

AMERICAN CORRECTIONAL ASSOCIATION

206 NORTH WASHINGTON STREET ALEXANDRIA VA 22314

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www.aca.org



June 10, 2008

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Representative

James A. Gondles, Jr., VA
Executive Director

Jim Dennis, Executive Director
Corrections Center of Northwest Ohio
03151 County Road 2425
Stryker, Ohio 43557

Dear Mr. Dennis:

Congratulations!

It is a pleasure to officially inform you that the Corrections Center of Northwest Ohio was accredited by the Commission on Accreditation for Corrections at the American Correctional Association Awards Ceremony on May 18, 2008 in Alexandria, Virginia

Your accreditation represents the satisfactory completion of a rigorous self-evaluation, followed by an outside review by a team of independent auditors.

Every profession strives to provide a high quality of service to society. To know that you, your staff, and other officials are complying with the requirements of the accreditation process is indeed a statement of a high level of commitment to the staff and persons under your care.

On behalf of the Commission on Accreditation for Corrections, thank you for your commitment to the corrections profession.

Sincerely,

Robert Garvey

Robert Garvey, Chairperson
Commission on Accreditation or Corrections

cc: Jenny Tornes

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Congratulations on your accreditation award! You are now a member of the elite in achieving correctional excellence. The certificate you have received is but a small symbol of the enormous dedication and commitment demonstrated by each and every member of your staff to the accreditation process, and I urge you to display it prominently as a continual reminder of the level of professionalism achieved. This is just the beginning of your journey, however, for the true test of excellence is the test of time. It is critical that your operation be able to sustain this achievement over time and be constant through both prosperity and adversity.

The logo of the Commission on Accreditation for Corrections depicts a sextant. Those who chose this symbol did so because "the sextant is an instrument used by a navigator to pinpoint the location of his ship in relation to the established points of reference in the universe, with the purpose of charting his future course." This is the exact purpose of accreditation; objectively reviewing an agency or facility and giving it a goal for which to strive, a destination to reach. Accreditation is the sextant for our profession; let it be your guide as well.

Thank you for your commitment to the American Correctional Association and the standards and accreditation process.

Mark A. Flowers, Director
Standards and Accreditation
American Correctional Association

Overview of the American Correctional Association

The American Correctional Association is the oldest and most prestigious correctional membership organization in the United States. Founded in 1870, ACA currently represents more than 20,000 correctional practitioners in the United States and Canada. Members include all levels of staff from a wide variety of correctional disciplines and programs, as well as professionals in allied fields and representatives from the general public. In addition, the Association represents the interests of 74 affiliated organizations whose goals, while similar to those of ACA, focus on specialized fields and concerns within the realm of corrections.

At its first organizational meeting held in Cincinnati, Ohio, in 1870, the Association elected then-Ohio governor and future U.S. President, Rutherford B. Hayes, as its first president. The *Declaration of Principles* developed at that first meeting became the guidelines for correctional goals in both the United States and Europe.

Since that time, ACA has continued to take a leadership role in corrections and work toward a unified voice in correctional policy. In recent years, one of the Association's major goals has been the development of national correctional policies and resolutions of significant issues in corrections. These policies are considered for ratification at the Association's two annual conferences and ratified policies are then disseminated to the field and other interested groups. ACA has also had a major role in designing and implementing professional standards for correctional practices, as well as methods for measuring compliance with those standards.

The Association conducts research and evaluation activities, provides training and technical assistance, and carries out the regular responsibilities of any professional membership organization, including a full publications program. The Association's two annual conferences, held in varying cities across the nation, attract more than 5,000 delegates and participants each year from the 50 states, U.S. territories, and several foreign countries.

Membership in ACA is open to any individual, agency, or organization interested in the improvement of corrections and the purposes and objectives of the Association. Members include the majority of state, local, provincial, and territorial correctional agencies, individual correctional institutions and local jails, pretrial programs and agencies, schools of criminal justice in colleges and universities, libraries, and various probation, parole, and correctional agencies. Most of ACA's members are employed at the federal, state, and local levels. Members also include more than 200 volunteers affiliated with these agencies as administrators or as members of advisory boards and committees.

Organizational Purposes of the American Correctional Association

Among the most significant purposes of the Association as outlined in its Constitution, are:

To promote the coordination of correctional organizations, agencies, programs, and services to reduce fragmentation and duplication of effort and increase the efficiency of correctional services on a national basis.

To develop and maintain liaisons and a close working relationship in America with national, regional, state, and local associations and agencies in the correctional, criminal justice, civic, and related fields for mutual assistance and the interchange of ideas and information, and to extend and strengthen cooperative working relationships with similar associations and agencies on the international level.

To develop and promote effective standards for the care, custody, training, and treatment of offenders in all age groups and all areas of the correctional field: detention facilities and services, institutions and other facilities for juvenile and adult offenders, probation, parole, community residential centers, and other community-based programs and services.

To conduct studies, surveys, and program evaluations in the correctional field, and provide technical assistance to correctional organizations, departments, institutions, and services.

To publish and distribute journals and other professional materials dealing with all types of correctional activities.

To promote the professional development of correctional staff at all levels.

In carrying out these purposes, ACA sponsors programs for policy analysis, demonstration, and research. ACA also provides testimony, consultation, publications, conferences, workshops, and other activities designed to stimulate constructive action regarding correctional issues.

Standards and Accreditation

Perhaps ACA's greatest influence has been the development of national standards and the accreditation process. ACA standards address services, programs, and operations essential to effective correctional management. Through accreditation, an agency is able to maintain a balance between protecting the public and providing an environment that safeguards the life, health, and safety of staff and offenders. Standards set by ACA reflect practical up-to-date policies and procedures and function as a management tool for over 1,500 correctional agencies in the United States.

Organizational Structure of the American Correctional Association

Executive Committee

The Executive Committee is composed of the elected officers of the Association - president, vice president, treasurer, two Board of Governors' members, the immediate past president, the president-elect, and the ACA executive director. The Executive Committee meets at least quarterly and exercises most of the powers of the Board of Governors during the intervals between meetings of the board.

Board of Governors

ACA's bylaws vest control of the Association with an 18-member elected Board of Governors composed of the officers of the Association and five at-large members. To ensure the interdisciplinary nature of the Association, board members must represent the following areas:

At-Large Citizen (not employed in corrections)	Community Programs (Juvenile)
Correctional Administration (Adult)	Aftercare or Post-Release Supervision (Juvenile)
Correctional Administration (Juvenile)	Detention (Adult)
Institutions (Adult)	Detention (Juvenile)
Institutions (Juvenile)	At-Large (Ethnic Minority) (3)
Probation (Adult)	Education
Probation (Juvenile)	Member At-Large
Parole or Post-Release Supervision (Adult)	
Community Programs (Adult)	

Delegate Assembly

The Delegate Assembly is composed of delegates from the professional affiliates, geographical chapters, membership at-large, Board of Governors, past presidents of ACA, and representatives of each military service. The Delegate Assembly can establish policy, define Association positions on broad social and professional issues, and determine major programs and legislative priorities. They meet at least twice annually, at the Winter Conference and Congress of Correction.

Committees

The majority of the Association's activities take place through committees. Each committee chair reports to the Association's Board of Governors at least twice a year. In this way, the Association collectively benefits from the involvement and contribution of the hundreds of individuals who function on the various committees. Ad-hoc committees are appointed by the president of the Association.

The current committees and councils are:

Committee on Affirmative Action	Committee on Legal Issues
Committee on Constitution and Bylaws	Committee on Correctional Awards
Committee on International Relations	Committee on Membership
Committee on Congress Program Planning	Committee on Military Affairs

Council of Professional Affiliates
Council of Dual-Membership Chapters and
State and Geographical Affiliates
Nominating Committee
Council on Professional Education
Credentials Committee
Research Council

Eligibility Committee
Resolutions & Policy Development Comm
Committee on Ethics
Standards Committee
Legislative Affairs Committee

Affiliates and Chapters

Affiliates and state chapters are major features of the Association's structure. They represent professional, regional, and state groups across the United States and Canada. Affiliates and chapters contribute to the professional development of all members by providing consultation in their respective areas of interest and by participating in seminars and workshops at ACA's annual conferences.

The following affiliates and chapters are currently associated with ACA:

Alabama Council on Crime and Delinquency
Alston Wilkes Society
American Assn for Correctional Psychology
American Correctional Chaplains Association
American Correctional Food Service
Association
American Correctional Health Services Assn
American Institute of Architects
American Jail Association
American Probation and Parole Association
Arizona Probation, Parole, and Corrs Assn
Association for Corrl Research and Info Mgmt
Assn of Paroling Authorities, International
Assn of State Correctional Administrators
Assn of Women Executives in Corrections
International Assn of Correctional Officers
Iowa Corrections Association
Juvenile Justice Trainers Association
Kansas Correctional Association
Kentucky Council on Crime and Delinquency
Louisiana Correctional Association
Maryland Criminal Justice Association
Michigan Corrections Association
Middle Atlantic States Correctional Association
Minnesota Corrections Association
Missouri Corrections Association
National Association of Adult and Juvenile State
Corrections Mental Health Directors
National Assn of Blacks in Criminal Justice
National Association of Juvenile Corrl Agencies

Association on Programs for Female Offenders
Central States Correctional Association
Colorado Correctional Association
Connecticut Criminal Justice Association
Correctional Association of Massachusetts
Correctional Accreditation Managers Assn
Correctional Education Association
Correctional Industries Association
Family and Corrections Network
Florida Council on Crime and Delinquency
Illinois Correctional Association
Indiana Correctional Association
International Assn of Corrl Training Personnel
International Community Corrections Assn

National Association of Probation Executives
National Coalition for Mental and Substance
Abuse Health Care in the Justice System
National Correctional Recreation Association
National Council on Crime and Delinquency
National Juvenile Detention Association
Nebraska Correctional Association
Nevada Correctional Association
New Jersey Chapter Association
New Mexico Correctional Association
New York Corrections and Youth Svcs Assn
North American Association of Wardens &
Superintendents
North Carolina Correctional Association
Ohio Correctional and Court Svcs Association

Oregon Criminal Justice Association
Parole and Probation Compact Administrators
Association
Pennsylvania Assn of Probation, Parole, and
Corrections
Prison Fellowship
South Carolina Correctional Association
Southern States Correctional Association
Tennessee Corrections Association

Texas Corrections Association
The Salvation Army
Utah Correctional Association
Virginia Correctional Association
Volunteers of America
Washington Correctional Association
Western Correctional Association
Wisconsin Correctional Association

Major Activities of the American Correctional Association

Legislation

The American Correctional Association is involved with all major issues affecting corrections today. Members and ACA staff maintain close working relationships with committees of the U.S. Congress and all federal agencies and groups whose decisions affect correctional policy. Expert testimony on a wide range of correctional issues is prepared for congressional committee and subcommittee hearings, and recommendations are provided to federal administrative agencies.

To ensure that the concerns and issues of the corrections profession are represented in proposed legislation and public policy, ACA's legislative liaison is addressing legislative and government concerns that will impact the corrections profession. ACA has established partnerships between chapters and affiliates and other national policy making organizations to present a strong collective voice for correctional reform throughout the world.

Professional Development

The purpose of the Association's Professional Development Department is to plan, promote, and coordinate professional development through training seminars, workshops, and published materials including curriculums, resource guides, and monographs.

ACA's training plan calls for a variety of professional development activities. Nationally advertised workshops cover topics such as training for trainers, management training, community-based employment programs, and stress management. On-site workshops for state and local departments of corrections are offered in curriculum development, supervision, communications, and report-writing skills.

The *Training for Correctional Staff Trainers* workshops further the skills of correctional professionals qualified to initiate and deliver training. These workshops also enable agencies to comply with national standards for accreditation and ensure that training is job-related and professionally developed and presented.

The department also offers correspondence courses to further professional development. More than 6,000 correctional personnel have completed or are in the process of completing ACA's self-instruction training program for correctional officers. This program, developed under the auspices of the National Institute of Corrections, provides 40 hours of basic training in accordance with ACA standards. A score of at least 80 percent on the comprehensive examination must be attained to achieve certification.

The Association has similar courses available for correctional supervisors, juvenile caseworkers, and food service employees. Additional courses which cover report writing skills, correctional management skills, legal issues for probation and parole officers, and legal issues for correctional officers are also available.

Publications

As one of the leading publishers of practical correctional publications, ACA produces books, videos, and lesson plans. Among the wide ranging subjects available are management, community, security, counseling, law, history, and health. These excellent resources for career advancement appeal to practitioners and scholars alike. Directories for every major sector of corrections are also published by ACA.

The following is just a few of the many publications that ACA offers:

Corrections Today is the major corrections magazine in the United States. Published seven times a year, it focuses on the interests of the professional correctional employee and administrator. Articles include reports of original research, experiences from the field, discussion of public policy, and the perspectives of prominent practitioners and academicians.

On the Line is published five times a year and contains national and local news of interest to the criminal justice professional.

Corrections Compendium Newsletter publishes cutting-edge information about the corrections environment. Survey information is compiled from 52 U.S. and 14 Canadian correctional systems.

The Juvenile and Adult Directory has been published since 1939. A revised edition of the directory is released each January. This publication is the only up-to-date, comprehensive directory of all U.S. and Canadian juvenile and adult correctional departments, institutions, agencies, and paroling authorities.

The National Jail and Adult Detention Directory was first published in 1978. It is a source of information concerning jails. The directory, published every two years, attempts to list all jails in the United States that house offenders or detainees for more than 48 hours.

The Probation and Parole Directory, updated every two years, provides over 500 pages of information regarding federal, state, and county adult and juvenile probation, parole and aftercare systems in the United States. It includes statistics on caseloads, expenditures, and personnel.

The State of Corrections, formerly *The Proceedings*, includes the events of both the Congress of Correction and the Winter Conference. Published since 1870, it includes selected speeches and panel presentations concerning the latest thoughts and practices in the criminal justice field.

Correctional standards are the most significant improvement in correctional programming. As the basis for accreditation, they give administrators a nationally recognized system for upgrading and improving their correctional services. The Association currently publishes over 20 manuals for every correctional discipline.

