

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: 9 October, 2015

Auditor Information			
Auditor name: Jack L. Falconer			
Address: P.O. Box 72673, Phoenix, AZ 85050			
Email: jfalconer1@cox.net			
Telephone number: 602-374-3320			
Date of facility visit: 22-24 Sep, 2015			
Facility Information			
Facility name: North Central Correctional Complex (MTC)			
Facility physical address: 670 Marion Williamsport Rd. East, Marion, Ohio 43301			
Facility mailing address: <i>(if different from above)</i> Click here to enter text.			
Facility telephone number: 740-387-7040			
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Neil Turner, Warden			
Number of staff assigned to the facility in the last 12 months: 362			
Designed facility capacity: 2,730 Beds; 2250 Main Facility (contractually 2,226) and 480 at the Camp			
Current population of facility: 2706			
Facility security levels/inmate custody levels: Medium/Minimum			
Age range of the population: 18-77			
Name of PREA Compliance Manager: Kevin Woods		Title: Compliance Manager	
Email address: kevin.woods@mtctrains.com		Telephone number: 740-387-7040 Ext 2003	
Agency Information			
Name of agency: Management and Training Corporation			
Governing authority or parent agency: <i>(if applicable)</i> Click here to enter text.			
Physical address: 500 North Marketplace Drive, PO Box 10, Centerville, Utah 84014			
Mailing address: <i>(if different from above)</i> Click here to enter text.			
Telephone number: 801-693-2600			
Agency Chief Executive Officer			
Name: Scott Marquardt		Title: President and CEO	
Email address: scott.marquardt@mtctrains.com		Telephone number: 801-693-2800	
Agency-Wide PREA Coordinator			
Name: Mark Lee		Title: Director, Corrections, Corporate PREA Coordinator	
Email address: mark.lee@mtctrains.com		Telephone number: 801-693-2864	

AUDIT FINDINGS

NARRATIVE

The PREA audit of the North Central Correctional Complex (NCCC) was conducted on September 22-24, 2015. The facility is a 2,730 bed, minimum and medium custody level prison operated by the Management & Training Corporation (MTC) for the Ohio Department of Rehabilitation and Correction (ODRC). It is located in Marion, Ohio and the facility is owned by the State of Ohio.

It is the mission of **Management Training Corporation (MTC)** to “Be a leader by implementation of our plan to achieve high performance standards and goals; Maintaining a foundation based on integrity, accountability, and excellence; Providing long-term growth and stability while ensuring fiscal responsibility; creating opportunities through a positive environment for personal growth and development; empowering employees to implement innovative ideas for continuous improvement; Building esteem and pride by celebrating our diversity and accomplishments”.

It is the mission of the **North Central Correctional Complex NCCC)** “To provide individuals with programmatic activities while incarcerated in a safe and secure environment. NCCC will implement and enhance the Success for Life concept and the “BIONIC” philosophy with inmates from intake to release which will in turn create a safe environment for staff and inmates to flourish”.

On the first day of the audit, an entrance meeting was held where introductions were made. The following facility and other staff was in attendance:

Neil Turner, Warden
Taggart Boyd, Deputy Warden, Operations
Becky Joyce, Deputy Warden, Programs
Kevin Woods, Compliance Manager
Ruben Quintero, Major
James Craig, Associate Deputy Warden
Dawn Lykins, Associate Deputy Warden
Lori Shuler, Inspector
Richard McCurry, Asst, Investigator
Andrew Albright, ODRC PREA Coordinator
Jayne Haberfield, ODRC Contract Monitor
Charlotte Owens, ODRC Regional PREA Administrator
Dan Lipperman, ODRC Audit Administrator
Carl Nink – Management Training Corporation PREA Coordinator
Jack Falconer – Auditor

The auditor briefed the group on the audit process and responded to questions. After the entrance meeting, a tour of the NCCC Main Unit was conducted looking at inmate housing, program areas, food service, medical, recreation, and other areas required by the PREA guidance was made. In addition, a number of staff and inmate interviews was conducted. On Wednesday, the NCCC Camp Unit was toured and interviews of staff and inmates were completed.

