policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation with the supplemental institutional policy, Institution Zero Tolerance Policy 79-ISA-01 (A), clearly and comprehensively outline the efforts and the procedures for prison rape elimination.

The organizational charts reflect, at the Agency wide level, a PREA Coordinator with access to the Agency Director and at the institutional level, a PREA Manager with direct access to the Warden. Interviews with the Agency Director, PREA Coordinator, Warden and Institutional PREA Manager all reflect their commitment to eliminating rape in prison and compliance with the PREA standards.

Based on the agency policies, the organizational structure, the commitment to cultural change, the auditor assesses this standard as substantially exceeding the requirements of this standard – exceeds standard.

§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)

This standard has been reviewed and assessed six times by this auditor. It applies to the ODRC by virtue of the inmates housed at two private institutions/facilities. Assessments have been made using the PREA Documentation List - 2015, supplied by the ODRC and individual audit questionnaires supplied by each of the six institutions, including this institution, Marion CI. Also, contracts/agreements were reviewed and interviews were held with the Agency PREA Coordinator and the Agency Contract Administrator. All supported compliance.

Additionally, policy 79-ISA-01 Prison Rape Elimination outlines that "all new or renewed contracts for confinement of Department inmates must include a provision that the contractor will adopt and comply with PREA standards". Addendums to the contracts for housing inmates with the Corrections Corporation of America and the Management Training Corporation require that these two private companies comply with PREA national standards to prevent, detect and respond to prison rape. The ODRC monitors these two companies to ensure that they meet their responsibility under the ODRC policies on sexual abuse and sexual harassment prevention, detection and response.

This PREA auditor telephonically interviewed the Contract Administrator and the ODRC Director in February 2015. These interviews supported 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 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, supplement with video monitoring supervision and monitoring efforts to protect inmates. The 11 items addressed in standard 115.13 part A are outlined and considered as directed by the aforementioned ODRC policy.

Documents, policy, notes, interviews, observations, and the tour were all utilized to assess compliance with this standard. Documents for deviation from the staffing plan, including the deviation form, and the template for staffing assisted with the assessment.

There is a form for annual review of staffing at the Marion Correctional Institution and this was examined by the auditor.

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 logs were reviewed to also assist with assessment of compliance.

Interviews with the Warden and intermediate and higher-level staff additionally 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)
- Non-applicable

There are no youthful offenders, inmates under the age of 18, at Marion 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)

The 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 speak to 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 Marion CI. Additionally, all inmates are able to shower, perform bodily functions, and change clothes without nonmedical staff of the opposite gender viewing. The LGBTI policy prohibits staff from searching or physically examining a transgender or intersex inmate for determining genital status (no such searches have occurred). Marion Correctional Institution is on a construction schedule to have each housing unit equipped with an alarm/flasher to announce the presence of a staff member of the opposite gender when entering the dormitory, wing, or cellblock.

In the past 12 months there have been zero (0) number of cross gender strip and cross gender visual body cavity searches of inmates. There have been zero (0) number of patdown searches of female inmates because there are no female inmates at this facility. This is an all-male facility, no female inmates are housed at Marion CI.

Marion CI has 100% of its security staff trained in searches, complying with PREA. Video training, training scripts, and training logs were reviewed by the auditor.

Interviews (formal and scripted) with staff and inmates confirm 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)

The standard on inmates with disabilities and inmates who are limited English proficient is divided into three subsections: a) the agency ensures that inmates participate in or benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment; b) the agency takes reasonable steps to ensure meaningful access to prevent, detect, and respond to sexual abuse and sexual harassment, including providing interpretation; and c) the agency does not rely on inmate interpreters/readers except in limited circumstances. The auditor used the Pre-Audit Questionnaire, agency policy, notes, other documentation, interviews, and the tour to assess compliance.

The ODRC policy 64-DCM-02, Inmates with Disabilities (six pages), addresses disability needs on page 3, interpretation needs on page 5, and accommodations on page 6. Essentially, this policy ensures nondiscrimination against individuals on the basis of disabilities and provides for reasonable accommodations when the need exists. Policy 79-ISA-01 Prison Rape Elimination addresses inmates not fluent in English or those with low literacy levels, and the use of interpreters, which would only be used in the case of an extended delay or an emergency.

The Affordable Language Services, LTD, contract which provides translating, interpreting, and teaching, was reviewed by the auditor. Spanish inmate handbooks are available. Spanish inmate education videos are available. Further accommodations for individual inmates can be made. Staff training also supports the Agency's commitment to providing appropriate assistance to all inmates.

Interviews with staff, inmates, and disabled inmates (hard of hearing, Spanish speaking) 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 are crucial to the safety of the public, safety of the staff and the inmates, and to the operations, management, and effectiveness of correctional facilities.

