



A Joint Committee of the Ohio General Assembly

DAYTON CORRECTIONAL INSTITUTION INSPECTION REPORT

AUGUST 2020

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TABLE OF CONTENTS

SUMMARY	2
SAFETY & SECURITY	5
A. Violence Outcome Measures	
B. Use of Force	
C. Control of Illegal Substances	
D. Offender Perception of Safety	
E. Unit Security Management	
F. Institutional Security Management	
G. Prison Rape Elimination Act (PREA)	
HEALTH & WELLBEING	11
A. Unit Conditions	
B. Medical Services	
C. Mental Health Services	
D. Recovery Services	
E. Food Services	
F. Recreation	
FAIR TREATMENT	16
A. Staff/Offender Interactions	
B. Inmate Grievance Procedure	
C. Offender Discipline	
REHABILITATION & REENTRY	19
A. Reentry Planning	
B. Rehabilitative Programming	
C. Family Engagement and Community Connections	
D. Academic Programming	
E. Library Services	
F. Vocational and Work Skill Development	
FISCAL ACCOUNTABILITY	23
A. Fiscal Wellness	
B. Environmental Sustainability	
C. Staff Management	
ENDNOTES	28

REPORT ON THE INSPECTION & EVALUATION OF DAYTON CORRECTIONAL INSTITUTION

Date of Inspection:	August 19, 2020
Type of Inspection:	Announced
CIIC Staff Present:	Travis Ricketts, Deputy Director (Remotely) Rachel Helbing, Sr. Analyst, Report Coordinator (Remotely) Jeffrey Noble, Senior Analyst (In-Person) Elijah Woodberry, Analyst (Remotely)
Facility Staff Present:	Warden Shelbie Smith CIIC spoke with many additional staff throughout the course of the inspection.

Institution Overview

Dayton Correctional Institution (DCI) is one of three female prisons that are run by the Ohio Department of Rehabilitation and Correction (DRC). DCI predominately houses Level 1 (minimum), Level 2 (medium), and Level 3 (close) security offenders. DCI opened in 1987 as a male facility and was converted to a female facility in 2011. The institution is located on 75 acres in Dayton, Ohio. In FY 2020, DCI was approved for a budget of \$26,368,398.

The rated capacity for DCI is 500. As of August 19, 2020, the institution housed 792 offenders.

Demographically, 61.0% of offenders were classified as white, 37.9% as black, and 1.1% as another race. The youngest offender was listed as 19 years of age and the oldest was listed as 77 years of age. The average offender age was 35.6 years. As of August 2020, DCI employed 251 total staff, of which 134 are officers.

The institution scored 100% compliance on the May 14-16, 2018 ACA audit for 57 applicable, mandatory standards, and 99.76% on the 422 applicable, non-mandatory standards. The area of non-compliance was for unencumbered space in cells.

In its August 6-7, 2019 full internal management audit, DCI was 100% compliant on the 58 applicable, mandatory standards and 99.6% compliant on the 448 applicable, non-mandatory standards. Of the Ohio Standards, the facility was 93.8% compliant on the 97 applicable standards. The areas of non-compliance were related to unencumbered space in cells, documentation of warehouse storage temperatures, healthcare, and asset management.

FACILITY RATINGS

Ratings are a four point scale based on the balance of the indicator ratings for that area. A rating of “Exceptional” for an indicator means that there is no room for improvement and, generally, that the facility performs above other prisons. A rating of “Good” for an indicator means that the prison more than meets the standard, but is not significantly better than other prisons or there is still room for improvement. A rating of “Acceptable” for an indicator means that the prison just meets the standard or meets the standard with minor exceptions. A rating of “In Need of Improvement” for an indicator means that the prison does not meet standards, is significantly different from other prisons in a negative manner, or that CIIC staff had serious concerns.

	2017	2020
SAFETY & SECURITY	ACCEPTABLE	GOOD
<i>Violence Outcome Measures</i>	<i>In Need of Improvement</i>	<i>Acceptable</i>
<i>Use of Force</i>	<i>Good</i>	<i>Good</i>
<i>Control of Illegal Substances</i>	<i>Exceptional</i>	<i>In Need of Improvement</i>
<i>Offender Perception of Safety</i>	<i>Good</i>	<i>Exceptional</i>
<i>Unit Security Management</i>	<i>In Need of Improvement</i>	<i>Good</i>
<i>Institutional Security Management</i>	<i>Exceptional</i>	<i>Good</i>
<i>Prison Rape Elimination Act</i>	<i>Good</i>	<i>Good</i>
HEALTH & WELLBEING	ACCEPTABLE	GOOD
<i>Unit Conditions</i>	<i>Good</i>	<i>Good</i>
<i>Medical Services</i>	<i>Acceptable</i>	<i>Good</i>
<i>Mental Health Services</i>	<i>Acceptable</i>	<i>Acceptable</i>
<i>Recovery Services</i>	<i>Acceptable</i>	<i>Acceptable</i>
<i>Food Services</i>	<i>Acceptable</i>	<i>Good</i>
<i>Recreation</i>	<i>Good</i>	<i>Good</i>
FAIR TREATMENT	GOOD	GOOD
<i>Staff/Offender Interactions</i>	<i>Acceptable</i>	<i>Good</i>
<i>Inmate Grievance Procedure</i>	<i>Good</i>	<i>Acceptable</i>
<i>Transitional Program Unit</i>	<i>Good</i>	-
<i>Limited Privilege Unit</i>	<i>Good</i>	-
<i>Offender Discipline</i>	-	<i>Good</i>
REHABILITATION & REENTRY	GOOD	ACCEPTABLE
<i>Reentry Planning</i>	<i>Good</i>	<i>Acceptable</i>
<i>Rehabilitative Programming</i>	<i>Acceptable</i>	<i>Acceptable</i>
<i>Family Engagement & Community Connections</i>	<i>Good</i>	<i>Acceptable</i>
<i>Academic Programming</i>	<i>Good</i>	<i>Good</i>
<i>Library Services</i>	<i>Good</i>	<i>Good</i>
<i>Vocational & Work Skill Development</i>	<i>Good</i>	<i>Acceptable</i>
FISCAL ACCOUNTABILITY	ACCEPTABLE	GOOD
<i>Fiscal Wellness</i>	<i>Acceptable</i>	<i>Good</i>
<i>Environmental Sustainability</i>	<i>Good</i>	<i>Good</i>
<i>Staff Management</i>	<i>Acceptable</i>	<i>Acceptable</i>

INSPECTION OVERVIEW

Preparation for the inspection of Dayton Correctional Institution took place in the week prior to site visitation. The most recent inspection of the facility, completed in 2017, was reviewed to identify areas of previous concern or praise. The CIIC database of concerns received from offenders, constituents, and staff was analyzed for topics of frequent concern. CIIC members and staff were notified of the upcoming inspection.

Facility staff were notified of the inspection during the week prior to visitation. At this time, an email was sent to administrative staff outlining the documentation and data that would be requested over the course of the inspection, as well as a description of the modified inspection process:

“With the goal of reduced impact on facility operations, the in-person inspection process was adapted to be completed by a single CIIC staff member within a half day. CIIC recognizes that DRC facilities have staff in cohorts for portions of the prisons to reduce the potential for cross-contamination. The in-person inspector works with facility staff to identify the appropriate cohort that will allow for the fulfillment of observational requirements. Additional interviews will be conducted via phone call with one of three CIIC remote inspectors.”

The day of inspection, Wednesday, August 19, 2020, consisted of an opening meeting between the in-person inspector and Deputy Warden, followed by a facility tour. Areas inspected included: visiting room, food service, mental health department, medical department, Raiders 1 and 2 unit, recreation department education department, and operation administrative area. A close-out meeting was held by the CIIC inspector and Deputy Warden prior to departure (Warden via phone). Each remote inspector completed telephone interviews with staff in various positions. Facility staff were hospitable to the CIIC inspectors, and their adaptability to the hybridized inspection process was greatly appreciated.

The conclusion of the inspection brought CIIC staff members and executive facility staff for a virtual close-out discussion. CIIC staff shared observations from each area inspected, including recommendations for improvements and positive remarks. CIIC additionally thanked the facility staff for their hospitality and assistance throughout the inspection process.

An initial inspection report draft was provided to Warden Smith and her staff on September 18, 2020 as an opportunity to review and notify CIIC staff of any discrepancies. A teleconference meeting between CIIC and facility staff was held on September 28, 2020 to finalize the inspection report draft.

SAFETY & SECURITY: GOOD

Expectation: Prisons will provide a safe and secure environment for all offenders.

SAFETY & SECURITY	2017 ACCEPTABLE	2020 GOOD
Violence Outcome Measures	In Need of Improvement	Acceptable
Use of Force	Good	Good
Control of Illegal Substances	Exceptional	In Need of Improvement
Offender Perception of Safety	Good	Exceptional
Unit Security Management	In Need of Improvement	Good
Institutional Security Management	Exceptional	Good
Prison Rape Elimination Act	Good	Good

KEY FINDINGS

While assault numbers are high in comparison to other female facilities, occurrences have decreased recently. Positive drug screenings have increased within the past 3 years and rates are higher than the DRC average. Survey responses noted that drug activity was a large problem at the institution. Offender perception of safety is exceptionally high, and has improved since last inspection.