To aid in the development of policy with relation to accreditation, *Guidelines for the Development of Policies and Procedures* are available for adult correctional institutions, adult parole authorities/adult probation and parole field services, adult local detention facilities, adult community residential services, juvenile detention facilities, and juvenile training schools.

Conventions

ACA hosts two national conventions each year that attract more than 5,000 professionals from all aspects of corrections; the Winter Conference held in January, and the Congress of Correction, held in August. These events include a variety of workshops, exhibits, and seminars devoted to addressing topics specific to the corrections profession.

Contracts and Grants

The American Correctional Association has a history of successful grant and contract management and administration. ACA has completed contracts and grants of more than \$30 million. These diverse initiatives, which are funded through federal and private sources, add to the technical expertise and knowledge of the organization as well as to the total field of corrections.

Standards and Accreditation

Perhaps ACA's greatest influence has been the development of national standards and the accreditation process. ACA standards address services, programs, and operations essential to effective correctional management. Through accreditation, an agency is able to maintain a balance between protecting the public and providing an environment that safeguards the life, health, and safety of staff and offenders. Standards set by ACA reflect practical up-to-date policies and procedures and function as a management tool for over 1,200 correctional agencies in the United States.

Overview of the Commission on Accreditation for Corrections

The Commission on Accreditation for Corrections (CAC) is a private, nonprofit organization established in 1974 with the dual purpose of developing comprehensive, national standards for corrections and implementing a voluntary program of accreditation to measure compliance with those standards.

The Commission was originally developed as part of the American Correctional Association. In 1979, by joint agreement, the Commission separated from the Association in order to independently administer the accreditation program. Between 1978 and 1986, the organizations shared the responsibility for developing and approving standards and electing members of the Commission. On November 7, 1986, the Commission on Accreditation for Corrections officially realigned itself with the American Correctional Association.

The Commission is composed of a board which meets at least twice each year. The responsibility of rendering accreditation decisions rests solely with the Commission. The members of the Commission represent the full range of adult and juvenile corrections and the criminal justice system. They represent the following categories:

- National Association of Juvenile Correctional Agencies (1 representative)
- Council of Juvenile Correctional Administrators (1 representative)
- Association of State Correctional Administrators (2 representatives)
- National Sheriff's Association (2 representatives)
- American Jail Association (1 representative)
- North American Association of Wardens and Superintendents (1 representative)
- International Community Corrections Association (1 representative)
- American Probation and Parole Association (1 representative)
- Association of Paroling Authorities International (1 representative)
- National Juvenile Detention Association (1 representative)
- American Bar Association (1 representative)
- American Institute of Architects (1 representative)
- National Association of Counties (1 representative)
- Correctional Health (Physician) (1 representative)
- Juvenile Probation/Aftercare (1 representative)
- Adult Probation/Parole (1 representative)
- At-Large (17 representatives)
- Citizen At-Large (Not in Corrections) (1 representative)

Association staff

Accreditation activities are supported by the staff of the American Correctional Association, Standards and Accreditation Department, under the leadership of the director of the department. Standards and Accreditation Department staff are responsible for the daily operation of the accreditation program. Agencies in the process have contact primarily with the accreditation specialist responsible for their state or agency.

Auditors

Over 600 corrections professionals in the United States have been selected, trained, and employed on a contract basis by the Association. These individuals perform the field work for the Association which includes providing assistance to agencies working toward accreditation, conducting on-site audits of agencies to assess compliance with standards and confirming that requirements are met, and monitoring to ensure maintenance of the conditions required for accreditation. Teams of auditors, referred to as visiting committees or audit teams, are formed to conduct standards compliance audits of agencies seeking accreditation and reaccreditation.

Auditors are recruited nationally through announcements in prominent criminal justice publications and at major correctional meetings. Affirmative action and equal employment opportunity requirements and guidelines are followed in the recruitment of auditors. All auditors employed by the Association have a minimum of three years of responsible management experience, have received a recommendation from an agency administrator, and have demonstrated knowledge in the substantive area(s) in which they are employed to assist the Association. In addition, all auditors must successfully complete the Association's auditor training and be members of the ACA in good standing.

Standards Development

Development of the ACA standards began in 1974 with an extensive program of drafting, field testing, revising, and approving standards for application to all areas of corrections. Since then, approximately 1,500 correctional facilities and programs have adopted the standards for implementation through accreditation, and many others have applied the standards informally themselves.

In the development of standards, the goal was to prescribe the best possible practices that could be achieved in the United States today, while being both realistic and practical. Steps were taken to ensure that the standards would be representative of past standards development efforts, reflect the best judgment of corrections professionals regarding good corrections practice, recognize current case law, and be clear, relevant, and comprehensive. The standards development and approval process has involved participation by a wide range of concerned individuals and organizations. Twenty-two manuals of standards are now used in the accreditation process:

Standards for the Administration of Correctional Agencies

Standards for Adult Parole Authorities

Standard for Adult Probation and Parole Field Services

Standard for Adult Correctional Institutions

Standards for Adult Local Detention Facilities

Standards for Small Jail Facilities

Standards for Electronic Monitoring Programs

Standards for Adult Community Residential Services

Standards for Adult Correctional Boot Camps

Standards for Correctional Industries

Standards for Correctional Training Academies

Standards for Juvenile Community Residential Facilities
Standards for Juvenile Correctional Facilities
Standards for Juvenile Probation and Aftercare Services
Standards for Juvenile Detention Facilities
Standards for Juvenile Day Treatment Programs
Standards for Juvenile Correctional Boot Camps
Standards for Therapeutic Communities
Standards for Small Juvenile Detention Facilities
Standards for Performance-Based Health Care in Adult Correctional Institutions
Certification Standards for Food Service Programs
Standard for Adult Correctional Institutions (in Spanish)

The standards establish clear goals and objectives critical to the provision of constitutional and humane correctional programs and services. The standards include the requirement for practices to promote sound administration and fiscal controls, an adequate physical plant, adherence to legal criteria and provision of basic services. Basic services called for by the standards include the establishment of a functional physical plant, training of staff, adoption of sanitation and safety minimums, and provision of a safe and secure living environment. In offering specific guidelines for facility and program operations, the manuals of standards address due process and discipline, including access to the courts, mail and visitation, searches, and conditions of confinement of special management offenders.

The standards are systematically revised to keep pace with the evolution of correctional practices and case law, after careful examination of experiences, and after applying them over a period of time and circumstances. The ACA Standards Committee, which includes membership from the Commission on Accreditation for Corrections, is responsible for standards development and revision.

The ACA publishes biannual supplements to the standards with updated information and clarifications until new editions of standards manuals are published. Each supplement addresses standards interpretations, deletions, revisions, and additions for all manuals of standards issued by the Standards and Accreditation Department.

Suggestions and proposals for revisions to the standards from the field and interested others are encouraged. The Standards and Accreditation Department has developed a standards proposal form specifically for this purpose. The standards proposal form can be obtained from the *Standards Supplement*, the ACA website, or Standards and Accreditation Department staff (Appendix A). Proposals should be submitted via the ACA website.

Accreditation Process Descriptions

For over 120 years, the American Correctional Association has been the only national body involved in the development of standards for the correctional field. ACA standards are supported by ACA's Standards and Accreditation Department and the Commission on Accreditation for Corrections, which is the evaluating and certifying body for accreditation. The department is responsible for the administration of accreditation and ongoing development of correctional standards.

The accreditation process is a voluntary program for all types of correctional agencies. For these agencies, accreditation offers the opportunity to evaluate their operations against national standards, to remedy deficiencies, and to upgrade the quality of programs and services. The recognized benefits of such a process include: improved management; a defense against lawsuits through documentation; demonstration of a "good faith" effort to improve conditions of confinement; increased accountability and enhanced public credibility for administrative and line staff; a safer and more humane environment for personnel and offenders; and the establishment of measurable criteria for upgrading programs, staffing, and physical plant on a continuous basis.

A major component of the accreditation process is the standards compliance audit conducted by a visiting committee. The purpose of the audit is to measure operations against the standards, based on documentation provided by the agency.

The Visiting Committee Report

The results of the standards compliance audit are contained in the visiting committee report, a document prepared by the visiting committee chairperson. The report is distributed to the agency administrator and members of the visiting committee. This report is also submitted to the Commission on Accreditation for Corrections for consideration at the accreditation hearing.

The following information is usually contained in the visiting committee report:

Agency and Audit Narrative

The agency narrative includes a description of program services, a description of physical plant, number of offenders served on the days of the audit, a summary significant incidents and consent decrees, class action lawsuits and/or judgments against the agency/facility, if applicable. The audit narrative, prepared by the visiting committee chairperson, describes audit activities and findings. The narrative examines issues or concerns that may affect the quality of life and services in an agency or facility. Quality of life issues include areas such as staff training, adequacy of medical service, sanitation, use of segregation and detention, reported and/or documented incidences of violence and crowding in institutions, offender activity levels, programming and provision of basic services. The audit narrative also contains comments as a result of staff and offender interviews, and a detailed explanation of all noncompliant and not applicable standards.

Agency Response

The agency has four options for standards found in noncompliance: a plan of action, an appeal, a waiver request, or a discretionary compliance request.

A **plan of action** is a detailed statement of tasks to be performed in order to achieve compliance with a standard found in noncompliance at the time of the audit. The plan of action designates staff responsibilities and timetables for completion.

An **appeal** is the agency's attempt to change the visiting committee's decision on a standard. The result of a successful appeal is a change in the status of the standard and a recalculation of the compliance tally.

A **waiver** may be requested when noncompliance with a standard does not adversely affect the life, health, or safety of staff and offenders and when quality of life conditions compensate for the lack of implementation of a plan of action. The granting of a waiver by the Commission waives the requirement for submitting a plan of action; however, it does not change the noncompliant finding.

A **discretionary compliance request** is when there are circumstances in which agencies choose not to comply with a particular standard for a variety of reasons. These reasons include:

- An unwillingness to request funds from a parent agency or funding source
- A preference to satisfy the standard/expected practice's intent in an alternative fashion
- An objection from a parent agency, higher level government official, or funding source to the nature of the standard/expected practice
- A clear policy in place at a higher level that is contrary to the requirements of the standard/expected practice
- An existing provision in a collective bargaining agreement that makes compliance impossible (without bargaining with the employees' union to effect such a change).

Auditor's Response

This section contains the visiting committee's final reply to all responses received from the agency and includes comments regarding the acceptability of plans of action, appeals, and waivers.

Accreditation Hearings

The Commission on Accreditation for Corrections is solely responsible for rendering accreditation decisions and considers an agency's application at its next regular meeting following completion of the visiting committee report. The Commission is divided into panels that are empowered to reach and render accreditation decisions. These panels hear the individual application for accreditation and include a quorum of at least three Commissioners which includes the panel hearing chairperson. Agencies are notified in writing of the date, time, and location of the hearings by Standards and Accreditation Department staff.

The panel hearing is the last step in the process. With the panel chairperson presiding, panel members discuss issues and raise questions relative to all aspects of agency operations and participation in the process. The information presented during the hearing and in the visiting committee report is considered by the panel members in rendering accreditation decisions.

The agency is invited to have a representative at the hearing and, in most cases, one or more individuals attend. When special conditions warrant, the visiting committee chairperson or a member of the visiting committee also may be asked to attend the hearings. When this occurs, the auditor provides information to help clarify controversial issues and responds to questions and concerns posed by panel members.

Attendance by any other parties (i.e. media representatives, public officials, or personnel from agencies other than the applicant) occurs only with the permission of the applicant agency. In these cases, the applicant agency representatives and panel members discuss procedures to be followed before commencement of the hearing.

Conduct of Hearings

The panel schedule provides ample time for review of each individual agency pursuing accreditation. Hearings are conducted by the panel chairperson in accordance with established procedures. Panel proceedings require that a formal vote be taken on all final actions, i.e., agency appeals, waiver requests, and the final accreditation decision of the Commission. All panel proceedings are tape-recorded to assist in preparing minutes of the hearings. Panel activities generally occur as follows:

- applicant agency representatives are requested by Standards and Accreditation Department staff to be on-call to allow for scheduling flexibility
- a designated waiting area is usually provided for this purpose
- when the panel is ready to review the agency, the Standards and Accreditation Department staff representative notifies agency representative(s)
- the hearing opens with an introduction by the panel chairperson
- the agency representative is asked to give a brief description of the program
- if a visiting committee member is present at the hearing, the panel chairperson may request that the auditor present an account of the visit, focusing on matters particularly pertinent to the decision or specific panel actions. In some cases, however, the panel may wish to call on the visiting committee member only to

- request additional information at different points during the hearing
- the panel chairperson leads a standard by standard review of non-compliance issues. The agency representative presents information relative to their requests for waivers, plans of action, appeals, and discretionary compliance requests. The agency may also present additional materials, including photographs or documentation, for review by the panel.
- following the agency presentation, the chairperson has the option of calling the panel into executive session to consider the information provided, determine findings, and make an accreditation decision. Whether or not panel deliberations occur in the presence of agency personnel or in executive session varies from panel to panel, considering the preference of panel members and the sensitivity of issues to be discussed regarding the application.

In final deliberations, the Commission panel:

- ensures compliance with all mandatory standards and at least 90 percent of all other standards
- responds with a formal vote to all appeals submitted by the applicant agency
- responds with a formal vote to all requests for waivers, discretionary compliance, and plans of action submitted by the applicant agency

At this time, the panel also:

- assures that an acceptable plan of action will be submitted for every non-compliant standard, including those standards for which appeals of non-compliance and waiver requests have been denied by the panel. In judging the acceptability of plans of action, the panel ensures that all of the information requested on the form is provided. Furthermore, the feasibility of plans to achieve compliance is considered, including specific tasks, time frames, and resource availability (staff and funding) for implementing proposed remedies.
- addresses to its satisfaction any concerns it has with visiting committee comments about the quality of life in the facility or program, patterns of non-compliance, or any other conditions reviewed by the panel relating to the life, health, and safety of residents and staff

For each application, a roll call vote to award accreditation, extend an agency in Candidate or Correspondent Status, or deny accreditation is conducted. The options for final action available to the panel are outlined in the next chapter.