This standard 115.17 and its eight subsections (a-h) specifically address hiring, promotion, and background checks. The ODRC does an excellent job vetting prospective employees, contractors and volunteers who may have contact with inmates.

The ODRC/Marion CI policy 31-SEM-02 Standards of Employee Conduct (nine pages) and policy 34-PRO-07 Background Investigations (seven pages) outline policy and procedure.

The Standards of Conduct requires employees to self-report any criminal, sexual abuse, and/or sexual harassment behavior/activity. Agency policy dictates background checks are conducted every five years. Policy also states that material omissions regarding sexual abuse/harassment and material false information shall be grounds for termination.

The Human Resources/Personnel Department at each facility, coordinates with the ODRC Support Services Office in Columbus Ohio for background information, background checks, and personal history checks required to employ staff at the institution.

The auditor reviewed civil service applications, the required disclosures, the ODRC forms, such as the Prison Rape Elimination Act Annual Acknowledgment Form (DRC 1213 E), and law enforcement background checks. The acknowledgment form (DRC 1214 E) is a checklist of three questions asking about engagement in sexual abuse and previous misconduct. Again, it is an indication of the thoroughness of the ODRC background check procedure.

The auditor, in addition to policy, files, and documents, interviewed the MCI Human Resource staff, random staff, contractors, and management in assessing compliance with 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)

Marion Correctional Institution has not made any substantial expansion or modification of the existing facilities since August 20, 2012. This part (a) subsection of 115.18 is non-applicable since the facility has not acquired a new facility or made a substantial

expansion as noted in the auditor's tool. Part (b) installing or upgrading video monitoring system, electronic surveillance system, or other monitoring technology does apply and does meet the standard.

Marion CI, through its staffing plan, is continually updating its supervision and monitoring of inmates at the institution. There is an annual review documented and signed by the Warden of Marion CI, the Regional Director and the Agency PREA Coordinator of the ODRC. This review considers the following:

- 1) generally accepted correctional practices, and current camera locations. (Assessed by the auditor as meeting this standard and standard 115.13)
- 2) any judicial findings of inadequacy. (None)
- 3) findings of inadequacy from the investigative agencies. (None)
- 4) findings of an adequacy from internal or external oversight bodies. (None)
- 5) the facility's physical plant, including blind spots. There was a lengthy, comprehensive review of the placement and expansion of cameras throughout. (Assessed by the auditor as meeting this standard)
- 6) the composition of inmate population (2588 daily average of inmates) was the most significant issue for monitoring and supervision. (Assessed by the auditor as meeting this standard because of the security level, and the numerous activities and programs which keep the inmates busy.)
- 7) number and placement of supervisory staff. (Assessed by the auditor as meeting this standard)
- 8) institution programs occurring on shifts. (Assessed as meeting standards)
- 9) the prevalence of substantiated and unsubstantiated incidents of sexual abuse [zero (0) substantiated incidents of sexual abuse, five (5) unsubstantiated incidents of sexual abuse]. (Assessment by the auditor as meeting standards)
- 10) applicable state or local laws, regulations, standards or any other relevant factors, none specifically for Marion CI. (The auditor assesses compliance)

The factors above were reviewed by the auditor for compliance with the staffing standard 115.13 and the technology standard 115.18, and based on the number of staff, the level of custody, the observation of the large number of programs and well-coordinated operations, the professionalism of the staff, the behavior and routine of the inmates, the two standards were/are assessed as compliant with PREA. The large number of inmates housed at this facility was noted and discussed with the Warden.

There are 16 exterior cameras which monitor sallyports, outside areas, areas between buildings, recreation yards and other appropriate locations. These are digital, pan, tilt, zoom cameras with recordings retained for 15 to 30 days. There are 119 interior cameras throughout the facility and its housing units. These cameras are VCR, digital, and zoom, pan, tilt style with recording ability. Access to the camera views is in the Central Control, shift supervisor's office with a limited approval.

Interviews with staff and inmates and the discussion with them about overall safety, and the safety from sexual abuse specifically contributed to the assessment of compliance for standards 115.13 and 115.18.

§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 standard has been reviewed by this auditor at six ODRC facilities. This auditor and auditors that have assisted him found that not only does this standard comply with PREA but exceeds standards including here at Marion CI.

This auditor's assessment is that this standard substantially exceeds the requirement outlined for 115.21 Evidence Protocol and Forensic Medical Examinations. This is based on Marion CI's cooperative professional association with the Ohio State Highway Patrol (OSHP) and with its two major hospitals for forensic examinations, Ohio State University Hospital and Marion General Hospital in Marion, OH.

The Ohio State Highway Patrol is used to handle every investigation of sexual abuse and forensic exams for sexual abuse are performed by Marion General Hospital or the Ohio State University Hospital. No forensic exams were conducted by the ODRC/Marion Correctional Institution. The investigative process and the forensic exam process lends great credibility to the investigation of alleged sexual abuse within the ODRC.

