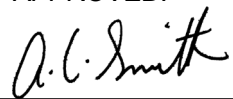




Department of
Rehabilitation & Correction

SUBJECT: ODRC Directives and Forms	PAGE <u> 1 </u> OF <u> 11 </u>
	NUMBER: 01-COM-01
RULE/CODE REFERENCE: ORC 5120.01, 1.43 (B), 125.91B, 125.98	SUPERSEDES: 01-COM-01 dated 09/03/2019
RELATED ACA STANDARDS: 5-ACI-1A-05, 1A-12 thru 1A-14, 1C-02; 2-1013, 2-1014; 4-APPFS-3D-06, 3D-07; 1-HC-7A-03; 2-CTA-1A-10, 1A-12; 2-CO-1A-05, 1A-07, 2-CO-1A-15 thru 1A-17	EFFECTIVE DATE: May 2, 2022
	APPROVED: 

I. AUTHORITY

Ohio Revised Code 5120.01 authorizes the Director of the Department of Rehabilitation and Correction, as the executive head of the department, to direct the total operations and management of the department by establishing procedures as set forth in this policy.

II. PURPOSE

The purpose of this policy is to establish a coordinated system for the drafting, review, and dissemination of written agency policies, procedures, operation manuals and forms. Guidelines shall be set for the development and revision process to ensure input from appropriate stakeholders.

III. APPLICABILITY

This policy applies to persons employed by the Ohio Department of Rehabilitation and Correction (ODRC), contractors providing a service to the ODRC, incarcerated individuals, interns, and volunteers.

IV. DEFINITIONS

The definitions for the below listed terms can be found at the top of the policies page on the ODRC Intranet at the following:

[Definitions Link](#)

- **Drafter**
- **Field Policy Review Team (PRT) Chairperson -**
- **Form**
- **Forms Analyst**
- **Non-Substantive Revision**
- **ODRC Policy**
- **Operation Manual**
- **Policy Administrator**
- **Policy Owner**
- **Stakeholder**
- **Substantive Revision**
- **Variance**

V. POLICY

It is the policy of the ODRC to develop and maintain current and meaningful policies and operation manuals. ODRC policy and operation manuals shall assist in ensuring compliance with agency directives, professional standards, legal requirements, settlement agreements or consent decrees, and/or any requirements or guidelines mandated by an external agency.

VI. PROCEDURES**A. Policy Access**

ODRC policies are public information and shall be made available upon request. The only exception to public access are the 310-SEC series policies, which are security related and are not public information and shall be kept confidential. When authorized, security policies shall only be printed and/or copied on goldenrod colored paper. Within institutions, each managing officer shall determine the distribution list for these restricted policies. These policies shall be maintained in a secure area and shall not be placed in population libraries or other unsecured locations. Security policies used in accreditation files must have the approval of the Bureau of Operational Compliance (BOC) chief.

B. New Policies and Operation Manuals

1. All employees are encouraged to participate in the formulation of ODRC policies, procedures, operation manuals, and related programs. The policy administrator/designee shall be responsible for coordinating the review and approval of all policy directives and operation manuals and shall serve as the chairperson of the Operation Support Center (OSC) in-person policy review.
2. No new policy shall be developed to address an issue if the subject matter is already contained in a current policy and/or a current policy can be reasonably revised to include the subject matter. Prior to drafting a new policy or operation manual, the drafter shall request approval from the deputy director for the Office of Policy and Strategic Initiatives via the policy administrator to start the process. This approval process shall be used to determine any overlaps or inconsistencies with existing policies or directives. The policy administrator, in collaboration with the project manager 2 for the Office of Policy and Strategic Initiatives, shall designate the policy owner for new or revised policies. New policies shall be routed and approved as described in subsections VI.C and VI.D of this policy.
3. Employees involved in drafting a new proposed ODRC policy or operation manual shall analyze and research the topic and solicit input from the significant stakeholders of the proposed policy or manual. The drafter shall also research any related Administrative Rules, ACA expected practices, or other existing directives and, if applicable, incorporate any necessary language to comply with such standards.
4. Operation manuals must be developed, reviewed, and approved through the same process used for the authorization of ODRC policies. Operation manuals not approved through this process shall be considered invalid and not authorized for use within the agency.

