



*A Joint Committee of the Ohio General Assembly*

# TOLEDO CORRECTIONAL INSTITUTION INSPECTION REPORT

NOVEMBER 2020

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*Vice-Chair*

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**REPORT ON THE INSPECTION & EVALUATION OF  
TOLEDO CORRECTIONAL INSTITUTION**

<b>Dates of Inspection:</b>	November 18, 2020
<b>Type of Inspection:</b>	Announced
<b>CIIC Staff Present:</b>	Travis Ricketts, Deputy Director, Remotely Rachel Helbing, Sr. Analyst, Report Coordinator, In-Person Jeffrey Noble, Senior Analyst, Remotely Elijah Woodberry, Research Analyst, Remotely
<b>Facility Staff Present:</b>	Warden Harold May CIIC spoke with many additional staff throughout the course of the inspection.

**Institution Overview**

Toledo Correctional Institution (ToCI) is a maximum security male prison that houses Level 4 (maximum) security, as well as Extended Restrictive Housing (E) offenders. ToCI additionally houses offenders under protective custody of all security levels. The facility opened in 2000 and is located on 45.2 acres in Toledo, Ohio. The institution's FY 2020 GRF budget is \$41,845,400.

The rated capacity for ToCI is 1,591. As of November 18, 2020, the institution housed 820 offenders (51.5% of capacity). Demographically, 56.2% of the offenders are classified as black, 39.9% as white and 3.9% as "other" race. The average offender age was 36.3 years, with the range from 19.9 through 74.7 years of age. As of November 18, 2020, ToCI had 453 staff, including 323 officers.

The institution scored 100% compliance on the most recent American Correctional Association accreditation audit (March 9-11, 2020) for 58 applicable, mandatory standards, and 99.06% on 423 applicable, non-mandatory standards. The areas of non-compliance were for unencumbered space and natural light requirements.

In its most recent full internal management audit, conducted January 22-23, 2020, ToCI was 95% compliant on ACA mandatory standards and 98.3% compliant on ACA non-mandatory standards. The mandatory standards involved fire code, weekly fire/safety/sanitation inspections, and immediate release processes. Non-mandatory standards involved unencumbered space, natural light, recreation space, testing of emergency equipment, and security rounds being logged when video surveillance did not show them being completed. As the audit relates to Ohio Standards, the facility was 93.5% compliant on the applicable standards. The Ohio standards found in non-compliance were related to Unit Manager scheduling, joint UMC/Major rounds, chronic care clinic scheduling, and asset management.

## FACILITY RATINGS

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

## INSPECTION OVERVIEW

Preparation for the inspection of Toledo 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.

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 is aimed to be completed by a single CIIC staff member within a half day. The inspector will arrive at 9:00am with the goal of departing by 1:00pm. CIIC recognizes that DRC facilities have staff in cohorts for portions of the prisons to reduce the potential for cross-contamination and spread of the COVID-19 virus. The inspector will work with facility staff to identify the appropriate cohort that will allow for the fulfillment of observational requirements. Inspectors that enter a facility must refrain from entering another facility for a minimum 14-day period.”

The day of inspection, Wednesday, November 18, 2020, consisted of a tour of the facility, to include: mental health services, medical services, library, religious services, recovery services, education, housing unit C, transitional programming unit (TPU), and food services. Each remote inspector completed telephone interviews with staff in various positions. Facility staff were welcoming to the CIIC inspector, and their adaptability to the hybridized inspection process was greatly appreciated.

While CIIC includes the results of surveys distributed to offenders, officers, and supervisors, the offender surveys for ToCI have reduced reliability due to the sample size. Four-hundred and fifteen surveys were provided to the facility, enough for every other offender to receive one. CIIC received 38 completed surveys in the days following inspection. Of the 820 offenders, this represents a 4.6% sample of the population. Due to this low response rate, survey results hold a 95% confidence level with a  $\pm 15.6\%$  margin of error. Each reported result from the offender survey has 95% certainty that the true result of the population is within  $\pm 15.6\%$ . The 2017 CIIC inspection of ToCI had survey results from 28.0% of the population; resulting in a 95% confidence level with 5.14% margin of error. The targeted response rate allows for a 95% confidence level with 5% or less margin of error. Readers should be cautioned when digesting survey results for this reasoning.

An initial inspection report draft was provided to Warden May and his staff on December 28, 2020 as an opportunity to review and notify CIIC staff of any discrepancies. A teleconference meeting between CIIC and facility staff was held on January 4, 2021 to finalize the inspection report draft.

**SAFETY & SECURITY: GOOD**

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

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

**KEY FINDINGS**

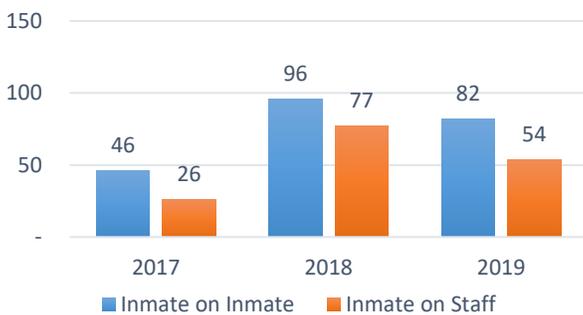
Convictions for incidents of fighting have consistently decreased from 2017 to 2019.  
 Use of force incidents have decreased, but Toledo still remains high in comparison to others.  
 Drug testing positivity rates are significantly lower than other facilities.

**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**

**Total Assaults CY 2017 – CY 2019**



	2017	%	2018	%	2019
<b>Significant I/I</b>	0		2		1
<b>Significant I/S</b>	0		0		0

*Significant incidents are defined by the American Correctional Association (ACA) as “An altercation which results in serious injury requiring urgent and immediate medical attention and restricts usual activities.”*

TOCI transitioned from security levels three and four, to a solely level four facility in late-2017. This increase in security level may contribute to the increase in violence seen from 2017 to 2018.

**Comparator Facility Rates**

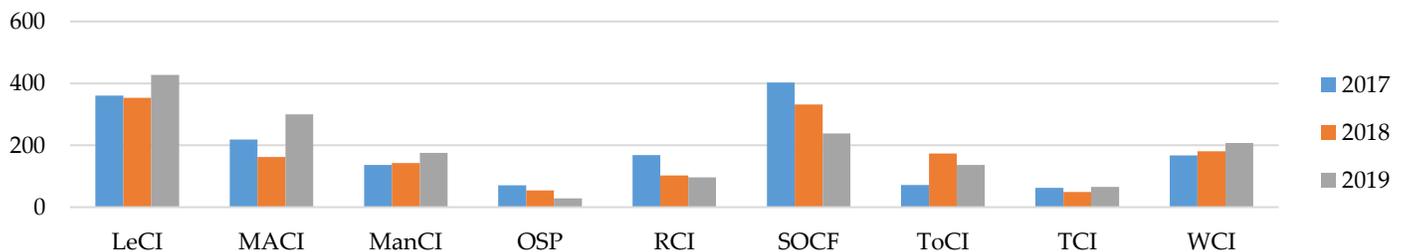
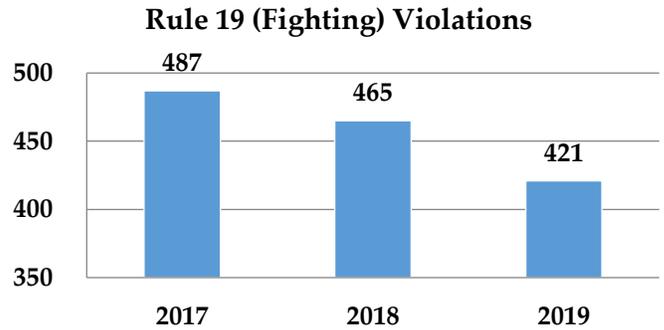


Figure 1: The total combined “inmate on inmate” and “staff on inmate” assaults are graphed above for data collected from 2017-2018 for all DRC level 3/4 institutions.