If the panel has deliberated in executive session, agency representatives are invited back into the meeting and informed of the panel's final decision and actions or recommendations on all other issues raised by the applicant. If accreditation has not been granted, the chairperson discusses with agency personnel specific reasons for the decision and the conditions of extension in Candidate or Correspondent Status and procedures for appeal.

Accreditation Decisions

The decisions available to the Commission panel relating to the accreditation of an agency are:

- *Three-year accreditation award* based on sufficient compliance with standards, acceptance of adequate plans of action for all non-compliant standards and satisfaction of any other life, health, and safety conditions established by the panel. The balance of the contract must be paid in full in order to receive a certificate of accreditation.
- *Extension of the applicant agency in Candidate Status* (initial accreditation only) for reasons of insufficient standards compliance, inadequate plans of action, or failure to meet other requirements as determined by the panel. The Commission may stipulate additional requirements for accreditation if, in its opinion, conditions exist in the facility or program that adversely affect the life, health, or safety of the offenders or staff. Extension of an applicant in Candidate Status is for a period of time specified by the panel and for identified deficiencies if in the panel's judgment, the agency is actively pursuing compliance.
- *Probationary Status* is determined when the panel specifies that compliance levels are marginal, there is a significant decrease in compliance from the previous audit (in the case of reaccreditation), or there are quality of life issues that would indicate continued monitoring. While an award of accreditation is granted, a monitoring visit *must* be completed and the report presented at the next meeting of the Commission. The cost for a monitoring visit is borne by the agency at a rate of cost plus 25%. The agency does not have to appear before the Commission for the review of the monitoring visit report. If they choose to do so, all related travel expenses are borne by the agency. Specific expectations for removal from probation are outlined.
- *Denial of accreditation* removes the agency from Accredited Status (in the case of reaccreditation) and withdraws the agency from the accreditation program. Situations such as insufficient standards compliance, inadequate plans of action, failure to meet other requirements as determined by the panel or quality of life issues may lead to the denial of accreditation. If an agency is denied accreditation, it is withdrawn from the process and is not eligible to re-apply (as an applicant) for accreditation status for a minimum of six months from the date of that panel hearing. The Commission will explain the process for appeal.

The agency receives written notification of all decisions relative to accreditation after the hearing.

Appeal Process

The accreditation process includes an appeal procedure to ensure the equity, fairness, and reliability of its decisions, particularly those that constitute either denial or withdrawal of Accredited Status. Therefore, an agency may submit an appeal of any denial or withdrawal of accreditation.

The basis for reconsideration is based on grounds that the decision(s) were:

- arbitrary, capricious, or otherwise in substantial disregard of the criteria and/or procedures promulgated by the Commission
- based on incorrect facts or an incorrect interpretation of facts
- unsupported by substantial evidence
- based on information that is no longer accurate

The reasonableness of the standards, criteria, and/or procedures for the process may not serve as the basis for reconsideration. The procedures for reconsideration are as follows:

- The agency submits a written request for reconsideration to the Director of Standards within 30 days of the adverse decision stating the basis for the request.
- The Executive Committee of the Commission, composed of the officers of the Commission, reviews the request and decides whether or not the agency's request presents sufficient evidence to warrant a reconsideration hearing before the Commission. The agency is notified in writing of the Executive Committee's decision.
- If the decision is made to conduct a hearing, the hearing is scheduled for the next full Commission meeting and the agency is notified of the date.
- The agency, at its option and expense, has the right of representation, including counsel.
- Following the hearing held before the Commission, the decision, reflecting a majority opinion, is made known to the agency immediately.
- Pending completion of the reconsideration process, the agency maintains its prior status. Until a final decision has been reached, all public statements concerning the agency's accredited status are withheld.
- Following completion of the reconsideration process, any change in the status of an agency is reflected in the next regularly published list of accredited agencies.

Accredited Status

The accreditation period is three years, during which time the agency must maintain the level of standards compliance achieved during the audit and work towards compliance of those standards found in non-compliance. Regular contact with Standards and Accreditation Department staff should also be maintained.

Annual Report

During the three year accreditation period, the agency submits an annual report to the Standards and Accreditation Department. This statement is due on the anniversary of the accreditation (panel hearing) date and contains the following information:

Current standards compliance levels - This includes any changes in standards compliance since accreditation, listing on a standard-by-standard basis any standard with which the agency has fallen out of compliance or achieved compliance.

Update of plans of action - A progress report is included with respect to plans of action submitted to the hearing panel, indicating completion of plans resulting in compliance with standards and revised plans reflecting the need for additional time, funds, and/or resources to achieve compliance.

Significant Events - A report is made of events and occurrences at the agency during the preceding year that impact on standards compliance, agency operation, or the quality of services provided by the agency. This might include:

- a change in the agency administration and/or major staffing changes
- mission change or program revisions
- changes in the offender population, including number of offenders or general offender profile
- physical plant renovations, additions, or closings
- any major disturbances, such as extended periods of lock-down, employee work stoppages, etc
- any significant incident to include allegations of physical/sexual abuse
- a death from other than natural causes

Standards and Accreditation Department staff review the annual report received from the agency and respond to clarify issues or request additional information if necessary.

In addition to submission of the annual report, the agency is responsible for notifying Standards and Accreditation Department staff of any major incident, event, or circumstance that might affect standards compliance. This notice must be provided to the Standards and Accreditation Department immediately following the event. For example, an agency must notify the Standards and Accreditation Department if it is the subject of a court order, has a major disturbance, escape, physical/sexual abuse (to include allegations), employee work stoppage, death from unnatural causes, or experiences a major fire or other disaster. It is the responsibility of the accredited agency to inform Standards and Accreditation Department staff or provide them with copies of news

articles, special reports, or results of investigations that address conditions that affect standards compliance.

Finally, the Standards and Accreditation Department may request that the agency respond to public criticism, notoriety, or patterns of complaint about agency activity that suggests failure to maintain standards compliance. The Standards and Accreditation Department may conduct an on-site monitoring visit to the agency to verify continued compliance.

Monitoring Visits

Monitoring visits to agencies in Accredited Status are conducted by an ACA auditor(s) in order to assess continuing compliance with the standards. A monitoring visit may be conducted at any time during the accreditation period, with advance notice to the agency. The determination of need for a monitoring visit is based on:

- compliance levels, findings, and recommendations by the Commission on Accreditation for Corrections during the hearing
- incidents or events reported by the agency in its annual report
- problems indicated by adverse media reports or correspondence received by Standards and Accreditation Department staff, disturbances at the agency, or special investigations

The length of the visit varies depending on the number of standards or special issues that must be addressed during the visit. The visits are conducted similar to standards compliance audits, but on a reduced scale. Monitoring visits are charged to the agency at a rate of cost plus twenty-five percent.

Activities, as a general rule, involve a review of all mandatory standards, all standards found in non-compliance at the time of accreditation, and any other concerns identified by the Commission. The visit also involves a tour of the agency and interviews with staff and offenders to ensure maintenance of the requirements of accreditation. It concludes with an exit interview during which the auditor informs the agency staff of the findings of the visit.

Following the visit, the auditor prepares a monitoring visit report that addresses findings of the visit. The report includes a list of standards reviewed, explanation of non-compliance findings, results of the tour and interviews with agency staff and offenders, and discussion of any issues believed to be relevant to the agency's accreditation. The report, as with others prepared by auditors, is reviewed and sent to the agency by Standards and Accreditation Department staff.

When a monitoring visit to the agency reveals deficiencies in maintaining compliance levels that existed at the time of accreditation, or less than 100 percent compliance with mandatory standards, the agency prepares a response providing explanation of the problems indicated in the report. When the agency has failed to maintain compliance with all mandatory standards, the monitoring visit report and the agency response are submitted to the Commission on Accreditation for Corrections for review during a regular hearing. Agency representatives are advised of the date, time, and location of the review, and are invited to attend. At the discretion of the Commission, the agency may be placed in probationary status and a revisit conducted to determine if deficiencies have been

corrected.

Revocation of Accreditation

If the Commission panel believes that an agency's failure to maintain continuous compliance with certain standards is detrimental to life, health, and safety of residents and staff, the Commission may place an agency on probation. Probationary Status lasts for a specific period of time designated by the Commission to allow for correction of deficiencies. At the end of the probationary status, another monitoring visit will be conducted to ensure that the deficiencies have been corrected. The cost of this visit is borne by the agency. Following the visit, a report is prepared for review by the Commission at its next regularly scheduled meeting. The Commission again reviews the program and considers removing the probationary status or revoking accreditation. When the agency corrects the deficiencies within the probationary status period and the corrections have been verified and accepted, the agency resumes its status as an accredited agency. An agency that does not satisfactorily correct the deficiencies may be withdrawn from accreditation.

Another condition that may result in a rehearing and consideration of revocation is following a significant event in an agency (i.e. major disturbance, death from other than natural causes or allegations of physical/sexual abuse of offenders). Failure to notify the Standards and Accreditation Department in a timely manner may result in suspension of the agency's accreditation. Once ACA is notified of the major event, the Director of Standards and Accreditation may consult with the Executive Committee of the Commission, who may request a monitoring visit. If a visit is warranted, ACA will notify the agency and a date will be established with the concurrence of the facility. The monitoring visit will take place within 14 days of this notification. The monitoring visit report will be sent to the Director of Standards within 7 days of the monitoring visit and then forwarded to the Executive Committee of the Commission. Following review of the report, a determination will be made by the Executive Committee as to whether revocation of accreditation is warranted. Prior to any rehearing, agency representatives will be notified, so that any issues may be addressed and responded to in writing.

Accreditation is revoked for the following reasons:

- failure on the part of the agency to adhere to the provisions on the contract
- failure on the part of the agency to maintain continuous compliance with the standards at levels sufficient for accreditation
- intentional misrepresentation of facts, lack of good faith, or lack of deliberate speed or a concerted effort to progress in the accreditation process, including the implementation of plans of action
- failure to notify ACA of significant incidents in the annual report to the Commission
- adverse conditions of confinement that affect the life health, and/or safety of staff and offenders
- failure to comply with the conditions of probation or suspension

Standards and Accreditation Department staff notify the agency in writing of the specific reasons identified by the Commission for the revocation hearing. Agencies may appeal the decision of the Executive Committee to the full board of the Commission on Accreditation for Corrections. Appeals must be submitted within 30 days. The agency may apply to re-enter the process 180 days after the

revocation of accreditation.

Expiration of Accredited Status

Accreditation is granted for a three year period. Unless the agency has applied for reaccreditation and completed activities in the process required for reaccreditation, the Commission withdraws the agency from Accredited Status after this three year period.

For agencies in Accredited Status that are seeking subsequent accreditation, administrative extensions of Accredited Status may be granted under certain conditions. For example, relocation of the facility, staff turnover, and major renovations often warrant an extension. In these cases, a written request to the Director of Standards and Accreditation is required, outlining the reasons for extending the accreditation period. Agencies that fail to successfully complete an audit within the three year period, or do not receive an extension prior to their expiration date, are withdrawn from Accredited Status.



Visiting Committee Report and Hearing Minutes

CONFIDENTIALITY

The American Correctional Association and the Commission on Accreditation for Corrections do not disclose to external parties specific information contained in this Accreditation Report or information discussed in the Accreditation Hearing. The Association encourages all participating agencies to provide information to the media about their accreditation activities, including disclosure of the Self-Evaluation and Accreditation Report.

American Correctional Association

ACCREDITATION
REPORT



Commission on Accreditation for Corrections

CORRECTIONS COMMISSION OF NORTHWEST OHIO
CORRECTIONS CENTER OF NORTHWEST OHIO
STRYKER, OHIO

The mission of the Commission on Accreditation for Corrections is to upgrade and improve practices and conditions in adult and juvenile correctional facilities and programs through an accreditation process which is founded on a commitment to accountability, professionalism and respect for basic human rights and which recognizes sound and effective correctional practices, while striving towards excellence in the field of corrections.

COMMISSION ON ACCREDITATION FOR CORRECTIONS
PANEL ACTION REPORT

The Westin of Alexandria
Alexandria, Virginia

May 18, 2008

Corrections Commission of Northwest Ohio
Corrections Center of Northwest Ohio
Stryker, Ohio

Agency Representatives: Jim L. Dennis, Executive Director

Panel Members: Jeanette Kinker, Chairperson
Denise Robinson
Charles Seidleman

Staff: Nicole A. Spann

Panel Action

Standard #4-ALDF-2A-37 The waiver request was granted.

Standard #4-ALDF-2A-38 The waiver request was granted.

Standard # 4-ALDF-2A-42 The waiver request was granted.

Accreditation Panel Decision

Moved: Commissioner Denise Robinson
Seconded: Commissioner Charles Seidleman

Three-Year Accreditation: Yes

Accreditation Vote **Yes** **No**

Jeanette Kinker, Chairperson ✓

Denise Robinson ✓

Charles Seidleman ✓

Prepared by Nicole A. Spann, Standards and Accreditation Specialist

Final Tally

Mandatory	100%
Non-Mandatory	99%

COMMISSION ON ACCREDITATION FOR CORRECTIONS
STANDARDS COMPLIANCE REACCREDITATION AUDIT

Corrections Commission of Northwest Ohio
Corrections Center of Northwest Ohio
Stryker, Ohio

January 14-16, 2008

VISITING COMMITTEE MEMBERS

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A. Introduction

The audit of the Correctional Center of Northwest Ohio (CCNO), Stryker, Ohio was conducted on January 14-16, 2008 by the following team: Kelly Ward, Chairperson; Ted Limke, Member; and Richard Carswell, Member.

