REPORT ON THE
INSPECTION OF

CORRECTION RECEPTION CENTER

INSPECTION DATE: MAY 20, 2026

DAVE YOST
OHIO ATTORNEY GENERAL

Correction Reception Center

Inspection Date: May 20, 2026

Acronym:	CRC
Address:	11271 St. Rt. 762 Orient, OH 43146
Warden/Superintendent:	Jody Sparks
CFIS Team Members Present:	J. Wesson / D. Drummond / D. Thompson

FACILITY INFORMATION

Date Institution Opened:	1987
Population Type:	☒ Male ☐ Female
Security Level Type:	☒ Minimum ☒ Medium ☒ Reception ☒ Special Management ☐ Restrictive Housing ☐ Death Row ☒ Juvenile
Total Acres:	50
Total Buildings On-Site:	11
Total Custody Staff:	299
Total Service Area Staff:	75
Total Staff:	374
Total Volunteers:	63

INCARCERATED INDIVIDUAL INFORMATION

Current Count:	1,425
Total Available Capacity:	1,562
Incarcerated Person Age Range:	18 - 84
Incarcerated Person Average Age:	39.8

CRC is one of two male incarcerated person (IP) reception centers operated by the Department of Rehabilitation and Correction (DRC). It serves as the entry point for all males sentenced to prison from 85 of the state's 88 counties. During the reception process, IPs participate in orientation, which provides an overview of institutional rules, expectations, and available services. Most IPs will remain at a security level 3R until completion of all required assessments and orientation process, after which point CRC determines the appropriate security level and housing needs for each IP. CRC transfers most IPs to one of the state's 25 remaining male facilities, where they will serve the duration of their prison term.

RECENT INTERNAL MANAGEMENT AUDIT

CRC's most recent Internal Management Audit (IMA) was conducted on March 31 - April 2, 2026. The IMA is an annual audit conducted by an independent auditor who reviews a facility's compliance with the American Correctional Association's (ACA) 5th Edition Standards and the 2026 Ohio Standards and Observations, in preparation for the next ACA audit. All institutional work, industries, vocational, and educational programs are also audited. The table below illustrates CRC's rates of compliance for the previous three years:

IMA Audit Scores	2024	2025	2026
ACA Mandatory	100%	98.3%	98.4%
ACA Non-Mandatory	99%	99.5%	99.5%
Ohio Standards	94%	91.3%	90.1%

External Inspection Results	Date of Inspection	Violations	Violations Corrected
State Fire Marshall	11/22/2025	2	2
Health Department	6/10/2025	2	2
Annual Safety & Sanitation Inspection	11/20/2025	0	0

OVERVIEW OF CFIS INSPECTION

On May 20, 2026, CFIS completed an initial inspection of CRC. Warden Jody Sparks was notified the day prior that CFIS inspectors would be arriving at 9 a.m. the following day to conduct the inspection. CFIS was on site at CRC for approximately four hours. The CFIS team consisted of Dr. James Wesson, chief of inspections; Deborah Drummond, chief inspector; and Derek Thompson, inspector.

Per Ohio Revised Code Section 109.39, mandatory areas of inspection are food services, the grievance process, and an educational or a rehabilitative program. In addition to these mandatory areas of inspection, R.C. 109.39 empowers CFIS to inspect any other areas that it deems appropriate. While at CRC, CFIS also inspected the following:

- Recovery services
- Medical
- Library/law library
- Transitional programming unit (TPU)
- Mental health
- Visitation area
- General population housing units
- Specialized housing units
- Recreation
- Receiving and discharge (R&D) department

In advance of arrival, CFIS requested copies of CRC's Administrative Duty Officer (ADO) (50-PAM-02) reports from the past seven days, the most recent 30 days of grievances, and the following:

- Current vacancy rates (total staff/custody/non-custody overtime report)
- Current facility incarcerated population count (racial breakdown, average age)
- Current facility security threat group numbers
- Facility drug testing (previous quarter)
- Facility educational program numbers (program enrollment/completion)
- Approved volunteers (total)
- Facility Prison Rape Elimination Act (PREA) reports (past year/current, total of completed investigations)
- Family engagement and volunteer events
- Fire drills