The rate of offender disciplinary convictions for violent offenses increased by 10% during CY 2018 in comparison to CY 2017 and decreased 15.1% from 2018 to 2019.

**Fights**

Fights<sup>1</sup> are documented via RIB convictions for rule 19 (fight) violations. There were 487 offenses in 2017, 465 offenses in 2018, and 421 offenses in 2019 convicted of a fight violation at Toledo Correctional Institution.



**Homicides**

There was one homicide reported during the period evaluated (2017 to date).

**Disturbances<sup>2</sup>**

There have been no disturbances at Toledo since the last inspection in 2017.

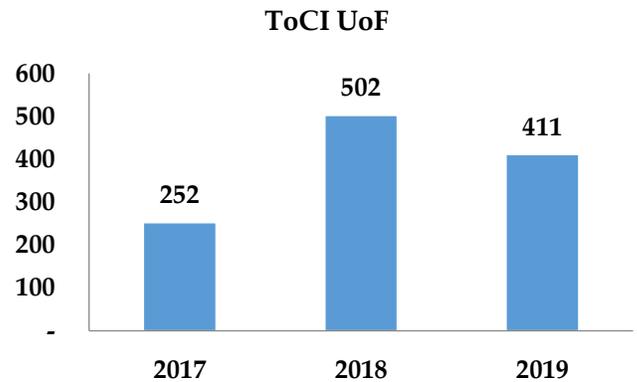
**USE OF FORCE: ACCEPTABLE**

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 completed use of force reports.

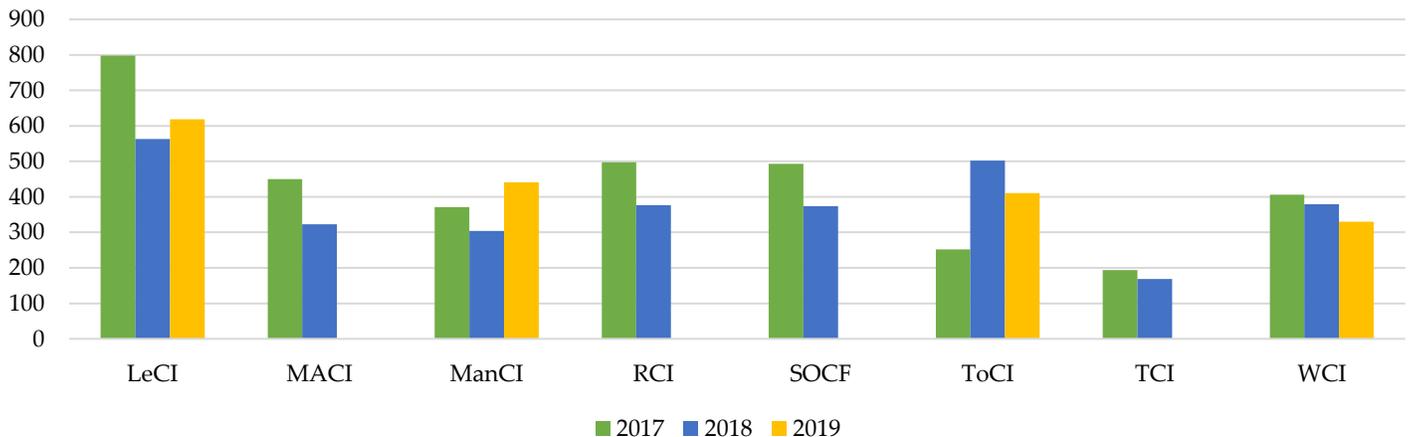
**Incident Caseload**

During CY 2019, the facility reported 411 use of force incidents. From CY 2017 (252) to CY2018 (502), the facility increased use of force incidents by 99.2%.

ToCI UoF	2017	%	2018	%	2019
	252	+99.2%	502	-18.1%	411



**DRC Level 3 UoF Rates**



**Procedural Accountability**

Video documentation was available for 18/20 incidents sampled. Seven of the 20 incidents were reviewed. Staff appropriately referred use of force incidents 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. Most offenders provided statements or it was documented that they refused a use of force statement. Offenders were generally seen by medical within an hour following the use of force incident.

Some medical exams were timestamped later than the hour requirement. Three use of force incident recordings were watched through completion and no issues were noted. Staff utilized first-person videotaping with the use of a cell phone, for greater documentation and accountability.

**Application of Force**

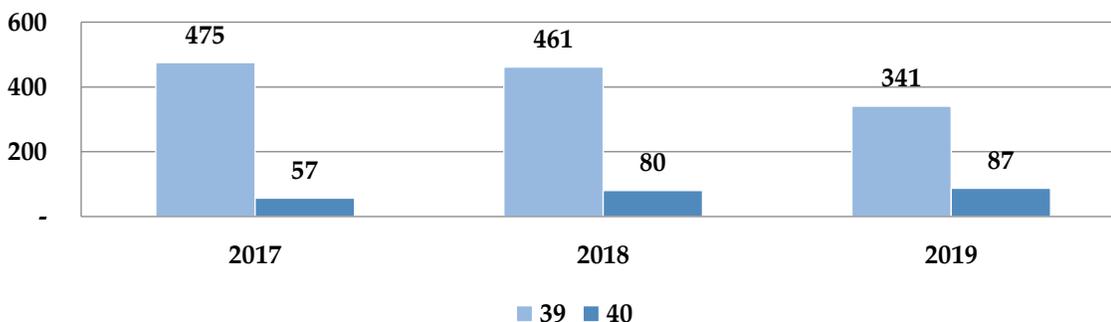
Officer responses to incidents generally appeared appropriate. There were very few injuries, all of which were minor and consistent with the level of force.

**CONTROL OF ILLEGAL SUBSTANCES: GOOD**

*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, the comparator prison rate, and the DRC average.*

Random Drug Testing	2017		2018		2019	
	# Tested	% Positive	# Tested	% Positive	# Tested	% Positive
Lebanon	1246	7.3%	1462	7.8%	1570	11.3%
Madison	1547	6.9%	1448	7.7%	1692	8.5%
Mansfield	1899	8.2%	1847	7.2%	1891	7.3%
Ross	1341	14.5%	1342	16.2%	1231	9.9%
Southern Ohio	975	3.2%	1089	1.7%	1014	2.9%
<b>Toledo</b>	<b>502</b>	<b>4.2%</b>	<b>633</b>	<b>2.4%</b>	<b>662</b>	<b>0.6%</b>
Trumbull	1085	1.2%	1032	1.0%	1015	2.1%
Warren	918	1.2%	949	1.8%	1050	8.1%
Level 3/4 Average		6.6%		6.5%		7.1%
DRC Average		5%		5.4%		5.4%
<b>Program Drug Testing</b>						
<b>Toledo</b>	<b>152</b>	<b>2.0%</b>	<b>196</b>	<b>2.0%</b>	<b>295</b>	<b>0.3%</b>
<b>For Cause Drug Testing</b>						
<b>Toledo</b>	<b>105</b>	<b>38.1%</b>	<b>168</b>	<b>17.8%</b>	<b>91</b>	<b>12.1%</b>