B. Facility Demographics

Rated Capacity: 638
Actual Population: 544
Average Daily Population for the last 12 months: 586
Average Length of Stay: 23 days
Security/Custody Level: Maximum; Medium; Minimum
Age Range of Offenders: 18-61
Gender: Male and Female
Full-Time Staff: 217
10 Administrative, 42 Support, 11 Program, 128 Security, 19 Medical, 7 Food Service

C. Facility Description

The Corrections Center of Northwest Ohio (CCNO) is located in Stryker, Ohio, approximately 60 miles from the city of Toledo. The Corrections Commission of Northwest Ohio was formed in 1987 to oversee the construction and operation of the Corrections Center of Northwest Ohio. The six member jurisdictions of the Corrections Commission include Defiance County, Fulton County, Henry County, Lucas County, Williams County, and the City of Toledo. The six member jurisdictions each have three representatives that serve on the 18 member Commission. The six member jurisdictions proportionately share in the cost of operating the Corrections Center based upon the number of beds each is allocated.

CCNO is a modern, well designed, well maintained two-building facility that was built in 1990. The main facility is a closed compound secured by a perimeter fencing system that includes two 16 foot chain-link fences enhanced with multiple rolls of razor ribbon and an alarm system. The fence lines are well monitored by closed circuit video.

The main facility houses offenders in dormitory and celled housing units. The celled housing units are two floors which house medium and maximum security offenders including juveniles and administrative segregated males and females. The minimum security dormitory style housing units are single floor design. The CCNO also includes a medical department with six cells that is staffed 24 hours a day to enhance emergency response to offenders with medical necessities. The kitchen, commissary, laundry, maintenance and warehouse are located in the main facility. Intake, booking/release, dress in/out, offender property storage, video court and the security control room are also located in the main facility.

There are seven celled units. B Unit is a male unit for offenders with short stays or awaiting classification. C Unit is a male unit for low medium classification offenders. DF Unit is a female medium/maximum security unit; DM Unit is a male medium security unit. EA Unit is a male administrative segregation unit. EM Unit is a male general population maximum security unit and ED Unit is a male disciplinary isolation unit. There are five 60-bed minimum security dormitory style units in the main facility. J1 Unit is a female minimum security unit. J2 Unit, K1 Unit, K2 Unit and L1 Unit are male minimum security units. There are no bars or physical barriers separating staff and offenders except in maximum security. The staff provides direct supervision to the offenders while providing control of all offender activities.

There is an indoor recreation/gymnasium area with a full size basketball court. There is a main outdoor recreation area located directly outside the gymnasium and four additional auxiliary outdoor recreation yards. There are classrooms available for a wide variety of offender programs. Specialized programming for the offender population include AA meetings, specialized drug counseling, domestic violence awareness, pre-release planning for the mentally ill and other types of educational and rehabilitative programming. There is an education area with GED instructors and computers equipped with educational software. A reading and law library is available for offender use. Monthly GED testing is done on site. An extensive network of volunteers provides faith based and other program services.

A separate two-story building houses community security offenders. The first floor of this building houses offenders who have been granted work release privileges by their sentencing judge. There are 73 male or female dormitory beds in three separate units in M1 building. The units are interchangeable between males and females depending on which classification is needed to be housed. Offenders housed in M2 unit are offenders who are eligible to participate in the CCNO's Community Corrections Programs. Offenders in the Community Public Works program are providing public service hours to public agencies or non-profit organizations. Offenders in the HITT program are employed at area businesses. There are 73 dormitory beds for males or females depending on which classification is needed to be housed in three separate units in M2 building.

Electronic monitoring and house arrest services are provided through facility staff to the Defiance, Fulton, Henry and Williams County courts and the municipal courts in each county, including Lucas. A centralized transportation system is operated by the CCNO for purposes of transporting offenders to and from their participating jurisdictions for commitments, releases, court appearance and transfer to state correctional facilities. Video court appearances/video arraignments are currently being held for the Defiance, Fulton, Henry and Williams County courts. The project is being phased in for the 23 courts that CCNO services.

The facility is a very well managed, complex correctional facility. The institutional staff efficiently coordinates a number of contractual services. Medical Services are provided by Correctional Medical Services (CMS); food services and commissary are provided by Aramark; treatment programs are provided by a number of local providers. The CCNO booked in 9,398 offenders during the year 2006.

The Corrections Center of Northwest Ohio was accredited by the National Commission on Correctional Health Care in 1991. The accreditation was discontinued on January 27, 2003. The decision was based on the facility's desire to achieve American Correctional Association accreditation. The Corrections Center of Northwest Ohio was accredited by the Ohio Department of Rehabilitation and Corrections, Bureau of Adult Detention in 2002. CCNO successfully obtained re-accreditation by the Bureau of Adult Detention in 2007. The facility was initially accredited by the American Correctional Association in 2005.

The stated mission of the facility is to protect the public, employees, and offenders while operating a cost effective detention center for Defiance, Fulton, Henry, Lucas and Williams's counties of Ohio and for the city of Toledo.

D. Pre-Audit Meeting

The team met on January 13, 2008 in Defiance, Ohio to discuss the information provided by the Association staff and the officials from (facility).

The chairperson divided standards into the following groups:

Standards #4-ALDF-4A-01 to 4B-09 and 6A-01 to 7F-07 Kelly Ward, Chairperson

Standards #4ALDF-1A-01 to 3A-02 Ted Limke, Member

Standards #4ALDF 4C-01 to 5C-26 Richard Carswell, Member

E. The Audit Process

1. Transportation

The team was escorted to the facility by Jim Dennis, Executive Director

2. Entrance Interview

The audit team proceeded to the office of Jim Dennis, Executive Director. The team expressed the appreciation of the Association for the opportunity to be involved with the Correctional Center of Northwest Ohio in the accreditation process. Director Dennis discussed the history of the facility

and the unique governing structure of the facility. Director Dennis escorted the team to Classroom One where the formal entry meeting was held.

The following persons were in attendance:

Jim Dennis, Executive Director
Dennis Sullivan, Director of Security
Steve Snyder, Transportation Supervisor
Stephanie Garza-Romero RN, CMS, Health Service Administrator
Levin Jones RN, CMS Regional Manager
Linda Shambarger, Manager of Inmate Programs
Scott Bradbee, Director of Support Services
Tonya Justus, Fiscal Manager
Beth Gobrogge, Administrative Assistant
Jenny Tornes, Accreditations & Inspection Supervisor
Julie Hood, ARAMARK, Food Service Director
Tim Clay, Investigator
Polly Albright, Program Supervisor Community Corrections
Jeff Nossaman, EM/GPS Program Supervisor
Toby Bostater, Manager of Offender Services
Leslie Kinder, Training Supervisor
Salina Hill, Human Resources Manager
Tammy Parker, Shift Commander

It was explained that the goal of the visiting team was to be as helpful and non-intrusive as possible during the conduct of the audit. The chairperson emphasized the goals of accreditation toward the efficiency and effectiveness of correctional systems throughout the United States. The audit schedule was also discussed at this time.

3. Facility Tour

The team toured the entire facility from 8:30 a.m. to 2:30 p.m. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Jim Dennis, Executive Director
Dennis Sullivan, Director of Security
Jenny Tornes, Accreditations & Inspection Supervisor
Scott Bradbee, Director of Support Services

4. Conditions of Confinement/Quality of Life

During the tour, the team evaluated the conditions of confinement at the facility. The following narrative description of the relevant programmatic

services and functional areas summarizes the findings regarding the quality of life.

Security

The security program at CCNO was seen to be very well managed and effective in the fulfillment of the mission especially considering the very complex nature of the facility's operation and the high turnover of inmates. Data indicated that the facility had very few disruptive events. Observations indicated that the staff was professional, well trained and effective in communications with the inmates. The atmosphere was calm yet controlled. Key control, tool control, and the control of chemicals are managed well within expected practices. At the time of the audit visit, the segregation units were quiet, clean and controlled; discussions indicated that the unit usually does not usually operated at full capacity. Records indicated that rounds were made according to policy. Observations in the housing areas, indicated that staff was active and interactive with the inmates. Discussions and observations also indicated that security staff interacted well with other institutional staff.

The armory was well stocked and well organized. Inventories and inspections were documented to be in compliance with standards. Firearms policies and practices were seen to be well within expected practices. CCNO has a tactical unit that is available to the facility in emergencies and is available to the counties within the area. The unit has participated in national tactical team training and competition. The only posts that are usually armed are the transportation officers; records sampled indicated that those officers who were on duty during the audit visit had been trained in the use of force and were certified to use the assigned weapons.

The training department was well organized. Training resources were appropriate to the situation. There are twenty-eight certified trainers on staff that are available to train. Records indicated that the staff consistently exceeded training required in the standards.

Policies relating to the Prison Rape Elimination Act (PREA) were very clear and clearly communicated to both staff and inmates.

Environmental Conditions

The facility is very well maintained. The facility had the look of a new physical plant. CCNO met or exceeded all the standards for lighting, noise levels, air flow and temperature controls. Electrical service, sewage and fresh water, all supplied through the local community, are appropriately regulated. Work orders for repairs and preventative maintenance records

are carefully maintained. The audit team observed no clutter or detected any unusual odors. The unit was in compliance with all physical plant standards.

Sanitation

The facility was very clean and orderly. Inmates assisted in janitorial duties in all areas according to a schedule and housekeeping plan. Regular inspections were well documented through-out the facility; corrective action was taken when citations were noted. Cleaning supplies were available in each of the housing areas in dilutions that were both effective and safe to use. Inventory control was good.

Fire Safety

The facility has a very comprehensive fire protection program. The facility had a fully functioning alarm and detection system at the time of the audit. The State Fire Marshal's Office does a full inspection at least once a year; there were no unresolved citations. CCNO also works very closely with the local fire department. Regular visits are made to familiarize the firefighters with the layout of the unit. Fire extinguishers are strategically placed throughout the facility. Staff and inmates were familiar with evacuation routes and procedures. The auditors suggested some minor changes to the evacuation diagrams to make them more precise. Regular fire drills were documented.

Food Service

Comprehensive food services are provided through a contract with Aramark Corporation. At present, the executive director stated that he was pleased with the quality of services provided. A well balance diet is provided through a cycle menu developed and approved by a register dietician. There were very few meaningful complaints expressed during the audit visit. Religious and medical diets are provided when indicated. The kitchen facility was clean and well maintained. Temperatures were documented to be in the appropriate ranges for food storage and dishwashing. Both kitchen and maintenance staff indicated that repairs are made in a timely fashion and that consideration is being given for replacement of equipment that is nearing its functional limit. The audit team sampled two lunch and one breakfast meals. The food was well prepared and tasty. The majority of meals are served in two dinning rooms that adjoin the kitchen: however, meals are delivered to several restricted areas and to the community security building.

Medical Care

Health care services are provided by contract with Correctional Medical Services (CMS). Offenders are subject to co-pay for health care. Care is provided to both male and female offenders. The facility has a six bed infirmary. The health care unit is clean, well equipped and easily accessible with private exam rooms. Inmates pay co-pay for doctors and nurse's visits, and medications. Inmates do not pay for mental health services other than medications.

Health care is easily accessible by offender population. Medical and mental health screening is done at time of intake by a health care staff with referrals as appropriate. On-site services provided include: sick call, emergency care, chronic care clinics, patient education, infirmary care, wound care and obstetric care. Pharmacy services are contracted; medication distribution is direct and observed. The medical unit has its own pharmacy with a part time consultant pharmacist. Formulary medications are provided by Pharmcorr. Medications are ordered by fax, delivered by UPS and cross checked with the order sheet when received... Emergency medications ordered but not on the formulary are provided by a local pharmacy.. Offenders may keep on person inhalers, nitro and certain creams and also over the counter medications. Laboratory samples are drawn on-site and sent to an outside reference lab. Routine and dental radiological services are provided. Those needing specialty referrals or services are transported to local providers. High risk obstetric care is provided by the St. Vincent Hospital in Toledo. Offenders who need services not available on site are usually referred to Defiance Regional Hospital. Back up facilities are Bryan Hospital, Bryan, Ohio, St. Vincent Hospital, Toledo or De Vita Hospital, Toledo. CCNO has a six bed infirmary unit which is staffed around the clock. . There is not a negative pressure room. Residents in the infirmary are within sight and sound of staff.

The Health Care Authority is the medical doctor. The Medical Health Administrator is a registered nurse. Health services are composed of one part time physician, five registered nurses, ten licensed practical nurses, a part time contract dentist, a consultant pharmacist, a medical records technician. At the time of the audit the facility is recruiting three part time licensed practical nurses, a fulltime licensed practical nurses and a dental assistant. Adequate office and /examination space and equipment is available for all services. There were no students, residents or interns working in medical at time of audit. Staff is licensed, trained health care professionals. There is no staff with a lapsed license.

Emergency care is available on site around the clock. The facility has one automatic external defibrillator; first aid kits were located through out the

facility but were stocked with only band aids. Facility does have a crash cart. All emergency equipment is inspected, inventoried and logged. Staff complies with four minute response time for emergency care. Offenders needing emergency care beyond that available at the infirmary are referred to Defiance Regional Hospital located within minutes of the unit. Emergency transport is provided by Promedia Emergency Transport or Defiance Regional Hospital with response time of 10-15 minutes. CCNO does use restraints for medical/psychiatric reasons with established policies and staff training regarding their use.

Sick call is available seven days a week with coverage available on all units around the clock. Wound care is provided daily. Non medical staff may make referral to health care. Medical staff visits all the general population and special housing units and triage sick call requests with referrals as appropriate.

The medical records area is centrally located and secure. Standards regarding confidentiality are met. When medical records/information is sent out of the facility it is secured in an envelope. Approximately five to seven Release of Information Requests are processed each week.

All employees are given a TB skin test prior to employment with annual follow-up. Offenders are provided TB skin tests and treatment as needed. Hepatitis B testing is available to all staff and offenders with follow up as needed.

The counts, logs, and storage of instruments, tools, sharps and controlled drugs were in order. Autoclave spore testing is current. Intake and follow up exams are done within required time limits.

Dental services are provided by a part time contract dentist. Services provided include examinations, education, extractions, gum care, emergency care, fillings and referrals.

Mental health services are provided by a part time psychiatrist, psychologist and three master level and one bachelor level full time mental health professionals. Some of the mental health services available are individual counseling, orientation, assessments, referrals, staffing, treatment planning, discharge planning and emergency care. First Call for Help provides emergency mental health care when staff is not available.