GRIEVANCE PROCEDURE (Ohio Administrative Rule 5120-9-31)

The DRC inmate grievance procedure is a three-step process which is governed by Ohio Administrative Code Section 5120-9-31. The goal of the process is to address inmate complaints related to institutional life which directly and personally affect IPs, including those related to DRC policies and procedures, conditions of confinement, or the actions of institutional staff. Whenever possible, complaints should be resolved at the lowest step. Informal complaints must contain enough specificity to allow institutional staff to investigate and take corrective action, where necessary (e.g., the date, time, and place of the event; the name or names of personnel involved; and witnesses). An IP may file a "John/Jane Doe" complaint if he or she does not know the identity of the personnel involved. Such complaints must still provide specific dates, times, places, and physical descriptions of personnel, as well as the actions giving rise to the complaint. The steps to the process are set forth below:

> *Step One: The filing of an informal complaint:* An IP must file an informal complaint within 14 calendar days of the event about which the complaint is being filed. The complaint shall be filed with the direct supervisor of the staff member or department most directly responsible for the subject matter of the complaint. Staff shall respond in writing within seven calendar days of receipt of the informal complaint, though the inspector of institutional services (IIS) may grant an additional four calendar days for response. The IIS is required to ensure that the IP's informal complaint is responded to within seven calendar days. If it is not, the informal complaint step is waived, and the IP may proceed to step two. Informal complaint responses must reflect an understanding of the inmate's complaint, be responsive to the issue, cite any relevant departmental or institutional rules or policies, and specify the action taken, if any. The IIS is responsible for monitoring compliance with the informal complaint process and reports any pattern of non-compliance to the warden for appropriate action. The IIS may also waive the informal complaint process (step one) if, among other reasons, he or she determines that there is a substantial risk of physical injury to the grievant. Further, if an IP does not meet policy requirements — such as failing to submit an informal complaint resolution (ICR) within 14 calendar days of the event or failing to include specific details, such as dates, times, locations, descriptions of staff involved, and details of the actions that led to the complaint — the IIS will notify the IP that the grievance is denied.

Step Two: The filing a notification of grievance: If the inmate is dissatisfied with the informal complaint response, or the informal complaint process has been waived, the inmate may file a notification of grievance with the IIS no later than 14 calendar days from the date of the informal complaint response or waiver of the informal complaint step. The IIS may waive this time frame for good cause. Within 14 calendar days of receiving the grievance the IIS shall provide a written response that summarizes the complaint, describes the steps taken to investigate it, and sets forth the IIS's findings and decision. The IIS may extend the response time by up to 14 days with notice to the inmate. If there is no disposition within 28 days of receipt of the grievance, it will be deemed unresolved, and the IP may proceed to step three of the process. Expedited responses shall be made to grievances that, as determined by the IIS, present a substantial risk of physical injury to the grievant or for other good cause.

Step Three: The filing an appeal of the disposition of grievance: If an IP disagrees with the grievance resolution, he or she may appeal it to the office of the chief inspector. An appeal must be filed within 14 calendar days of the disposition, unless that time is waived by the chief inspector for good cause. The chief inspector, or his or her designee(s), shall provide a written response to the appeal within 30 days of receipt, unless that time is extended for good cause and with notice to the inmate. The chief inspector/designee's decision on the appeal is final.

Are the incarcerated issued tablets with access to the grievance procedure: ☒Yes ☐No ☐N/A

Are facility staff answering ICRs within policy: ☒Yes ☐No ☐N/A

If issued tablets are not available, are there other measures in place to provide access to the grievance procedure (e.g., open office hours): ☒Yes ☐No ☐N/A

Upon reviewing responses, are there any issues with timelines or lack of substance within the responses to the ICRs: ☐Yes ☒No ☐N/A

Additional Notes: While inspecting CRC, CFIS focused on ensuring that the institution systematically logs and tracks grievances in DRC's electronic system, ViaPath, and that staff respond to grievances within policy guidelines.