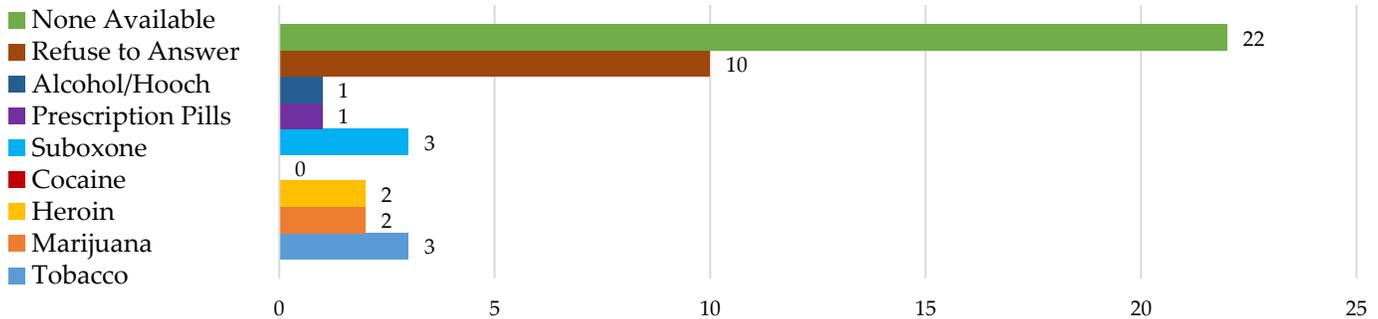
**Rule 39/40 Violations**



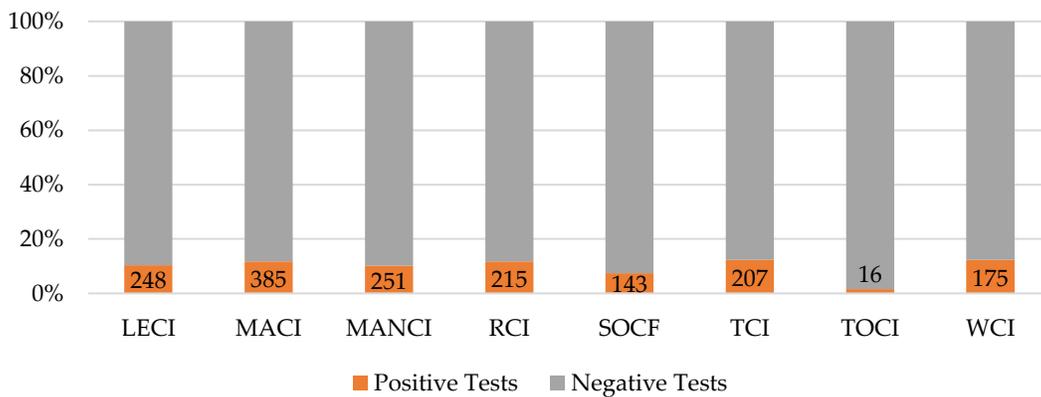
Convictions for Rules 39 (possession and consumption) and 40 (conveyance) are graphed for TOCI for 2017-2019.

57.9% 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 (3) and tobacco (3).

What type of prohibited substances are available at this institution?



### 2019 Drug Testing Results



The results from the 2019 state-wide administered facility drug tests is graphed above for all DRC level 3 institutions

### **OFFENDER PERCEPTION OF SAFETY: DEFERRED**

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

Offender surveys were only completed by a 4.6% sample of the population. Due to this low response rate, survey results hold a 95% confidence level with a ±15.6% margin of error. CIIC has deferred rating this section due to the low reliability of survey results.

Offender Survey Question(s)	Safe or Neutral	Total Number of Respondents	Change from Previous Inspection
Do you feel safe/neutral/unsafe from other inmates here?	84.2%	N=38	-2.6%

Convictions for Rule 23 violations, “Refusal to accept assignment”, have decreased over recent years. Offenders refuse to accept assignment commonly out of safety concerns. There were 457 convictions in 2017, 410 in 2018, and 359 in 2019.

**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. The documentation of rounds was done in an organized manner, which were easily reviewed for compliance.

**Cell 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, twice per shift. Officers frequently found minor contraband, which reflects effective searches are taking place.

**Cell<sup>3</sup>/Bunk<sup>4</sup> Security Check**

No security concerns were noted during housing unit inspections.

**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.

**INSTITUTIONAL SECURITY MANAGEMENT: GOOD**

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

**Executive Staff Rounds**

Executive staff members<sup>5</sup> were consistent in documenting their rounds of the institution during facility inspection.

**Violent Incident Management**

About half of officer survey respondents and those interviewed indicated they feel adequately informed prior to beginning their shift. Typically, when COVID-19 restrictions are not in place, officers attend roll call for information to be disseminated. This practice allows for critical information to be communicated for awareness.

STG Management		2017			2018			2019		
Institution	# of STG Offenders	% of Gen. Pop.	Rule 17 Violations	# of STG Offenders	% of Gen. Pop.	Rule 17 Violations	# of STG Offenders	% of Gen. Pop.	Rule 17 Violations	
Lebanon	1047	43%	160	1072	45%	199	325	12%	205	
Madison	483	20%	100	492	21%	105	299	11%	112	
Mansfield	777	30%	211	905	34%	232	141	8%	335	
Ross	865	41%	147	853	46%	176	271	12%	14	
Southern Ohio	746	59%	291	833	63%	300	329	13%	316	
Trumbull	370	26%	76	356	25%	125	297	12%	155	
<b>Toledo</b>	<b>348</b>	<b>60%</b>	<b>169</b>	<b>484</b>	<b>58%</b>	<b>189</b>	<b>267</b>	<b>13%</b>	<b>175</b>	
Warren	501	40.4%	105	567	42%	126	392	15%	146	

As of November 2020, there were 480 STG-affiliated offenders, which was 58.5% of the institutional population. The percentage of STG-affiliated offenders was lower in comparison to the percentage on the 2017 inspection, which was 42.6%.

The rate of rule 17 (unauthorized group activity) convictions<sup>6</sup> increased 3.5% since the last inspection in 2017. The rule 17 convictions were 169 in 2017, 189 in 2018, and 175 in 2019. There have been 54 rule 17 convictions in 2020 to date.

A review of STG committee meetings for the past six months indicated meetings are being held and included the required staff. There were no overdue security threat group classification reviews, which are done at the monthly STG meetings. The offender respondents who identified gang activity as an occurrence indicated that assaults and gambling were the most common activities.

**Escapes**

There have been no escapes or attempted escapes from 2017 to date.

**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 January 2020 Internal Management Audit found no Ohio PREA related standards in non-compliance.

The facility met 37 and exceeded 8 standards on its April 2020 PREA audit.<sup>7</sup> There were no concerns noted by the auditors.

housing units. PREA awareness education is provided to the offender population upon arrival at the institution and at offender orientation sessions within a week of arrival at the institution.

**Investigations/Allegations**

Staff reported there were eight PREA cases in CY 2019, of which five were allegations against staff members and three were allegations against another offender.

**Offender Education and Awareness**

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

	2017	2018	2019
<b>Total Alleged Incidents</b>	10	14	8
<b>Outcomes</b>	2 unfounded 8 unsubstantiated	10 unfounded 2 unsubstantiated 2 substantiated	4 unfounded 3 unsubstantiated 1 substantiated

<b>Offender Survey Question(s)</b>	<b>Yes</b>	<b>Total Number of Respondents</b>	<b>Change from Previous Inspection</b>
<i>Have you been harassed or threatened by other inmates here?</i>	36.1%	N=36	+8.2%
<i>Have you ever been abused by inmates here?</i>	13.5%	N=37	-3.7%
<i>Have you been harassed or threatened by staff here?</i>	64.9%	N=37	+8.7%
<i>Have you ever been abused by staff here?</i>	28.9%	N=38	+2.7%
<i>Do you know how to report sexual harassment or abuse?</i>	78.9%	N=38	-0.4%

**HEALTH & WELLBEING: GOOD**

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

<b>HEALTH &amp; WELLBEING</b>	<b>2017</b>	<b>2020</b>
	<b>GOOD</b>	<b>GOOD</b>
<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>Good</i>	<i>Acceptable</i>
<i>Recovery Services</i>	<i>Good</i>	<i>Good</i>
<i>Food Services</i>	<i>Good</i>	<i>Acceptable</i>
<i>Recreation</i>	<i>In Need of Improvement</i>	<i>Good</i>

**KEY FINDINGS**

Recovery staff have begun facilitating the AA/NA program while volunteers are suspended, due to COVID-19. Kitchen floors were uneven and broken, which was noted in previous CIIC inspections. Recreation has increased their program offerings and staffing since last inspection.

**UNIT CONDITIONS: GOOD**

*Evaluation of unit conditions consists of direct observation of unit conditions on the main compound and the camp.*

A tour was conducted of cells in housing unit C and the transitional programming unit (TPU). All dayrooms/common areas were good based on the cleanliness of the floors and their overall appearance. The cell conditions were also rated as good with no visible issues. Units were quiet and orderly upon entrance.