Outcome measures were reviewed with the Health Administrator and two corporate health care staff and were found to be within expected ranges. One of the auditors observed medication rounds, emergency triage, infirmary care, medication preparation, mental health assessments and sick call exams. No substantiated medical grievances were documented.

Recreation

Indoor and outdoor recreation is available to all groups of inmates on a regular basis. Due to the need to keep different groups separated scheduling of recreation is complex. Outside exercise areas adjoin most of the housing areas. A large, well appointed gym is available. The state does not allow weights in the facility but fitness equipment is available. Organized recreation activities are available to inmates in all security levels, including basketball, volleyball, ping pong, jogging and board games. Television, cards and other board games are available in the general housing units.

Religious Programming

A local ministry group, Reach Up provides a chaplain 20 hours per week to the facility. A number of trained volunteers are credentialed to provide direct services inside the facility; those with a “white badge” receive 56 hours of training and are allowed to escort inmates to services, make rounds, and conduct services without direct staff participation. There are a total of 200 volunteer registered to provide services. According to staff, some of the volunteers have been active for over ten years.

Offender Work Programs

Many of those inside the secured unit are assigned institutional support duties including food service, maintenance, laundry and maintenance. Of significance is a system by which staff can document inmates’ work activities so that the inmate can get a reduction of time to be served. During the audit visit, the team observed numerous inmates volunteer for clean-up and other work activities so that they could get the requisite documentation.

Those in the Community Corrections Program are housed in the unsecured two story building outside the secure perimeter. Work opportunities include Work Release, Helping Inmates Through Training (HITT), Workers Assisting Maintenance (WAM) and Community Public Works. Inmates participating in the Work Release program maintain current employment while serving non-working time at CCNO. They are required to pay 25 percent of their net pay for jail and court cost and they must provide their own transportation to and from work. Inmate in the HITT program participate in a job placement program in which inmates are employed and paid by area employers and then placed on the Work Release program. They are also required to pay 25 percent of their net pay for jail and court cost; the employer transports inmates to and from work. In 2006, the Work Release and HITT program accounted for \$93,527 in jail fees and \$21,644 in jail fees. Inmates in the WAM program are

assigned to perform community service work for the CCNO Maintenance department. They receive no pay but get sentence reduction credits. Inmates in the Community Public Works work for various public agencies doing public service work. In 2006, participants worked a total of 56,000 hour in public works. All of the Community Corrections Programs are designed to assist the inmate in the reintegration process.

Academic and Vocational Education

Inmates have the opportunity to earn their GED or advance their educational skills by attending weekday classes in well designed facilities. Classes are taught by qualified teachers who assess the educational needs of the inmates and develop an individual plan that allows the inmate to work at his own pace. A modern computer lab is available for individual study. GED testing is conducted on-site each month. Vocational training is offered through the Four Corners Career Center. Past classes have included Forklift Certification, Personal Finance, Job Search Techniques and Re-entry. In addition, Introduction to Computers and introduction to Microsoft Word classes are conducted by Northwest State Community College.

Social Services

A wide range of social services and programs are available to the inmates at CCNO. Each of the housing areas has full time case managers to assist in a number of adjustment and transition issues. During the audit visit the team observed a close working relationship between the security staff and the case managers in assisting inmates adjust to the facility. The facility has partnered with a number of organizations, both through contractual and volunteer relationship, to provide comprehensive programming. Programs include: confidential HIV testing, provided by SASI, Inc.; Freedom from Smoking, offered by Women and Family Services; Life Skills; HARC, a six week Christian program designed to end the cycle of crime; ACTS, an educational approach to drug and alcohol abuse; Domestic Violence Awareness Program, conducted by the Center for Child and Family Advocacy; Choices, a program for dual status inmates who have co-existing chemical dependency and a mental health diagnosis; and New Beginnings, an intensive drug/alcohol treatment and educational program, conducted by Recovery Services of Northwest Ohio, Inc. Of special note is the TAMAR program that is a relatively new program whose program designed to develop an integrated, trauma-oriented, mental health and addiction–recovery service system for women; the program is matched with a support system that attempt to enhance the client’s recovery through re-entry into their respective communities. It was seen to be unusual for that level of services to be available in a local detention facility.

Visitation

Visiting is available to all of the inmates at CCNO in a well appointed visiting room. Those in general population have contact visiting; those in the Segregation Unit general visit behind a glass panel via telephone. Visits are limited to thirty minutes.

Library Services

Inmates have access to a fully stocked reading library, which includes hardbacks, paperbacks and periodicals. The facility participates in an inter-library loan program with several local libraries. The library facility is large and attractive. Each unit has a bookshelf with a working stock of reading materials. As the team walked around the facilities there was an abundance of reading materials in use. The Community Work Program facility has a small reading library in the building. A law library with current Ohio Revised Codes is situated next to the reading library.

Laundry

A central laundry is well equipped to provide quality laundry services for all of the inmates at CCNO. The laundry also provides services to a nearby juvenile facility.

F. Examination of Records

Following the facility tour, the team proceeded to the Classroom Two to review the accreditation files and evaluate compliance levels of the policies and procedures. The facility has no notices of non-compliance with local, state, or federal laws or regulations.

1. Litigation

Over the last three years, the facility had no consent decrees, class action lawsuits or adverse judgments.

2. Significant Incidents/Outcome Measures

The outcome measures were reviewed with both administrative and medical staff. The data was reflective of both the mission of the facility and the atmosphere of the facility during the audit visit. Outcome measures were consistent with observations made and records reviewed.

3. Departmental Visits

Team members revisited the following departments to review conditions

relating to departmental policy and operations:

<u>Department Visited</u>	<u>**Person(s) Contacted</u>
Central Control	Deb Harrington, Corrections Officer
Intake	George Bryant, Corrections Officer
B Unit	Beth Hasch, Corrections Officer
Classification	Tina Weaver, Classification Officer Carolyn Kuntz, Classification Officer
C Unit Rashel Podiak, Case Manager	Russ Markley, Corrections Officer
DF Unit	Kila Wineland, Corrections Officer
DM Unit	Marla Turner, Corrections Officer
E Unit	Dennis Vajen, Case Manager Tyler Sommers, Corrections Officer Sue Rastocan, Corrections Officers
Disciplinary	Rob Wright, Corrections Supervisor
J1 Unit	Judy Masser, Case Manager
J2 Unit	Glen Gerwin, Corrections Officer
Education	Dave Donaldson, GED Instructor
Library	Steve Santo, Librarian
Recovery Services	Sherry Phillips Earl Grant
Training	Leslie Kinder, Training Supervisor
Kitchen	Julie Hood, Food Services Manager
Maintenance	Denny Stantz, Maintenance Supervisor
Transportation	Steve Snyder, Transportation Supervisor

Warehouse	Neil Rocha, Warehouse Officer
M1 Unit	Polly Albright, Program Supervisor Jeff Nossaman, Program Supervisor Mike Castor, Corrections Officer
M2 Unit	Lisa Osborne, Corrections Officer Rob Wright, Corrections Supervisor Deb Vajen, Case Manager
Health Services Staff	Stephanie Garza-Romero RN, Health Services Administrator
	Levin Jones RN, CMS Regional Manager
	Gwen Lanser RN, CMS Programs Manager
	Chris Niese RN, Director of Nursing
	Lindsay Hug LPN
	Cindy Herendeen, Administrative Assistant
	Tammy Schoch, Mental Health RN
	Linda Williams, LPN
	Rebecca Fitzwater, LPN
	Chris Richard, RN, CMS, Nurse
	Joseph Kraska, MD, CMS, Physician
Contract Services	Tammy Schoch, BSN, Recovery Services
	Brenda Byers, Behavior Health, Intern
	Michael Jordan, NORIS, Information Technology
	Sherry Phillips, Recovery Services, TAMAR
	Roz Burt, LSW, Recovery Services, TAMAR
	Matt Brown, BS, Recovery Services, New Beginnings
	Dawn Pond, LACDC, Recovery Services, Choices
	Tina Zedaker, CDCA, Recovery Services, New Beginnings
	Earl Grant, Recovery Services, Program Director
	Monica Rose, Recovery Services, Secretary
Security Staff	Cheryl Carlisle, Corrections Officer
	Ken Hand, Corrections Officer
	Greg Phillips, Corrections Officer
	Ronda Osborn, Corrections Officer
	Julia Saunders, Corrections Officer
	Anthony Bush, Corrections Officer
	Tamara Goebel, Corrections Officer
	Vicki Schnitkey, Corrections Officer
	Ashley Viers, Corrections Officer
	Kevin Kinnersley, Corrections Officer
	Barb Hesselschwardt, Corrections Officer
	Pete Mielke, Corrections Officer

David Dominique, Corrections Officer
John Larson, Corrections Officer
Dan Heebsh, Corrections Supervisor

All of those staff members who spoke to the audit team appeared to be very well motivated to accomplish the goals and mission of the facility. Though, many of the staff members were part of a contract entity, the commitment to working as a team was apparent.

4. Shifts

a. Day Shift

The team was present at the facility during the day shift from 7:00 a.m. to 3:00 p.m. The audit team toured most of the facility during the day shift. The staff was responsive to questions and was very well informed regarding policies and procedures. Staff could detail what they would do in emergencies; staff and inmates knew evacuation routes and procedures. The audit team also observed the intake process and various programs in progress. Several audit team members sat in programs and observed disciplinary hearings, classification meetings and clinical staffing. The inter-departmental cooperation was impressive.

b. Evening Shift

The team was present at the facility during the evening shift from 3:00 p.m. to 7:00 p.m. Team members made rounds in the housing areas and program areas. Again, staff was responsive to questions and informative regarding emergency policies. The team observed a religious service conducted by volunteers, some of whom had been coming to the facility for over ten years. An auditor attends the shift briefing and found that it was very thorough and informative.

c. Night Shift

The team was present at the facility during the night shift from 6:00 a.m. to 7:00 a.m. Team members visited the segregation unit, several housing areas, the medical unit and the kitchen to observe activities and talk with staff members. Staff members were well informed and appeared to be well trained in their assigned duties as well as to the overall mission of the facility.

Status of Previously Non-compliant Standards/Plans of Action

The team reviewed the status of standards previously found non-compliant, for which a waiver was not granted, and found the following:

Standard 3-ALDF-1C-07 The standard was not included in the 4th edition.

Standard 3-ALDF-2C-14 (4-ALDF-2A-36) The facility is now in compliance with the standard.

Standard 3-ALDF-4B-04-1 (4-ALDF-2A-38) The facility remains in non-compliance with the standard. Adjudicated Juveniles are not housed in a specialized unit. For the period of time that they are housed at the facility they are housed in single cells in a separate protective custody unit. Other adults may also be housed in the same unit but not in the same cell.

Standard 3-ALDF-4B-04-2 (4-ALDF—2A-39) The facility is now in compliance with the standard. For the few and brief times that adjudicated juveniles are at the facility they are directly supervised in their single cells; they are moved separately to services and programming.

Standard 3-ALDF-4B-04-3 (4-ALDF-2A-40) The facility is now in compliance. Appropriate classification plans are provided.

Standard 3-ALDF-4B-04-5 (4-ALDF-2A-42) The facility remains in non-compliance. Adjudicated Juveniles are not housed in a specialized unit. For the period of time that they are housed at the facility they are housed in single cells in a separate protective custody unit. Other adults may also be housed in the same unit but not in the same cell.

Standard 3-ALDF-4B-04-6 (4-ALDF-2A-43) The facility is now in compliance. Appropriate training has been provided for those who work with youthful offenders.

Standard 3-ALDF-5F-02 (4-ALDF-5C-18) The facility is in compliance with the new standard.

G. Interviews

During the course of the audit, team members met with both staff and offenders to verify observations and/or to clarify questions concerning facility operations.

Offender Interviews

Team members talked to approximately 70 inmates in all areas of the facility. There were few complaints or concerns expressed. The inmates stated that the services and programs were good and that the staff treated them in a respectful and professional manner; they further stated that they felt safe in the facility.

Staff Interviews

The team talked to over sixty staff members. The staff was positive regarding their employment situation. Many of the staff had been at the facility since it was opened; they expressed pride in the quality of operations. There were no complaints or concerns expressed. The head of the officer's union indicated that labor relations were good and that the administrative staff worked with them to resolve issues.

H. Exit Discussion

The exit interview was held at 9:30 a.m. in the Classroom One with the Jim Dennis, Executive Director and 45 staff in attendance.

The following persons were also in attendance:

John Nye, Sheriff, Henry County, Chairman of the Governing Board of the Correctional Center of Northwest Ohio

Dave Westrick, Sheriff, Defiance County, Board Member of the Governing Board of the Correctional Center of Northwest Ohio

The chairperson explained the procedures that would follow the audit. The team discussed the compliance levels of the mandatory and non-mandatory standards and reviewed their individual findings with the group.

The chairperson expressed appreciation for the cooperation of everyone concerned and congratulated the facility team for the progress made and encouraged them to continue to strive toward even further professionalism within the correctional field.

COMMISSION ON ACCREDITATION FOR CORRECTIONS
AND THE
AMERICAN CORRECTIONAL ASSOCIATION

COMPLIANCE TALLY

Manual Type	Performance Based Standards for Adult Local Detention Facilities, Fourth Edition
Supplement	2006 Standards Supplement
Facility/Program	Correctional Center of Northwest Ohio
Audit Dates	January 12-14, 2008
Auditor(s)	Kelly Ward, Chairperson; Ted Limke, Member, Richard Carswell, Member

	MANDATORY	NON-MANDATORY
Number of Standards in Manual	60	323
Number Not Applicable	0	16
Number Applicable	60	307
Number Non-Compliance	0	3
Number in Compliance	60	304
Percentage (%) of Compliance	100%	99%
<ul style="list-style-type: none"> ● Number of Standards minus Number of Not Applicable equals Number Applicable ● Number Applicable minus Number Non-Compliance equals Number Compliance ● Number Compliance divided by Number Applicable equals Percentage of Compliance 		

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Corrections Commission of Northwest Ohio
Corrections Center of Northwest Ohio
Stryker, Ohio

January 14-16, 2008

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

Standard #4-ALDF-2A-37

CONFINEMENT OF JUVENILES UNDER THE AGE OF 18 IS PROHIBITED.