VIOLENCE OUTCOME MEASURES: ACCEPTABLE

Evaluation of violence focuses on the number and rate of disciplinary convictions for assaults, fights, the number of homicides, and disturbances at the institution during a year in comparison to the previous year; the comparator prison rate; and the DRC average.

Assaults

The occurrence of offender disciplinary convictions for causing or attempting to cause physical harm to another (Rules 3 & 4) decreased by 65.7% during CY 2019 (#24) in comparison to CY 2018 (#70). There has been 9 violations in 2020 to date.

	2017	%	2018	%	2019*
Inmate on Inmate	106	-39.6	64	-56.3	28
Inmate on Staff	25	-64.0	9	+133.3	21

**2019 numbers are preliminary and are subject to modification by DRC Central Office, Bureau of Research.*

Comparator Inmate-on-Inmate and Inmate-on-Staff Assaults

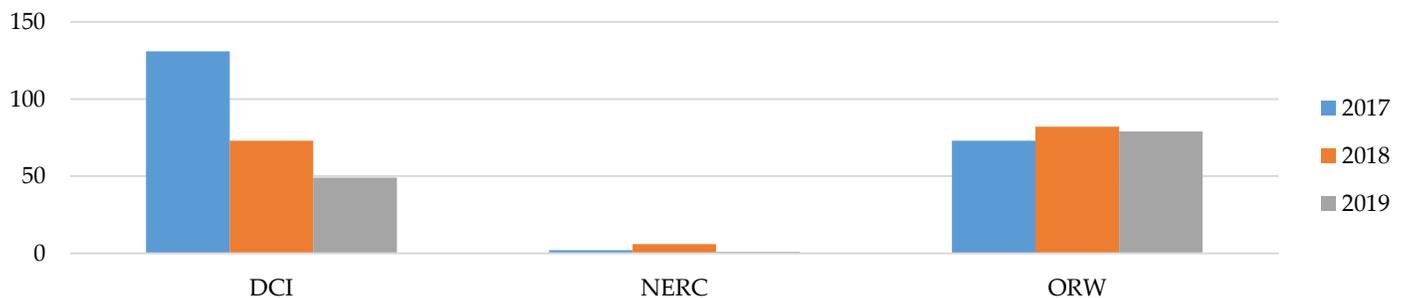
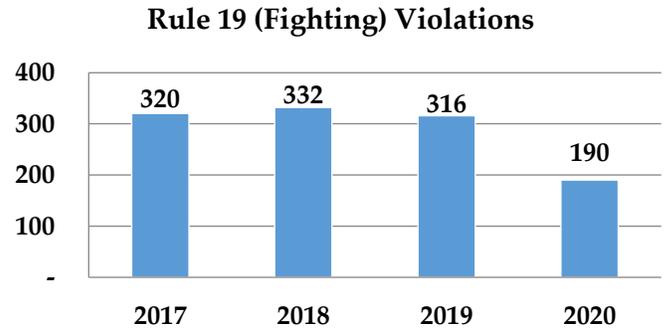


Figure 1: The total combined "inmate on inmate" and "staff on inmate" assaults are graphed above for data collected from 2017-2019 for all DRC female institutions.

Fights

Fights¹ are documented via RIB convictions for rule 19 (fight) violations. At the time of inspection there were 190 rule 19 violations. There were 332 convictions in 2018, and 316 convictions in 2019 for fight violations at DCI.



Homicides

There were no homicides during the period evaluated (2017 to date).

Disturbances²

No disturbances were noted in 2019 or to date in 2020.

USE OF FORCE: GOOD

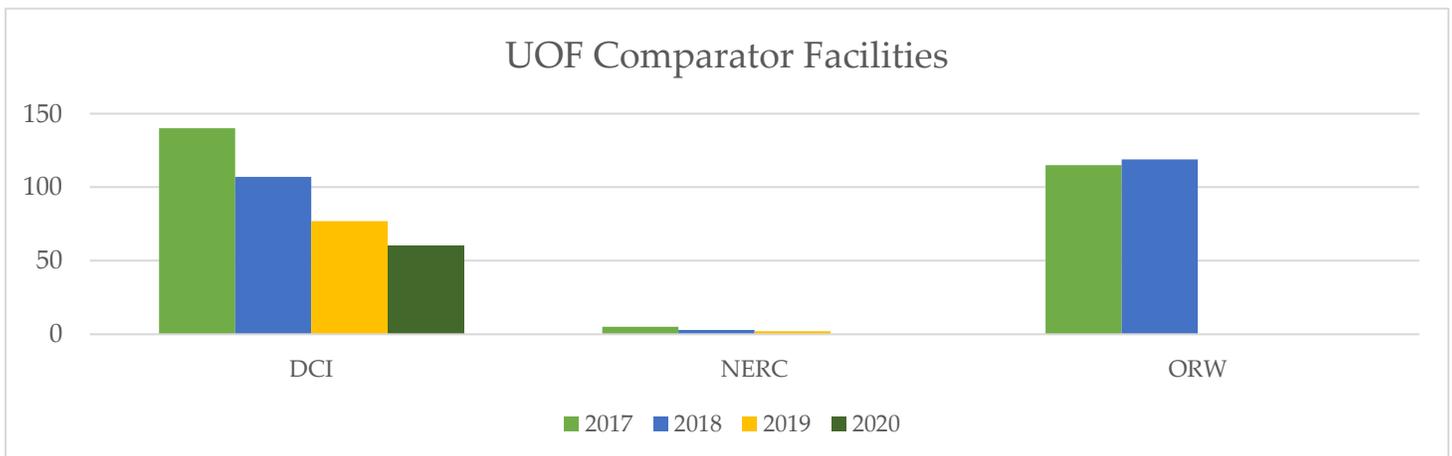
Evaluation of use of force focuses on the number of uses of force at the institution as well as an evaluation of a random sample of 20 completed use of force reports.

Incident Caseload

During CY 2019, the facility reported 77 use of force incidents. Compared to CY 2018, in which 107 uses of

force were reported, total uses of force decreased by 28%.³

DCI UOF	2018	%	2019	%
	107	-23.6	77	-28



Procedural Accountability

Video documentation was available on all 13 incidents reviewed. Two incidents required referral to a use of force committee/ investigator. Officer statements reviewed were generally thorough and clearly stated

directives given prior to force. The required documentation was completed and included in the packets. One offender provided no statements or refused a use of force statement. Offenders were

generally seen by medical within an hour following the use of force incident. Three medical examinations were completed later than the hour requirement. All 13 use of force incident recordings were watched through completion and no issues were noted.

Application of Force

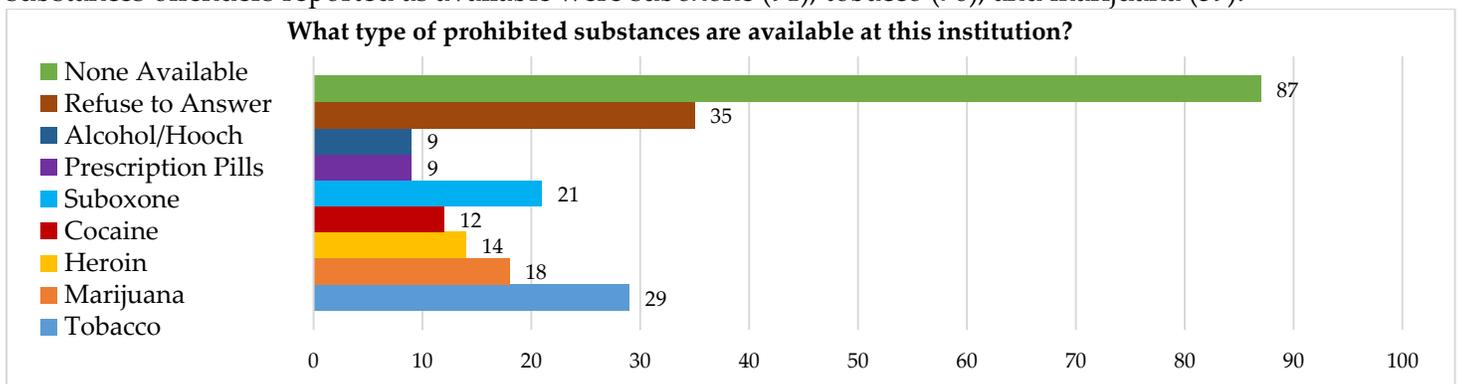
Officer responses to incidents generally appeared appropriate. There were very few injuries, all of which were minor and consistent with the level of force.

CONTROL OF ILLEGAL SUBSTANCES: IN NEED OF IMPROVEMENT

Evaluation of control of illegal substances focuses on the percentage of offenders who tested positive for an illegal substance at the institution during a year in comparison to the previous year and the comparator prison rate.