Any bureau, division, or office that would like to propose the development of an operation manual must first contact their respective deputy director for authorization. Once authorized, the drafter shall contact the deputy director for the Office of Policy and Strategic Initiatives via the policy administrator to proceed.

C. Policy Review and Revision

1. Each ODRC policy and operation manual shall be reviewed annually, divided into a quarterly review schedule (i.e., 1st quarter = January-March), which shall be posted on the ODRC Intranet. However, at any time during the year, employees may provide input concerning ODRC policies or operation manuals via e-mail by connecting to the ODRC Intranet and submitting an electronic comment. Policy owners are responsible for reviewing their assigned policies prior to the assigned quarter of review and submitting detailed comments through this electronic means prior to the first day of the quarter if it is determined a revision to the policy is warranted. The general public and/or volunteers may provide input regarding policy issues by directly contacting, via e-mail, the policy administrator (drc.policyreview@odrc.state.oh.us) or by utilizing the link provided on the ODRC Internet page (<http://www.drc.ohio.gov/policy/feedback>).
2. The policy administrator/designee will review submitted comments for revision considerations to an ODRC policy or operation manual as they are received, respond to the individual submitting the comment, and place the comment in the respective ODRC policy or operation manual folder on the shared annual-policy-review server (<\\codata\annual-policy-review>) for policy owner access prior to the start of the assigned revision period.
3. One (1) month prior to the start of the assigned quarter, the policy administrator/designee shall move a copy of the Word version of ODRC policies/operation manuals recommended for revision to the respective policy/operation manual folder on the shared annual-policy-review server. This copy shall have track changes locked. A notification email shall be sent by the policy administrator/designee to the policy/operation manual owner for all assigned policies/operation manuals with significant comments to initiate the revision process.
4. The policy owner shall have sixty (60) calendar days following the notification to consider and act on the policy, including submitting a policy revision for consideration. Operation manual owners shall have ninety (90) calendar days following the notification to consider and act on the operation manual, including submitting a manual revision for consideration. The policy administrator must be notified and grant approval for any extension to this deadline. If a policy revision has not been submitted by the established deadline and an extension has not been requested or granted, the annual review shall be considered complete and a subsequent revision to the policy will not be accepted without approval from the Director.
5. After review of all submitted comments, if the policy owner determines no revision is necessary, the policy owner shall notify the policy administrator/designee, complete an Impact Analysis (DRC1907) indicating no revision needed and submit it electronically to the policy administrator. The annual review shall be documented as complete. In the event the policy owner determines revisions are needed, they shall prepare a draft

revision of the policy utilizing the working policy draft in the annual-policy-review folder on the server within sixty (60) calendar days following receipt of the e-mail notification from the policy administrator/designee.

6. The policy owner shall respond to all submitted comments. The response shall be e-mailed directly to the individual who submitted the comment with a copy to the policy administrator. The response shall be professional and provide a brief explanation should a comment not be incorporated into the policy revision.
7. All ODRC policies shall be prepared on the approved ODRC Policy Template (DRC1361/DRC1362). Policy text shall be formatted in Microsoft Word, Times New Roman, font size 12. All paragraphs within the policy shall be formatted with a justified alignment. Track changes shall be utilized for revisions to existing ODRC policies and operation manuals. New language shall not be in all capital letters. If the revision is so extensive this practice is not feasible, the policy administrator/designee shall be notified for approval to deviate from this requirement.
8. The drafter and/or policy owner is responsible for carefully proofreading the proposed draft policy or operation manual revision prior to submission for applicability, clarity, conciseness, grammar, and punctuation. In addition, the drafter and/or policy owner is responsible for reviewing the entire policy for accuracy, not just the revised sections. The drafter and/or policy owner shall utilize the Policy Impact Analysis Writing Guidelines (Appendix A) as a resource.
9. An ODRC Policy Impact Analysis (DRC1907) shall be completed, to include appropriate signatures, via electronic forms for all ODRC policy and/or operation manual revisions and routed along with the draft revision to the policy administrator/designee. It is the drafter's and/or policy owner's responsibility to obtain the required signatures on the ODRC Policy Impact Analysis (DRC1907) before submitting it to the policy administrator/designee. The ODRC Policy Impact Analysis (DRC1907) shall be completed in its entirety showing the revision made to the policy, the factors supporting the revision, and the anticipated impact on ODRC operations.
 - a. The policy owner shall identify on the Impact Analysis (DRC1907) if proposed revisions are substantive or non-substantive (as defined in this policy).
 - b. Upon receipt of the policy draft and Impact Analysis (DRC1907), the policy administrator/designee shall make the final determination if revisions are non-substantive or substantive and establish the next step in the revision process for the policy.
10. Non-Substantive policy revisions will not be subject to OSC or Field Reviews. The policy administrator/designee shall prepare the policy for review and approval by the Legal Services designee on behalf of the ODRC Director.
11. OSC In-Person Policy Review