CFIS reviewed 209 ICRs and 83 grievances filed between April 20 and May 20, 2026. The review highlighted 55 grievances related to medical services, and 78 grievances related to staff accountability.

In consultation with the IIS, it was noted that a recent institutional search contributed to the high volume of grievances regarding staff conduct. CFIS reviewed multiple grievances related to this search and determined all were handled appropriately. CFIS observed no indications of retaliation against IPs for filing grievances. A review of grievances and ICRs showed thorough staff responses that appropriately referenced DRC policies and administrative rules.

Complaints were logged and tracked electronically through the ViaPath system and were accessible on IP tablets. CRC's grievance process is operating in accordance with DRC administrative rule 5120-9-31.

FOOD SERVICE AREA INSPECTION (60-FSM-02)

The food service department was inspected to ensure compliance with DRC policy 60-FSM-02, Food Service Operations, and DRC policy 60-FSM-06, Safety and Health Protection for Staff and Incarcerated Individuals Assigned to Food Service.

Executive staff/supervisors conducting unannounced rounds: ☒Yes ☐No ☐N/A

A. SANITATION

Dining room(s) meet DRC policy for cleanliness: ☒Yes ☐No ☐N/A

Serving line(s) meet DRC policy: ☒Yes ☐No ☐N/A

Dish room area meets DRC policy for cleanliness: ☒Yes ☐No ☐N/A

Dishwasher water temperature meets DRC policy: ☒Yes ☐No ☐N/A

Handwashing stations in working order: ☒Yes ☐No ☐N/A

Handwashing stations operate at a proper temperature: ☒Yes ☐No ☐N/A

Eye washing stations operate appropriately: ☒Yes ☐No ☐N/A

B. FOOD SERVING & STORAGE COMPLIANCE

Appropriate food menus posted: ☒Yes ☐No ☐N/A

Food temperatures in compliance with DRC policy: ☒Yes ☐No ☐N/A

Food service workers wearing hairnets, gloves, etc.: ☒Yes ☐No ☐N/A

Serving utensils appear to be in good working order: ☒Yes ☐No ☐N/A

Freezer temperatures in compliance with DRC policy: ☒Yes ☐No ☐N/A

C. CHEMICAL & TOOL CONTROL

Tools properly stored/signed out/accounted for: ☒Yes ☐No ☐N/A

Tools properly etched with an identifier: ☒Yes ☐No ☐N/A

Chemicals properly stored and inventoried: ☒Yes ☐No ☐N/A

Additional Notes: During the inspection, CFIS sampled a lunch meal that included Spanish rice, beans, steamed carrots, brownie, and banana. The meal was appropriate in portion size, and met policy standards for taste, appearance, and temperature.

Aramark food service staff and IP workers were appropriately dressed in protective clothing (hair and beard nets, rubber gloves) within the food service department. Uniforms were neat and clean. The food service area was orderly. The spring menu was posted.

Food was properly labeled and dated. The dish room was clean and dish cleaning water temperatures followed

DRC policy 60-FSM-02. CFIS verified completion of sanitation and hygiene training for food service staff and IP workers assigned to food service in accordance with DRC policy 60-FSM-06. ServSafe certification was also verified. The food service area used DRC-approved cleaning chemicals and disinfectants.

The back dock area was clean and free of odor, and the vicinity of the trash compactor was free of debris. There was no indication of rodents, however there were fruit flies in the food service area. Staff assured CFIS a pest control contractor is on grounds twice monthly to address all pest issues. CFIS interviewed several Aramark staff members and the food service manager, and none reported concerns or issues. No DRC policy violations were observed or reported during the inspection.

In2Work Program: DRC and Aramark have established a program enabling IPs to be employed by Aramark as food service managers. Before assuming these positions, program participants are required to obtain necessary certifications and maintain them throughout their involvement. These certifications remain accessible to individuals upon release. The In2Work program is structured to impart essential skills and certifications for careers in culinary arts. CFIS spoke with In2Work participants who expressed high satisfaction with the program, noting the value of the experience for their future reentry. During the inspection, program participants were observed actively engaged in meal preparation.