Random Drug Testing	2017		2018		2019	
	# Tested	% Positive	# Tested	% Positive	# Tested	% Positive
Dayton Correctional Institution	298	0.0	341	2.1	458	6.8
Northeast Reintegration Center	242	0.0	296	0.0	475	0.0
Ohio Reformatory for Women	1573	1.7	1780	1.7	1705	0.3
Program Drug Testing						
DCI	137	0.7	141	1.4	130	7.7
For Cause Drug Testing						
DCI	67	20.9	81	17.3	110	40.9

DCI has transitioned from a level ½ institutions to a partial level 3 institution in recent years, which may account for a 4.7% increase in positive drug tests. 11% of the offender survey respondents indicated that drugs were not available at the institution. In response to CIIC’s survey question pertaining to prohibited substances, the top substances offenders reported as available were suboxone (91), tobacco (76), and marijuana (59).



Rule 39 (Possession or Use of Illegal Substance)

	DCI	NERC	ORW
2019	120	2	73
2018	77	7	115
2017	53	2	60

OFFENDER PERCEPTION OF SAFETY: EXCEPTIONAL

Evaluation of offender perception of safety focuses on survey responses and the number of refusals to lock for personal safety reasons.

Offender Survey Question(s)	Safe or Neutral	Total Number of Respondents	Change from Previous Inspection
<i>Do you feel safe/neutral/unsafe from other inmates here?</i>	92.0%	N=200	+8.5%

A few open-ended offender survey responses indicated safety as a positive aspect of the institution. Additionally, open-ended officer's surveys indicated that safety as a positive aspect of the institution. The institution had no offenders under investigation for Protective Custody at the time of inspection.

UNIT SECURITY MANAGEMENT: GOOD

Evaluation of unit security management focuses on policy compliance for officer rounds, documented shakedowns, cell/bunk security, and security classification/ privilege level reviews.

Officer Rounds

Officers were consistent in documenting security rounds in the requisite 30 minute, staggered intervals.

Security Classification

Unit staff are required to conduct reviews of offenders' security classification to ensure proper institutional placement. There were no overdue security classification reviews unaccounted for on the day of the inspection, which is exceptional.

Cell/Bunk Searches (Shakedowns)

Housing unit officers are required to search offenders' bunks/cells for contraband, including illegal drugs and weapons. Officers were consistent for the documentation of required shakedowns.

Cell⁴/Bunk⁵ Security Check

Cell security indicated good security and visibility. It was apparent that offender property limits were being enforced at the facility.

INSTITUTIONAL SECURITY MANAGEMENT: GOOD

Evaluation of security management focuses on: executive staff rounds, critical incident management, STG management, and escapes.

Executive Staff Rounds

Pre-COVID: Executive staff members⁶ are consistent in making the required rounds in housing units based on a review of employee sign-in logs. During the COVID cohort process executive staff were exceptionally performing this task as a measure to reduce the spread of COVID-19 within the institution.

critical information to be communicated for awareness.

STG Management

Rule 17 Violations	2017	2018	2019
Dayton Correctional Institution	9	3	5
Northeast Reintegration Center	0	0	0
Ohio Reformatory for Women	1	4	8

Violent Incident Management

Due to COVID countermeasures, roll call was moved to an electronic fashion that received mixed reviews from interviewed officers. This practice allows for

As of July 2020, there were 53 STG-affiliated offenders, which was 6.7% of the institutional population. The number of STG-affiliated offenders was similar in comparison to the number on the 2017 inspection, which was 61 offenders (6.4%).

	Dec 2017	Dec 2018	Current
STG-Affiliations	6.7% of population	5.8% of population	6.7% of the population

The number of rule 17 (unauthorized group activity) convictions⁷ increased by 2 in 2019. The rule 17 convictions were 3 in 2018 and 5 in 2019 and 4 in 2020 to date.

The last six months of the Security Threat Meetings were provided and it indicated that no major STG issues were currently occurring at the facility. The responses provided in the offender survey indicated that 103 offenders indicated that there were no major gang related concerns at the institution. Of the issues identified in the survey drug trade (57), gambling (47), and extortion (38) were the most prevalent concerns.

PRISON RAPE ELIMINATION ACT (PREA): GOOD

Evaluation of the institution's compliance with the Prison Rape Elimination Act (PREA) focuses on a review of the most recent PREA audit report, education and awareness of reporting, the number of reported sexual assaults, and offender responses.

PREA Management

The August 8, 2019 Internal Management Audit found no Ohio PREA related standards in non-compliance.

The facility exceeded 14 and met all remaining standards (45) on its May 2018 PREA audit.⁸ There were 4 recommendations noted on the inspection, which were adding mirrors in the laundry and warehouse, making rounds less predictable, and adding the crisis center phone number to more posters.

Offender Education and Awareness

PREA posters, with information for offenders on reporting of sexual assaults, were posted in all housing units.

Volunteers are provided with training on PREA before starting, including a video and discussion with the Operational Compliance Manager/Volunteer Coordinator.

Offender Survey Question(s)	Yes	Total Number of Respondents	Change from Previous Inspection
<i>Do you know how to report sexual harassment or abuse?</i>	92.0%	N=199	+6.6%

Investigations/Allegations

Staff reported there were 9 PREA cases in CY 2019, of which 8 were allegations against another offender and 1 was an allegation against a staff member.

	2018	2019
Total Alleged Incidents	23	9
Outcomes	16 unsubstantiated 7 unfounded 0 substantiated	7 unsubstantiated 2 unfounded 0 substantiated

Offender Survey Question(s)	Yes	Total Number of Respondents	Change from Previous Inspection
<i>Have you been harassed or threatened by other inmates here?</i>	34.8%	N=198	-2.7%
<i>Have you ever been abused by inmates here?</i>	17.1%	N=199	-4.0%
<i>Have you been harassed or threatened by staff here?</i>	40.7%	N=199	-2.8%
<i>Have you ever been abused by staff here?</i>	12.6%	N=198	-3.5%

HEALTH & WELLBEING: GOOD

Expectation: Prisons will provide sanitary conditions and access to adequate healthcare and wellness programming.

HEALTH & WELLBEING	2017 ACCEPTABLE	2020 GOOD
<i>Unit Conditions</i>	<i>Good</i>	<i>Good</i>
<i>Medical Services</i>	<i>Acceptable</i>	<i>Good</i>
<i>Mental Health Services</i>	<i>Acceptable</i>	<i>Acceptable</i>
<i>Recovery Services</i>	<i>Acceptable</i>	<i>Acceptable</i>
<i>Food Services</i>	<i>Acceptable</i>	<i>Good</i>
<i>Recreation</i>	<i>Good</i>	<i>Good</i>

KEY FINDINGS

Mental health services had multiple vacancies, which may impact access to quality care.

Recovery services had multiple vacancies, which may impact access to quality programming and treatment.

Offenders had a low perception of access to recovery services programming.

The facility had recently received all new recreational equipment.

UNIT CONDITIONS: GOOD

Evaluation of unit conditions consists of direct observation of unit conditions.

The offender housing at DCI consists of eight celled blocks/units (F1, F2, M1, M2, R1, R2, T1, and T2). Seven of the units consist of general population. DCI also has a Transitional Program Unit (TPU) in M2, which is further explained in the Fair Treatment section of the report. Due to COVID restrictions, only two housing units (R1 and R2) were visited on inspection.

Dayrooms/common areas were exceptional or good based on the cleanliness of the floors and their overall appearance. 82.4% of offenders surveyed (n=199) believe their housing unit is clean on most days.

During the inspection, unit staff reported some maintenance concerns but relayed that work orders were placed and being fulfilled. The work order delays were generally due to a part needed purchased and delivered. Additionally, the shower conditions were generally good.

The laundry areas were reviewed and all washers and dryers were in working order. All phones, ice machines, and drinking fountains were in working order. Cleaning materials matched the inventory and were appropriately secured.

MEDICAL SERVICES: GOOD

Evaluation of medical services is comprised of an offender focus group, a conversation with the Health Care Administrator, and a tour of the medical facilities.

Facilities

The medical facilities were observed to be in proper condition. The facility appears to have sufficient space

for staff to conduct clinical duties. Staff reported the space to be sufficient and kept at a high level of

cleanliness. Offender porters follow a cleaning schedule and are available for additional duties.

Access to Medical Services

Health Service Request forms were noted to be available in all of the housing units. Offenders entering the institution are provided written and verbal instructions on how to access medical services, including the use of a Health Service Request (HSR). Due to the restrictions implemented in response to COVID-19, chronic care appointments were at a 3-month backlog at the time of inspection. Offenders with low control over their condition(s) are prioritized and not included in this backlog. Prior to COVID-19, there was no backlog.

Staffing

The facility appears to have a sufficient number of medical staff. There was one vacancy at the time of the

inspection for an LPN. Some nurses expressed concern with the low number of nurses on second shift, particularly on weekends. Contracted staffing consists of Medical Health Information Technicians, Dental staff, a Phlebotomist, and a Registered Nurse.

Quality

An internal management audit was conducted August 2019 and found five Ohio standards in noncompliance. Medical staff relayed that they participate in quarterly interdisciplinary meetings and ad-hoc meetings with offenders, which is in compliance with DRC policy. There has been one offender death since January 2017, which was unexpected. Staff are trained on emergency equipment and response every year, and take part in drills on a quarterly basis.