Upon receipt of a proposed ODRC policy or operation manual revision and the corresponding ODRC Policy Impact Analysis (DRC1907), the policy administrator shall

determine if the extent of revisions warrants an in-person OSC review with the appropriate stakeholders or if the policy may be set up for field review. The purpose of this review shall be to consider the proposed revision and its impact on overall agency operations. Unless extenuating circumstances exist, should an in-person OSC policy review be selected, attendance by the drafter and/or policy owner is required.

12. Field Policy Review

- a. Following review at the OSC level (if indicated), the drafted/revise ODRC policy or operation manual shall be updated by the policy administrator and/or policy owner, if necessary. The updated draft shall be posted on the ODRC Intranet for approximately fourteen (14) calendar days to allow for review by field staff. The policy administrator shall notify stakeholders by e-mail. The field PRT chairperson shall determine additional appropriate stakeholders at the local level who may not have been included in the initial notification or do not have access to e-mail and provide them the opportunity to review the posted ODRC policy or operation manual.
- b. Local stakeholders, field staff, and the field PRT chairperson shall forward comments to the policy administrator/designee using the same e-mail process utilized for earlier input.
- c. If suggested revisions are recommended during the field review, the policy administrator/designee shall respond, copy the recommendations, and place them in the respective policy/operation manual folder on the annual policy review server and notify the policy owner for revision considerations.
- d. The policy owner shall respond to all comments submitted during the field review period. The response shall be e-mailed directly to the individual who submitted the comment with a copy to the policy administrator/designee. For those comments not incorporated, the response shall provide a brief explanation as to why the submitted comment is not being incorporated into the policy revision.
- e. The drafter and/or policy owner/operation manual owner shall email the final revision (with edit marks) to the policy administrator/designee within fourteen (14) days of receipt of the field comments notification from the policy administrator/designee. If the final revision involves additional extensive revisions, an updated ODRC Impact Analysis (DRC1907) shall be completed, signed, and routed electronically to the policy administrator.

D. Approval and Implementation

1. Upon receipt of the final policy/operation manual revision, the policy administrator/designee shall prepare the policy for review by chief counsel/designee for approval.
 - a. Policy revisions identified as non-substantive shall be vetted by chief counsel/designee and approved on the Director's behalf.

- b. Upon receipt of chief counsel's/designee's approval notice for policies with non-substantive revisions, the policy administrator shall proceed with administration process as outlined in subsection VI.D.4 of this policy.
2. Upon receipt of chief counsel's/designee's approval notice for policy/operation manual revisions identified as substantive, the policy administrator/designee shall prepare the policy/operation manual for the Director's/designee's review for final approval. Operation manuals shall be reviewed by the appropriate deputy director for final approval and signature.
3. Upon approval of the ODRC policy or operation manual, the policy administrator/designee shall assign an effective date approximately thirty (30) calendar days from the date of the Director's/designee's approval and apply the Director's electronic signature. The effective date may be expedited under limited circumstances, based on operational need. All new or revised ODRC policies and operation manuals shall be available on the ODRC Intranet prior to their effective date unless an expedited effective date makes advanced posting infeasible.
4. The policy administrator/designee shall facilitate posting the new or revised ODRC policy on the ODRC Intranet and shall disseminate notice of such to all ODRC staff using the DRC – All Users distribution list. A version of the revised policy/operation manual with the edit marks still in place shall be attached to this email notification. It is the responsibility of the deputy directors, regional directors, and managing officers to ensure affected employees without e-mail access are provided appropriate notice of new or revised ODRC policies and operation manuals within their respective areas or institutions. Current ODRC policies and operation manuals shall remain posted and effective as normal until the revised policy takes effect. If circumstances occur where the current and revised ODRC policy and/or operation manual both remain posted on the intranet past the new/revised effective date, the revised policy is still effective, and the old policy is rescinded.
5. Institutions and parole regions shall be responsible for disseminating new or revised ODRC policies to volunteers and, when appropriate, incarcerated individuals prior to implementation. Guidelines for population access to ODRC policies are specified in ODRC Policy 58-LIB-01, Comprehensive Library Services.