EDUCATION & REHABILITATIVE PROGRAMS (57-EDU-01-02)

The Ohio Central School System (OCSS) offers educational programs designed to meet the needs of IPs throughout DRC, including CRC. The programs include adult education courses, vocational training, and technical training, all of which incorporate technology into the program. Collectively, the programs are designed to enhance the incarcerated population's employability upon release.

A. EDUCATION PROGRAMS

Does the facility have an education department for in-person learning? ☒Yes ☐No ☐N/A

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Programs offered: ☒GED ☒ACADEMIC ☐CAREER-TECH ☒APPRENTICESHIP
☐VOCATIONAL ☒ DEGREE PROGRAMS/CERT.
☐OTHER: ☐N/A

Are there currently any vacant teaching/staff positions within the education dept.: ☒Yes ☐No ☐N/A

Does the area have appropriate signage/information displayed: ☒Yes ☐No ☐N/A

Does the education department area comply with DRC standards for cleanliness: ☒Yes ☐No ☐N/A

Additional Notes: The education department within CRC is large with numerous classrooms. On the date of the inspection, CRC's academic and educational programs included:

- Adult basic education
- High school education (HSE)
- Pre-HSE
- Sinclair Community College
- Electrical maintenance
- Janitor
- Maintenance repair
- Welder

CRC offers classes in a variety of instructional formats, including traditional classroom, face-to-face, hybrid, and digital mediums. IPs may attend classes in the education department, where the facility provides accommodations for those with learning disabilities to ensure equitable access to educational opportunities.

The education department features an Ohio Means Jobs site, offering specialized employment services such as job search assistance, interview preparation, and re-entry resume support.

CFIS verified the instructors' qualifications, confirming compliance. Educational materials and technology at CCI are current. Staff consistently log and track enrollment and attendance accurately.

No violations of DRC 57-EDU-08, Education Staff Credentials, were observed or reported.

B. REHABILITATIVE/REENTRY PROGRAMS

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Please list the kind of rehabilitative/reentry programs that the facility offers: Treatment readiness program, Intensive Outpatient Program (IOP), Recovery Maintenance Program, Batterer Intervention Program (BIP), Continuing Care Program, Open Fellowship meetings, Medically Assisted Treatment (MAT), Community Transition Program, as well as Alcoholics Anonymous and Narcotics Anonymous.

Does the area have appropriate signage/information displayed: ☒Yes ☐No ☐N/A

Does the reentry department comply with DRC standards for cleanliness: ☒Yes ☐No ☐N/A

Additional Notes: Two treatment rooms are available for group sessions. The IOP takes place daily, with sessions in both the morning and afternoon. Initial screening for sex offenders is conducted upon arrival. CRC currently has four behavioral health providers and one OTP coordinator. The health information technician position is currently vacant.

The open-ended IOP offers flexibility in treatment duration for participants needing extended support. The BIP focuses on addressing and changing abusive behaviors. The peer supporters' program is an integral part of the rehabilitative program where IPs receive training and become certified. The skills learned can be utilized once an IP returns to society, allowing them to work as peer supporters in the community.

MEDICAL & MENTAL HEALTH (68-MED-01 & 67-MNH-15)

A. MEDICAL SERVICES

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Services offered: Telemedicine, medication distribution (three times per day), doctor sick call, dental, optometry, and x-ray.

Are there any staffing vacancies within the medical dept.: ☒Yes ☐No ☐N/A

Does the area have appropriate signage/information displayed: ☒Yes ☐No ☐N/A

Does the medical department meet DRC policy standards for cleanliness: ☒Yes ☐No ☐N/A

Are there any maintenance issues that may hinder sufficient medical care: ☐Yes ☒No ☐N/A

Are there any ongoing hunger strikes, constant watches, dry cells, or special supervision IPs in this area: ☒Yes ☐No ☐N/A

Additional Notes: CRC's medical department currently has five rooms to conduct triage and examinations. In addition to the available exam rooms, there are eight housing beds available for any ongoing care or continued observation following appointments. Within the medical department is also one crisis watch status cell available to house an IP for monitoring. The medical department currently has one vacant position for a nurse. There are currently 60 IPs enrolled in the MAT program. There were four IPs from the residential treatment unit (RTU) housed in the infirmary due to illegal substance abuse from when the exterminator sprays the exterior/interior of the building for pests. The exterminator is preventative; CRC does not have a reported pest problem.