FINDINGS

Ohio Revised Code mandates that Adjudicated Juveniles are to be housed in Adult Local Detention Centers. A total of five such adjudicated Juveniles were housed from January 1 2005 to December 31, 2007. Records indicate that the maximum length of time that any of the five were housed at the facility was 24 days; the shortest period of time was 13 hours; the average length of stay for those in that status was 10.5 days.

AGENCY RESPONSE

Waiver

The Ohio Revised Code mandates that Adjudicated Juveniles are to be housed in Adult Local Detention Facilities. A total of five (5) adjudicated Juveniles were housed from January 01, 2005 to December 31, 2007. The average length of stay for these Adjudicated Juveniles was 10.5 days. The Corrections Center of Northwest Ohio does not have a specialized unit for male Adjudicated Juveniles. They are housed in a Protective Custody/Administrative Segregation unit in a single cell. Other male adults Offenders are housed in this Protective Custody/Administrative Segregation Unit. These Adjudicated Juveniles receive time out of their cells alone, are take to programming alone and are never within touch of actual adult Offenders. The female protective custody unit can be used solely for a female Adjudicated Juvenile if the need should arise. This standard was found in non-compliance three (3) years ago during our initial accreditation. Our plan of action was to work with the Northwest Ohio Juvenile Facility to see if

they could house these Adjudicated Adults. They are unable to house them due to the fact that they are Adjudicated Offenders. The courts have declared them adults and we must take them. Specialized training was established for all staff working with Adjudicated Juveniles. The funding to construct a Specialized Unit for Adjudicated Male Juveniles is not available.

AUDITOR'S RESPONSE

The visiting committee supports the waiver.

Standard #4-ALDF-2A-38

IF YOUTHFUL OFFENDERS ARE HOUSED IN THE FACILITY, THEY ARE HOUSED IN A SPECIALIZED UNIT FOR YOUTHFUL OFFENDERS EXCEPT WHEN:

- VIOLENT, PREDATORY YOUTHFUL OFFENDER POSES AN UNDUE RISK OF HARM TO OTHERS WITHIN THE SPECIALIZED UNIT, OR
- A QUALIFIED MEDICAL OR MENTAL-HEALTH SPECIALIST DOCUMENTS THAT THE YOUTHFUL OFFENDER WOULD BENEFIT FROM PLACEMENT OUTSIDE THE UNIT

A WRITTEN STATEMENT IS PREPARED DESCRIBING THE SPECIFIC REASONS FOR HOUSING A YOUTHFUL OFFENDER OUTSIDE THE SPECIALIZED UNIT AND A CASE-MANAGEMENT PLAN SPECIFYING WHAT BEHAVIORS NEED TO BE MODIFIED AND HOW THE YOUTHFUL OFFENDER MAY RETURN TO THE UNIT. THE STATEMENT OF REASONS AND CASE-MANAGEMENT PLAN MUST BE APPROVED BY THE FACILITY ADMINISTRATOR OR HIS/HER DESIGNEE. CASES ARE REVIEWED AT LEAST QUARTERLY BY THE CASE MANAGER, THE ADMINISTRATOR OR HIS OR HER DESIGNEE, AND THE YOUTHFUL OFFENDER TO DETERMINE WHETHER A YOUTHFUL OFFENDER SHOULD BE RETURNED TO THE SPECIALIZED UNIT.

FINDINGS

Adjudicated Juveniles are not housed in a specialized unit. For the period of time that they are housed at the facility they are housed in single cells in a separate protective custody unit. Other adults may also be housed in the same unit but not in the same cell.

AGENCY RESPONSE

Waiver

The Ohio Revised Code mandates that Adjudicated Juveniles are to be housed in Adult Local Detention Facilities. A total of five (5) adjudicated Juveniles were housed from January 01, 2005 to December 31, 2007. The average length of stay

for these Adjudicated Juveniles was 10.5 days. The Corrections Center of Northwest Ohio does not have a specialized unit for male Adjudicated Juveniles. They are housed in a Protective Custody/Administrative Segregation unit in a single cell. Other male adults Offenders are housed in this Protective Custody/Administrative Segregation Unit. These Adjudicated Juveniles receive time out of their cells alone, are taken to programming alone and are never within touch of adult Offenders. The female protective custody unit can be used solely for a female Adjudicated Juvenile if the need should arise. This standard was found in non-compliance three (3) years ago during our initial accreditation. Our plan of action was to work with the Northwest Ohio Juvenile Facility to see if they could house these Adjudicated Adults. They are unable to house them due to the fact that they are Adjudicated Offenders. The courts have declared them adults and we must take them. Specialized training was established for all staff working with Adjudicated Juveniles. The funding to construct a Specialized Unit for Adjudicated Male Juveniles is not available.

AUDITOR'S RESPONSE

The visiting committee supports the waiver.

Standard #4-ALDF-2A-42

YOUTHFUL OFFENDERS IN THE SPECIALIZED UNIT FOR YOUTHFUL INMATES HAVE NO MORE THAN INCIDENTAL SIGHT OR SOUND CONTACT WITH ADULT INMATES FROM OUTSIDE THE UNIT IN LIVING, PROGRAM, DINING, OR OTHER COMMON AREAS OF THE FACILITY. ANY OTHER SIGHT OR SOUND CONTACT IS MINIMIZED, BRIEF, AND IN CONFORMANCE WITH APPLICABLE LEGAL REQUIREMENTS.

FINDINGS

Adjudicated Juveniles are not housed in a specialized unit. For the period of time that they are housed at the facility they are housed in single cells in a separate protective custody unit. Other adults may also be housed in the same unit but not in the same cell.

AGENCY RESPONSE

Waiver

The Ohio Revised Code mandates that Adjudicated Juveniles are to be housed in Adult Local Detention Facilities. A total of five (5) adjudicated Juveniles were housed from January 01, 2005 to December 31, 2007. The average length of stay for these Adjudicated Juveniles was 10.5 days. The Corrections Center of Northwest Ohio does not have a specialized unit for male Adjudicated Juveniles.

They are housed in a Protective Custody/Administrative Segregation unit in a single cell. Other male adults Offenders are housed in this Protective Custody/Administrative Segregation Unit. These Adjudicated Juveniles receive time out of their cells alone, are taken to programming alone and are never within touch of adult Offenders. The female protective custody unit can be used solely for a female Adjudicated Juvenile if the need should arise. This standard was found in non-compliance three (3) years ago during our initial accreditation. Our plan of action was to work with the Northwest Ohio Juvenile Facility to see if they could house these Adjudicated Adults. They are unable to house them due to the fact that they are Adjudicated Offenders. The courts have declared them adults and we must take them. Specialized training was established for all staff working with Adjudicated Juveniles. The funding to construct a Specialized Unit for Adjudicated Male Juveniles is not available.

AUDITOR'S RESPONSE

The visiting committee supports the waiver.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Corrections Commission of Northwest Ohio
Corrections Center of Northwest Ohio
Stryker, Ohio

January 14-16, 2008

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

Standard #4-ALDF-1A-06

THE FACILITY CONFORMS TO APPLICABLE FEDERAL, STATE, AND LOCAL BUILDING CODES. (RENOVATION, ADDITIONS, NEW CONSTRUCTION ONLY)

FINDINGS

CCNO was built in 1989-1990 and has had not renovations or additions.

Standard #4-ALDF-2C-02

WHEN A CANINE UNIT IS OPERATED BY THE FACILITY:

- THERE IS A MISSION STATEMENT, INCLUDING GOALS AND OBJECTIVES
- THE CIRCUMSTANCES IN WHICH CANINE UNITS MAY BE USED ARE CLEARLY DEFINED
- EMERGENCY PLANS ARE INTEGRATED INTO THE OVERALL EMERGENCY PLANS OF THE FACILITY
- THERE ARE CRITERIA FOR SELECTING, TRAINING AND CARING FOR ANIMALS
- THERE ARE CRITERIA FOR THE SELECTION, TRAINING, AND PHYSICAL FITNESS OF HANDLERS
- THERE IS AN APPROVED SANITATION PLAN THAT COVERS INSPECTION, HOUSING, TRANSPORTATION AND DAILY GROOMING FOR THE ANIMALS
- THERE ARE DAILY AND CURRENT RECORDS ON TRAINING, CARE OF DOGS AND SIGNIFICANT EVENTS.

FINDINGS

CCNO does not operate a canine Unit.

Standard # 4-ALDF-2C-04

A STRIP SEARCH OF GENERAL POPULATION INMATES IS ONLY CONDUCTED WHEN THERE IS REASONABLE BELIEF THAT THE INMATE MAY BE IN POSSESSION OF AN ITEM OF CONTRABAND. THE LEAST INVASIVE FORM OF SEARCH IS CONDUCTED.

FINDINGS

Policy of CCNO and CMS do not permit body cavity searches to be conducted.

Standard # 4-ALDF-4A-14

WHEN REQUIRED BY STATUTE, FOOD PRODUCTS THAT ARE GROWN OR PRODUCED WITHIN THE SYSTEM ARE INSPECTED AND APPROVED BY THE APPROPRIATE GOVERNMENT AGENCY; THERE IS A DISTRIBUTION SYSTEM THAT ENSURES PROMPT DELIVERY OF FOODSTUFFS TO FACILITY KITCHENS.

FINDINGS

CCNO does not grow or produce any food items.

Standard # 4-ALDF-4D-04

A HEALTH-TRAINED STAFF MEMBER COORDINATES THE HEALTH DELIVERY SERVICES UNDER THE JOINT SUPERVISION OF THE RESPONSIBLE HEALTH AUTHORITY AND FACILITY ADMINISTRATOR, WHEN QUALIFIED HEALTH CARE PERSONNEL ARE NOT ON DUTY.

FINDINGS

Qualified health care staff is on-site at CCNO at all times.

Standard # 4-ALDF-4D-11

UNLESS PROHIBITED BY STATE LAW, INMATES, UNDER STAFF SUPERVISION, MAY PERFORM FAMILIAL DUTIES COMMENSURATE WITH THEIR LEVEL OF TRAINING. THESE DUTIES MAY INCLUDE THE FOLLOWING:

- PEER SUPPORT AND EDUCATION
- HOSPICE ACTIVITIES

- ASSISTING IMPAIRED INMATES ON A ONE-ON-ONE BASIS WITH ACTIVITIES OF DAILY LIVING
- SERVING AS A SUICIDE COMPANION IF QUALIFIED AND TRAINED THROUGH A FORMAL PROGRAM THAT IS PART OF A SUICIDE PREVENTION PLAN

INMATES ARE NOT TO BE USED FOR THE FOLLOWING DUTIES:

- PERFORMING DIRECT PATIENT CARE SERVICES
- SCHEDULING HEALTH CARE APPOINTMENTS
- DETERMINING ACCESS OF OTHER INMATES TO HEALTH CARE SERVICES
- HANDLING OR HAVING ACCESS TO SURGICAL INSTRUMENTS, SYRINGES, NEEDLES, MEDICATIONS, OR HEALTH RECORDS
- OPERATING DIAGNOSTIC OR THERAPEUTIC EQUIPMENT EXCEPT UNDER DIRECT SUPERVISION, BY SPECIALLY TRAINED STAFF, IN A VOCATIONAL TRAINING PROGRAM.

FINDINGS

CCNO inmates do not perform any of the familial duties including those listed on the standard.

Standard # 4-ALDF-5A-05

THERE IS A TREATMENT PHILOSOPHY WITHIN THE CONTEXT OF THE TOTAL CORRECTIONAL SYSTEM AS WELL AS GOALS AND MEASURABLE OBJECTIVES. THESE DOCUMENTS ARE REVIEWED AT LEAST ANNUALLY AND UPDATED AS NEEDED.

FINDINGS

CCNO does not operate a therapeutic community treatment program.

Standard # 4-ALDF-5A-06

THERE IS AN APPROPRIATE RANGE OF PRIMARY TREATMENT SERVICES FOR ALCOHOL AND OTHER SUBSTANCE-ABUSING INMATES THAT INCLUDE, AT A MINIMUM, THE FOLLOWING:

- INMATE DIAGNOSIS
- IDENTIFIED PROBLEM AREAS
- INDIVIDUAL TREATMENT OBJECTIVES
- TREATMENT GOALS
- COUNSELING NEEDS
- DRUG EDUCATION PLAN
- RELAPSE PREVENTION AND MANAGEMENT

- CULTURALLY SENSITIVE TREATMENT OBJECTIVES, AS APPROPRIATE
- THE PROVISION OF SELF-HELP GROUPS AS AN ADJUNCT TO TREATMENT
- PRERELEASE AND TRANSITIONAL SERVICE NEEDS
- COORDINATION EFFORTS WITH COMMUNITY SUPERVISION AND TREATMENT STAFF DURING THE PRERELEASE PHASE TO ENSURE A CONTINUUM OF SUPERVISION AND TREATMENT.

FINDINGS

CCNO does not operate a therapeutic community treatment program.

Standard # 4-ALDF-5A-07

THE FACILITY USES A COORDINATED STAFF APPROACH TO DELIVER TREATMENT SERVICES. THIS APPROACH TO SERVICE DELIVERY IS DOCUMENTED IN TREATMENT PLANNING CONFERENCES AND IN INDIVIDUAL TREATMENT FILES.

FINDINGS

CCNO does not operate a therapeutic community treatment program.

Standard # 4-ALDF-5A-08

THERE ARE INCENTIVES FOR TARGETED TREATMENT PROGRAMS TO INCREASE AND MAINTAIN THE INMATE'S MOTIVATION FOR TREATMENT.

FINDINGS

CCNO does not operate a therapeutic community treatment program.

Standard #4-ALDF-5A-10

IN FACILITIES OFFERING ACADEMIC AND VOCATIONAL TRAINING PROGRAMS, CLASSROOMS ARE DESIGNED IN CONSULTATION WITH SCHOOL AUTHORITIES. (RENOVATION, ADDITION, NEW CONSTRUCTION ONLY)

FINDINGS

CCNO was built in 1989-1990 and has had not renovations or additions.