There is a Memorandum of Understanding (MOU) between the ODRC and the OSHP. The MOU between the Director of the ODRC and the Director of the Ohio Department of Public Safety states that there will be a uniform process for evidence collection and the investigation of PREA related incidents. This protocol is adapted from the Department of Justice's Office on violence against women publication "A national protocol for sexual assault medical forensic examination adult/adolescents". This MOU encompasses all investigative/evidence collection steps outlined in this standard 115.21.

The Ohio State University, or Marion General Hospital is used for forensic medical examinations. SAFE/SANE healthcare professionals perform the required/appropriate exams. There have been four (4) exams performed by SAFEs/SANEs in the last 12 months.

Marion Correctional Institution has a Memorandum of Understanding with the Marion Counseling Center - Victims Support Program. This MOU addresses accompanying the victim, supporting the victim at the hospital, providing emotional support, and local contact/accessibility. This support is available, in addition to on-site support, through specially trained staff and Victim Support Person (VSP) at the Marion Correctional Institution.

Specialty medical staff, Victim Support Persons, OSHP troopers, random staff, and random inmates were all formerly interviewed and assisted in contributing to an exceeds assessment for this standard.

§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)

This standard 115.22 and its 5 sections, a-e, were addressed in the Marion Pre-Audit Questionnaire, the Marion CI supporting documentation, and PREA Documentation List-2015 prepared by the ODRC.

Specifically, Marion CI and the ODRC have policies in place to ensure the referral of allegations of sexual abuse for investigation. Policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation has a checklist for security and non-security first responders. These checklists are a step-by-step action process that is thorough and comprehensive and helps ensure the appropriate referrals. Reporting proceeds through the allegation of sexual abuse flowchart. There is notification of the Shift Commander, Medical Services, the Investigator, the OSHP, the PREA Compliance Manager, and the Victim Support Person.

The first responder's action is to follow up with an incident report on every allegation. The sexual abuse first responder checklist/appendix D, and the use of the sexual abuse first responder flowchart/appendix C are the basis for ensuring referrals.

During the past 12 months there have been twenty-two (22) allegations of sexual abuse and sexual harassment that were received. During the past 12 months there have been twenty-two (22) allegations resulting in an administrative investigation. During the past 12 months there have been twelve (12) allegations that were referred for criminal investigation. These allegations are documented. Allegations of sexual abuse or sexual harassment for criminal investigation are published on the agency website.

Interviews with the staff and inmates, and specialty interviews with the Institutional Investigator and the OSHP Investigator confirmed compliance with this standard.

§115.31 – Employee Training

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

The PREA auditor for the Marion Correctional Institution has assessed this standard as exceeds. The ODRC tests its employees on PREA training which exemplifies the commitment to making sure employees in the ODRC receive the appropriate training. A record of this testing and the scores achieved by each staff member is maintained. The auditor reviewed

training policies, curriculum, the intranet electronic e-learning program, and during random interviews, the training accomplished by each staff member.

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

As outlined in the standard/compliance tool, Marion CI trains all employees who have contact with inmates in 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 Lesbian, Gay, Bisexual, Transgender, and Intersex (LGBTI) inmates
- 10) and how to comply with relevant laws related to mandatory reporting of sexual abuse.

These training bullets were individually asked during the scripted random interviews.

In the past 12 months there have been 454 staff at Marion CI who have been trained in PREA requirements stipulated in the above 10 items. Training of the correctional staff is an ongoing process at Marion CI. Training continues through the intranet, at roll calls/shift changes, and annually through the employee's annual in-service training. All training is documented in the employee's training records.

§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. They have also been trained in the ODRC policy regarding Sexual Abuse, Sexual Harassment, Prevention, Detection, and Response. Specifically, the standard requires that contractors/volunteers (a) receive appropriate training, (b) understand how to report sexual abuse and (c) that the agency maintain documentation of this training.

The Prison Rape Elimination Act Contractor/Volunteer Training Script (seven pages) as well as acknowledgment records signed by contractors and volunteers were reviewed by the auditor. The training acknowledgment form signed by the contractor/volunteer details the following:

- 1) The ODRC's zero tolerance for sexual abuse
- 2) Zero tolerance for sexual harassment

- 3) How to report sexual abuse and sexual harassment
- 4) Sexual abuse and sexual harassment prevention
- 5) Sexual abuse and sexual harassment protection
- 6) How to respond to sexual abuse and sexual harassment
- 7) The legal prohibition on any sexual activity with inmates
- 8) The identifiers of possible sexual assault victims
- 9) Sexual assault prevention strategies.

Special note: a test is required of volunteers and contractors regarding sexual abuse/harassment, prevention, detection, and response.

Interviews with contractors and volunteers and the above documentation, and training confirmed compliance with this PREA standard.