Facility Description

The North Central Correctional Complex (NCCC) consists of the Main Unit and a Camp.

The **NCCC Main Unit** is a 70 acre, open campus plan of (17) buildings which include: entry, control, administration, visitation, medical, food service, segregation, programs, a Chapel, and inmate housing units. The compound is surrounded by two, 14ft. chain link fences, topped and lined with razor wire, an electronic intrusion system, and closely monitored by staff using closed circuit cameras and screen monitors in a central control room. The security perimeter includes (2) armed roving perimeter vehicles, posted 24 hours a day. The control room also monitors and controls all traffic moving into and out of the facility at the front entry and at the rear sally port. Housing for the 2226 adult male general population inmates includes 10, 224 bed inmate dorms and a segregation unit. Showers, urinals, and commodes all have partitions and shower curtains.

The **Camp Unit** located on a 15 acre campus, has (6) buildings which include: entry & control, a programs structure, and four inmate housing units. The compound is surrounded by one, 14ft. chain linked fence. Cameras are located in most areas to assist in the security management of the Unit.

The housing for the 480 general population inmates includes (4) open bay dormitories. Showers, urinals, and commodes all have partitions and shower curtains. The NCCC Camp was originally opened in 2000 for the Department of Youth Services. In 2012, the Unit was converted for minimum security adult male inmates.

Both facilities have a variety of rehabilitative programs that are offered to the inmate population. These include; Academic Programs, Vocational Programs, Religious Programs, Substance Abuse Programs and Meical/Mental Health programs.

- The Academic program offers classes in Literacy, ABE, and GED, Pre-GED, and Special Education. The vocational program offers apprentice programs for Bakery and Carpentry. Other VT offerings include plumbing, electrical, HVAC, building maintenance, auto mechanics, auto detailing, digital application center, and horticulture. The facility reported for the previous 12 month period, 445 academic students, 190 vocational students, 205 education certificates, and 23 completions of GED.
- The Religious Program is staffed by one full time Chaplain. In addition, the Chaplain is assisted by over 300 volunteers from the community. The Religion Program ensure that the inmates are provided access to religious activities, religious materials, religious diets, and other legitimate requirements of their faith. The priority of the program is to support worship services and studies for several different religious groups. The Religious program reported that 358 achievement certificates were awarded to the inmate population.
- The Substance Abuse Program (Recovery Services) is staffed with a psychiatrist, a psychologist, and substance counselors. The facility conducts Life Skills training in such areas as employment, relationships, personal growth, etc. Treatment is provided in DUI classes, drug and alcohol rehabilitation, Moral Reconation Therapy, Inside-Out Dads, Relapse Prevention, AA, NA, & CA, The facility reported for the previous 12 month period, 520 program completions.

Inmate Healthcare Services are provided 24/7 by the medical division of MTC. The staffing for the medical program has 39 providers Most of the inmates interviewed indicated the medical program met their needs.

Inmates incarcerated at the NCCC are afforded the opportunity to participate in work programs in most of the operational areas of the facility.

NCCC is accredited by the AmericanCorrectional Association.

PREA Audit Comments

The Complex has a neat and orderly appearance. The grounds are well manicured and the facility appears to be well maintained. The Correctional Officers and a Unit Management system provide security supervision.

Prior to the on-site visit, the auditor reviewed the Pre-Audit questionnaire examining the documentation offered by the facility for each PREA standard. During the two day on-site audit, the auditor toured the facility, examined additional documentation, and conducted formal staff and inmate interviews.

The auditor interviewed 51 staff and inmates during the PREA audit. 18 Inmates from the housing units, 15 Specialized Staff, 4 Management Staff, and 14 Correctional Officers were interviewed using the questions provided in the audit documents. The staff and the inmates were eager to answer all questions.

The Pre-Audit document provided by the facility indicated 19 inmate allegations of sexual abuse. The inmate allegations were administratively investigated by the NCCC Investigator and 18 were determined to be unfounded or unsubstantiated. During the past 12 months, 1 was referred for criminal investigation by the Ohio State Highway Patrol.