E. Rescinding Policies

1. In the event an ODRC policy or operation manual is no longer needed, the appropriate deputy director, bureau chief, managing officer, or policy owner shall send a request to the policy administrator with a brief explanation as to the reason the policy should be rescinded. The policy administrator shall then consider the request and the impact rescinding the policy would have on agency stakeholders. Where appropriate, a request to rescind an ODRC policy or operation manual may be scheduled for an in-person OSC review.
2. If it is determined appropriate to rescind the ODRC policy, the request shall be forwarded to the Director/designee for consideration. If approved, the ODRC policy or operation manual shall be rescinded and notice provided consistent with this policy.

F. Policy Maintenance

1. The policy administrator/designee shall initiate and track the review of all ODRC policies and operation manuals each year. All ODRC policies and operation manuals shall be archived in OnBase by the policy administrator/designee.
2. Each managing officer shall conduct an annual review of all ODRC Human Resource policies and institution local policies. Recommended changes that affect ODRC Human Resource policies shall be submitted through the electronic comment process. The managing officer shall maintain a written, dated acknowledgement of all annual reviews conducted.

G. Policy Variance

1. A variance process is available to accommodate local facility or agency wide issues that arise and may require a facility or facilities to deviate from an ODRC policy, section of policy, or operation manual until the next scheduled annual revision is accomplished.
2. To be considered for a variance, a managing officer/designee shall request a waiver from an ODRC policy, in whole or in part, by completing an ODRC Policy/Operation Manual Variance Request (DRC1887) via electronic forms and routing it to the policy administrator. The ODRC Policy/Operation Manual Variance Request (DRC1887) must be detailed and specific as to why it is necessary for the facility or facilities to deviate from established policy. The specific ODRC policy/operation manual and section(s) must be noted. If the managing officer/designee requesting the variance is not the policy owner, input from the policy owner must be received before initiating the request. Additionally, the variance request shall be discussed with the Bureau of Operational Compliance (BOC) to ensure there is no violation of an ACA standard.
3. To facilitate staff input, non-urgent variances with ODRC wide impact shall be posted for a five-day field review prior to approval. The policy administrator shall share the field input with the managing officer/designee requesting the variance. Following the field review period, if held, the policy administrator shall consider and make a recommendation on the ODRC Policy/Operation Manual Variance Request (DRC1887). If the variance request is recommended, the policy administrator/designee shall obtain the recommendation of the appropriate deputy director or regional director and submit it for the final decision of the Director/designee. The policy administrator/designee shall be responsible for recording the effective and expiration dates on the approved variance. In most cases, the approved variance shall be effective on the date it is disseminated to staff and posted on the ODRC Intranet. The policy administrator/designee shall be responsible for the distribution and posting of the variance. The facility/facilities may not deviate from established ODRC policy and procedure while the variance request is under consideration unless temporary authorization has been granted in writing to address an urgent situation.
4. A copy of the approved ODRC Policy/Operation Manual Variance Request (DRC1887) shall be forwarded to stakeholders by the policy administrator/designee via email unless other distribution is warranted. Managing officers/designees shall be responsible for

ensuring employees without e-mail accounts are notified of the variance when warranted. All approved variances shall also be posted on the ODRC Intranet until the expiration date occurs. All approved variances shall be considered during the next annual review of the ODRC policy or operation manual and approved revisions shall be executed, where appropriate, to permanently accommodate the variance.

5. In the case where a variance is requested but is unnecessary to accommodate the issue, the policy administrator/designee may indicate such on the request. No further review shall be necessary.
6. All ODRC Policy/Operation Manual Variance Requests (DRC1887) shall be maintained by the policy administrator/designee and approved requests shall reflect the effective date of the variance and date of expiration, which shall be no later than the next annual review of the ODRC policy unless approved by the Director/designee.