In the past 12 months there have been 174 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)

The inmate education standard has six subsections (a-f) indicating that inmates are to receive information on the zero-tolerance policy during intake, b) be comprehensively educated within 30 days of intake on their rights to be free from sexual abuse and retaliation, c) current inmates are to be educated within one year of the establishment of PREA standards, d) the Agency will provide information to inmates who are limited in English language proficiency, or otherwise disabled, e) the Agency shall maintain documentation of this education and f) shall continually make this education material available. Marion CI does this. Especially notable is the fact that Marion CI has a local TV network station/education station for the inmates with a special institutional channel that broadcasts this information routinely. This broadcast was viewed by the auditor. All six of the sections met standards.

During the tour, posters, titled "Break the Silence" and the "Road to Recovery" were noticeable throughout the institution alerting inmates on how to report and handle sexual abuse at Marion CI.

§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)

This standard is assessed as substantially exceeding the requirement of this standard. Specifically, the teamwork of the ODRC/MCI and the OSHP in accomplishing investigations through its highly trained Institutional Investigators and State Trooper Investigators clearly exemplifies an outstanding effort in investigating sexual abuse in this prison, Marion CI. Investigators, and state troopers not only meet the minimum requirements, background checks, and the standards set for their respective positions but also must accomplished specialized prison training, specialized prison investigative training, and PREA specialized training. Simply and forthrightly this standard exceeds.

The auditor has reviewed many times the Memorandum of Understanding between the ODRC and the OSHP and the cooperative effort “signed off” by the Directors of these two agencies. This is the basis of the commitment that law enforcement/OSHP, and corrections/ODRC has given to solving the problem of sexual abuse in prison. This auditor was impressed with the interviews with the MCI Institutional Investigator and the state trooper assigned to Marion CI. Also impressive was the inmates’ attitudes towards the investigation of sexual abuse and sexual harassment when, in interviews about the investigative process, the inmates expressed that “they don’t play, this is serious business”.

The National Institute of Corrections PREA Learning Center is the basis for specialized PREA training. Training certificates were reviewed for both the Institutional Investigator and the OSHP Investigator.

Further detailed information from standards 115.21 Evidence Protocol and 115.71 Administrative Agency Investigations was used to make this exceeds assessment.

§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 relate to the training of medical and mental health practitioners who work regularly in the ODRC and MCI facilities.

100% of all medical and mental health care practitioners who work regularly at Marion CI have received the training required by agency policy. Thirty-four (34) health care practitioners have been trained.

No forensic medical exams are performed by the Medical Department at this facility.

Training logs, acknowledgment forms, and the curriculum for mental health and medical practitioners were reviewed by the auditor. Documentation is clear, precise and appropriately maintained.

§115.41 – Screening for Risk of Victimization and Abusiveness

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

The ODRC policy 79-ISA-04 PREA Risk Assessments and Accommodation Strategies policy outlines its purpose which is “to screen inmates for the risk of sexual victimization and abusiveness and to establish the process for the use of sharing of screening information to make informed decisions for housing, bed, work, education, and program assignments”. It is positively impressive to see inmates appropriately screened at both the initial reception level and the institutional reception level such that each individual inmate is educated on how to report sexual abuse, harassment and prevention, detection, response, and strategies for sexual assault prevention. The process has been refined into an automated PREA assessment process such that “upon admission to any facility, all inmates are immediately assessed by our Medical Department. The assigned healthcare screener initiates the assessment and completes the first screen. The assessment is then put into a queue for the Case Managers”.

The Case Managers check their assessments, and complete the second screen. The assessment then goes to the Unit Manager queue.

The Unit Managers check their pending cases and determine if the inmate does not meet a PREA classification. When the inmate meets a PREA classification listed, it is recommended to the Unit Management Chief. This process is thorough and comprehensive. The process addresses all nine subsections (a) to (i) of standard 115.41 that are found outlined in the Compliance Tool. Time frames are listed and followed, the 10 screening criteria are addressed and documented, histories are addressed and documented, and personal questions are asked (discipline is not imposed for not answering). The assessment is then made and follow through is completed, not only at the Reception Unit, but through and to the assigned institution.

Assessment and risk information is shared/maintained on a “need to know basis”.

The PREA auditor reviewed this process at MCI along with interviewing intake staff, medical and mental health staff, unit staff, and inmates. The process is comprehensive and in the individual inmate's best interest. Additionally, the inmate participated in the assessment.

Information is made part of the Departmental Offender Tracking System (DOTS) portal which serves as the primary information system on all offenders. Access is limited and coded by levels and type of information.

Based on policy, practice, and interviews this auditor assesses exceeds standards.

§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)

As with the previous standard, Screening for Risk of Victimization and Abusiveness, this follow-up standard is very professionally accomplished and this auditor assesses 115.42 also as exceeding the requirement of this standard.