No maintenance issues were relayed by unit staff, and they stated that maintenance requests are fulfilled in a timely manner when they do occur. All the drinking fountains, ice machines, phones, and laundry facilities were reported to be operational.

**MEDICAL SERVICES: GOOD**

*Evaluation of medical services is comprised of a nurse 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 good condition. The facility appears to be clean and has sufficient space for staff to conduct clinical duties. The exam rooms, waiting area, safe cells, and infirmary were observed.

**Staffing**

The facility appears to have a sufficient number of medical staff. The facility had one healthcare

administrator, one assistant healthcare administrator, one quality improvement coordinator, one nurse practitioner, four licensed practical nurses, ten registered nurses, and one doctor. Additional staff in medical consists of one health information technician, a diet technician, a part-time phlebotomist, part-time optometrist, and part-time radiologist. Dental staff consists of a lead dental assistant, hygienist, and a part-time dentist.

There was one registered nurse vacancy at the time of the inspection.

The nursing staff indicated during interviews that they felt they provided adequate care to the offender population. The challenges of serving the different security levels and dealing with the coronavirus pandemic were their noted concerns.

**Quality**

An internal management audit was conducted January 2020 and found three Ohio standards in need of improvement. Medical staff relayed that they participate in quarterly interdisciplinary meetings, which is in compliance with DRC policy. The QIC conducts patient satisfaction surveys, which is in compliance with DRC policy. There have been four offender deaths from 2017-2019, due to homicide, suicide, and two overdoses.

**Sick Call & Chronic Care**

**Number of offenders seen in last 6 months**

<i>Nurse Sick Call</i>	1,002	<i>Doctor Sick Call</i>	1,866
<b>Chronic Care Caseload</b>	368	<i>Appointments in last 6 months</i>	800

<b>Offender Survey Question(s)</b>	<b>Satisfied or Neutral</b>	<b>Total Number of Respondents</b>	<b>Change from Previous Inspection</b>
<i>How satisfied are you with the quality of the care you get from the nurses?</i>	80.6%	N=36	+16.5%
<i>How satisfied are you with the quality of the care you get from the Doctor/ALP?</i>	66.7%	N=33	+6.4%
<b>Within 2 days</b>			
<i>On average, when do you see the nurse after filing a health service request (sick call slip)?</i>	56.8%	N=37	+1.9%
<b>Yes</b>			
<i>If you are on the chronic care caseload, do you see medical regularly?</i>	53.8%	N=26	+6.8%

**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**

<i>Total</i>	250	<i>C1 / Seriously Mentally Ill (SMI)</i>	104
<i>Offenders on Medication</i>	135	<i>On Mandated Medications</i>	1

**Facilities**

The mental health facilities were observed to be clean and orderly. Staff relayed space is not an issue. Staff were currently placed in offices within housing units,

to allow for offender access during COVID-19 restrictions. The crisis cells were noted to be in good condition. One offender was on crisis watch during the tour and the officer was attentive to their needs.

**Access to Mental Health<sup>8</sup>**

482 kites have been processed in the last six months. 98 referrals were made to mental health for offenders. The MHA indicated that they have continued to hold office hours but staff have to call for services due to the high security level of the institution. Group programming has resumed in small offender-to-staff ratios. In-cell activities such as written programs and exercises have increased.

**Staffing**

Staffing levels included one APN-MH, two RN’s, five LSW’s, two LISW’s, an HIT, a QIC, and one MHA. There were no vacancies at the time of the inspection.

**Programming**

ToCI offers a small range of mental health programming for offenders. At the time of the inspection, BRIGHT depression group was facilitated

by staff. It was reported that Illness Management Recover and Seeking Safety would be resuming in the near future. Anger Management and Life Skills are offered as in-cell programs.

**Suicide Attempts / Critical Incidents**

There has been one completed suicide, and five attempted suicides from 2017-2019. Self-injurious behavior occurred 70 times in the time period. The facility routinely utilizes crisis intervention strategies and the crisis intervention team to diffuse offender concerns. Constant watch was utilized 1,036 from 2017-2019.

**Quality**

A full internal management audit was conducted in January 2020. The auditors relayed no concerns related to mental health services.

<b>Offender Survey Question(s)</b>	<b>Satisfied or Neutral</b>	<b>Total Number of Respondents</b>	<b>Change from Previous Inspection</b>
<i>Overall, how satisfied are you with the quality of the care you get from Mental Health?</i>	54.5%	N=22	-17.4%

**RECOVERY SERVICES: GOOD**

*Evaluation of recovery services focuses on cleanliness of facilities, staffing, participation 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. The facility’s recovery services supervisor indicated that they have sufficient space for staff to conduct clinical duties.

**Staffing**

Staffing levels appear adequate to provide recovery service programming. There were no staff vacancies at the time of the inspection. Additionally ToCI has one offender aide that assists in program facilitation.

**Participation and Outreach<sup>9</sup>**

The recovery services department did stop group programming during the initial coronavirus pandemic, but have resumed group programming with decreased class sizes.

ToCI recovery service department currently offers programming to include: Intensive Outpatient Program and Brief Intervention Program. More programs are able to be facilitated when COVID-19 restrictions are not in place. Recovery Services held 16 groups in the last 90 days. ToCI reported 20 offenders are currently participating in recovery service programming with 209 offenders on the waitlist. The recovery service department does reach out to

offenders who are found guilty of Rule 39's<sup>10</sup>. ToCI staff reported that offenders are still receiving NA/AA meetings, currently facilitated by staff while volunteers are restricted by COVID-19.

**Access**

Staff relayed multidisciplinary meetings occur quarterly through the QIC (Quality Improvement Committee) process which is within policy.<sup>11</sup>

<b>Offender Survey Question(s)</b>	<b>Yes</b>	<b>Total Number of Respondents</b>	<b>Change from Previous Inspection</b>
<i>Do you feel you are able to get into Recovery Services Programs?</i>	46.2%	N=26	-18.7%

**FOOD SERVICES: ACCEPTABLE**

*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 sanitation process between cohorts was observed. The area was rated as good. The serving lines were also clear of food particles. Temperatures were taken of the food and they were found to be appropriate.

in adequate condition. A slight buildup of ice was noted in one freezer.

**Offender Work Programs**

Staff reported there are currently 45 offender food service workers. Offenders earn \$25 each month in addition to state pay.

**Meal**

The meal sampled by CIIC was rated as good. The portion sizes were sufficient and the quality of the main entrée was good. Temperatures were appropriate. The meal sampled contained a chicken patty, vegetables, bread, rice, and cake.

**Food Service Contract Staff**

The food service contract staff consisted of 15 employees including one director, two assistant directors, and twelve hourly workers.

**Kitchen and Food Preparation Area**

The kitchen floor was clear of any excess food particles and debris, though it was broken in places and uneven. There was water buildup in parts of the preparation area, without "wet floor" signs present. During the tour, an offender slipped on puddling water, but caught himself before falling.

**Loading Dock / Pest Control**

The loading dock was extremely clean, organized and clear of debris. Staff relayed that the exterminator visits the facility monthly and as needed. Pest issues were not reported.

**Food Service Management and Oversight**

In their most recent contract evaluation from the DRC in March 2020, ToCI received a compliance score of 99%. The main area of non-compliance was sanitation.

Cooking equipment appeared clean while in use, stored equipment was clean and orderly. Staff relayed that equipment is sanitized after every use and the preparation area is cleaned on a regular daily and weekly basis. The freezers and coolers appeared to be

In their most recent health department inspection on February 25, 2020, the institution passed with all standards in 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>	18.4%	N=38	+2.6%

**RECREATION: GOOD**

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

**Facilities**

Physical facilities<sup>12</sup> appeared clean and were observed during inspection. The indoor recreation area had very limited equipment, though an organized game of basketball was ongoing. There were no maintenance concerns during the inspection.