One IP was housed within the infirmary for medical observation due to a hunger strike. A hunger strike is when an IP has refused to accept food intake for breakfasts, lunches, and dinners for three consecutive days. DRC policy requires treatment and monitoring of IPs who participate in a hunger strike, and permits involuntary medical treatment as necessary to prevent death or serious, irreversible damage to life or major organs. DRC policy also requires the assembly of a hunger strike management team containing the following staff:

- Deputy warden (hunger strike team leader)
- Unit management chief
- Chief of security
- Healthcare administrator
- Mental health administrator
- Other members designated by the team leader, which may include, but are not limited to: religious services, education, recovery, recreation, dietary, and/or dental services.

CFIS reviewed CRC's hunger strike log (DRC 4178) and noted all protocols were properly followed. No violations of DRC policy 81-OHS-02, Hunger Strike, were observed or noted.

No violations of DRC policy 68-MED-01, Medical Services, were observed or reported.

B. MENTAL HEALTH SERVICES

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Services offered: Behavior therapy, anger management, depression management, post-traumatic stress disorder treatment, seeking safety.

Are there any staffing vacancies within the mental health dept.: ☒Yes ☐No ☐N/A

Does this area have appropriate signage/information displayed: ☒Yes ☐No ☐N/A

Does the mental health department meet DRC policy standards for cleanliness: ☒Yes ☐No ☐N/A

Are there any maintenance issues that may hinder sufficient mental health care: ☐Yes ☒No ☐N/A

Does the facility have sufficient space for staff to see patients for mental health care: ☒Yes ☐No ☐N/A

Additional Notes: The mental health department is in Unit D4. Substance Abuse and Mental Illness (SAMI) programming is available for individuals housed in the RTU unit. In total, approximately 15 programs are consistently provided for clinical and activity purposes. There are currently five vacancies within the department. Four positions have been approved to be filled, including one psych assistant and two behavioral health professionals. Additionally, a general activity therapist is scheduled to begin employment on June 14, 2026. CRC has not filed a request to fill its vacant psychologist position. The outpatient section of the facility contains multiple rooms dedicated to group programming, individual therapy sessions, and peer support meetings.

RECREATION (77-REC-01)

A. RECREATION DEPARTMENT

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Does the area have appropriate signage/information displayed: ☒Yes ☐No ☐N/A

Types of recreation programs offered: Basketball, weight/cardio room, billiards, and badminton.

Types of recreation: ☒ Indoor ☒ Outdoor ☐ N/A

Are equipment and facilities in working order: ☒Yes ☐No ☐ N/A

Does the recreation department comply with DRC policy standards for cleanliness: ☒Yes ☐No ☐ N/A

Additional Notes: The CRC recreation department was staffed by an activity therapy administrator, an activity therapist, and a corrections officer. The department maintained a structured schedule designed to provide consistent recreational access to all individuals housed at the facility.

All housing units were scheduled to attend the recreation area at least twice per week. In addition, two specific housing units, those designated for juvenile individuals and for cadre IPs, were granted daily access to the recreation area. These units attended during their assigned times in accordance with established departmental procedures.

There were no observed or reported violations of DRC policy 77-REC-01, Recreation and Leisure Time Activities.

CRC Gymnasium

CRC Weight Room

LIBRARY (58-LIB-01)

A. LIBRARY

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Does the library provide access to LexisNexis: ☒Yes ☐No ☐N/A

Does the library have policies and procedures available: ☒Yes ☐No ☐N/A

Does the library have operation hours and information posted: ☒Yes ☐No ☐N/A

Does the library have a community partner to assist with services: ☒Yes ☐No ☐N/A

Does the library meet DRC policy standards for cleanliness: ☒Yes ☐No ☐N/A

Additional Notes: The CRC library provides access to LexisNexis, reading materials, educational support resources, self-development materials, and legal research assistance. Additionally, library services collaborate with education services to support IPs in their academic coursework. CRC has established the Ohio Means Jobs Center, allowing individuals to update their resumes and apply for employment opportunities prior to release. Driver's license and CDL information manuals are also available. No issues with DRC policy 58-LIB-01, Comprehensive Library Services, were observed during the inspection of the library.