H. Non-Routine Policy Revisions

In the event of a non-routine situation, the policy administrator/designee shall have the ability to coordinate an immediate ODRC policy revision outside of the annual review schedule using an abbreviated version of the policy process. This type of revision shall be extremely limited to only valid, urgent situations and only after the policy owner met with and received authorization from the policy administrator/designee to proceed with the revision.

I. ODRC Forms

1. Deputy Director/Designee Form Responsibilities
 - a. The appropriate deputy director/designee is authorized to approve the creation, revision, or deletion of all ODRC forms for his/her area of ownership.
 - b. All ODRC forms that relate to process dictated in ODRC policy must be appropriately cited in all related policies. It is the responsibility of the deputy director/designee of the area of ownership to determine all ODRC policies that may be impacted by a form creation, revision, or deletion and complete the necessary policy revision(s) in a timely manner.
2. The ODRC forms analyst will assign ODRC form control numbers to all department forms that:
 - a. Officially represent the department's actions, or
 - b. Have an average annual usage per facility/office/bureau/division of more than 1000, or
 - c. Has annual usage below 1000 but is used by several facilities/offices/bureaus/divisions (example – Monthly Reports).

When a form has been assigned a control number, the area of ownership (i.e., security) will also be recorded as the authority for future revisions.

3. Procedures for Creating a New ODRC Form
 - a. When the deputy director/designee determines a new form is necessary in their area of ownership, the managing officer/designee shall submit a request through ServiceNow (<https://stateofohio.service-now.com/ess>) for a new form. The request shall include:
 - i. A description of the intended purpose or function of the form, including verification that no current ODRC form exists to fulfill the purpose or function of the new requested form.
 - ii. The ODRC policy name and number associated with the form.
 - iii. Documentation that other ODRC areas impacted by the new form have been consulted.
 - iv. The name of a primary contact person from the area of ownership that can serve as a subject matter expert (SME) to assist the ODRC forms analyst in the design of the form.
 - b. Upon receipt of the managing officer's/designee's approved ServiceNow request, the ODRC forms analyst will contact the SME from the area of ownership to finalize the requirements for the new form. Using the requirements provided by the SME, the ODRC forms analyst shall prepare a formal draft of the new form for review, testing and approval by the SME in ServiceNow and, if necessary, other staff members from the area of ownership. After the draft form has been reviewed, finalized, and approved in ServiceNow, the ODRC forms analyst shall:
 - i. Assign an ODRC control number to the form,
 - ii. Begin the historical file to be maintained for the life of the form,
 - iii. Update the ODRC forms database, and sample file, used to create the Ohio forms resource posted on the ODRC Intranet site,
 - iv. If a printed form is to be ordered from Ohio Penal Industry (OPI), secure the necessary information from OPI, such as the form graphic or artwork and packaging unit/pricing,
 - v. Notify the deputy director/designee from the area of ownership and other appropriate parties impacted by the form of the creation and availability of the new form.
4. Procedures for Revising an Existing ODRC Form
 - a. ODRC forms associated with an ODRC policy that will change the intent of the policy shall only be revised during the policy's annual review/revision period unless a policy variance justifying the revision has been approved pursuant to section VI.G of this policy.
 - b. When the deputy director/designee determines a form must be revised in their area of ownership, the deputy director/designee shall submit a request through ServiceNow (<https://stateofohio.service-now.com/ess>) for the revision. The request shall include:
 - i. The ODRC policy name and number associated with the form,