**Activities**

Offenders are offered a good variety of activities for recreation, including several organized intramural sports and tournaments. Overall, the recreation department offers a majority of recreation activities permitted, per policy, for Level 3 offenders.<sup>13</sup> Movies are made accessible and are rotated frequently.<sup>14</sup>

The recreation department hosts a leisure program for the arts in which participants may purchase musical instruments and craft supplies through approved vendors. To be a member of the program, applicants must not have major rule infractions. Once accepted, members go through an orientation process and then may purchase products through approved vendors.

**Access**

Currently, two units recreate together in separate areas of the recreation department. Prior to COVID-19 restrictions, units recreated together. There is an inclement weather schedule provided. Offenders also have scheduled recreation in their units. Units have board games and puzzles for dayroom recreation.

Offender Survey Question(s)	Satisfied or Neutral	Total Number of Respondents	Change from Previous Inspection
<i>How satisfied are you with recreation?</i>	56.8%	N=37	+0.7%

**FAIR TREATMENT: ACCEPTABLE**

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

<b>FAIR TREATMENT</b>	<b>2017 ACCEPTABLE</b>	<b>2020 ACCEPTABLE</b>
<i>Staff/Offender Interactions</i>	<i>Acceptable</i>	<i>Deferred</i>
<i>Inmate Grievance Procedure</i>	<i>Acceptable</i>	<i>In Need of Improvement</i>
<i>Transitional Programming Unit</i>	<i>Acceptable</i>	-
<i>Limited Privilege Housing</i>	<i>Good</i>	-
<i>Offender Discipline</i>	-	<i>Good</i>

**KEY FINDINGS**

During the facility tour of the housing areas, staff engagement with offenders was exceptionally professional and constructive to their wellbeing. The Unit Management Chief had a notable rapport with offenders.

Untimely responses to informal complaints and grievances were a concern.

Multiple offender complaints for staff retaliation were substantiated, following investigation.

**STAFF / OFFENDER INTERACTIONS: DEFERRED**

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

Offender surveys were only completed by a 4.6% sample of the population. Due to this low response rate, survey results hold a 95% confidence level with a ±15.6% margin of error. CIIC has deferred rating this section due to the low reliability of survey results.

<b>Offender Survey Question(s)</b>	<b>Yes</b>	<b>Total Number of Respondents</b>	<b>Change from Previous Inspection</b>
<i>On most days, are your housing unit officers professional?</i>	65.8%	N=38	+6.2%
<i>On most days, are your housing unit officers helpful?</i>	57.9%	N=38	+10.4%
<i>Have you been harassed or threatened by staff here?</i>	64.9%	N=37	+8.7%
<i>Have you ever been abused by staff here?</i>	28.9%	N=38	+2.7%

**INMATE GRIEVANCE PROCEDURE (IGP): IN NEED OF IMPROVEMENT**

*Evaluation of the inmate grievance procedure<sup>15</sup> 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 he does not hold open office hours, due to the security level of the institution. He indicated that he is available weekly in the food service areas and does see offenders if they request through a kite, for further investigation of a complaint, or through conversations during rounds. Inspector’s report logs reflected inspector rounds being conducted in a variety of areas, to include housing units, food service, recreation, and medical services. The inspector relayed that three offenders were currently on grievance restriction for duplicating complaints.

**Informal Complaints**

	<b>Filed</b>	<b>Average # of Days to Answer</b>	<b>Untimely</b>
<b>2018</b>	2,925	33.52	294 (10.1%)
<b>2019</b>	2,392	21.33	317 (13.3%)

The Inspector relayed that they do contact staff and monitor informal complaint responses closely to ensure they are timely. A review of 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. Two of the ten complaints reviewed were closed without being responded to.

**Grievances**

	<b>Filed</b>	<b>Average # of Days to Answer</b>	<b>Untimely</b>
<b>2018</b>	1,196	19.96	488 (40.8%)
<b>2019</b>	993	17.62	597 (60.1%)

The Inspector relayed that the most frequent grievance topics are relating to medical, property, and mailroom. There were offender grievances filed in the past year for staff retaliation that were substantiated, and discipline was handled with the responsible staff person(s).

The ToCI Inspector indicated that he does attend executive staff meetings, where informal complaint and grievance trends are discussed and plans developed to address them.

A review of ten grievance responses was conducted. It was noted that many responses had to have the time limit extended by the inspector. One response was questioned for its professionalism.

<b>Offender Survey Question(s)</b>	<b>Yes</b>	<b>Total Number of Respondents</b>	<b>Change from Previous Inspection</b>
<i>Do you know who the inspector is?</i>	44.7%	N=38	+18.2%
<i>Are you able to get the following: Informal Complaints?</i>	61.1%	N=36	-20.8%
<i>Have you ever felt that staff would not let you use the grievance procedure here?</i>	48.6%	N=37	-0.5%
<i>Do you feel that the following are handled fairly at this institution: Informal Complaints?</i>	12.9%	N=31	+1.4%
<i>Do you feel that the following are handled fairly at this institution: Grievances?</i>	10.0%	N=30	-0.7%

**OFFENDER DISCIPLINE: GOOD**

*Evaluation of offender discipline<sup>16</sup> 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 in 2019 were rules 19 (fighting) and 39 (possession/consumption), of the Inmate Rules of Conduct. Staff reported there were no issues with backlog.

There were 9,874 conduct reports submitted in 2019, which was an 11.5% decrease from 2018, which had 11,154. In 2019, 341 conduct reports were for drug or alcohol related offenses and 421 were for fighting or instigation of a fight.

**Procedures**

The RIB panel followed standard hearing procedures.<sup>17</sup> Panel members reviewed relevant evidence during the hearing, and checked that the offender had received a copy of the conduct report and completed their rights form. Staff review camera footage for conduct reports such as fights and assaults. They additionally will review statements, photographs, or medical exams, when appropriate for the case.

**Due Process**

In the 33 closed case reviews, 20 offenders were on the mental health caseload and were screened by mental health staff prior to the RIB hearing, per policy. No

cases requested witnesses in the cases reviewed. The inmate rights form was completed for all cases.<sup>18</sup> Confidential information was not used in any of the reviewed cases.

**Sanctions**

The progressive discipline process was explained by the Rules Infractions Board Chairperson. Discipline for first-time offenders appeared appropriate.

**Programming/Activities**

Mental Health staff conducts daily rounds and evaluations of offenders. Medical staff conduct rounds every shift.

Recreation consisted of indoor and outdoor cages. Each of the recreation cages consisted of a pull-up/dip workout station. The recreation areas appeared clean. Offenders have access to a bookcase for reading material, may use the library, and the librarian made weekly rounds in the unit. The chaplain makes rounds throughout the unit, as well.

**Conditions**

Overall, the common areas of the TPU were rated good. The unit visited was quiet and organized. The cells in TPU were adequately clean. Each TPU cell has its own sink and toilet.<sup>19</sup>

**REHABILITATION & REENTRY: GOOD**

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

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

**KEY FINDINGS**

Community service hours have substantially decreased in 2019.

Academic programming is exceptional for a high security level facility.

Library services are in the process of implementing innovative improvements.

Toledo is one of few high security level facilities in the country to offer college courses.

**REENTRY PLANNING: GOOD**

*Evaluation of reentry planning<sup>20</sup> includes interviews of staff, document review, and survey responses.*

**Staff Accountability**

Unit staff consists of a unit management chief, three unit managers, seven sergeants, and six case managers. There were no vacancies at the time of inspection. Case managers are expected to facilitate reentry approved programming, as well as meaningful activities.

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. Unit staff track the completion of RPLAN’s through the ORAS software.

**Reentry Resources**

Staff relayed they conduct family and reentry fairs to provide offenders and their support systems with community contacts. Staff relayed that barriers for offenders to access purposeful activities and reentry programming at ToCI are staffing and offender motivation. The institution maintained a reentry resource center in their library, which is undergoing an expansion.