In this auditor's opinion, the North Central Correctional Complex was well managed and the staff were well trained in their assignments. The inmates interviewed indicated that they felt safe, that the medical program met their needs, and the food program was reasonable.

On Wednesday, an exit meeting was conducted by the auditor. The attendees were;

Neil Turner, Warden
Taggart Boyd, Deputy Warden, Operations
Becky Joyce, Deputy Warden, Programs
Kevin Woods, Compliance Manager
Ruben Quintero, Major
James Craig, Associate Deputy Warden
Dawn Lykins, Associate Deputy Warden
Lori Shuler, Inspector
Richard McCurry, Asst, Investigator
Andrew Albright, ODRC PREA Coordinator
Jayne Haberfield, ODRC Contract Monitor
Charlotte Owens, ODRC Regional PREA Administrator
Dan Lipperman, ODRC Audit Administrator
Dave Mandichek, Recovery Services Mgr.
Karen Sanforth, ODRC Medical Monitor
Carl Nink – Management Training Corporation PREA Coordinator
Jack Falconer – Auditor

The auditor provided an overview of the audit results and congratulated the facility staff about the progress made in compliance with the PREA standards.

DESCRIPTION OF FACILITY CHARACTERISTICS

Facility Demographics	NCCC Main Unit	Camp Unit
Rated Capacity:	2730 (combined)	
Actual Population (22 Sep, 2015)	2290	405
Security/Custody level:	Medium	Minimum
Gender	Adult Male	Adult Male
Age Range	18-77	18-77
Average length of Stay	4.36 years	
Number of full time staff:	Combined	
Administration	11	
Security	242	
Programs	42	
Support	17	
Other	11	
Medical (MTC)	39	
Total Facility	362	
Food Service (Contract)	11	

SUMMARY OF AUDIT FINDINGS

[Click here to enter text.](#)

Number of standards exceeded: 0

Number of standards met: 39

Number of standards not met: 0

Number of standards not applicable: 4 (115.12, 115.14, 115.52 & 115.66)

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Management Training Corporation (MTC) and the Ohio Department of Rehabilitation and Correction (ODRC) both have policies that mandate a zero tolerance for sexual abuse and sexual harassment of their inmate populations (MTC 903E.02 & ODRC 79 ISA 01 & 02).

The policies also present a plan to address prevention, detection, and responses for all employees. The agency (MTC) employs both a PREA Compliance Coordinator and an Assistant PREA Coordinator and the facility assigns a Compliance Manager as the PREA Manager. All indicate they have sufficient time to address the needs of PREA.

Standard 115.12 Contracting with other entities for the confinement of inmates

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Not applicable

The facility does not contract for the confinement of inmates. NCCC is owned by the ODRC and operated by the Management Training Corporation (MTC). The MTC policy and ODRC policy is to ensure full compliance with the PREA requirements.

Standard 115.13 Supervision and monitoring

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NCCC has developed a staffing plan to safely meet the PREA and correctional needs. This plan involves always filling a list of mandatory positions to meet the necessary staffing requirements when vacancies occur. The facility used overtime to meet a safe staffing mandate required by the ODRC. The facility reported no deviations from the custody staffing plan for the past 12 months. Unannounced rounds are conducted for all shifts and recorded by senior management staff. A review of the staffing plan was documented. The Auditor examined direct contact correctional staff vacancy rates for an 24 month period Jan 2013 thru Dec 2014. The correctional staff vacancy rate for this period averaged 4.7%. Policies are in MTC 903E.02.

Standard 115.14 Youthful inmates

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Not Applicable

No inmate is under 18 years of age at NCCC.