VISITATION (76-VIS-01)

A. VISITATION

Visitation hours: Sunday-Saturday from 8:00 a.m. to 10:00 a.m., 11:00 a.m. to 4:00 p.m., and 5:00 p.m. to 7:30 pm.

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Visits allowed: ☒Contact ☒Non-contact ☐Semi-Contact

Does the visitation area provide adequate seating: ☒Yes ☐No ☐N/A

Does visitation area provide food and drink options: ☒Yes ☐No ☐N/A

Does the area have appropriate signage/information posted: ☒Yes ☐No ☐N/A

Does the visitation area meet DRC policy standards for cleanliness: ☒Yes ☐No ☐N/A

Additional Notes: On the day of the inspection CRC's visitation area was well-kept. The institution offers contact and non-contact visits. During contact visits, visitors can physically make contact, embrace, and actively engage with IPs in activities such as games, meals, and coloring. During non-contact visits, visitors and IPs are separated by a wall with a glass window and cannot physically touch, embrace, or engage in activities.

The area appeared to allow IPs and their families an opportunity to engage in a setting designed to encourage positive interaction among family members, especially children. Children's books were available for use during visitation. Vending machines and food-ordering service were available for visitors to purchase snacks and drinks.

Video visits are also permitted to be conducted utilizing their ViaPath tablets within approved designated areas of the facility.

No violations of DRC policy 76-VIS-01, Incarcerated Person Visitation, were observed or reported.

GENERALIZED HOUSING

A. GENERAL POPULATION HOUSING #1

Name/Identifier: A1

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Does the unit have appropriate signage/information displayed: ☒Yes ☐No ☐N/A

Does this housing unit offer programming: ☒Yes ☐No. ☐N/A

Type of unit: ☐Open Dorm ☒Cells

Housing unit max capacity: 124

Are equipment and facilities in working order: ☒Yes ☐No ☐N/A

Does the housing unit meet DRC policy standards for cleanliness: ☒Yes ☐No ☐N/A

Additional Notes: A1 is staffed by two corrections officers, a case manager, a sergeant, and a unit manager. The facility maintains a clean, organized, and quiet environment. A1 is furnished with an ice machine, water cooler, and laundry facilities. Additionally, the unit provides access to Decision Points, an IP peer-led program which offers a 12-week cognitive-behavioral curriculum aimed at supporting participants in making positive life decisions. The unit operates under a collaborative team model that involves all staff members as reported by unit management. No issues or violations of DRC policy were observed or reported.

SPECIALIZED HOUSING

A. SPECIALIZED HOUSING #1

Name/Identifier: Transitional Program Unit (TPU)

Type of Specialized Housing: ☒ Special Management Housing (*55-SPC-02*) ☐ RTU (*67-MNH-23*)
☐ Reception (*52-RCP-01, 02, 06*) ☐ Death Row (*67-MNH-31, 52-RCP-02*)
☐ Limited Privilege Housing ☐ Level 1/Outside Worker ☐ Nursery
☐ Dementia ☐ Protective Custody ☐ Other:

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Does the unit have appropriate signage/information displayed: ☒Yes ☐No ☐N/A

Does this specialized housing offer programming: ☒Yes ☐No ☐N/A

Type of unit: ☐Open Dorm ☒Cells

Housing unit max capacity: 78

Are equipment and facilities in working order: ☐Yes ☒No ☐N/A

Does the housing unit inspected comply with DRC standards for cleanliness: ☒Yes ☐No ☐N/A

Additional Notes: CFIS inspected TPU, a special management housing unit. PREA posters and unit staff photos were prominently displayed. Inspectors reviewed the TPU staff sign-in log (DRC 6011), which showed that while several leadership staff are conducting rounds in accordance with DRC policy 50-PAM-02, Incarcerated Person Communication/Weekly Rounds, some members of the leadership are not conducting rounds consistently. CRC has a plan of action it is implementing to ensure consistent rounds to meet the requirements of DRC policy 50-PAM-02.