As mentioned in the investigative/evidence protocol standards, the ODRC is involved in a professional, team, and multidiscipline approach to compliance with PREA standards. In the standards for screening for risk of victimization and abusiveness and for use of that screening information, there is a coordinated operational effort between and with the Unit Management, Mental Health, Medical, and Security Departments. This coordinated operational effort accentuates comprehensive, professional, and individualized inmate treatment.

Unit Management is utilized by the ODRC/MCI to make use of the screening information from the Reception Center. Follow-up is by the Unit Management/Intake Team at the receiving institution to “double check” the assessment of each individual. Again, this emphasis on individual determinations and how to insure the safety of each inmate is an ongoing process occurring at each institution and at every level. The DOTS is continually updated, examined and reviewed.

Interviews with specialized staff and inmates confirm an exceeds compliance and moreover speaks to the sophistication and highly developed classification/assessment process administered by the ODRC and the Marion CI.

§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 has a policy 79-ISA-04 Risk Assessment and Accommodation Strategies, prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made.

In the past 12 months there have been zero (0) number of inmates who were held in involuntary segregated housing at Marion CI.

§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 auditor used the Pre-Audit Questionnaire, the Agency policies, posters and documents, the tour to observe posters and notices, interviews with staff and inmates, and review of notes and information to confirm an exceeds compliance.

The ODRC policy 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation; outlines the procedures inmates can take to report. (Section VI, Procedure A. Reporting of Sexual Misconduct and Retaliation). Also the Inmate Handbook, posters, inmate education videos, video script, and the Prison News Network (PNN), which is broadcast at Marion CI, detail ways to report.

Internal ways to report are, specifically, as follows:

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

External ways to report:

- 1) outside agency hotline phone, 614-728-3155 (no cost to call from inmate phone).
- 2) family and friends can report allegations of sexual abuse, sexual harassment, and retaliation on an inmate's behalf by calling phone, 614-995-3584.
- 3) email DRC.ReportSexualMisconduct@odrc.state.oh.us
- 4) volunteers and contractors are trained on how to report sexual abuse/sexual harassment/retaliation

Upon request, inmates shall be given the opportunity to remain anonymous to outside agencies. There will be no retaliation for reporting incidents of sexual abuse or harassment. These provisions are outlined in the ODRC policy and noted in the Inmate Handbook and through the video/video script.

The Agency requires documentation of reports of sexual abuse/sexual harassment verbally, in writing, anonymously, or from third parties. Staff are required to document verbal reports.

The staff can privately report sexual abuse/sexual 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. The staff is trained in the above procedures.

The auditor was very positively impressed with these opportunities to report. Clearly the culture of silence is changing. "Break the silence" inmates have the right not to be raped or sexually abused in prison.

§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)
- Non-applicable

The Ohio Department of Rehabilitation and Correction does not use an 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)

Marion Correctional Institution provides access to both specially trained staff and/or specially trained outside advocates for emotional support services for sexual abuse victims as outlined in the ODRC Policy 79-ISA-01 Prison Rape Elimination.

Marion CI has a Memorandum of Understanding (MOU) with the Marion Counseling Center-Victim Assistance Program located in Marion, Ohio. This 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) Providing crisis intervention services.
- 5) Providing referrals.
- 6) Providing follow-up services.
- 7) Providing to the institution an address and phone number for inmates.

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.

Interviews with inmates and staff confirm knowledge and access to these outside confidential support services.

§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)

Standard 115.51 was assessed at Marion CI as exceeding standards for inmate reporting. This standard 115.54 third-party reporting is also assessed as exceeding standards. This assessment is based on the policy, posters, documentation, the Inmate Handbook, and the Prison News Network broadcast, continually informing inmates of the opportunity/ability of third-party reporting.

As indicated in standard 115.51, family and friends can report allegations of sexual abuse, sexual harassment, and retaliation on an inmate's behalf by calling 614-995-3584. Additionally, family and friends can report by emailing the ODRC, or for sexual abuse, contacting the Ohio State Highway Patrol, or the Agency's Inspector General's Office. Anonymous reports are required to be referred to the Institutional Investigator.

The ability/opportunity to report is a serious issue that ODRC has championed. Again, they are changing the culture of silence to a culture of report, report, report.

Interviews with staff and inmates confirm this exceeds compliance 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/Marion CI (all institutions) 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 Marion 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 (the Institutional Investigator is responsible for monitoring retaliation, and working with the OSHP on all allegations of sexual abuse).

As outlined by policy, there is a checklist form titled: "Sexual Abuse – First Responder Checklist" for security and nonsecurity staff who are made aware of sexual abuse. This checklist requires the completion of an incident report which ensures follow-up of each staff member's "duty to report".

Random staff interviews 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 asked of each staff member, randomly interviewed, and all responded affirmatively. Staff training curriculum, and online training scripts confirmed this staff's responsibility and duty to report sexual abuse. Documentation is maintained of all staff training.