<b>Offender Survey Question(s)</b>	<b>Yes</b>	<b>Total Number of Respondents</b>	<b>Change from Previous Inspection</b>
<i>Do you know where you can find reentry information?</i>	37.8%	N=37	-3.1%

**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**

ToCI has four Reentry Approved programs able to be facilitated by unit staff at the time of this site visit. Due to COVID-19, programming is currently suspended. Supplemental programs offered include: Anger- Creating New Choices, TOPUCU, Money Smart, Financial Peace University, and Anger Regression Therapy (ART).

<b>Program</b>	<b>Waitlist</b>	<b>Enrollment</b>	<b>2019 Completions</b>
<i>Thinking for a Change</i>	55	-	7
<i>Inside Out Dad</i>	9	-	13
<i>Victim Awareness</i>	22	-	17
<i>Decision Points</i>	109	-	32
<i>Anger Control (ART)</i>	0	-	4

<b>Offender Survey Question(s)</b>	<b>Easy or Neutral</b>	<b>Total Number of Respondents</b>	<b>Change from Previous Inspection</b>
<i>How easy or difficult is it to get into the following activities in this prison? Unit Programs</i>	39.4%	N=34	-22.2%
	<b>Yes</b>		
<i>Have staff talked with you about what programs to take while incarcerated?</i>	28.9%	N=38	-5.6%

**FAMILY ENGAGEMENT & COMMUNITY CONNECTIONS: ACCEPTABLE**

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

ToCI promotes offender communications with family, friends, and community through mail, email, phones, and free envelopes. The facility also hosts family events, as permitted. ToCI reported 169 community service hours for 2019. This is a drastic decrease from the 64,572 hours reported in 2017, which can be attributed to the change in security level and the restrictions that accompany that change. Volunteers are currently suspended by COVID-19 restrictions.

<b>Offender Survey Question(s)</b>	<b>Yes</b>	<b>Total Number of Respondents</b>	<b>Change from Previous Inspection</b>
<i>Have you had any problems with mail?</i>	78.9%	N=38	+23.4%
<i>Have you had any problems with telephones?</i>	63.2%	N=38	-6.5%
<i>Have you had any problems with visitation?</i>	40.5%	N=37	-5.4%

**ACADEMIC PROGRAMMING: EXCEPTIONAL**

*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.*

ToCI education department consists of a principal, education specialist, three academic teachers, a career-tech and advanced job training instructor. There are currently no vacancies in the education department. The average ratio of student to academic and career/tech instructors is 8 to 1.

Education classrooms appeared to be in good condition. Classrooms and a computer lab were observed during inspection. Toledo is reported to be the forefront in DRC for college programming and utilization of technology in the classrooms. ToCI’s education department prides themselves on removing barriers from students by incorporating Universal Learning; ensuring all students are engaged including those with executive functioning deficiencies. ToCI education staff builds positive school culture and aims to graduate a quarter of the students they serve during the year.

ToCI education department offers Pre-GED, GED, ABLE, Literacy, Special Education, Title 1, career technical education/career enhancement program, advanced job training, and apprenticeship programs. Staff relayed that educational opportunities and materials are provided to the offenders.

Currently, due to COVID-19 restrictions, there are approximately nine students per class in the morning and evenings for each instructor. Classes have been extended to 2.5 hours long. Normally, 100 students would be seen each school day, with an average of 80 academic students and 20 career-tech students. Students enrolled in Advanced Job Training (college) programs are continuing courses on provided tablets. Students in the TPU are brought weekly packets when applicable.

Reading room hours for the children’s reading room in visiting are not being reported on the Educational Monthly Report per policy<sup>21</sup> and have not been reported in the past. ToCI offers offenders the opportunity to take the Pearson View GED test on the computer, or opt to take the HiSet test<sup>22</sup>.

ToCI’s principal expressed tremendous gratitude for instructors and their work ethic during this time. There are future plans for students to have access to Chromebooks which shall pilot a new distance-learning program. Additionally, they want to expand their career-tech program.

<b>Offender Survey Question(s)</b>	<b>Easy or Neutral</b>	<b>Total Number of Respondents</b>	<b>Change from Previous Inspection</b>
<i>How easy or difficult is it to get into the following activities in this prison? Academic Programming</i>	31.3%	N=32	-16.5%

**LIBRARY SERVICES: GOOD**

*Evaluation of literacy development focuses on data analysis, a document review, direct observation of at least one program, and offender survey responses.*

**Library Facilities**

The library appeared organized and clean. The staff reported that the library currently has a seating

capacity of approximately 10 offenders. There is also one satellite library in B-block. Currently, the library is

closed for entry but legal services are virtually accessible and may also be requested by kite.

The total computers in the ToCI library is 13: four Lexus Nexus, seven Word Processors and two Ohio Means Jobs computers. All machines were reported to be operational at the time of inspection.

The library did reflect having secondary educational materials, ethnic/urban books and books in foreign languages such as Spanish, and some in French and German.

The last library advisory meeting was held on September 16, 2020 with staff in attendance such as the School Administrators, Librarians, two teachers, a corrections officer and two offender representatives, which is in compliance with policy.<sup>23</sup>

**Library Access**

The library schedule reflects morning, evening and weekend hours which is in compliance with policy.<sup>24</sup>

Due to COVID-19 restrictions, physical access to the library is closed but offenders may kite the Librarian for desired materials. Lexus Nexus is also made available to them on provided GTL tablets.

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-02<sup>25</sup>. In the TPU there is also a cart with library books for choosing. Additionally, offenders may request materials via kite.

The librarian reported that the department is looking to expand and separate the Reentry Resource Center in the library and make this area more distinctive. It was also reported that the library and education department are working together to create a Universal Design that is makes utilizing library services easier by coding books by topics and reading levels.

**VOCATIONAL & WORK SKILL DEVELOPMENT: GOOD**

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

<b>Program</b>	<b>Waitlist</b>	<b>Enrollment</b>	<b>2019 Completions</b>
B.O.S.S	8	8*	9

\*Enrollment numbers were cut in half to comply with social distancing guidelines.

**Programming**

ToCI offers one vocational program, B.O.S.S. with 8 offenders enrolled. ToCI currently has the following Apprenticeship programs: Animal Trainer, Health Care Sanitary Tech., Horticulturist, Janitor, Maintenance Repairer (Building), Plumber, Quality Control Tech, and Stitcher (Garment).

<b>Offender Survey Question(s)</b>	<b>Easy or Neutral</b>	<b>Total Number of Respondents</b>	<b>Change from Previous Inspection</b>
<i>How easy or difficult is it to get into the following activities in this prison? Vocational Programming</i>	20.0%	N=30	-12.6%

**FISCAL ACCOUNTABILITY: GOOD**

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

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

**KEY FINDINGS**

Overtime has steadily increased from FY 2018 – FY 2020.  
 Toledo has decreased all utility costs and usages by over 10% between FY 2019 and FY 2020.  
 Surveyed staff and supervisors were overall positive regarding the facility climate.

**FISCAL WELLNESS: ACCEPTABLE**

*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**

	<b>Amount</b>
The FY 2019 ToCI allocated budget increased by 9.8% from their FY 2018 budget.	2018 FY \$37,666,763
	2019 FY \$41,358,252

**Fiscal Audits**

In their most recent internal audit in January 2020, ToCI was compliant on nine of their 10 applicable Ohio Fiscal Standards. In their most recent external fiscal audit dated August 2019, the External Auditor found nine observations and concerns. The concerns were related to religious service contracts, employee payroll, commissary, cashier’s office, inmate trust fund, and the industrial and entertainment (I&E) fund.