- ii. A description of the requested revisions and the purpose for the revisions,
 - iii. Documentation that other ODRC areas impacted by the revisions have been consulted,
 - iv. The name of a primary contact person from the area of ownership that can serve as a subject matter expert (SME) to assist the ODRC forms analyst in the design of the form revisions.
 - c. Upon receipt of the managing officer's/designee's approved ServiceNow request, the ODRC forms analyst will contact the SME from the area of ownership to finalize the revisions for the ODRC form. Using the requirements provided by the SME, the ODRC forms analyst shall prepare a formal draft of the revised form for review and approval by the SME in ServiceNow and, if necessary, other staff members from the area of ownership. After the draft form has been reviewed, finalized, and approved in ServiceNow, the ODRC forms analyst shall:
 - i. Ensure the ODRC control number on the form is accurate and update it if necessary,
 - ii. If a printed form is to be ordered from OPI, secure the necessary information from OPI, such as the form graphics or artwork and packaging unit/pricing,
 - iii. Update the historical file to be maintained for the life of the form,
 - iv. Update the ODRC forms database, and sample file, used to create the Ohio forms resource posted on the ODRC Intranet site,
 - v. Notify the deputy director/designee of the area of ownership and other parties impacted by the form of the revision and availability of the revised form.
- 5. Procedures for Deleting an Existing ODRC Form
 - a. ODRC forms associated with an ODRC policy shall only be deleted from use during the policy's annual review/revision period unless a policy variance justifying the deletion has been approved pursuant to ODRC policy.
 - b. When the deputy director/designee determines a form must be deleted in his/her area of ownership, the deputy director/designee shall submit a request through ServiceNow (<https://stateofohio.service-now.com/ess>) for the deletion. The request shall include:
 - i. The ODRC policy and number associated with the form,
 - ii. A justification for deletion of the form,
 - iii. Documentation that other ODRC areas impacted by the deletion of the form have been consulted.
 - c. Upon receipt of the deputy director's/designee's approved ServiceNow request, the ODRC forms analyst shall:
 - i. Update and close the historical file to be maintained for the life of the form,
 - ii. Update the ODRC forms database, the sample file used to create the Ohio forms resource posted on the ODRC Intranet,
 - iii. Notify the managing officer/designee of the area of ownership and other parties impacted that the form has been deleted from ODRC service.

6. "SOFTWARE-X" and Counterfeit Forms

ODRC does not support "SOFTWARE-X" forms and counterfeit forms for legal and security reasons. Therefore, no "SOFTWARE-X" forms or counterfeit forms shall be created or used in place of existing official authorized ODRC forms for ODRC business purposes.

7. Departmental Policy Issues (Regarding Forms)

- a. All department forms that relate to a process dictated in ODRC policy must be appropriately cited in all related policies.
- b. Staff are not to use DRC1361 or DRC1362 to generate a draft of a new form. These are for creating policy and procedures only.
- c. During the annual policy review or the creation of a new policy, the reviewer or creator will check the policy for forms usage. Any ODRC policy that requires, refers to, mentions, or implies the use of a form, must identify that form by form number and title, at the bottom of the last page.

8. State Seal Usage (The Great Seal)

- a. The design of the great seal shall not be reproduced, except as required by any provision of the Ohio Constitution and the Revised Code, unless permission to do so is first obtained from the Governor of the State of Ohio.
- b. If a department seal is needed for publications or forms, a digitized file of the ODRC or APA–seal is available from the ODRC forms analyst by submitting a request through ServiceNow (<https://stateofohio.service-now.com/ess>).

Attachments:

Appendix A

Policy/Impact Analysis Writing Guidelines

Referenced Forms:

DRC Policy Template	DRC1361/1362
DRC Policy/Operations Manual Variance Request	DRC1887
DRC Policy/Operations Manual Impact Analysis	DRC1907

**Appendix A
(01-COM-01)**

Writing or Revising ODRC Policy Directives/Impact Analysis

Policy

1. Review the entire policy for accuracy. Policy owners are responsible for all language in the policy. Do not just focus on a specific section as there may be other language in the policy that needs updated as well. For example, all references to Central Office must be changed to Operation Support Center.
2. Pay attention to the deadline for policy revisions as it enables related policies to be scheduled together for reviews.
3. Policy drafts must be developed using the most current, up to date, ODRC policy template. The current template is (DRC1361/1362 rev. 12/17). If the previous policy was developed in an outdated format, the policy owner is responsible for transitioning the policy into the current, approved format.
4. Policy text shall be formatted in Microsoft Word, Times New Roman, font size 12. All paragraphs within the policy shall be formatted with a justified alignment.
5. When revising a policy, track changes shall be utilized. New language will automatically change in font color and deleted language will automatically strikethrough. Do not use all capital letters.
6. Review the use of the term “should” or “may” vs. the term “shall”. Using the term “should” or “may” implies that you should do something, but it is not always required, whereas “shall” implies that you must do it.
7. Review the use of the terms warden and deputy warden of Special Services, Operations, and/or Administration. Instead of warden, the term managing officer is more appropriate. Also, not all institutions have a DWSS, DWO, or DWA; therefore, it is more appropriate to use the language “responsible deputy warden”.
8. Review the use of the terms unit management administrator and/or major. Those positions are now unit management chief and/or security chief. Additionally, all references must be changed to Operation Support Center as opposed to Central Office. Inmate shall be replaced with incarcerated individual or incarcerated person where applicable.
9. Any related legislation or administrative rule must be properly cited in the header of the policy.