§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 in section F, page 13 how to handle reports of 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. The policy outlines the following:

- 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 (5) 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 has been zero (0) number of inmates at Marion CI, who were determined to be 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 ODRC requires; by policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation; 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 direction requirement of reporting to other facilities should take place as soon as possible but the policy indicates no longer than 72 hours after receiving the allegation. The facility documents all allegations. During the past 12 months there have been five (5) allegations that the facility has received an inmate that was abused while confined at another facility. In the past 12 months, there was one (1) allegation of sexual abuse at this facility (MCI) received from another facility. Immediate notification was taken, with the Warden, Institutional PREA Manager, and Investigator all involved.

§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 staff/Marion CI staff are outlined in the policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation. This policy is comprehensive and thorough and has 14 pages containing flow charts, appendices, and forms. The policy specifically, directs the following:

- 1) the first responder; if nonsecurity; separate victim and abuser, advise victim not to destroy evidence, and complete the incident report (notification).
- 2) the first responder; if security; 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 there have been seventeen (17) allegations that an inmate was sexually abused. Of these 17 allegations, the first security staff member to respond separated the alleged victim and abuser. It should be noted that only four (4) of these 17 allegations were within a time that allowed for physical evidence collection. Additionally, in the past 12 months, six (6) allegations of sexual abuse were made to a nonsecurity staff member. Six times the nonsecurity staff member requested the alleged victim not take any

action to destroy physical evidence and notified a security staff member for further processing/assistance (as directed by the above mentioned policy 79-ISA-02).

§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)

Marion CI has its own Sexual Abuse Coordinated Response Plan 79-ISA-02 (A) which complements and supplements the ODRC Agency policies. This plan directs the review of allegations, the completion of incident reports, the procedures staff are to follow, and steps to be followed in addressing sexual abuse and sexual harassment. This nine (9) page policy also includes the Agency's form, Sexual Abuse – First Responder Checklist, which assists in the steps to be taken when a security or nonsecurity member is made aware of sexual abuse.

Importantly, this MCI Sexual Abuse Coordinated Response Plan coordinates through its flowchart; first responders, medical and mental health practitioners, investigators, and the facility leadership.

Interviews with the Warden and specialized staff, with the Incident Review Team members, and with random staff all indicated a team approach/team effort in response to any sexual abuse at Marion 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)
- Non-applicable

The ODRC reports that there is a collective bargaining agreement that has been voted on and will be effective in the near future. This agreement will contain provisions for the Agency to preserve the ability to protect inmates from contact with abusers. However, at the present time the new contract with correctional services staff was not available. At this time, this standard as non-applicable.

§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)

The ODRC policy 79-ISAF-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 further addressed in the Employee Handbook and in the Marion CI Inmate Handbook.

This protection against retaliation is emphasized by posters and notices throughout the facility.

Inmates and staff have been trained/educated on this protection from retaliation.

Formal and scripted questions during the interview of random staff, and random inmates address the fact that inmates and staff have the right to be free from retaliation for reporting sexual abuse. Both staff and inmates who were interviewed, responded affirmatively and knew that retaliation was prohibited.

The MCI Institutional Investigator is responsible for monitoring retaliation and he does so every 30, 60 and 90 days exceeding the expectation of this standard.

Interviews with the Institutional Investigator and the Warden, as well as the random interviews of staff and inmates support an exceeds rating.

§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)

The ODRC has an agency policy 79-ISA-04 Risk Assessment and Accommodation Strategies that addresses protective custody. Involuntary segregation is used only as a last resort for the protection of inmates who have alleged to have suffered sexual abuse.

The Unit Management Teams assist in placing inmates at high risk of victimization, into safe circumstances. Moreover, Unit Management Teams individually address risk assessment of the inmates at Marion CI and appropriately screen all inmates to ensure safety, custody, and care. Each inmate is afforded an assessment screen and if any inmate is placed in involuntary segregation, the appropriate alternative steps are taken.

There have been zero (0) number of inmates at Marion CI, who alleged to have suffered sexual abuse that were held in involuntary segregated housing in the past twelve (12) months for any time frame.

§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 ODRC has a policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation related to criminal and administrative agency investigations. Investigations within the ODRC/MCI concerning sexual abuse have been thorough, comprehensive and professional. These investigations are coordinated with the Ohio State Highway Patrol.

This particular standard has 12 sub-standards (a-l) on the auditor's compliance tool which are addressed either through the policy of the ODRC, the policy of the OSHP, or through the laws of the State of Ohio.

The ODRC Policy 79-ISA-02 details the procedures and steps to complete an investigation. Additionally, there is a Memorandum of Understanding between the ODRC and the OSHP to collaboratively provide a uniform process for evidence collection and the investigation of PREA related incidents.