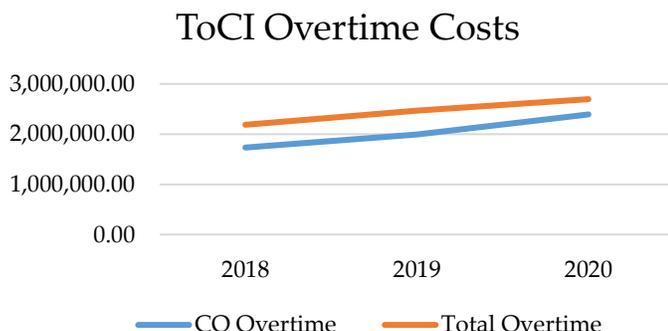
**Overtime Management**

	<b>FY 2018</b>	<b>FY 2019</b>	<b>FY 2020</b>
<b>CO Overtime</b>	20,312	25,916	32,963
<b>Total Overtime</b>	24,387	28,986	36,569

**Infrastructure**

The following capital improvement requests were submitted for future consideration:

<b>Project</b>	<b>Amount</b>
Food Service Floor & Drains	\$500,000
Window & Ventilation Replacement	\$400,000
Door Lock Upgrade	\$5,000,000
Parking Lot Improvements	\$700,000
Quarter Master Washer & Dryer	\$250,000
Salt Building	\$150,000
Digitizing Cameras	\$129,000
	<b>\$10,761,000</b>



**ENVIRONMENTAL SUSTAINABILITY: EXCEPTIONAL**

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.

**Utility Conservation<sup>26</sup>**

Overall, ToCI decreased their total utility costs by \$175,292 (18.3%) in FY 2020. ToCI has decreased all utility costs and usages by over 10% between FY 2019 and FY 2020. The most significant utilization and cost decreases were in natural gas followed by electric and water. The FY 2019-20 utility consumption and costs comparisons are illustrated in the following chart:

Energy Type	FY 2019	FY 2020	Change
Water (gal)	35,802,514 gal	30,191,374 gal	-15.7%
	\$339,566	\$292,657	-13.8%
Natural Gas (ccf)	31,125 ccf	23,397 ccf	-24.8%
	\$160,350	\$100,052	-37.6%
Electric (kwh)	6,206,738 kwh	5,312,594 kwh	-14.4%
	\$460,134	\$392,049	-14.8%
<b>Total Costs</b>	<b>\$960,050</b>	<b>\$784,758</b>	<b>-18.3%</b>

**Recycling**

In FY 2020, recycling projects resulted in \$184.69 of revenue. ToCI has 23 offender re-claimers specifically trained in recycling but the program is currently non-operational due to COVID-19.

**Sustainability Programs**

No participants are currently enrolled in the Roots of Success<sup>27</sup> environmental literacy program, nor is there

an offender waitlist due to COVID-19 restrictions. There were 10 program completions in 2019.

**Sustainability Audit**

ToCI conducted a sustainability audit which outlined additional energy conservation and waste reduction initiatives from FY 2019. The institution has replaced filters and weather strips throughout the facility and replaced lighting in the parking lot to reduce energy.

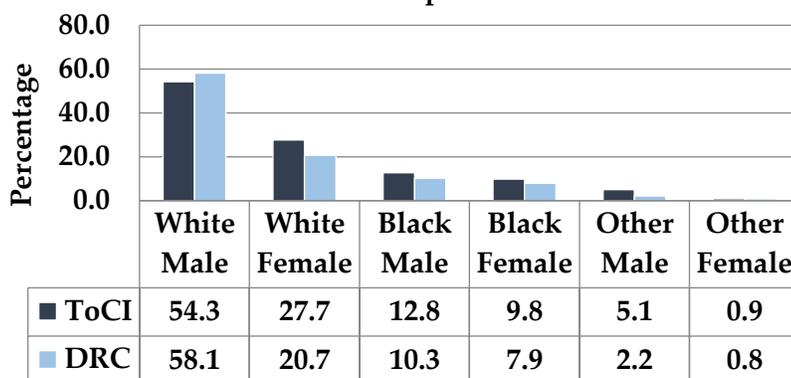
**STAFF MANAGEMENT: ACCEPTABLE**

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

**Staff Demographics**

As of November 2020,<sup>28</sup> ToCI had 429 total staff including 305 correctional officers (71.1%). Of the total staff, 72.3% were male and 27.7% were female. Additionally, 71.3% were classified as white, 22.6% were classified as black, and 6.1% were classified as individuals of another race. As of November 2020, the offender-to-officer ratio at ToCI was 2.7-to-1 which is significantly lower than the DRC ratio of 6.1-to-1.<sup>29</sup>

Staff Breakdown Comparison as of November 2020



**Workplace Environment**

CIIC interviewed 10 correctional officers who provided the following insight regarding the ToCI workplace environment: Most officers rated both staff and offender safety as “High to Very High” on a 5-point scale. Some feedback on how to make the facility safer was to run the facility more like a maximum security institution. Due to the unique security population mix, officers feel that some higher level offenders aren’t watched as much as they should be.

Staff morale was rated as “Low” staff attributed this to the current environment due to COVID-19 and having to work additional shifts.

Staff are offered appropriate PPE equipment such as gloves, and masks. Equipment such as gowns, face shields and N-95 masks are made available to those who may interact with positive offenders. Hand sanitizer is also available throughout the facility.

**Evaluations**

In CY 2019, ToCI staff completed 100% of their 428 performance evaluations.

**Vacancies**

On the day of the inspection, ToCI reported 31 total vacancies (6.7%). Of the total vacancies, 22 were correctional officer positions (6.8%).

**Turnover Ratio**

	ToCI Total Separations	ToCI Rate	Total State Institution Separations	State Institution Rate
FY 2017	64	15.7	1,283	11.8
FY 2018	83	19.1	1,325	12.1
FY 2019	77	18.2	1,437	13.1

**Training<sup>30</sup>**

The FY 2019 ToCI mandated training completion rates consisted of the following:

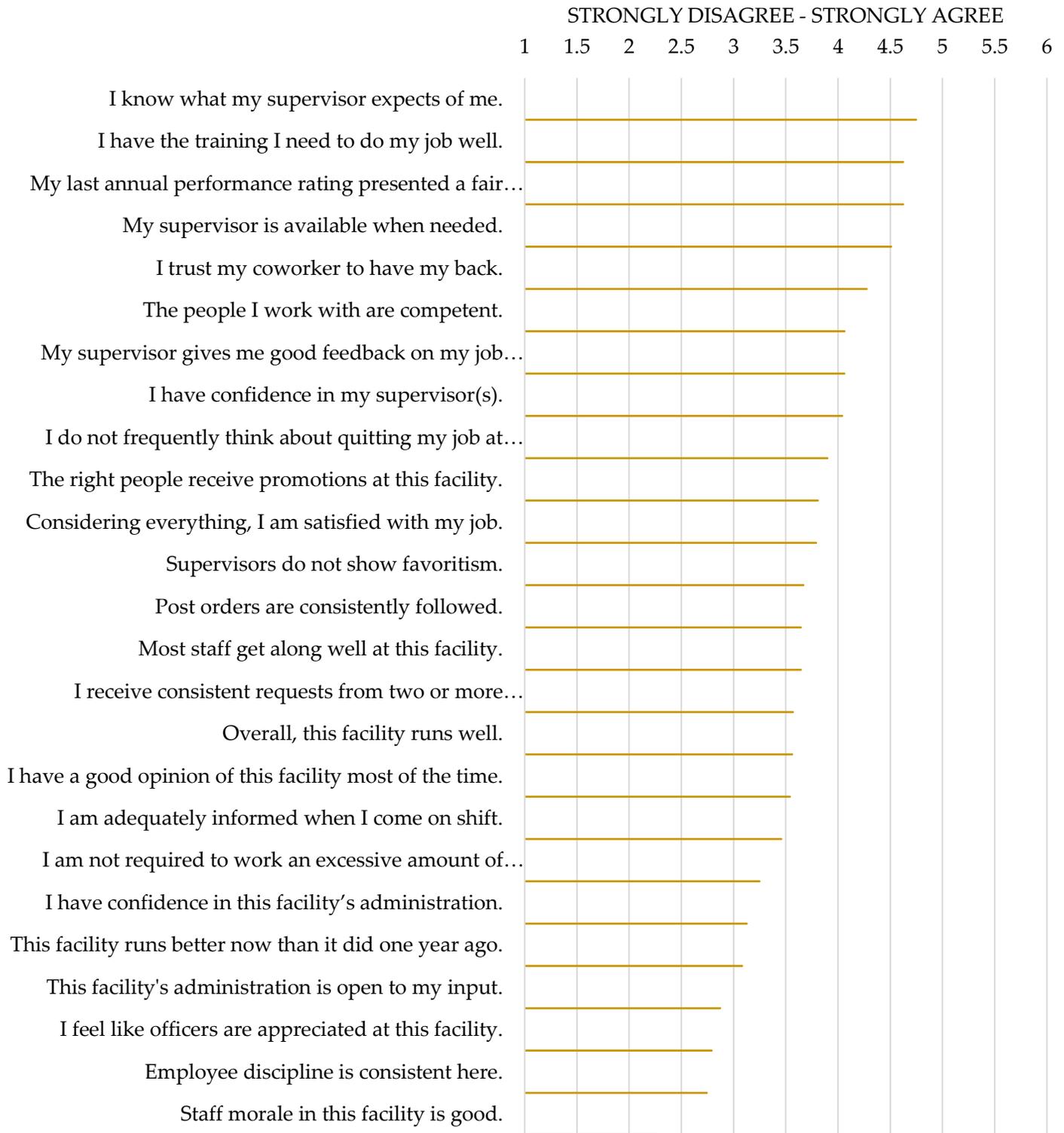
- CPR/First Aid: 97.9%
- Defense Tactics: 61.2%
- E-Learning: 72.4%
- OC-Spray: 88.3%
- Firearms 68.4%
- PREA 93.9%