Standard 115.15 Limits to cross-gender viewing and searches

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The MTC & ODRC have policies that do not allow cross-gender strip or visual body cavity searches of inmates (MTC 903E.02, pg. 7 & ODRC 79 & 310). These policies were confirmed by the staff and inmates interviewed. The facility reported zero instances where these types of searches had occurred. All showers areas have curtains or protective screens. Opposite gender staff are required to announce their presence when entering the units. Policies are in place to prevent staff (other than medical) to examine an offender solely for the purpose of determining gender. The facility reported zero instances where these types of searches have occurred in the

past 12 months. 100% of the staff has been trained in the correct procedure for searches

Standard 115.16 Inmates with disabilities and inmates who are limited English proficient

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NCCC provides a variety of ways to ensure inmates with disabilities or limited English are provided the opportunity to understand PREA. Orientation videos, pamphlets, booklets, etc. are available in both English and Spanish. Interpreters are available at both Units to provide any needed service. Inmate interpreters are prohibited (MTC 903E.02 a 1-2, c1 , ODRC 79 ISA -01 , ODRC 64-DCM.02).

Standard 115.17 Hiring and promotion decisions

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NCCC has an on-site HR position that manages the recruitment and hiring process. Background checks are requested by the HR manager and completed by the ODRC. Review of MTC & ODRC policy and interviews of the on-site HR manager verified that the facility follows the PREA requirements. All contractors are screened by using the same process (MTC 903E-02, a1,c1,d.e). The facility reported 161 employee checks were made and 3 contractor background checks were completed.

The MTC and ODRC policies require a 5 year re-check of employees and contractors. This was verified by review of the documentation and in the interview process. Agency policy does indicate that any employee misconduct or false reporting is subject to the possibility of termination of employment.

Standard 115.18 Upgrades to facilities and technologies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the

relevant review period)

- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

MTC policy (MTC 903E.02) requires that any modification or expansion of existing facilities will consider the modifications impact upon the facilities ability to protect the inmates from sexual abuse.

The facility is owned by ODRC. NCCC reported no substantial improvements have been made to the facility.

Standard 115.21 Evidence protocol and forensic medical examinations

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Per ODRC policy 79 ISA -02, the Ohio State Highway Patrol (OSHP) conducts all criminal investigations. In accordance with the MTC contract with ODRC, any allegation involving sexual abuse or criminal activity requires that the OSHP be notified immediately to assume control of the investigation.

The facility has an MOU with SAFE and SANE examiners using an outside health care provider. The facility conducted zero SAFE/SANE examinations during the last 12 months. Victim advocates to provide outside services are under contract and a Chaplin is trained to provide advocacy services if required. MTC Policy 903E.02

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Per ODRC policy, the Ohio State Highway Patrol will conduct all criminal investigations. In accordance with the MTC contract with ODRC, any allegation involving sexual abuse or criminal activity requires that the OSHP be

notified immediately to assume control of the investigation.

During the past 12 month period , 19 allegations of inmate sexual abuse and sexual harassment was received. The allegations were administratively investigated and 18 were found to be unfounded or unsubstantiated. During the past 12 months, 1 was referred for criminal investigation. Policies MTC 903E.02 & ODRC 79-ISA-02.

Agency (MTC) policy regarding allegations of sexual abuse/harassment investigations is published on

www.mtctrains.com.

Standard 115.31 Employee training

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The staff training provided by NCCC meets policy requirements of PREA, MTC and ODRC.

All NCCC employees, contractors and volunteers, are trained to meet the PREA standards. In the past 12 months, 505 staff were trained. The facility has a comprehensive training program which includes pre-service and annual in-service training and is tailored to meet the gender needs of the facility. The training documentation includes a signature roster that indicates their presence when the training was presented. The interview process documented that employees understood the materials presented. The auditor was impressed with the staff responses in the interview process. They understand the PREA requirement very well.

Policies are MTC 901D.02, 903E.02 & ODRC 79-ISA-01.

Standard 115.32 Volunteer and contractor training

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

76 volunteers and contractors at NCCC were trained about PREA and correctional requirements during the last 12 months. Signatures documented that they understood the training presented. A volunteer interviewed was very knowledgeable about the requirements of the facility and PREA. (MTC policy 901E.02, 903E.02 & ODRC 79 ISA -01).

Standard 115.33 Inmate education

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

By policy of MTC, inmates are provided information at intake about the zero-tolerance policy for sexual abuse or harassment (MTC 903E.02).