The OSHP has an office in the Marion CI facility. There is professional and expert collaboration at MCI as evidenced by interviews with investigators from both the facility, and the Highway Patrol. The MOU between the two agencies 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 allegation referral.
- 10) The departure of victim or abuser from employment or control of the facility.

Substantiated allegations that appear to be criminal are referred for prosecution. At Marion CI, there were zero (0) number of sustained allegations that were referred for prosecution since August 20, 2012.

The State Record Retention Schedule requires that special investigative case files be retained for ten (10) years after an inmate has reached final release (expiration of sentence, death) or

ten (10) years after an employee is no longer employed by the agency. The OSHP requires that records are held indefinitely for all criminal investigations.

Interviews with the Warden, specialized staff, the Ohio State trooper assigned to Marion CI, and another Ohio State trooper, 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”.

The policy and interviews with the Institutional Investigator 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)

The ODRC policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation requires that when an inmate makes an allegation of sexual abuse, he is informed verbally or in writing as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. Marion Correctional Institution follows this policy as evidenced by the fact that in the past twelve (12) months there have been seventeen (17) criminal and/or administrative investigations of alleged sexual abuse that were completed. Of these seventeen (17) sexual abuse investigations that were completed, all seventeen (17) inmates were notified verbally or in writing, the results of the investigation.

The auditor reviewed incident reports, PREA incident packets, documentation of notification, and interviewed the Institutional Investigator (who is responsible for notification of the inmate) to substantiate compliance with this standard.

§115.76 – Disciplinary sanctions for staff

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

The ODRC policy 79-ISA-01 Prison Rape Elimination and Personnel Policy 31-SEM-02, Standards of Employee Conduct stipulate that staff is subject to disciplinary sanctions up to and including termination for violating the agency sexual abuse or sexual harassment policy.

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

In the past twelve (12) months there have been zero (0) number of staff from the facility that have violated agency sexual abuse or sexual harassment policy. There have been zero (0) number of staff that have been terminated and there have been zero (0) number of staff disciplined, short of termination, for violation of such policies. There have also been zero (0) number of staff that have been reported to law enforcement or licensing boards for violating Agency policy.

§115.77 – Corrective action for contractors and volunteers

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

Similar to Standard 115.76, corrective action and discipline for contractors and volunteers is defined by policy 79-ISA-01 Prison Rape Elimination and 71-SOC-01, Standards of Conduct for Contractors and Volunteers. The Ohio Revised Code may also apply to contractors and volunteers.

In the past twelve (12) months there have been zero (0) number of contractors or volunteers who have been engaged in sexual abuse with inmates and/or who have been reported to law enforcement agencies or licensing boards for engaging in sexual abuse with 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)

Inmate Rules of Conduct 5120-9-06, Administrative Code lists Rules Violations/Disciplinary Violations. Administrative codes 5120-9-07, 5120-9-08 define and list the Disposition for Rule Violations. This information is available through the Inmate Handbook, handouts, and the electronic kiosk machines.

Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate on inmate sexual abuse.

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

In the past 12 months there have been zero (0) criminal findings of inmate on inmate sexual abuse that occurred at Marion 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)

Medical and mental health screenings begin with the reception process generally through the Correctional Reception Center with its 54 mental health staff and 33.5 medical staff. All inmates admitted to the ODRC are initially screened pursuant standard 115.41 Screening for Risk of Victimization and Abusiveness (assessed as exceeding standards). There are offerings of follow-up screenings/meetings with medical and mental health practitioners at the Reception Center and at the parent/assigned institution. An assessment and follow-up is again administer by Marion CI. All of this as directed by the ODRC policy 79-ISA-04, PREA Risk Assessment and Accommodation Strategies.

All inmates at Marion Correctional Institution who have disclosed any prior sexual victimization during a screening pursuant 115.41 are offered a follow-up meeting at MCI. Inmates who have previously perpetrated abuse as indicated in 115.41 are offered a follow-up meeting with a mental health practitioner at MCI, again following the procedures directed in the PREA Risk Assessment and Accommodation Strategies policy. Both of these categories meets 100% compliance as documented by mental health staff.

Follow-up meetings for victim or for 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 and mental health staff.

The auditor reviewed policy, risk assessments, and mental health follow-up. This documentation, policy review, and Unit Management as well as mental health input supported an exceeds assessment of this standard. Moreover, interviews with LGBTI inmates, random inmates and specialized staff all supported an exceeds compliance for this 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 at Marion CI. There are 24/7 medical services, and mental health services (on-call) available to all inmates.

Complex emergency hospital healthcare is available through the Marion General Hospital. The local Rape Crisis Center and the Marion Area Counseling Center are available as outlined in a Memorandum of Understanding between the center and MCI. Forensic Healthcare Services are available at the Ohio State University Hospital in neighboring Columbus, OH.

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

Interviews with random inmates and staff supported/confirmed access to emergency medical/mental health services.