CFIS reviewed multiple restrictive housing individual record sheets (DRC 4118). These documents track each IP's essential daily functions, including meal acceptance/refusal, personal hygiene, and recreation. Each DRC 4118 is signed or initialed by a staff member as confirmation that the necessities for essential daily functions have been provided.

Of the DRC 4118s reviewed, most sections had been properly completed, except for the daily signatures required from medical personnel. On one day, medical personnel failed to initial the DRC 4118s.

CFIS reviewed several of the restrictive housing daily activity logs (DRC 4117). These logs document the delivery of essential services, including linen and clothing exchanges as well as barbering, to IPs placed in restrictive housing. CFIS determined that most of the DRC 4117s were generally compliant; however, some logs were missing times reflecting when services were provided to residents in restrictive housing. Missing service times are significant because their absence can hinder accurate tracking of service delivery and reduce overall accountability, potentially impacting compliance with required standards and the quality of care provided.

The TPU is appropriately staffed, with three officers assigned to the first and second shifts and two officers on the third shift. Meals are delivered to the unit from food service in temperature-regulated bins and served immediately to comply with DRC policy 60-FSM-02. CFIS was present when the lunch meal was delivered. No policy violations were observed regarding the meal.

A few sanitation and maintenance issues, such as deteriorating showers and an odor in several empty cells, were observed. CRC was following the process for repairing these issues according to DRC policy 21-CAM-12, Preventative Maintenance and General Work Orders, which outlines procedures for ensuring that all problems are reported and addressed promptly.

B. SPECIALIZED HOUSING #2

Name/Identifier: Sex Offender Risk Reduction Center Unit (SORRC)

Type of Specialized Housing: ☐ Special Management Housing (*55-SPC-02*) ☐ RTU (*67-MNH-23*)
☐ Reception (*52-RCP-01*, *02*, *06*) ☐ Death Row (*67-MNH-31*, *52-RCP-02*)
☐ Limited Privilege Housing ☐ Level 1/Outside Worker ☐ Nursery
☐ Dementia ☐ Protective Custody ☒ Other: Sex Offender Program Unit

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Does the unit have appropriate signage/information displayed: ☒Yes ☐No ☐N/A

Does this specialized housing offer programming: ☒Yes ☐No ☐N/A

Type of unit: ☐Open Dorm ☒Cells

Housing unit max capacity: 124

Are equipment and facilities in working order: ☒Yes ☐No ☐N/A

Does the housing unit inspected comply with DRC standards for cleanliness: ☒Yes ☐No ☐N/A

Additional Notes: SORRC is managed by two corrections officers, a case manager, a sergeant, and a unit manager. Corrections officers are responsible for maintaining the safety and security of the unit. The clinical staff consists of a director and two behavioral health providers. Clinical staff collaboratively conduct comprehensive assessments within the unit.

The specialized diagnostic and evaluation unit assesses all males entering the Ohio prison system who are identified as sex offenders as part of the initial reception and classification process. Group sessions are conducted within the unit and are scheduled for one week at a time. These sessions are designed to facilitate engagement, promote personal development, and address specific needs of the residents. Sessions are facilitated by behavioral staff and unit case managers.

After completion of the group sessions, IPs undergo assessments to determine whether additional programming is required upon transfer to a permanent facility. This evaluation ensures that each IP receives appropriate support based on their individual needs and risk factors. Three sex offender clinicians are assigned to the unit. Their primary responsibility is to conduct specialized assessments and provide clinical expertise for residents with identified needs. Additionally, two staff program facilitators organize and lead programming within the unit, ensuring effective delivery of curriculum and supporting participant engagement.