Offender Survey Question(s)	Satisfied or Neutral	Total number of Respondents	Change from Previous Inspection
<i>How satisfied are you with the quality of the care you get from the nurses?</i>	81.6%	N=196	+10.2%
<i>How satisfied are you with the quality of the care you get from the Doctor/ALP?</i>	60.1%	N=193	+5.3%
Within 2 days			
<i>On average, when do you see the nurse after filing a health service request (sick call slip)?</i>	46.2%	N=184	-12.6%

Sick Call & Chronic Care

Number of offenders seen in last 6 months			
<i>Nurse Sick Call</i>	1,224	<i>Doctor Sick Call</i>	224
<i>Chronic Care Caseload</i>	381	<i>Appointments in last 6 months</i>	323

Offender Survey Questions	Yes	Total Number of Respondents	Change from Previous Inspection
<i>If you are on the chronic care caseload, do you see medical regularly?</i>	56.1%	N=107	-17.4%

MENTAL HEALTH SERVICES: ACCEPTABLE

Evaluation of mental health services focuses on cleanliness of facilities, staffing, access to mental health staff, programming, and critical incident data in addition to quality of services.

Caseload

	Total	598	C1 / Seriously Mentally Ill (SMI)	306
	Offenders on Medication	292	On Mandated Medications	0

Facilities

The mental health facilities were observed to be clean and orderly. A tour of the complete facility was completed. The crisis cells located in the infirmary and transitional programming unit were observed in use and were noted to be in good condition with adequate visibility for observation.

Access to Mental Health⁹

498 kites have been processed in the last 6 months. There were 3 informal complaints regarding mental health in the 6 months prior to inspection. The institution made 28 mental health referrals for offenders in the last 3 months.

Staffing

Staffing levels included a psychiatrist, two psychologists, one APN-MH, one LSW, two LISW's, two contracted SW's, one mental health administrator, 2 RN's, one QIC, and one HIT. There were three vacancies at the time of the inspection: two BHP-2's, and one SW.

Quality

A full internal management audit was conducted in August 2019. The auditors relayed one observation related to mental health services.

Offender Survey Question(s)	Satisfied or Neutral	Total number of respondents	Change from Previous Inspection
<i>Overall, how satisfied are you with the quality of the care you get from Mental Health?</i>	68.6%	N=137	-8.0%

Programming

DCI offers a broad range of mental health programming for offenders. At the time of the inspection, nine programs based in evidence were facilitated by staff. These programs have been on hold since March 2020 due to coronavirus concerns. Staff provides SAMI programming to offenders with substance abuse and mental illness complexities.

In the past three months, no group treatment programs have been completed. Group programming is being re-established in September

2020 with smaller offender numbers. Offenders are being seen individually in the unit and mental health staff have been making unit rounds daily in their assigned cohorts.

Suicide Attempts / Critical Incidents

Since January 2019, there have been no completed suicides, no suicide attempts, and 12 incidents of self-injurious behavior. From January 2019 to the inspection date of August 19, 2020, the facility had 88 offenders placed on constant watch, and 20 on observation status.

RECOVERY SERVICES: ACCEPTABLE

Evaluation of recovery services focuses on cleanliness of facilities, staffing, participation and outreach of offenders, and access.

Facilities

The recovery service facilities were noted to be clean and organized. The facility appears to have sufficient space for staff to conduct clinical duties. DCI has a designated recovery services housing unit, Raiders.

Staffing

Staffing levels appear sufficient to provide adequate recovery service programming. There were two staff vacancies at the time of the inspection. There were six counselors and one administrator. DCI has four consistent community volunteers that facilitate AA/NA programming on a weekly basis. Four offender graduates assist in facilitation of AA/NA.

Access

Staff relayed multidisciplinary meetings occur quarterly through the QIC (Quality Improvement Committee) process which is within policy.¹⁰ DCI reported 138 offenders are currently assessed and participating in recovery service programming with 150 offenders on the waitlist.

Participation and Outreach¹¹

DCI's recovery service department works alongside mental health and security departments in a collaborative manner. Interdisciplinary meetings are held on a quarterly basis, per policy. Recovery Services does offer a Substance-Abusing-Mentally-Ill (SAMI) group for dual diagnosis, working with the Mental Health Department.

DCI recovery service department offers programming to include: Intensive Outpatient Program, Intervention Program, Medical Assisted Treatment, and a Residential Treatment Unit (LOTUS). Group programming was suspended in March 2020 and plans to resume in September 2020. The recovery service department does reach out to offenders who are found guilty of Rule 39's¹² and has group programming conducted with offenders in the Transitional Programming Unit (TPU).

Offender Survey Question(s)	Yes	Total number of respondents	Change from Previous Inspection
<i>Do you feel you are able to get into recovery services programs?</i>	34.9%	N=152	-16.2%

FOOD SERVICES: GOOD

Evaluation of food services included eating the offender meal, an observation of the dining hall, food preparation area, the loading dock, interview with the Food Service Manager, and a documentation review.

Dining Hall

The tables and the floor of the dining halls were clean and clear of debris. The serving lines were also clear of food particles.

Kitchen and Food Preparation Area

The kitchen area appeared clean, cooking equipment appeared clean while in use, and stored equipment

was clean and orderly. Staff relayed that equipment is sanitized at the beginning of each day, after every use, and at the end of each day. Additionally, the preparation area is cleaned on a consistent, daily basis. The freezers and coolers appeared to be exceptionally orderly. One cooler was out of order; however, a work order had been placed and it had only been out of service for two days.

Offender Work Programs

Staff reported there are currently 25 offender food service workers. Offenders earn \$18-20 monthly. On the day of the inspection, there were no offenders enrolled in the IN-2-WORK program, which is provided by Aramark and includes both a classroom component and on-the-job training. The curriculum is tailored to the special needs of offenders, including classroom instruction and “on-the-job” training.

The food service contract staff consisted of 1 director and 12 hourly workers.

Loading Dock / Pest Control

The loading dock was clean and clear of debris. Staff relayed that the exterminator visits the facility

monthly and as needed. The most recent pest issue was reportedly the sight of roaches.

Food Service Management and Oversight

A review of the food service kite log¹³ found that most offender kites were regarding the sack lunches implemented during the COVID-19 response. Meal substitutions and delays reportedly seldom occur.

In their recent contract evaluation from the DRC in March 2020, DCI received a compliance score of 99.0%. The area of non-compliance was regarding the preparation area cleanliness and food cooling log. In their most recent health department inspection in September 2019, 2 of 66 standards were found in non-compliance.

Offender Survey Question(s)	Satisfied or Neutral	Total Number of Respondents	Change from Previous Inspection
<i>How satisfied are you with the food in the chow hall?</i>	17.9%	N=201	-7.8%

The most frequently reported concerns were “Lack of variety,” and “Quality of the meal,” both reported by 154 respondents.

RECREATION: GOOD

Evaluation of recreation is based on three factors: facilities, activities, and access.

Facilities

Physical facilities appeared clean and were observed in use during the inspection. There were no maintenance concerns during the inspection.

Access

Units may attend recreation every day on a rotational basis. In response to COVID-19 only 50 offenders are allowed in the gym and yard time is separated by units. Staff relayed that recreation is rarely shut down and if movement is temporarily modified due to an incident, activities are provided in the housing units.

Activities

Offenders are offered a variety of activities, including organized intramural sport and tournaments. Overall, the recreation department offers a majority of recreation activities permitted, per policy, for offenders during normal conditions. Movies are made accessible and are rotated. Movie rotations have been increased during the COVID concerns. The recreation department does not have a music room. There are four offender program assistants. Offender led programming such as Zumba are still being offered but only by unit, to comply with COVID regulations and reduce the potential spread of the virus.

Offender Survey Question(s)	Satisfied or Neutral	Total Number of Respondents	Change from Previous Inspection
<i>How satisfied are you with recreation?</i>	61.1%	N=198	-3.8%

FAIR TREATMENT: GOOD

Expectation: Prisons will provide fair and professional treatment of offenders.

FAIR TREATMENT	2017 GOOD	2020 GOOD
<i>Staff/Offender Interactions</i>	<i>Acceptable</i>	<i>Good</i>
<i>Inmate Grievance Procedure</i>	<i>Good</i>	<i>Acceptable</i>
<i>Transitional Program Unit</i>	<i>Good</i>	-
<i>Limited Privilege Unit</i>	<i>Good</i>	-
<i>Offender Discipline</i>	-	<i>Good</i>

KEY FINDINGS

Responses to informal complaints have a high rate of untimeliness.

The transitional programming unit had a low offender population.

STAFF / OFFENDER INTERACTIONS: GOOD

Evaluation of staff/offender interactions is based on a survey of offenders, and analysis of grievance data.

Offender Survey Question(s)	Yes	Total Number of Respondents	Change from Previous Inspection
<i>On most days, are your housing unit officers professional?</i>	70.0%	N=197	+16.6%
<i>On most days, are your housing unit officers helpful?</i>	67.7%	N=195	+13.4%
<i>Have you ever been abused by staff here?</i>	12.6%	N=198	-3.5%

INMATE GRIEVANCE PROCEDURE (IGP): ACCEPTABLE

Evaluation of the inmate grievance procedure¹⁴ includes an interview with the Inspector of Institutional Services, a review of a random sample of informal complaints and grievances, offender survey responses, and data analysis.