§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)

Marion Correctional Institution, as directed by Agency policy 79-ISA-02 Prison Sexual Misconduct, Reporting, Response, Investigation, and Prevention of Retaliation, and by the 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 care protocols. Specifically, policy 79 ISA-02, 67-MNH-02, 67-MNH-04, 67-MNH-15, and Medical Protocol B-11. A review of these documents and interviews with staff confirms an assessment of compliance with this standard.

§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)

By the ODRC Policy 79-ISA-03, Sexual Abuse Review Team, the institution (Marion CI) through its Sexual Abuse Review Team (SART) is required to review all sexual abuse incidents, unless determined to be unfounded, within 30 days of the conclusion of the investigation.

Policy 79-ISA-03 Sexual Abuse Review Team, also directs that the managing officer will establish a team that includes, at a minimum, the following;

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

The SART uses a Sexual Abuse Case Review Form DRC-1183 to address checklist issues such as the inmate's concern, committee considerations (change in policy or procedure, motivation, physical barriers, inadequate staffing, and monitoring technology), committee recommendations, committee referrals, committee signatures, committee recommendations approved, and the Warden's comments/actions ordered. This form is a very comprehensive, thorough review by the SART.

In the past 12 months have been nine (9) criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents. Some of these reviews were examined by the auditor and were found to be professional and followed policy/forms.

Interviews that were completed with SART members, specialized staff, inmates, and the Warden all confirmed compliance with this standard.

§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)

This group of standards 115.87, Data Collection; 115.88, Data Review for Corrective Action; and 115.89, Data Storage, Publication, and Destruction, have been reviewed by this auditor. In this auditor's opinion, the ODRC exceeds standards in this data collection. From the very first audit their support services/central office has had a handle on PREA significant incident, documentation. The ODRC has been thorough and comprehensive in collecting data, reviewing the data and publishing the data. This data collection and the production of PREA significant incidents summary substantially exceeds the requirement of this standard and its six subsections (a-f). The Agency PREA Documentation List-2015, and the Survey of Sexual Victimization (SSV) Reports were especially helpful in assessing exceeds for this standard and meeting compliance in the following two standards 115.88 and 115.89.

A Prison Rape Elimination policy 79-ISA-01 addresses eight steps of data collection and monitoring:

- 1) Monthly reports of allegations by the Institutional Investigators.
- 2) Automated reporting modules sent to the Agency PREA Coordinator and aggregated annually.
- 3) Review of aggregated data, identifying problems, taking corrective action, and preparing an annual report.
- 4) Review and comparisons of the ODRC annual data and corrective actions of previous years.
- 5) Ensure aggregate data from private facilities is obtained and make such available to the public.
- 6) Remove/redact personal identifiers.
- 7) Make sure certain information entered into the Department Offender Tracking System (DOTS) identifying victims and abusers is appropriately maintained/secured.
- 8) Maintain and secure records as outlined in the state of Ohio/ODRC retention schedule.

In addition to following policy, especially helpful in the institution/agency's collection of data, is the PREA Incident Packet instructions. PREA Incident Packets are completed on all allegations of abuse, harassment, retaliation, or imminent risk of abuse, even if unfounded. A copy of all completed packets/cases are mailed to the Central Support Services PREA Compliance Administrator.

The ODRC provided the Department of Justice (DOJ) data from the previous years. This data includes all information that is necessary to answer questions from the Survey of Sexual Violence (SSV) conducted by the DOJ.

Interviews were conducted with the Agency Director and the Agency PREA Coordinator and confirm an "exceeds" compliance with this standard.

§115.88 – Data Review for Corrective Action

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

The Annual Internal Report on Sexual Assault Data (Annual Report) for 2012 and 2013 prepared by the ODRC Agency PREA Coordinator was reviewed by the PREA auditor. This Annual Report contains the SSV data and accurate, uniform data for every allegation of sexual abuse.

The Annual Report outlined its' purpose, which is to make use of this information to identify problem areas and formulate corrective measures.

The report itself was divided into four areas:

- 1) an introduction
- 2) data
- 3) problem area identification and corrective measures
- 4) conclusion
(with an attachment/spreadsheet individually addressing each ODRC institution and detailing staff on inmate contact sexual assault and inmate on inmate confirmed sexual assault).

The report is signed by the Agency PREA Coordinator and approved by the ODRC Agency Director.

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

§§115.89 – Data Storage, Publication, and Destruction

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

The ODRC policy 79-ISA-01 Prison Rape Elimination, Section F, Data Collection and Monitoring, outlines that all PREA data will be securely retained in accordance with the procedure established by the ODRC Records and Retention Schedule. This retention is at least 10 years.

The Agency, ODRC, makes this information available through the public website <http://www.drc.ohio.gov/web/prea.htm>

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

July 17, 2015

Auditor Signature

Date