Standard #4-ALDF-5C-13

WHERE AN INDUSTRIES PROGRAM EXISTS, ITS ESTABLISHMENT IS AUTHORIZED AND AREAS OF AUTHORITY, RESPONSIBILITY, AND ACCOUNTABILITY ARE DELINEATED

FINDINGS

CCNO does not operate an industries program.

Standard #4-ALDF-5C-14

THE NUMBER OF INMATES ASSIGNED TO INDUSTRIES OPERATIONS MEETS THE REALISTIC WORKLOAD NEEDS OF EACH OPERATING UNIT.

FINDINGS

CCNO does not operate an industries program.

Standard #4-ALDF-5C-15

THE NUMBER OF INMATES ASSIGNED TO INDUSTRIES OPERATIONS MEETS THE REALISTIC WORKLOAD NEEDS OF EACH OPERATING UNIT.

FINDINGS

CCNO does not operate an industries program.

Standard #4-ALDF-5C-16

A COST ACCOUNTING SYSTEM FOR EACH INDUSTRIES UNIT IS DESIGNED, IMPLEMENTED, AND MAINTAINED IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES.

FINDINGS

CCNO does not operate an industries program.

Standard # 4-ALDF-7F-07

IF VOLUNTEERS ARE USED IN THE DELIVERY OF HEALTH CARE, THERE IS A DOCUMENTED SYSTEM FOR SELECTION, TRAINING, STAFF SUPERVISION, FACILITY ORIENTATION, AND A DEFINITION OF TASKS, RESPONSIBILITIES AND AUTHORITY THAT IS APPROVED BY THE HEALTH AUTHORITY. VOLUNTEERS MAY ONLY PERFORM

DUTIES CONSISTENT WITH THEIR CREDENTIALS AND TRAINING. VOLUNTEERS AGREE IN WRITING TO ABIDE BY ALL FACILITY POLICIES, INCLUDING THOSE RELATING TO THE SECURITY AND CONFIDENTIALITY OF INFORMATION.

FINDINGS

Volunteers are not used in the delivery of health care at CCNO.

Name of Facility Corrections Center of Northwest Ohio

Date _____

Number of Months Data Collected _____

ALDF Outcome Measure Worksheet				
1A	Outcome Measure	Numerator/Denominator	Value	Calculated O.M
		The community, staff, contractors, volunteers, and inmates are protected from injury and illness caused by the physical environment.		
	(1)	Number of worker compensation claims filed for injuries that resulted from the physical environment in the past 12 months.	10	
	divided by	Average number of Full-Time Equivalent (FTE) staff positions in the past 12 months.	186	5.38%
	(2)	Number of illnesses requiring medical attention as a result of the physical environment of the facility in the past 12 months.	0	
	divided by	Average daily population in the past 12 months.	586	0.00%
	(3)	Number of illnesses requiring medical attention as a result of the physical environment of the facility in the past 12 months.	0	
	divided by	The number of admissions in the past 12 months.	9426	0.00%
	(4)	Number of physical injuries or emotional trauma requiring treatment as a result of the physical environment of the facility in the past 12 months.	19	
	divided by	The average daily population in the past 12 months.	586	3.24%
	(5)	Number of physical injuries or emotional trauma requiring treatment as a result of the physical environment of the facility in the past 12 months.	19	
	divided by	The number of admissions in the past 12 months.	9426	0.20%
	(6)	Number of sanitation or health code violations identified by external agencies in the past 12 months.	2	
	divided by	The average daily population in the past 12 months.	586	0.34%
	(7)	Number of health code violations corrected in the past 12 months.	2	
	divided by	The number of health code violations identified in the past 12 months.	2	100.00%
	(8)	Number of inmate grievances related to safety or sanitation found in favor of inmates in the past 12 months.	0	
	divided by	The number of inmate's grievances related to safety or sanitation in the past 12 months.	1	0.00%
	(9)	Number of fire code violations corrected in the past 12 months.	0	

	divided by	The number of fire code violations cited by jurisdictional authority in the past 12 months.	0	0.00%
	(10)	Number of inmate injuries resulting from fires requiring medical treatment in a 12-month period.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(11)	Number of inmate injuries (other than by fire) requiring medical treatment in the past 12 months.	67	
	divided by	The average daily population of inmates in the past 12 months.	586	11.43%
	(12)	Number of staff injuries resulting from fires requiring medical treatment in the past 12 months.	0	
	divided by	The average daily population of staff in the past 12 months.	186	0.00%
	(13)	Number of staff injuries (other than fire) requiring medical treatment in the past 12 months.	25	
	divided by	The average daily population of staff in the past 12 months.	186	13.44%
	(14)	Number of inmate lawsuits related to safety or sanitation found in favor of the inmate in the past 12 months.	0	
	divided by	The number of inmate lawsuits related to safety or sanitation in the past 12 months.	0	0.00%
1B		Vehicles are maintained and operated in a manner that prevents harm to the community, staff, contractors, volunteers, and inmates.		
	(1)	Number of vehicle accidents resulting in property damage in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	586	0.17%
	(2)	Number of vehicle accidents resulting in injuries requiring medical treatment for any party in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(3)	Amount dollar of damage from vehicle accidents in the past 12 months.	\$1048.14	
	divided by	The average daily population in the past 12 months.	586	\$1.79
1C		The number and severity of emergencies are minimized. When emergencies occur, the response minimizes the severity.		
	(1)	Number of emergencies, caused by forces external to the facility, that result in property damage in the past 12 months.	0	
	divided by	The number emergencies.	0	0.00%
	(2)	Number of injuries, caused by forces external to the facility, requiring medical attention that resulted from emergencies in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(3)	Number of times that normal facility operations were	0	

		suspended due to emergencies caused by forces external to the facility in the past 12 months.		
	divided by	The average daily population in the past 12 months.	586	0.00%
	(4)	Number of hours that facility operations were suspended due to emergencies caused by forces external to the facility in the past 12 months.	0	
	divided by	The number of emergencies caused by forces external to the facility.	0	0.00%
	(5)	Number of emergencies that were not caused by forces external to the facility that resulted in property damage in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(6)	Number of injuries requiring medical attention that resulted from emergencies that were not caused by forces external to the facility in the past 12 months.	42	
	divided by	The average daily population in the past 12 months.	586	7.17%
	(7)	Number of times that normal facility operations were suspended due to emergencies that were not caused by forces external to the facility in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	586	0.17%
	(8)	Number of hours that facility operations were suspended due to emergencies that were not caused by forces external to the facility in the past 12 months.	10	
	divided by	The number of emergencies.	0	#DIV/0!
	(9)	Number of injuries resulting from fires requiring medical treatment in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(10)	Number of fires that resulted in property damage in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(11)	Amount dollar of property damage from fire in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(12)	Number of code violations cited in the past 12 months.	2	
	(13)	Number of incidents involving toxic or caustic materials in the past 12 months.	2	
	divided by	The average daily population in the past 12 months.	586	0.34%
	(14)	Number of incidents of inventory discrepancies in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(15)	Number of incidents of inventory discrepancies in the past 12 months	8	
		The average daily population in the past 12 months.	586	1.37%

2A	Outcome Measure	Numerator/Denominator	Value	Calculated O.M
		The community, staff, contractors, volunteers, and inmates are protected from harm. Events that pose risk of harm are prevented. The number and severity of events are minimized.		
	(1)	Number of incidents involving harm in the past 12 months.	40	
	divided by	The average daily population in the past 12 months.	586	6.38%
	(2)	Number of incidents in the past 12 months involving harm.	40	
	divided by	The number of admissions in the past 12 months.	9426	0.42%
	(3)	Number of physical injuries or emotional trauma requiring treatment as a result of incidents in the past 12 months.	4	
	divided by	The average daily population in the past 12 months.	586	0.68%
	(4)	Number of physical injuries or emotional trauma requiring treatment as a result of the incidents in the past 12 months.	4	
	divided by	The number of admissions in the past 12 months.	9426	0.04%
	(5)	Number of unauthorized inmate absences from the facility in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	586	0.17%
	(6)	Number of instances of unauthorized access to the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
2B		Physical force is used only in instances of self-protection, protection of the inmate or others, prevention of property damage, or prevention of escape.		
	(1)	Number of instances in which force was used in the past 12 months.	30	
	divided by	The average daily population in the past 12 months.	586	5.12%
	(2)	Number of instances in which force was used in the past 12 months.	30	
	divided by	The number of admissions in the past 12 months.	9426	0.32%
	(3)	Number of times that staff use of force were found to have been inappropriate in the past 12 months.	0	
	divided by	The number of instances in which force was used.	30	0.00%
	(4)	Number of inmate grievances filed alleging inappropriate use of force in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(5)	Number of grievances alleging inappropriate use of force decided in favor of inmate in the past 12 months.	0	
	divided by	The number of grievances alleging inappropriate use of force filed.	0	0.00%
	(6)	Number of injuries requiring medical treatment resulting from staff use of force in the past 12 months.	7	
	divided by	The average daily population in the past 12 months.	586	1.19%

2C		Contraband is minimized. It is detected when present in the facility.		
	(1)	Number of incidents involving contraband in the past 12 months.	4	
	divided by	The average daily population in the past 12 months.	586	0.68%
	(2)	Number of incidents involving contraband in the past 12 months.	4	
	divided by	The number of admissions in the past 12 months.	9426	0.04%
	(3)	Number of weapons found in the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(4)	Number of controlled substances found in the facility in the past 12 months.	4	
	divided by	The average daily population in the past 12 months.	586	0.68%
	(5)	Number of controlled substances found in the facility in the past 12 months.	4	
	divided by	The number of admissions in the past 12 months.	9426	0.04%
2D		Improper access to and use of keys, tools and utensils are minimized.		
	(1)	Number of incidents involving keys in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(2)	Number of incidents involving tools in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(3)	Number of incidents involving culinary equipment in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	586	0.17%
	(4)	Number of incidents involving medical equipment and sharps in the past 12 months.	2	
	divided by	The average daily population in the past 12 months.	586	0.34%
3A		Inmates comply with rules and regulations.		
	(1)	Number of rule violations in the past 12 months.	2378	
	divided by	The average daily population in the past 12 months.	586	4.06
	(2)	Number of assaults—inmate against inmate, inmate against staff in the past 12 months.	10	
	divided by	The average daily population in the past 12 months.	586	1.71%
4A		Food service provides a nutritionally balanced diet. Food service operations are hygienic and sanitary.		
	(1)	Number of documented inmate illnesses attributed to food service operations in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(2)	Number of inmate grievances about food service decided in favor of the inmate the past 12 months.	2	
	divided by	The number of inmate grievances about food service in the past 12 months.	5	40.00%
	(3)	Number of violations cited by independent authorities for food service sanitation in the past 12 months.	2	
		Divided by number of violations cited by independent authorities in the past 12 months.		
4B		Inmates maintain acceptable personal hygiene practices.		

	(1)	Inmate grievances regarding inmate access to personal hygiene decided in favor of the inmate in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	586	0.17%
	(2)	Number of inmate illnesses attributed to poor hygiene practices in the past 12 months.	36	
	divided by	The average daily population in the past 12 months.	586	6.14%
	(3)	Number of inmates diagnosed with hygiene-related conditions (scabies, lice, or fungal infections) in the past 12 months.	36	
	divided by	The average daily population in the past 12 months.	586	6.14%
	(4)	Number of inmate grievances related to hygiene found in favor of the inmate in the past 12 months.	1	
	divided by	The number of inmate grievances related to hygiene in the past 12 months.	1	100.00%
	(5)	Number of inmate lawsuits related to hygiene found in favor of the inmate in the past 12 months.	0	
	divided by	The number of inmate lawsuits related to hygiene in the past 12 months.	0	0.00%
4C		Inmates maintain good health. Inmates have unimpeded access to a continuum of health care services so that their health care needs, including prevention and health education, are met in a timely and efficient manner.		
	(1)	Number of inmates with a positive tuberculin skin test in the past 12 months.	108	
	divided by	The number of admissions in the past 12 months.	9426	1.15%
	(2)	Number of inmates diagnosed with active tuberculosis in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(3)	Number of conversions to a positive tuberculin skin test in the past 12 months.	3	
	divided by	The number of tuberculin skin tests given in the past 12 months.	3277	0.09%
	(4)	Number of inmates with a positive tuberculin skin test who completed prophylaxis treatment for tuberculosis in the past 12 months.	0	
	divided by	The number of inmates with a positive tuberculin skin test on prophylaxis treatment for tuberculosis in the past 12 months.	1	0.00%
	(5)	Number of Hepatitis C positive inmates in the past 12 months.	190	
	divided by	The average daily population in the past 12 months.	586	32.42%
	(6)	Number of HIV positive inmates in the past 12 months.	83	
	divided by	The average daily population in the past 12 months.	586	14.16%
	(7)	Number of HIV positive inmates who are being treated with highly active antiretroviral treatment in the past 12 months.	17	

	divided by	The number of known HIV positive inmates in the past 12 months.	83	20.48%
(8)		Number of inmates' diagnosis with an Axis I (excluding sole diagnosis of substance abuse) in the past 12 months.	1258	
	divided by	The average daily population in the past 12 months.	586	2.15
(9)		Number of inmate suicide attempts in the past 12 months.	5	
	divided by	The average daily population in the past 12 months.	586	0.85%
(10)		Number of inmate suicides in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
(11)		Number of inmate deaths due to homicide in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
(12)		Number of inmate deaths due to injuries in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
(13)		Number of medically expected inmate deaths in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
(14)		Number of medically unexpected inmate deaths in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
(15)		Number of inmate admissions to the infirmary (where available) in the past 12 months.	710	
	divided by	The average daily population in the past 12 months.	586	121.16%
(16)		Number of inmate admissions to off-site hospitals in the past 12 months.	9	
	divided by	The average daily population in the past 12 months.	586	1.54%
(17)		Number of inmates transported off-site (via an ambulance or correctional vehicle) for treatment of emergency health conditions in the past 12 months.	42	
	divided by	The average daily population in the past 12 months.	586	7.17%
(18)		Number of inmate specialty consults completed in the past 12 months.	157	
	divided by	The number of specialty consults (on-site or off-site) ordered by primary health care provider (MD, NP, PA) in the past 12 months.	214	73.36%
(19)		Number of inmate grievances about access to health care services found in favor of the inmate in the past 12 months.	0	
	divided by	The number of inmate grievances about access to healthcare services in the past 12 months.	5	0.00%
(20)		Number of inmate grievances related to the quality of health care found in favor of inmates in the past 12 months.	0	
	divided by	The number of inmate grievances related to the quality of health care in the past 12 months.	5	0.00%
(21)		Number of inmates' lawsuits about access to healthcare services found in favor of inmates in the past 12 months.	0	