Access

The Inspector relayed that orientation is conducted with new staff and offenders to educate on the grievance procedure. The inspector stated that they hold open office hours in their office multiple times each week. Offenders may also access the Inspector by kiting for an interview or by talking to them during institutional rounds in the unit. Inspector's report logs reflected rounds being conducted in a variety of areas, to include housing units, law library, laundry, and medical. Offender survey respondents who reported they had not used the grievance procedure noted that the top reasons were "Staff retaliation", followed by "No reason to use".

Offender Survey Question(s)	Yes	Total Number of Respondents	Change from Previous Inspection
<i>Do you know who the inspector is?</i>	72.0%	N=200	+12.5%
<i>Are you able to get the following: Informal Complaints?</i>	92.2%	N=192	+11.0%
<i>Have you ever felt that staff would not let you use the grievance procedure here?</i>	30.5%	N=200	-11.5%

Informal Complaints	2018	2019
Filed	2,453	2,520
Closed	2,444	2,545
Average Response Time	36.4 Days	26.77 Days
Untimely	8.6%	17.7%

The Inspector relayed that they do contact staff and monitor informal complaint responses to ensure they are timely and professional. Staff that frequently fail to respond in a timely manner are discussed at

department head meetings and reported to the Warden for accountability, yet the Inspector stated this is not a common occurrence.

A review of ten informal complaint responses for timeliness, investigation, and professionalism was completed. The responses all provided explanations of the investigations or evidence reviewed and professionally addressed the complaints. Although, one observed informal complaint was escalated to the grievance level, prior to receiving a response; though a thorough response was later provided.

Offender Survey Question(s)	Yes	Total Number of Respondents	Change from Previous Inspection
<i>Do you feel that the following are handled fairly at this institution: Informal Complaints?</i>	25.9%	N=143	+13.5%

Grievances

	2018	2019
Filed	559	672
Closed	519	648
Average Response Time	23.45 Days	17.54 Days
Untimely	9.5%	5.5%

The Inspector relayed that the most frequent grievance topics are relating to mail, healthcare, and supervision. A review of ten grievance responses

was completed. The responses all provided explanations of the investigations or evidence reviewed and professionally addressed complaints.

Oversight and Accountability

The Inspector relayed that there is an opportunity afforded to discuss issues/trends related to the grievance procedure and offender complaints during executive staff meetings and department head meetings. There were no offender grievances filed in the past year for staff retaliation that were substantiated.

Offender Survey Question(s)	Yes	Total Number of Respondents	Change from Previous Inspection
<i>Do you feel that the following are handled fairly at this institution: Grievances?</i>	27.6%	N=123	+15.2%

OFFENDER DISCIPLINE: GOOD

Evaluation of offender discipline¹⁵ includes observation of Rules Infraction Board (RIB) hearings and a review of a random sample of closed RIB cases.

Caseload

The most frequent rule violations referred to RIB were rules 19 (fighting) and 39 (illegal substance abuse or possession), of the Inmate Rules of Conduct. Staff reported there were no issues with backlog. There were 7,717 conduct reports in 2019, which was an 18.3% decrease from 2018, which had 9,441. Note that a single conduct report often includes multiple rule violations that occur during the incident.

Total Conduct Reports for Year

	DCI	NERC	ORW
2019	7,717	1,658	8,288
2018	9,441	1,906	10,499
2017	8,422	1,708	10,816

Procedures

The RIB panel followed standard hearing procedures.¹⁶ Panel members reviewed relevant evidence during the hearing. Staff relayed that they review camera footage for conduct reports such as fights and assaults. They additionally will review photographs or contraband, when appropriate for the case. Based on review, it appears the level of evidence is appropriate. Review of 20 closed cases found few procedural errors, which indicates that the oversight of RIB from the Warden's level is acceptable. The RIB panel did relay that very few cases are modified.

Due Process

In the 20 closed case reviews, 13 offenders were on the mental health caseload and were screened by mental health staff prior to the RIB hearing, per policy. Two cases requested a witness in the cases reviewed; none were denied and one was overturned by Central Office. The inmate rights form was completed for 17 of the 20 reviewed cases.¹⁷ Confidential information was not used in any of the reviewed cases, but the process for the handling of confidential information was explained by the Rules Infractions Panel.

Sanctions

The progressive discipline process was explained by the Rules Infractions Board Chairperson and the reasons for not following progressive discipline on serious cases was explained. Discipline for first-time offenders appeared appropriate.

TPU Population

According to the TPU roster¹⁸, there were 12 offenders assigned. There were 0 offenders charged with violations of Rule 23, "Refusal to accept an assignment or classification action" in TPU. Offenders refuse to lock many times due to threats, debts, concerns for safety, etc. An offender can request protective control (PC) if a risk to their safety is substantiated. There were no offenders being reviewed for PC.

Conditions

The units were clean and orderly. Some cells had some writing on the walls but were generally orderly.¹⁹ Overall, the common areas, cells, and showers of the TPU were rated "good," in terms of cleanliness. No maintenance issues were observed. The officers assigned indicated that work orders are typically completed within the same day.

Programming/Activities

Medical and Mental Health staff were documenting rounds in accordance with policy. Recreation consisted of a pull-up/dip station, a table, and stationary bike and an outdoor basketball space. Offenders have access to a bookcase for reading which was well stocked, and the librarian visits weekly.

Critical Incidents

According to staff, use of forces occur about every other month in TPU. The use of an alternative meal ("food loaf"), which is meant to be nutritional but used for improper behavior related to misuse of eating utensils and trays, was reported as being utilized about 3 times per year.

REHABILITATION & REENTRY: ACCEPTABLE

Expectation: Prisons will provide access to quality programming and purposeful activities that will ultimately aid reentry.

REHABILITATION & REENTRY	2017 GOOD	2020 ACCEPTABLE
<i>Reentry Planning</i>	<i>Good</i>	<i>Acceptable</i>
<i>Rehabilitative Programming</i>	<i>Acceptable</i>	<i>Acceptable</i>
<i>Family Engagement & Community Connections</i>	<i>Good</i>	<i>Acceptable</i>
<i>Academic Programming</i>	<i>Good</i>	<i>Good</i>
<i>Library Services</i>	<i>Good</i>	<i>Good</i>
<i>Vocational & Work Skill Development</i>	<i>Good</i>	<i>Acceptable</i>

KEY FINDINGS

Waitlists for rehabilitative programs are high, in comparison with the number of completions.

Offenders had high levels of concern with mail and telephone services.

DCI has expanded the use of GTL tablets for library and legal services.

Education packets have been provided to offenders to continue services during COVID-19.

Waitlists for vocational programs are exceptionally high, compared to the number of yearly completions.

REENTRY PLANNING: ACCEPTABLE

Evaluation of reentry planning²⁰ includes interviews of staff, document review, and survey responses.

Staff Accountability

An interview with a case manager at DCI relayed that unit staff does an exceptional job of communicating with the female population. The biggest challenges identified were finding reentry partners in the large northern counties to attend job and reentry fairs. Resources they felt could help with these challenges included the expansion of video conferencing abilities.

An offender release plan is a checklist identifying if an offender has housing, transportation, community linkage, an ID card and other resources necessary for preparing the offender to be released back into the

community. The Unit Management staff provides oversight of plan completion by having unit managers audit plans on a consistent basis, with random checks completed by the unit management administrator.

Reentry Resources

Staff relayed they conduct job fairs each year to provide offenders with community contacts. The last event hosted 26 agencies and 250 offenders. Staff relayed that barriers for offenders to access programming at DCI are the lack of vocational programming, and centralized county resources.

Offender Survey Question(s)	Yes	Total Number of Respondents	Change from Previous Inspection
<i>Do you know where you can find reentry information?</i>	54.5%	N=198	+11.3%

REHABILITATIVE PROGRAMMING: ACCEPTABLE

Evaluation of rehabilitative programming is based on a review of unit-based program enrollment and completion, on-site observations, and review of additional purposeful activities.

Unit-Based Programs

DCI currently has three Reentry Approved programs being facilitated by unit staff at the time of this site visit. 21 offender-led programs are offered within the units, which is an exceptional amount. Six offender group/organizations are offered at DCI: 7 Steps, Cultural Awareness Association, Inner Community Affairs Committee, Life Group, Genuine Rehabilitation of Women, and Entrepreneur Reentry Association.

Program	Waitlist	Enrollment	2019 Completions
<i>Thinking for a Change</i>	225	13	40
<i>Decision Points</i>	120	6	42
<i>Victim Awareness</i>	250	33	31

Offender Survey Question(s)	Easy or Neutral	Total Number of Respondents	Change from Previous Inspection
<i>How easy or difficult is it to get into the following activities in this prison? Unit Programs</i>	61.4%	N=189	+2.1%
	Yes		
<i>Have staff talked with you about what programs to take while incarcerated?</i>	40.4%	N=198	+11.6%

FAMILY ENGAGEMENT & COMMUNITY CONNECTIONS: ACCEPTABLE

Evaluation of family engagement and community connections consists of review of family-oriented activities, survey results, and data review.

DCI promotes offender communications with family, friends, and community through mail, email, phones, free envelopes, and graduation of programs. DCI reported 40,098 community service hours for 2019. DCI reported having 605 current active volunteers in religious services, recovery services and unit programs. Staff relayed that community coalition partnerships are held with Montgomery County.