10. Appropriate ACA Expected Practices (Standards) must be cited in the header of the policy. The ACA Expected Practices listed in the policy header must match the policies cited for that Expected Practice in the approved ODRC Documentation Lists. When the revision to ODRC Policy will impact the ODRC Documentation Lists, the BOC chief must be consulted prior to revising the policy.
11. Ensure the Applicability Statement is accurate and lists any facilities/entities that should be exempted from the policy requirements. The Applicability Statement must correspond to the response for Question Three on the Impact Analysis.
12. Definitions/Terms must be listed in alphabetical order with the term underlined. Do not define positions or forms in policy; however, roles may be defined. For example, Volunteer Coordinator may be defined because that is a role of a staff person and not their actual position. Do not define terms that are not specifically referenced within the policy language. Ensure all definitions/terms are up-to-date as they are placed in the spreadsheet provided at the top of the policies page. As policies are approved (2021/2022), definitions for listed terms are removed and placed in the spreadsheet by the policy administrator.
13. The policy statement must start with the phrase "It is the policy of the Ohio Department of Rehabilitation and Correction...." This phrase shall not be abbreviated or altered.
14. When using an acronym, the policy owner must first write out the entire title within the body of the policy, immediately followed by the acronym in parenthesis. Only then may an acronym be used throughout the remainder of the directive. Example: Rules Infraction Board (RIB)
15. When referring to another ODRC policy within the body of a policy, the full name of the related policy and policy number must be cited in the following format: "The reception center shall ensure all documents detailed in ODRC Policy 07-ORD-09, Education Records for Incarcerated Individuals, are included." Do not repeat procedure or practice if it is already covered in another ODRC policy, protocol or administrative rule. Refer to the respective policy, protocol, or administrative rule where necessary.
16. Policies are not to contain a training component without the express approval of the Corrections Training Academy (CTA) superintendent/designee.
17. When referring to an ODRC form within the body of a policy, the full name of the form and form number must be cited. For example: "The managing officer shall request a waiver by completing an ODRC Policy/Operation Manual Variance Request (DRC1887) and routing it to the policy administrator."
18. All ODRC forms cited within the policy must be listed at the end of the policy in the format below. Do not list forms at the end of the policy that are not referenced in the policy.

Impact Analysis

1. An ODRC Policy/Operation Manual Impact Analysis (DRC1907) must be completed when creating or revising any ODRC Policy or Operation Manual. When creating a new directive, the Impact Analysis (DRC1907) shall include a review of the impact the new directive will have on the agency. When the owner is revising a directive, the Impact Analysis (DRC1907) shall only include a review of the impact that the proposed revision will have on the agency.
2. Be thorough in answers.
3. At times, the practice is already in place and the policy is being revised to reflect the current practice. If that is the case, it should be stated in Question One.
4. If policy comments were received but not incorporated in the policy revision, an explanation must be provided in the appropriate section on the first page.
5. The response in Question Three must match the Applicability Statement of the policy. Be sure to consider all areas of our agency. For example, does the policy only apply to institutional staff? All DPCS staff? APA staff only? CTA? OPI? Does it apply to incarcerated individuals, contractors, interns, and/or volunteers? The existing Applicability Statement in the policy may need to be revised if it is not accurate.
6. If the revision requires a change to ODRC forms, ensure the response states whether the forms are electronic/paper and if the existing forms can be used until depleted. Draft revisions of the form/s shall be included with the policy revision being submitted.
7. If the proposed revision has an effect on any other areas of the agency, ensure any discussion held with those other areas is documented. Be specific as to with whom it was discussed.
8. If the proposed revision will require staff training, ensure CTA was contacted regarding the training? Who will provide the training, etc.