	divided by	The number of inmate's lawsuits about access to healthcare services in the past 12 months.	0	0.00%
	(22)	Number of individual sick call encounters in the past 12 months.	5342	
	divided by	The average daily population in the past 12 months.	586	9.12
	(23)	Number of physician visits contacts in the past 12 months.	1083	
	divided by	The average daily population in the past 12 months.	586	1.85
	(24)	Number of individualized dental treatment plans in the past 12 months.	428	
	divided by	The average daily population in the past 12 months.	586	73.04%
	(25)	Number of hypertensive inmates enrolled in a chronic care clinic in the past 12 months.	174	
	divided by	The average daily population in the past 12 months.	586	29.69%
	(26)	Number of diabetic inmates enrolled in a chronic care clinic in the past 12 months.	74	
	divided by	The average daily population in the past 12 months.	586	12.63%
	(27)	Number of incidents involving pharmaceuticals as contraband in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	586	0.17%
	(28)	Number of cardiac diets received by inmates with cardiac disease in the past 12 months.	0	
	divided by	The number of cardiac diets prescribed in the past 12 months.	0	0.00%
	(29)	Number of hypertensive diets received by inmates with hypertension in the past 12 months.	0	
	divided by	The number of hypertensive diets prescribed in the past 12 months.	0	0.00%
	(30)	Number of diabetic diets received by inmates with diabetes in the past 12 months.	10672	
	divided by	The number of diabetic diets prescribed in the past 12 months.	454	23.51
	(31)	Number of renal diets received by inmates with renal disease in the past 12 months.	63	
	divided by	The number of renal diets prescribed in the past 12 months.	3	2100.00%
	(32)	Number of needle-stick injuries in the past 12 months.	2	
	divided by	The number of employees on average in the past 12 months.	186	1.08%
	(33)	Number of pharmacy dispensing errors in the past 12 months.	5	
	divided by	The number of prescriptions dispensed by the pharmacy in the past 12 months.	2221	0.23%
	(34)	Number of nursing medication administration errors in the past 12 months.	12	
	divided by	The number of medications administered in the past 12 months.	8299	0.14%

4D		Health services are provided in a professionally acceptable manner. Staff are qualified, adequately trained, and demonstrate competency in their assigned duties.		
	(1)	Number of staff with lapsed licensure and/or certification in the past 12 months.	0	
	divided by	The number of licensed or certified staff in the past 12 months.	36	0.00%
	(2)	Number of new employees in the past 12 months who completed orientation training prior to undertaking job assignments.	8	
	divided by	The number of new employees in the past 12 months.	9	88.89%
	(3)	Number of employees completing in-service training requirements in the past 12 months.	26	
	divided by	The number of employees eligible in the past 12 months.	26	100.00%
	(4)	Number of MD staff who left employment in the past 12 months.	0	
	divided by	The number of authorized MD staff positions in the past 12 months.	4	0.00%
	(5)	Number of RN staff who left employment in the past 12 months.	3	
	divided by	The number of authorized RN staff positions in the past 12 months.	6	50.00%
	(6)	Number of LPN staff who left employment in the past 12 months.	5	
	divided by	The number of authorized LPN staff positions in the past 12 months.	8	62.50%
	(7)	Number of medical records staff who left employment in the past 12 months.	0	
	divided by	The number of medical records staff positions in the past 12 months.	1.25	0.00%
	(8)	Number of ancillary staff who left employment in the past 12 months.	0	
	divided by	Average number of authorized ancillary staff positions in the past 12 months	0	0.00%
5A		Inmates have opportunities to improve themselves while confined.		
	(1)	Number of inmates who passed GED exams while confined in the past 12 months.	46	
	divided by	The number of inmates who were sentenced to the jail for 6 months or more in the past 12 months.	1281	3.59%
	(2)	Total number of grade levels advanced by inmates in the past 12 months.	203	
	divided by	The number of inmates who were sentenced to the jail for 6 months or more in the past 12 months.	1281	15.85%
	(3)	Number of certificates of vocational competency awarded to inmates in the past 12 months.	591	
	divided by	The number of inmates who were sentenced to the jail for 6 months or more in the past 12 months.	1281	46.14%
5B		Inmates maintain ties with their families and the community.		
		NONE		

5C		The negative impact of confinement is reduced.		
		NONE		
6A		Inmates' rights are not violated.		
	(1)	Total number of inmate grievances in the past 12 months, regarding: (a) access to court; (b) mail or correspondence; (c) sexual harassment; (d) discipline; (e) discrimination; (f) protection from harm.	3	
	divided by	The average daily population in the past 12 months.	586	0.51%
	(2)	Number of inmate grievances (see [a] through [e] above) decided in favor of inmates in the past 12 months.	0	
	divided by	The total number of grievances filed in the past 12 months.	82	0.00%
	(3)	Total number of inmate court suits alleging violation of inmate rights filed against the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(4)	Number of inmate court suits alleging violation of inmate rights decided in favor of inmates in the past 12 months.	0	
	divided by	The total number of inmate suits filed in the past 12 months.	1	0.00%
6B		Inmates are treated fairly.		
	(1)	Number of inmate grievances regarding discrimination in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(2)	Number of inmate grievances regarding discrimination resolved in favor of inmates in the past 12 months.	0	
	divided by	The total number of inmate grievances filed regarding discrimination in the past 12 months.	0	0.00%
	(3)	Number of grievances resolved in favor of inmates in the past 12 months.	10	
	divided by	The average daily population in the past 12 months.	586	1.71%
	(4)	Number of grievances resolved in favor of inmates in the past 12 months.	10	
	divided by	The total number of inmate grievances filed in the past 12 months.	82	12.20%
	(5)	Number of court malpractice or tort liability cases found in favor of the inmate in the past 12 months.	0	

	divided by	The number of court malpractice or torte liability cases in the past 12 months.	1	0.00%
6C		Alleged rule violations are handled in a manner that provides inmates with appropriate procedural safeguards.		
	(1)	Number of disciplinary incidents resolved informally in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(2)	Number of formal inmate disciplinary decisions that were appealed in the past 12 months.	81	
	divided by	The total number of disciplinary decisions made in the past 12 months.	2918	2.78%
	(3)	Number of appealed disciplinary decisions decided in favor of the inmate in the past 12 months.	4	
	divided by	The total number of disciplinary decisions made in the past 12 months.	2918	0.14%
	(4)	Number of grievances filed by inmates challenging disciplinary procedures in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	586	0.17%
	(5)	Number of disciplinary-related grievances resolved in favor of the inmate in the past 12 months.	0	
	divided by	The total number of disciplinary-related grievances filed in the past 12 months.	1	0.00%
	(6)	Number of court suits filed against the facility regarding discipline in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
	(7)	Number of court cases regarding discipline decided against the facility in the past 12 months.	0	
	divided by	The total number of court decisions regarding discipline decided in the past 12 months.	0	0.00%
	(8)	Number of rule violations in the past 12 months.	2378	
	divided by	The average daily population in the past 12 months.	586	4.06
	(9)	Number of inmates terminated from the facility due to rule violations in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	586	0.00%
6D		Inmates take responsibility for their actions.		
	(1)	Number of inmates released in the past 12 months who made regular payments toward their restitution obligations.	30	
	divided by	The number of inmates who had restitution obligations in the past 12 months.	52	57.69%
	(2)	Number of inmates who satisfy their court cost/fines obligations in the past 12 months.	144	
	divided by	The number of inmates who had court cost/fine obligations in the past 12 months.	144	100.00%
	(3)	Total amount of restitution paid by inmates in the past 12 months.	26404.43	
	divided by	The average daily population in the past 12 months.	586	\$45.06
	(4)	Total number of hours of community service donated by inmates in the past 12 months.	52250	
	divided by	The average daily population in the past 12 months.	586	89.16

	(5)	Total number of inmates who participated in restitution in the past 12 months.	32	
	divided by	The total number of inmates housed in the past 12 months.	9581	0.33%
	(6)	Total number of inmates who participated in community service work in the past 12 months.	387	
	divided by	The total number of inmates housed in the past 12 months.	9581	4.04%
	(7)	Total number of inmates who participated in victim awareness programs in the past 12 months.	0	
	divided by	The total number of inmates housed in the past 12 months.	9581	0.00%
	(8)	Total amount of restitution paid by inmates in the past 12 months.	26404.43	
	divided by	The total number of inmates housed in the past 12 months	9581	\$2.76
	(9)	Total number of hours delivered by inmates who participated in community service work in the past 12 months.	52250	
	divided by	The total number of inmates housed in the past 12 months.	9581	5.45
7A		The facility operates as a legal entity.		
		NONE		
7B		Staff, contractors, and volunteers demonstrate competency in their assigned duties.		
	(1)	Total number of years of staff members' education as of the end of the last calendar year.	261	
	divided by	The number of staff at the end of the last calendar year.	181	1.44
	(2)	Number of staff who left employment for any reason in the past 12 months.	21	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	191	10.99%
	(3)	Total number of credit hours in course relevant to their facility responsibilities earned by staff participating in higher education in the past 12 months.	9	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	191	4.71%
	(4)	Number of professional development events attended by staff in the past 12 months.	840	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	191	4.40
7C		Staff, contractors, and volunteers are professional, ethical and accountable.		
	(1)	Number of incidents in which staff was found to have acted in violation of facility policy in the past 12 months.	43	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	191	22.51%
	(2)	Number of staff terminated for conduct violations in the past 12 months.	4	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	191	2.09%
	(3)	Number of inmate grievances attributed to improper staff conducts which were upheld in the past 12 months.	0	

	divided by	The number of inmate grievances alleging improper staff conduct filed in the past 12 months.	0	0.00%
	(4)	Number of inmate grievances attributed to improper staff conduct which were upheld in the past 12 months.	0	
	divided by	The average daily population for the past 12 months.	586	0.00%
	(5)	Where staff is tested, the number of staff substance abuse tests failed in the past 12 months.	0	
	divided by	The number of staff substance abuse tests administered in the past 12 months.	29	0.00%
	(6)	Number of staff terminations for violation of drug-free work policy in the past 12 months.	0	
	divided by	The number of staff terminations in the past 12 months.	4	0.00%
	(7)	The average number of physicians employed in the past 12 months.	4	
	divided by	The number of physician positions authorized in the past 12 months.	4	100.00%
	(8)	The average number of nurses employed in the past 12 months.	25	
	divided by	The number of nurse positions authorized in the past 12 months.	14	1.79%
	(9)	The average number of mid-level health care practitioners employed in the past 12 months.	0	
	divided by	The number of mid-level health care practitioner positions authorized in the past 12 months.	0	0.00%
	(10)	The average number of ancillary health care staff employed in the past 12 months.	0	
	divided by	The number of ancillary health care staff positions authorized in the past 12 months.	0	0.00%
7D		The facility is administered efficiently and responsibly.		
	(1)	Net amount of budget shortfalls or surplus at the end of the last fiscal year (budget less expenditures).	\$411,510.15	
	divided by	The budget for the past 12 months.	\$15,903,201	2.59%
	(2)	Number of material audit findings by an independent financial auditor at the conclusion of the last audit.	0	
	(3)	Number of grievances filed by inmates regarding their records or property in the past 12 months.	22	
	divided by	The average daily population in the past 12 months.	586	3.75%
	(4)	Number of inmate grievances (records/property) decided in favor of inmates in the past 12 months.	0	
	divided by	The total number of inmate grievances (records/property) in the past 12 months.	22	0.00%
	(5)	Number of objectives achieved in the past 12 months.	59	
	divided by	The number of objectives for the past 12 months.	65	90.77%
	(6)	Number of program changes made in the past 12 months.	0	
	divided by	The number of program changes recommended in the past 12 months.	0	0.00%
	(7)	Number of problems identified by internal health care review that were corrected in the past 12 months.	22	
	divided by	The number of problems identified by internal health care review in the past 12 months.	22	100.00%

7E		Staff are treated fairly.		
	(1)	Number of grievances filed by staff in the past 12 months.	5	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	191	2.62%
	(2)	Number of staff grievances decided in favor of staff in the past 12 months.	1	
	divided by	The total number of staff grievances in the past 12 months.	5	20.00%
	(3)	Total number of years of staff members' experience in the field as of the end of the last calendar year.	1347	
	divided by	The number of staff at the end of the last calendar year (e.g. average number of years experience).	181	7.44
	(4)	Number of staff termination or demotion hearings in which the facility decision was upheld in the past 12 months.	0	
	divided by	The number of staff termination or demotion hearings requested in the past 12 months.	0	0.00%
7F		The facility is a responsible member of the community.		
	(1)	Total number of hours of volunteer service delivered by members of the community in the past 12 months.	9928.5	
	divided by	The average daily population of inmates in the past 12 months.	586	16.94
	(2)	Total number of individual community members who provided voluntary service in the past 12 months.	244	
	divided by	The average daily population of inmates in the past 12 months.	586	41.64%
	(3)	Total number of complaints filed by media regarding access to information in the past 12 months.	0	
	divided by	The average daily population of inmates in the past 12 months.	586	0.00%
	(4)	Total number of positive statements made by media regarding the facility in the past 12 months.	126	
	divided by	The average daily population of inmates in the past 12 months.	586	21.50%
	(5)	Total number of complaints from the community in the past 12 months.	0	
	divided by	The average daily population of inmates in the past 12 months.	586	0.00%
	(6)	Total number of hours of community service work delivered by inmates in the past 12 months.	52250	
	divided by	The average daily population of inmates in the past 12 months.	586	89.16