Reasons for non-completion include: non job requirement and extended leave.

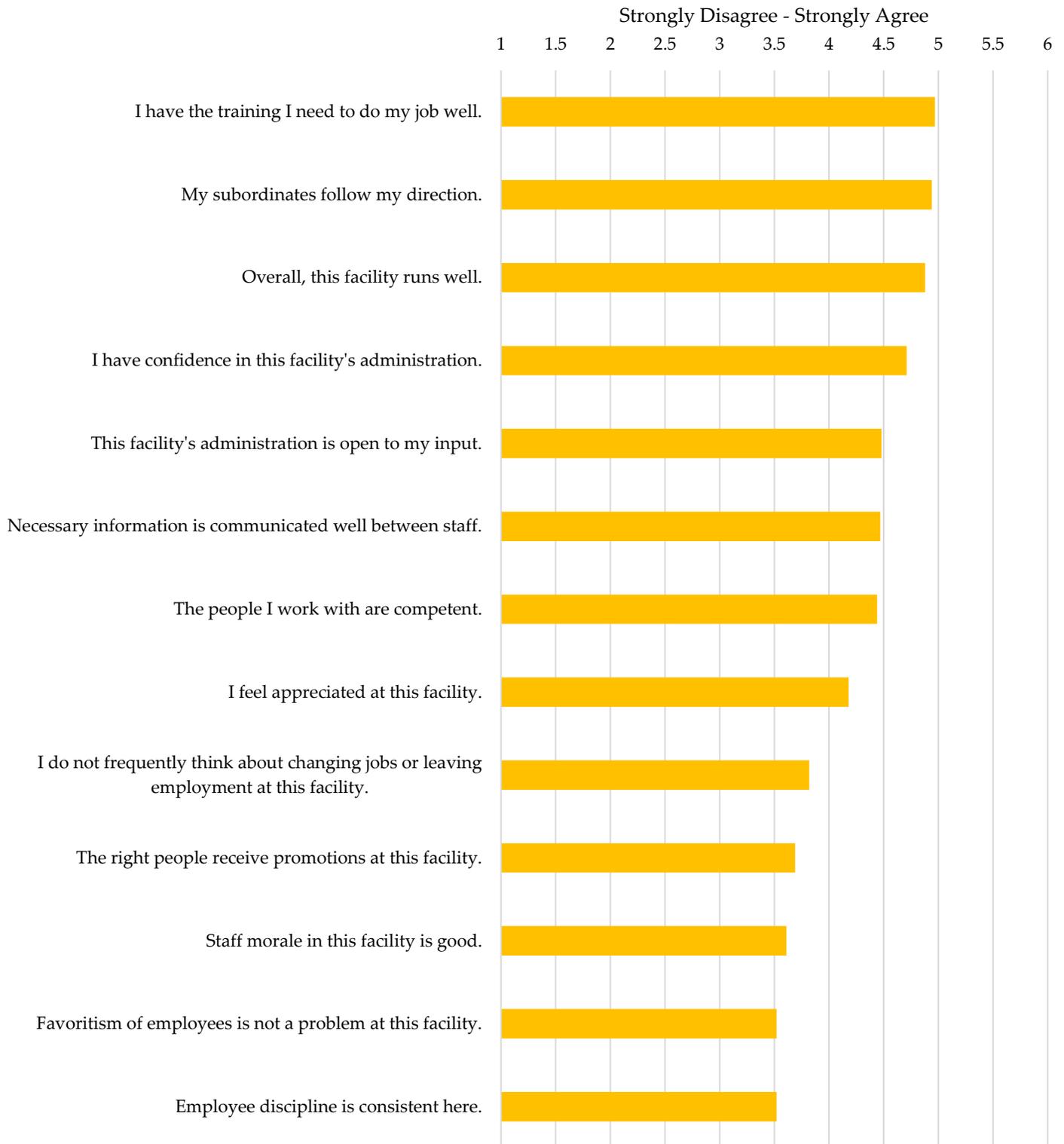
**Recruiting and Retention Initiatives**

According to staff, ToCI has a recruitment team that visits local colleges and vocational schools. Human Resources reported working with CTA and the Ohio Department of Education to implement a state-wide career path training.

CIIC received 48 responses back from ToCI correctional officers which represents a sample size of 14.9% of total officers. The survey responses were mostly positive, but indicate that officers have some concerns regarding administration.



CIIC received 34 survey responses from ToCI Supervisors. Supervisor survey responses were overall positive.



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<sup>1</sup> 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.

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

<sup>3</sup> 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.

<sup>4</sup> During the inspection, bunk areas are checked to identify if offenders are hanging items to block officers' direct observation.

<sup>5</sup> 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.

<sup>6</sup> 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.

<sup>7</sup> PREA Audit: Auditor's Summary Report Adult Prisons and Jails. Accessed at <https://www.drc.ohio.gov/Portals/0/Toledo%20Correctional%20Institution%202020%20PREA.pdf>

<sup>8</sup> 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.

<sup>9</sup> 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.

<sup>10</sup> AR 5120-9-06 defines Rule 39 as unauthorized possession, manufacture, or consumption of drugs or any intoxicating substance.

<sup>11</sup> 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.

<sup>12</sup> Indoor recreation facilities consist of a gymnasium with one full basketball court, an equipment room, a multipurpose room, a classroom for the art program (north side), a music room (south side), and a smaller room for board games. Outdoor facilities consist of, two basketball courts, a softball field, three handball courts, four horseshoe pits, and a half-mile track. North and South recreation areas are identical to each other.

<sup>13</sup> DRC 77-REC-01 states the permitted recreational activities per security level.

<sup>14</sup> The recreation department plays five to six different movies in a monthly rotation. Rec staff relayed during interview having a Netflix movie account.

<sup>15</sup> 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.

<sup>16</sup> 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.

<sup>17</sup> 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.

<sup>18</sup> 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.

<sup>19</sup> 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.

<sup>20</sup> 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.

<sup>21</sup> 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).

<sup>22</sup> The HiSet is a paper test, which slightly differs from the GED test but, results in a high school equivalency certificate.

<sup>23</sup> DRC 58-LIB-03 outlines to guidelines for the creation and duties of the Library Advisory Committee.

<sup>24</sup> 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.

<sup>25</sup> 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.

<sup>26</sup> 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.

<sup>27</sup> 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.

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

<sup>29</sup> DRC Monthly Fact Sheet, November 2020 <https://www.drc.ohio.gov/Portals/0/November%202020.pdf>

<sup>30</sup> 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.