Offender Survey Question(s)	Yes	Total Number of Respondents	Change from Previous Inspection
<i>Have you had any problems with mail?</i>	72.2%	N=202	+9.1%
<i>Have you had any problems with telephones?</i>	73.2%	N=202	+12.2%
<i>Have you had any problems with visitation?</i>	35.7%	N=199	-0.4%

ACADEMIC PROGRAMMING: GOOD

Evaluation of the quality of academic programming focuses on data analysis, a document review, direct observation of at least one program, and offender survey responses.

DCI education department consists of one principal, one assistant principal, seven academic teachers, one guidance counselor, and two career-tech teachers and advanced job training from Sinclair Community College. There are currently two vacancies in the education department for academic and Title I teachers. The average ratio of student to academic and career/tech teachers is 7 to 1, which was reduced from 9 to 1 due to COVID-19 restrictions. The education department reported having no offender tutors trained to assist others develop learning skills.

DCI education department offers Pre-GED, GED, ABLE, Special Education, Advanced Job Training (college courses), career technical education/career enhancement program, and apprenticeship programs.

In Fiscal Year 2019, 24 GED's were earned by offenders.

Reading room hours for the children's reading room in visiting are being reported on the Educational Monthly Report per policy²¹.

In response to COVID-19, instead of hosting in-person classes, instructors have created and disseminated weekly packets for students to continue learning in a distanced fashion.

Staff relayed that the biggest challenge for the education department was having a longer waitlist for career-tech students to accommodate for number of offenders. Adversely, the waitlist for GED attainment is considerably low.

Offender Survey Question(s)	Easy or Neutral	Total Number of Respondents	Change from Previous Inspection
<i>How easy or difficult is it to get into the following activities in this prison? Academic Programming</i>	42.8%	N=187	-8.6%

On-Site Observation

This statutory requirement could not be fulfilled due to COVID-19 restrictions causing the suspension of academic programming.

LIBRARY SERVICES: GOOD

Evaluation of literacy development focuses on data analysis, a document review, observation, and offender survey responses.

Library Facilities

The library appeared organized and clean. The staff reported that the library currently has a capacity of approximately 50 offenders.

There are six computers in the library: two LexisNexis, two GTL, two reentry resource computers, and two word processors. Additionally, eight typewriters are available for use. All are reportedly operational. The

library did reflect post-secondary educational, multi-cultural materials and books in Spanish and Chinese.

The library advisory meeting was held on October 1, 2019 with various staff in attendance such the Deputy Warden of Special Services, Principal, Librarian, Assistant Principal, Recovery Services, and the Inspector, the Business Administrator and the Unit Management Chief and no offender representatives.

The meeting discussed updates on the improvements and needs of the library.

Library Access

The library schedule reflects two evening library sessions and weekend hours which is in compliance with departmental policy.²² The library is opened five days a week, with unit libraries available all days of the week. The librarian relayed that the most frequent use of the library by offenders is the law library and book rentals.

Due to COVID-19, full library services have been temporarily revised. At the start of the pandemic, the

librarian was receiving a high volume of kites. In response to library service revisions, offenders are also able to receive library services on their GTL tablets, expanding library service accessibility.

The staff reported that rounds are conducted every week to the Transitional Program Unit (restrictive housing and limited privilege housing unit), which is in compliance with DRC 57-EDU-02²³ and that offenders may request materials via kite.

The librarian reported that complaints received recently regarding the library were having to access the library due to reduce times in response in compliance with institutional COVID-19 regulations.

VOCATIONAL & WORK SKILL DEVELOPMENT: ACCEPTABLE

Evaluation of the quality of vocational and work skill development and programming focuses on data analysis, a document review, observation, and offender survey responses.

Program	Waitlist	Enrollment*	FY 2020 Completions
Food Service Management	206	0	20
HVAC	140	0	0
APS	179	0	0

**Due to COVID-19 restrictions, vocational programming has temporarily discontinued.*

Programming

DCI offers advanced job training (coursework) through Sinclair College. DCI offers two vocational programs, culinary arts and administrative professionalism, with no offenders enrolled. DCI currently has 103 apprentices enrolled in the following

Apprenticeship programs: Animal Trainer, Janitor, Landscape Management Technician, Maintenance Repairer (Building), Material Coordinator, Plumber and Recovery Operator.

Offender Survey Question(s)	Easy or Neutral	Total Number of Respondents	Change from Previous Inspection
<i>How easy or difficult is it to get into the following activities in this prison? Vocational Programming</i>	39.4%	N=185	-4.5%

FISCAL ACCOUNTABILITY: GOOD

Expectation: Prisons will responsibly utilize taxpayer funds and implement cost savings initiatives where possible.

FISCAL ACCOUNTABILITY	2017 ACCEPTABLE	2020 GOOD
<i>Fiscal Wellness</i>	<i>Acceptable</i>	<i>Good</i>
<i>Environmental Sustainability</i>	<i>Good</i>	<i>Good</i>
<i>Staff Management</i>	<i>Acceptable</i>	<i>Acceptable</i>

KEY FINDINGS

Overtime has continually decreased over the reviewed years.
 There has been an overall decrease in utility usage, with the exception of water.
 DCI staff had diversity in its balance of gender and race.
 There is a high number of vacancies for correctional officers.

FISCAL WELLNESS: GOOD

Evaluation of fiscal wellness includes a document review of the institution budget status report, fiscal audits and an interview of staff regarding the implementation of cost saving initiatives, both those required by policy and those independently developed by staff.

Budget Overview

FY 2017	FY 2018	FY 2019
\$25,137,637	\$25,123,534	\$26,733,249

According to their FY 2019 budget overview, DCI used 99.7% of their \$26,733,249 allocated budget.²⁴

ACCOUNT CODE	ACCOUNT DESCRIPTION	FY 2019	FY 2020	% Change
500	PAYROLL	19,159,912	19,077,803.78	-0.43
510	CONTRACTS	60,005	59,539.45	-0.78
520	OPERATING SUPPLIES	1,033,307	1,039,328.90	+0.58
530	EQUIPMENT	6,946	43,665.76	+ 528.6
PROGRAM CODE	PROGRAM DESCRIPTION	FY 2019	FY 2020	% Change
5000	INSTITUTION OPERATIONS	1,033,307	1,039,328.90	+ 0.58
5040C	UTILITIES	677,038.03	547,314.14	- 19.2
5100C	MEDICAL	611,404	579,105.04	- 5.3
5170	EDUCATION	15,134.96	12,301.97	-18.7
5180	MENTAL HEALTH	269,527.14	219,109.24	-18.7
TOTAL EXPENSES		22,444,678	21,578,167	-3.9

Infrastructure

The following capital improvement requests were submitted for future consideration in FY 21-26:

Project	Amount
Exterior Security Doors	\$1,500,000
Window Replacement	\$1,885,000
Drain/Chase ways	\$2,000,000
Window Replacement/HVAC	\$5,000,000
Perimeter Fence	\$5,000,000
Replace Concrete Walkways	\$500,000
Visiting Room Upgrade	\$250,000
Security/Spider TPU	\$178,020

Overtime Management

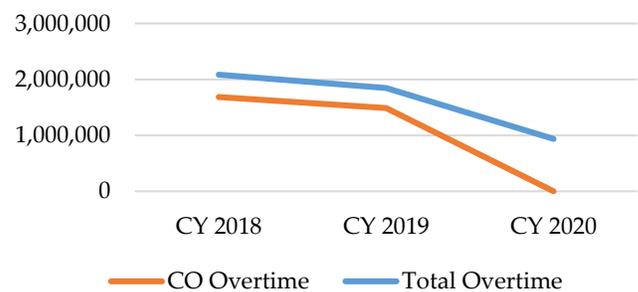
	CY 2018	CY 2019	CY 2020*
CO Overtime	1,685,329	1,486,726	750,819
Total Overtime	2,084,735	1,846,213	936,538

* CY 2020 reflects data as of the date of inspection.

Fiscal Audits

In their most recent internal audit, DCI was compliant in only eight of their nine applicable Ohio fiscal standards for an overall score of 88.9%.²⁵ In their most recent external fiscal audit dated March 2019, the External Auditor found seven observations and concerns. The concerns were related to the business office, religious service contracts, employee payroll, commissary, the industrial and entertainment fund, and the industrial arts fund.

DCI Overtime Costs



ENVIRONMENTAL SUSTAINABILITY: GOOD

Evaluation of environmental sustainability includes a document review of the utility bills and an interview of staff regarding the implementation of cost saving initiatives, both those required by policy and those independently developed by staff.