In the past 12 months, 2010 inmates were trained on the principles of PREA. Provisions are made to assist those inmates with disabilities or those not proficient in English to ensure their understanding of PREA. Orientation videos, posters, inmate handbooks, etc. are readily available to the population. The inmate interviews indicated that they understood their rights under PREA.

Standard 115.34 Specialized training: Investigations

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Per ODRC policy, the Ohio State Highway Patrol will conduct all criminal investigations. In accordance with the MTC contract with ODRC, any allegation involving sexual abuse or criminal activity requires that the OSHP be notified immediately to assume control of the investigation.

NCCC conducts administrative investigations and if found criminal in nature, the investigation is immediately turned over to the OSHP. Both of the NCCC investigators are PREA trained.

Policies are MTC 903E.02 & ODRC 79-ISA-02.

Standard 115.35 Specialized training: Medical and mental health care

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

By policy of both MTC and ODRC, medical and mental health providers are provided PREA training. (MTC 903E.02, a1,c1 & ODRC 79 ISA -01).

Documentation and the interviews indicated that all Medical and Mental Health services staff have been trained in the requirements of PREA. Forensic examinations are not conducted by the medical staff. These exams, if needed, are provided by a certified local health care organization.

Standard 115.41 Screening for risk of victimization and abusiveness

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

By policy of both MTC and ODRC, inmate screening for risk of sexual abuse victimization and sexual abusiveness towards other inmates is required. (MTC 903E.02 & ODRC 79 ISA-04).

100 % of the 2010 inmates received by NCCC were screened for the risk of sexual abuse victimization or sexual abuse towards other inmates. This screening is accomplished within the first 24 hours of arrival. The risk assessment documents of MTC and ODRC meet the PREA requirements.

The inmates are reassessed for the risk of sexual victimization or being sexually abusive within the time frames required. The facility reported 2010 reassessments occurred in the past 12 months.

MTC and ODRC policies both prohibit discipline of an offender for refusing to answer questions in the screening process.

Standard 115.42 Use of screening information

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The information obtained by NCCC in the inmate screening process is used to make individualized determination to ensure the inmates safety. This documentation found is used to make decisions to place each inmate in appropriate housing, work, education, and program assignments. The placement decisions are made by a classification committee. In making assignment decisions for transgender or intersex inmates, the decisions are made on a case-by-case basis.

These policies are found in MTC 903E.02 and ODRC 79 ISA 04 & 05.

Standard 115.43 Protective custody

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The MTC/ODRC policies govern the use of segregation housing.

The policies for inmates in protective custody are found in MTC 903E.02,a1,e1 and ORDC 79 ISL -04.

These policies include looking at alternatives for victims of sexual abuse. The facility reported one inmate was held in segregation in the past 12 months for the purpose of protecting a possible sexual abuse victim. Policies require a review every 30 days for any inmate in segregation.

Standard 115.51 Inmate reporting

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NCCC has several ways that an offender can report sexual abuse/harassment. They can report an incident to any staff person, write a grievance or report, write letters, use an inmate hot line, or notify a third person.

The policies that require this are found in MTC 903E.02, & ODRC 79 ISA -02.

Staff are informed of this requirement with required training and employee handbooks.

No inmates are held for civil immigration purposes at the facility. Inmates and staff interviews confirm that the process is well understood.

Standard 115.52 Exhaustion of administrative remedies

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Non-Applicable

The ODRC does not utilize the inmate grievance procedure for allegations of sexual abuse or sexual harassment. All cases of sexual abuse or sexual harassment are referred to the Institution Investigator. An investigation into a sexual abuse or sexual harassment allegation shall follow ODRC Policy 79-ISA-02. This policy adheres to the time constraints referenced in the standard.

Standard 115.53 Inmate access to outside confidential support services

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NCCC provides to the inmates, confidential access to outside victim advocates by providing the name of the organization, toll free telephone number, posters, and the information is in the inmate handbook. Policies are found in MTC 903E.02.

Standard 115.54 Third-party reporting

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific

corrective actions taken by the facility.

MTC has a website (mtctrains.com) that provides the opportunity for third party reporting of sexual violence. The website also provides the reporting policies regarding any sexual violence. Policies are found in MTC 903E.02.