Utility Conservation²⁶

DCI decreased the use and overall cost of natural gas. Overall utility costs increased by \$10,603 (1.6%) in FY 2019. The FY 2018-19 utility consumption and cost comparisons are illustrated in the following chart:

Energy Type	FY 2018	FY 2019	Change
Water (gal)	35,463,648 gal	36,059,096 gal	+1.7%
	\$192,162	\$198,783	+3.4%
Natural Gas (ccf)	279,306 ccf	243,199 ccf	-12.9%
	\$161,866	\$125,879	-22.2%
Electric (kwh)	4,933,309 kwh	4,743,543 kwh	-3.8%
	\$320,964	\$360,933	+12.5%
Total Costs	\$674,992	\$685,595	+1.6

Sustainability Programs

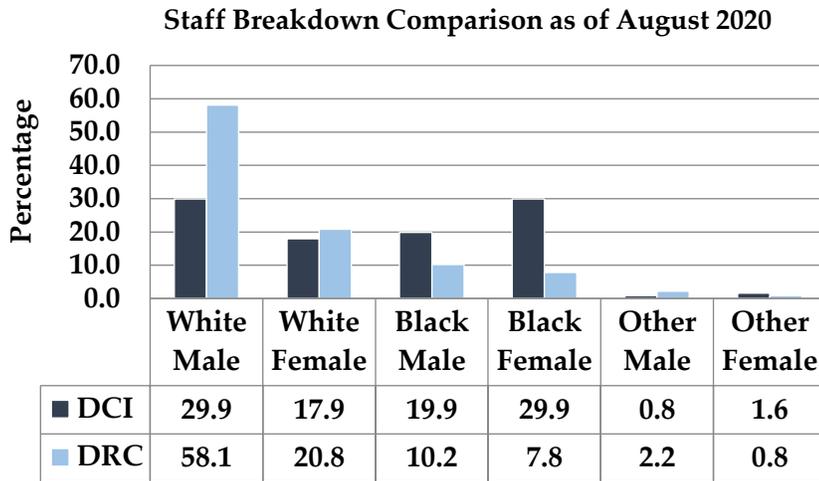
In FY 2019, recycling projects resulted in \$648.33 of revenue. The Roots of Success²⁷ environmental literacy program is offered at DCI.

Sustainability Audit

DCI conducted a sustainability audit which outlined additional energy conservation and waste reduction initiatives from FY 2019. Identified goals included expanding recycling and waste diversion projects.

STAFF MANAGEMENT: ACCEPTABLE

Evaluation of staff management includes a data review and staff interviews regarding overtime management, turnover ratio, morale, training, and evaluations.

**Staff Demographics**

As of August 2020, DCI had 251 total staff including 134 correctional officers (53.3%). Of the total staff, 50.6% were male and 49.4% were female. Additionally, 47.8% were classified as white, 49.8% were classified as black, and 2.4% were classified as individuals of another race.

As of August 2020, the inmate-to-officer ratio at DCI was 5.9-to-1 which is lower than the DRC ratio of 6.1-to-1.²⁸

Workplace Environment

CIIC interviewed seven correctional officers who provided the following insight regarding the DCI workplace environment: Most officers rated staff safety between "Average" and "High," and offender safety as "High" on a 5-point scale.

Staff morale was rated between "Average" and "Low," which staff attributed to communication and feeling supported by administrative staff.

Evaluations

In CY 2019, DCI staff completed 100% of their 224 performance evaluations. Any non-completed evaluations are attributed to probationary positions.

Training²⁹

Non-completions for training was attributed to military leave, disability, and firearm restrictions. The FY 2019 DCI mandated training completion rates consisted of the following:

- CPR/First Aid: 100%
- Defense Tactics: 100%
- E-Learning: 99%
- OC-Spray: 100%
- Firearms: 96%
- PREA Re-Certification: 99%

Turnover Ratio

	DCI Total Separations	DCI Rate	Total State Institution Separations	State Institution Rate
FY 2017	51	19.8	1,283	11.8
FY 2018	39	15.5	1,325	12.1
FY 2019	44	17.0	1,437	13.1

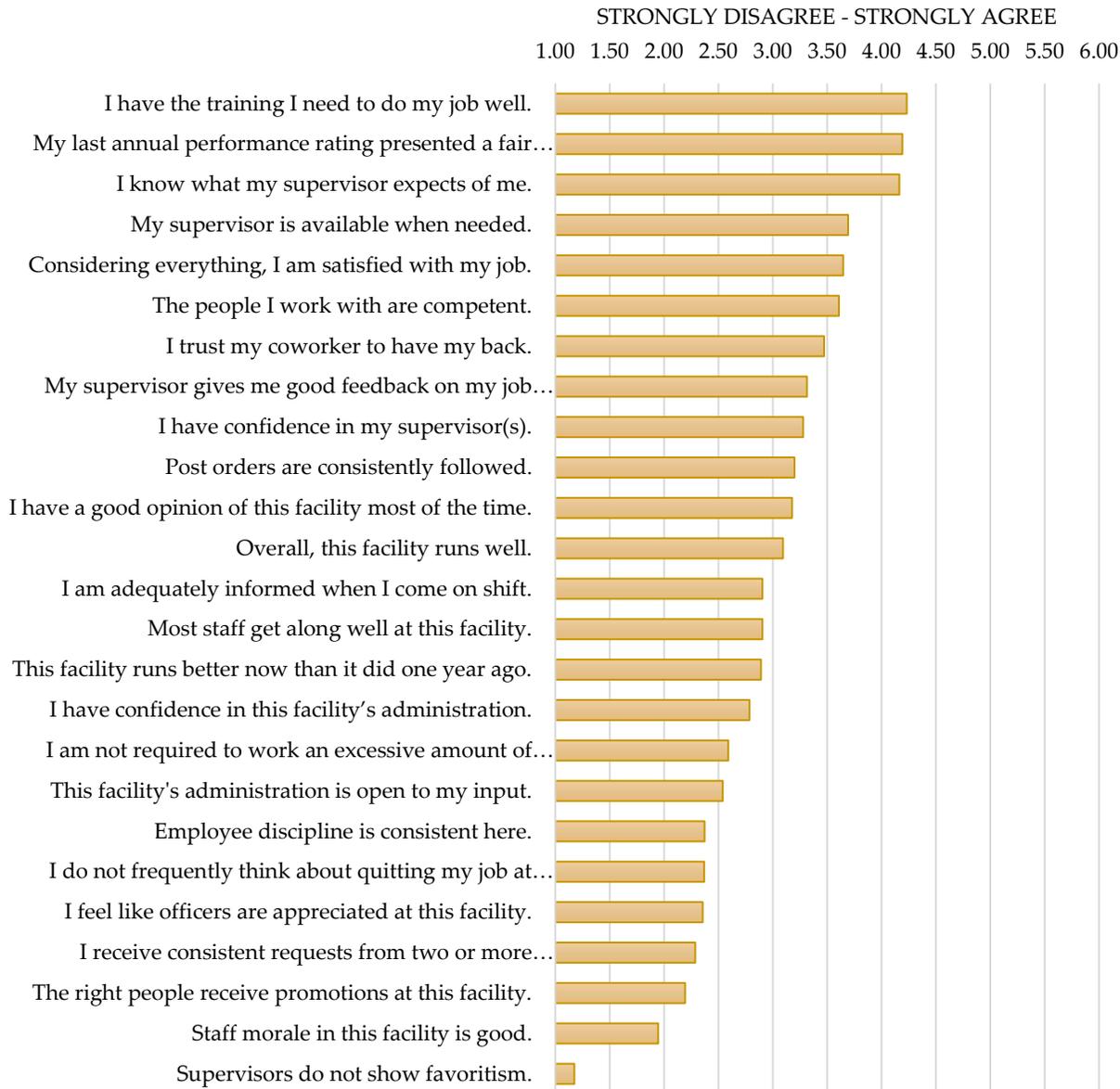
Vacancies

On the day of the inspection, DCI reported 27 total vacancies. Of the total vacancies, 17 were correctional officer positions.