Standard 115.61 Staff and agency reporting duties

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The MTC and the ODRC both have policies that require all staff to immediately report any incident of sexual abuse/harassment. The policies also address the need to maintain confidentiality and address possible retaliation. Senior management staff has been assigned the task to monitor possible retaliation and the monitoring must be recorded.

Medical and mental staff report all sexual abuse allegations and they do inform the inmate of their duty to report. These policies are found in MTC 903E.02 & ODRC 79 ISA 02, a1, b1.

Standard 115.62 Agency protection duties

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Policies at NCCC require all staff to immediately take steps to protect an inmate who is the subject of imminent sexual abuse. There has been one incident of this action being required in the past 12 months. These policies are found in MTC 903E.02 and ODRC 79-ISA -02.

Standard 115.63 Reporting to other confinement facilities

- Exceeds Standard (substantially exceeds requirement of standard)

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NCCC has a policy that requires notification of another facility when they learn of an inmate that had been sexually abused at that other facility. This notification is done within the 72 hour time frame. Documentation is required that the report will be investigated and properly acted upon. In the past 12 months, the facility reported zero allegations of sexual abuse that inmates received at another facility. These policies are found in MTC 903E.02 and ODRC 79-ISA-02.

Standard 115.64 Staff first responder duties

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The MTC & ODRC policies meets all first responder requirements of PREA. This policies were verified by the responses from the staff being questioned. In the past 12 months, six allegations of sexual abuse from an inmate were recorded. One of these required a first security staff or non-security staff response to collect physical evidence. All of the allegations were properly investigated and were either unfounded or unsubstantiated.

These policies are found in ODRC 79-ISA-02 & MTC 903E-02.

Standard 115.65 Coordinated response

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A written institutional plan for a coordinated response to any incident of sexual abuse was available at NCCC. They follow NCCC 79-ISA-01-01 to address the coordinated response requirements. The plan meets the requirements of both MTC and PREA. MTC policy is 903E.02.

Standard 115.66 Preservation of ability to protect inmates from contact with abusers

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Not applicable.

The NCCC employees do not participate in collective bargaining.

Standard 115.67 Agency protection against retaliation

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NCCC has policies that protect inmates and staff who report sexual abuse/harassment from retaliation. Senior management supervises the plan. Any monitoring required will be conducted for a minimum of 90 days or longer if needed. NCCC reported zero instances of retaliation in the past 12 months. These policies are found in ORDC 79-ISA-02, NCCC 79-ISA-01-01, & MTC 903E.02.

Standard 115.68 Post-allegation protective custody

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance

determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

MTC & ODRC have policies in place that govern the use of involuntary segregation. These policies meet the PREA requirements. The facility reported that no inmates who reported sexual abuse were held in involuntary segregation in the past 12 months. If this would occur, policies require 30 day reviews. These policies are found in ODRC 79-ISA-02 & MTC 903E.02.

Standard 115.71 Criminal and administrative agency investigations

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Per ODRC policy, the Ohio State Highway Patrol will conduct all criminal investigations. In accordance with the MTC contract with ODRC, any allegation involving sexual abuse or criminal activity requires that the OSHP be notified immediately. The two NCCC staff assigned to the facility have been trained to meet PREA standards. Should an allegation be substantiated, the case will be referred for prosecution. The facility reported zero cases of sustained allegations since 20 August, 2012. Written reports are developed and retained per PREA, MTC, and ODRC requirements. These policies are found in ODRC 79-ISA-02 & MTC 903E.02.

Standard 115.72 Evidentiary standard for administrative investigations

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The NCCC investigator that was interviewed indicated they use as a standard the preponderance of the evidence. Policies are found in MTC 903E.02 & ODRC 79-ISA-02.

Standard 115.73 Reporting to inmates

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Per ODRC policy, the Ohio State Highway Patrol will conduct all criminal investigations. In accordance with the MTC contract with ODRC, any allegation involving sexual abuse or criminal activity requires that the OSHP be notified immediately. In the past 12 months, 6 allegations from inmates were recorded. One of the allegations was for staff abuse. The reports were documented. The inmates who filed the allegations were informed of the findings.