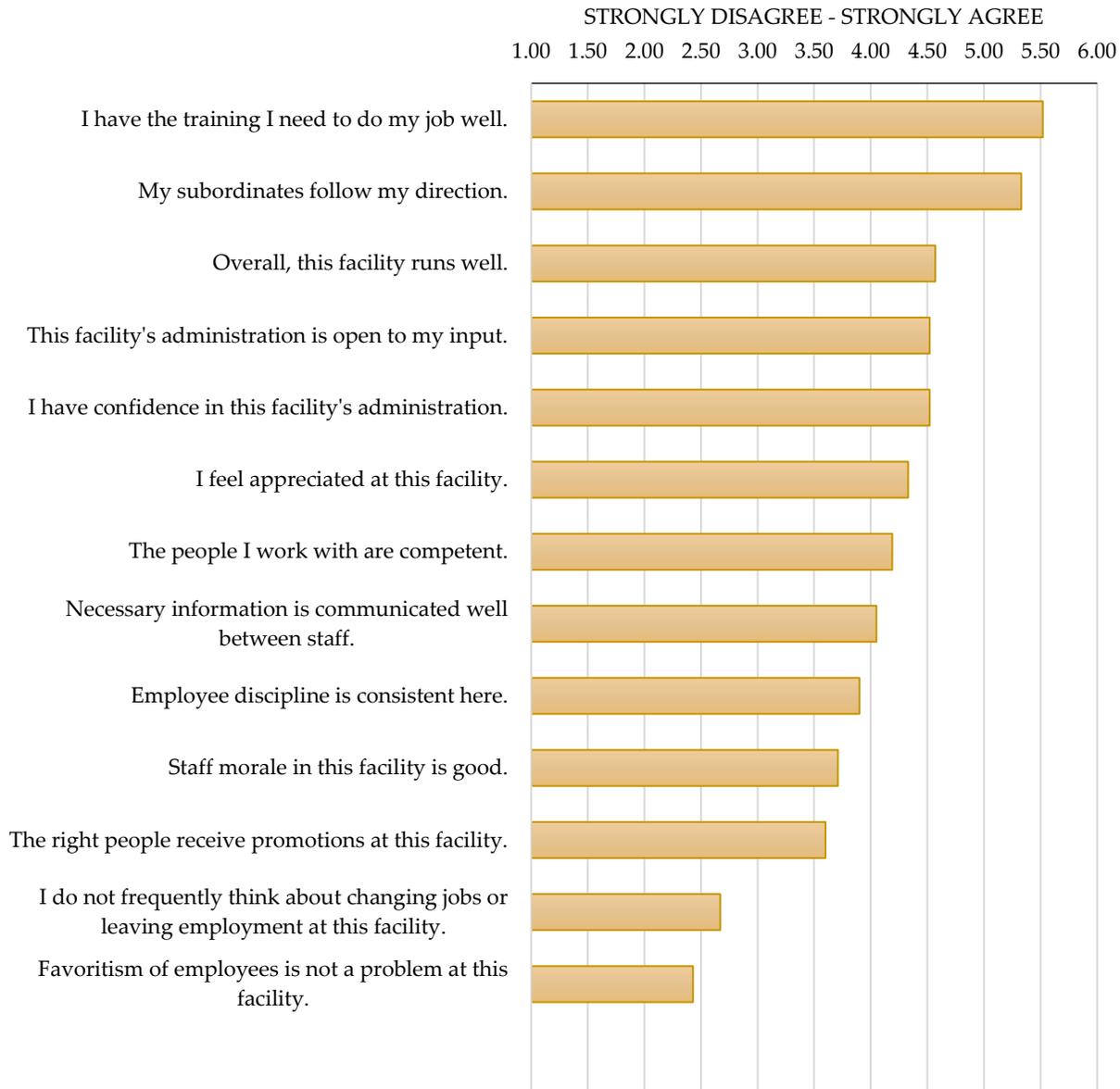
Recruiting and Retention Initiatives

According to staff, DCI recruiting initiatives includes attending job fairs, colleges, and vocational trade schools to recruit new employees. Additionally, they ask current staff to share open positions with their family and friends. Concerns regarding retention involve the competition for benefits and wages.

CIIC received 75 responses back from DCI correctional officers which represents a sample size of 56% of total officers. The responses were mixed and indicate that officers have some concerns regarding their treatment:



CIIC received 21 survey responses from DCI Supervisors. Although the supervisor survey responses were mostly positive, results showed a concern for favoritism.



¹ The total number of RIB convictions for rule 19 violations does not correlate to a total number of fights. For example, seven offenders might have been involved in one fight – all seven offenders would have been found guilty by the RIB for a rule 19 violation and would therefore be included in the total number.

² Disturbances are defined as any event caused by four or more offenders that disrupts the routine and orderly operation of the prison.

³ Information provided by the Dayton Correctional Institution during inspection dated August 19, 2020.

⁴ During the inspection, a random selection of cells in each unit are checked for common cell security issues such as: obstruction of windows, material in locks, inappropriate pictures, clotheslines, and graffiti.

⁵ During the inspection, bunk areas are checked to identify if offenders are hanging items to block officers' direct observation.

⁶ Per DRC policy 50-PAM-02, "Each housing unit, including the Transitional Program Unit, shall be visited by the managing officer and/or deputy warden weekly." In addition, "The unit management chief (UMC) and Major shall visit all offender living areas, at a minimum, on a bi-weekly basis. The Transitional Program Unit/s are visited weekly by the Major." Visibility of leadership is important in the correctional environment. It indicates they are aware of the conditions within their facility, and it also serves to boost the morale of staff and offenders.

⁷ RIB convictions for rule 17 (unauthorized group activity) violations do not capture total gang activity in an institution, as gang activity likely occurs that is not captured by staff supervision and/or documented via a conduct report and RIB conviction.

⁸PREA Audit: Auditor's Summary Report Adult Prisons and Jails. Accessed at

<https://www.drc.ohio.gov/Portals/0/Dayton%20Correctional%20Instituton%20PREA%20Report%202018%202.pdf>

⁹ Access to mental health staff is evaluated based on several factors: (1) time period between offender submission of a mental health service request form and appointment with mental health staff; (2) time period between referral and appointment with the psychologist or psychiatrist; (3) response times to kites and informal complaint forms; and (4) current backlogs.

¹⁰ In accordance with DRC 70-RCV-05, the Quality Improvement Committee shall review quality improvement activities to include utilization review, peer review, clinical review, and credentialing.

¹¹ Each offender is screened using an assessment tool for the need for addiction services, and is assigned a number associated with a recovery services level. This number indicates the degree to which offenders are in need of addiction services. Offenders are scored from zero to three; zero indicating no need of services, to three indicating chronic need for addiction services. This number is determined through completion of a need for services assessment that gives an overall score resulting in the assignment to one of the recovery services levels. Offenders who score either two or three are most in need of treatment; thus, they should be prioritized for programming.

¹² AR 5120-9-06 defines Rule 39 as unauthorized possession, manufacture, or consumption of drugs or any intoxicating substance.

¹³ Per DRC Policy 50-PAM-02 ("Inmate Communication/Weekly Rounds"), the kite system is a means of two-way communication between all levels of staff and offenders. All kites are required to be answered within seven calendar days and logged on the Kite Log.

¹⁴ Pursuant to Section 103.73 of the Ohio Revised Code, the CIIC is required to evaluate the inmate grievance procedure at each state correctional institution. The inmate grievance procedure is a three-step process by which offenders can document and report concerns to multiple levels of DRC staff.

¹⁵ Offenders charged with a rule infraction are given a conduct report (also known as a ticket). All conduct reports are first heard by a hearing officer; if the offense is a minor offense, the hearing officer may dispose of it himself. More serious offenses must be referred to the RIB, which is a two-person panel that conducts a formal hearing, including witness testimony and evidence.

¹⁶ Appropriate procedures includes checking to ensure that the offender had received a copy of the conduct report, checked the inmate rights form, read the conduct report, offered the opportunity for an offender to give his testimony, had the offender leave for deliberation, reviewed evidence and discussed the case with the other panel member, informed the offender of the decision, and offered the opportunity to appeal.

¹⁷ The inmate rights form asks whether the offender waives the 24 hour notice, the presence of the charging official at the hearing, and the presence of any witnesses. The form also asks the staff completing the form whether he or she believes that the offender needs staff assistance.

¹⁸ The roster tracks offenders by disciplinary status, rule violation, the date that the offender came into the TPU unit, mental health status, and STG status. All of this is important information for ensuring the orderly management the population.

¹⁹ Cell security issues would include offenders attempting to block cell windows or cell door windows, STG related graffiti, attempting to jam the locks or place material in the cuff-ports, or excessive clotheslines or towels on the floor.

²⁰ Reentry planning requires pervasive attention to individualized details from the first day of incarceration through the post-release period. Effective reentry planning is crucial for a successful reintegration into society. The inspection considers the amount and types of offender access to unit programs and purposeful activities, offender contact with local community representatives, and staff accountability related to reentry processes and unit life.

²¹ DRC 76-VIS-04 states that reading room coordinators shall submit a monthly report to the Ohio Central School System Literacy Coordinator using the Education Monthly Report Form (DRC2311).

²² DRC 58-LIB-01 states that library services shall be available to the offender population daily to include evenings and weekends, which includes all satellite library locations.

²³ DRC 57-EDU-02 states to ensure the accessibility of education staff and continuity of services, a library staff member shall visit each special population housing unit at least weekly with the area's logbook signed for accountability.

²⁴ Dayton Correctional Institution Fiscal Year 2018 and 2019 Budget Overview, Provided August 2020.^[1] Department of Rehabilitation and Correction Office of Administration Bureau of Internal Audits, Dayton Correctional

²⁵ Institution, Report of Audit for Period. All Funds: April 1, 2018 through March 31, 2019. Audit conducted March 20, 2019 through March 22, 2019. Report Finalized: September 24, 2019.

²⁶ The DRC established a goal for each institution to reduce its annual utility costs by five percent. Natural gas, water and electricity are the primary utilities targeted for reduction of use.

²⁷ According to the Roots of Success website, the Roots of Success is an activity-based curriculum that is facilitated by an instructor and taught in a classroom setting. The purpose of the program is to prepare offenders adults to become professionals and leaders who can access good green jobs upon release by improving environmental and social conditions in their institutions.

²⁸ DRC Monthly Fact Sheet, 2020 <https://drc.ohio.gov/Portals/0/August%202020.pdf>

²⁹ DRC required 40 hours of in-service training for custody staff (all non-clerical/support designated staff) and 16 hours in-service training for non-custody (clerical/support staff). According to DRC policy, 39-TRN-02 ("In-Service Training"), the prisons are mandated by the CTA to ensure custody staff receives annual re-certification training on the following topics: firearms, unarmed self-defense, CPR/First Aid, and in-service training. Institutions are only mandated to take CPR every other year. These topics are derived from Administrative Regulations, Legislative/Judicial Requirements, ACA Standards, DRC policies, and/or other Department Training Advisory Council recommendations. The goal of each institution is for all required staff to complete 100% of their required training by the end of each fiscal year.