Policies are MTC 903E.02 and ODRC 79-ISA-02.

Standard 115.76 Disciplinary sanctions for staff

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NCCC has disciplinary sanctions for staff up to and including termination for violating sexual abuse/harassment policies. The facility reported zero cases of staff of staff violating sexual abuse or harassment policies and none were terminated or resigned for violating policies on sexual abuse/harassment.

Policies are MTC 903E.02 & MTC 203.1, and ODRC 79-ISA-02.

Standard 115.77 Corrective action for contractors and volunteers

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion

must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NCCC has disciplinary sanctions for volunteers and contractors up to and including termination of the contract for violating sexual abuse/harassment policies. The facility reported zero cases of volunteers/contractors terminated for violating policies on sexual abuse/harassment. Policies are MTC 903E.02, ORDC 79-ISA-01 and ORDC 71-SOC-01.

Standard 115.78 Disciplinary sanctions for inmates

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NCCC has policies providing sanctions for inmates engaged in sexual abuse of another inmate. These sanctions meet the PREA requirements. Consideration is given to the inmates’ mental status in final determinations. Treatment is also offered to those found guilty. Both MTC & ODRC have policies that do not permit consensual sex between inmates. The facility reported zero cases of administrative or criminal findings of offender-on-offender sexual abuse in the past 12 months. Policies are MTC 903E.02, ODRC 79-ISA-02, & ODRC 56-DCS-01.

Standard 115.81 Medical and mental health screenings; history of sexual abuse

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NCCC policies require that all inmates (100%) who disclosed prior sexual victimization during initial screening be offered a follow-up meeting with medical or mental health. The meeting is required within 14 days of the initial screening. The same policy also applies to inmates who perpetrated sexual abuse. Documentation is maintained for all meetings. Information found in the follow-up meeting is strictly limited to medical, mental health, security, and management staff. Informed consent is obtained by the medical staff.

Policies are MTC 903E.02, a1,a2,a4,b1, and ODRC 79-ISA-02 and 04.

Standard 115.82 Access to emergency medical and mental health services

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The medical program at NCCC is staffed 24 hours per day, 7 days per week. All inmates who report to be sexual abused have unimpeded access to medical treatment. The community standard medical treatment includes proper medical care, treatment for sexual transmitted disease, and at no cost to the inmate. Policies are MTC 903E.02, ORDC 79-ISA-02 and ORDC 67 MNH-09,a3.

Standard 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NCCC provides medical and mental health evaluation and treatment consistent with the community standard for health care. The inmates are offered tests for sexually transmitted disease. These services are provided to all inmates who have been sexually abused. These services are at no cost. Inmate abusers are also offered mental health evaluations within a 60 day period. Policies are MTC 903E.02, & ODRC 79-ISA-02.

Standard 115.86 Sexual abuse incident reviews

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The facility policies require that all incidents of sexual abuse are thoroughly reviewed by an incident review team. This team includes the PREA Compliance Manager and several facility management staff. The reports are then reviewed by the Warden and MTC/ORDC Administrative staff. The team is required to review and make recommendations within 30 days of the incident. The facility reported four sexual abuse investigations in the past 12 months.

Policies are MTC 903E.02, & ODRC 79-ISA-03.

Standard 115.87 Data collection

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

MTC & ODRC collects sexual abuse data from all of its facilities and compiles the data annually. The process followed meets the requirement of PREA.

Policies are MTC 903E.02.

Standard 115.88 Data review for corrective action

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The MTC & ODRC collects sexual abuse data from all facilities and aggregates into an annual report. This MTC report is available on the web at www.mtctrains.com. The report is approved by the Vice President of Corrections at Management and Training Corporation.

Policies are MTC 903E.02.

Standard 115.89 Data storage, publication, and destruction

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The MTC and ODRC collects and securely retains data for a period of at least 10 years. This data is compiled from reports of all its facilities. This information is a public document and is readily available to the public. Policies are MTC 903E.02.

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.



9 October, 2015

Auditor Signature

Date