The unit also offers the Decision Points program to IPs, which is monitored by clinicians to ensure quality and relevance. No violations of DRC policy were noted or observed during the inspection.

C. SPECIALIZED HOUSING #3

Name/Identifier: C-3

Type of Specialized Housing: ☐ Special Management Housing (*55-SPC-02*) ☒ RTU (*67-MNH-23*)
☐ Reception (*52-RCP-01*, *02*, *06*) ☐ Death Row (*67-MNH-31*, *52-RCP-02*)
☐ Limited Privilege Housing ☐ Level 1/Outside Worker ☐ Nursery
☐ Dementia ☐ Protective Custody ☐ Other:

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Does the unit have appropriate signage/information displayed: ☒Yes ☐No ☐N/A

Does this specialized housing offer programming: ☒Yes ☐No ☐N/A

Type of unit: ☐Open Dorm ☒Cells

Housing unit max capacity: 50

Are equipment and facilities in working order: ☒Yes ☐No ☐N/A

Does the housing unit inspected comply with DRC standards for cleanliness: ☒Yes ☐No ☐N/A

Additional Notes: C-3 is staffed by two corrections officers, a case manager, a sergeant, and a unit manager and a staff member from mental health as the RTU Director. Corrections officers are responsible for maintaining safety and security within the unit. The unit is also staffed by mental health nurses on a 24/7 basis who assist corrections officers in handling IPs within the unit and IPs who may experience a mental health crisis.

C-3 typically houses IPs determined to need more intensive mental health care. These IPs may have diagnoses such as serious mental illness, personality disorders, or substance use disorders that require structured therapeutic intervention.

Referral, admission, treatment requirements, and discharge are authorized by behavioral health operations staff. Upon admission, IPs are assigned to a treatment track determined by the clinical team. The acute treatment track addresses IPs with active or acute symptoms requiring short-term intervention in a supportive setting. The chronic care track is designated for IPs who have reached clinical baseline but exhibit chronic residual symptoms and are unable to function independently outside of a specialized mental health unit.

C-3 is a secure treatment environment that has a structured clinical program containing five phases of care. Phase 1 handles IPs in crisis by providing assessment and developing a treatment plan. Phase 2 provides treatment and interventions through group and individual interventions supplemented by activity therapists or psychiatric attendant groups that focus on art, recreation, socialization, and hygiene. Phase 3 includes treatment interventions and meaningful activities, with most IP time spent out of cell to receive programming and treatment. Within Phase 3 is the chronic classification (3C), which signifies a serious mental illness diagnosis requiring long-term housing in a specialized unit. Programming for 3C IPs focuses on skill building and socialization. Phase 4 is a transitional phase where IPs are out of their cells more often and permitted to move more freely throughout the unit, as well as leaving the unit unescorted (based on security level).

SAMI is available for IPs residing in this unit. This program is a treatment-based court initiative designed to address both addiction and mental health disorders. SAMI utilizes a variety of therapeutic approaches, including individual counseling, group therapy sessions, and evidence-based interventions, to help participants simultaneously manage substance use and mental health challenges. By targeting both conditions together, the program aims to provide comprehensive support and promote lasting recovery for those involved.

No violations DRC 67-MNH-23, Residential Treatment Unit and Day Treatment Programs, were observed or reported.

D. SPECIALIZED HOUSING #4

Name/Identifier: D4

Type of Specialized Housing: ☐ Special Management Housing (*55-SPC-02*) ☐ RTU (*67-MNH-23*)
☐ Reception (*52-RCP-01*, *02*, *06*) ☐ Death Row (*67-MNH-31*, *52-RCP-02*)
☐ Limited Privilege Housing ☐ Level 1/Outside Worker ☐ Nursery
☐ Dementia ☐ Protective Custody ☒ Other: Juvenile Unit

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Does the unit have appropriate signage/information displayed: ☒Yes ☐No ☐N/A

Does this specialized housing offer programming: ☒Yes ☐No ☒N/A

Type of unit: ☐Open Dorm ☒Cells

Housing unit max capacity: 34

Are equipment and facilities in working order: ☒Yes ☐No ☐N/A

Does the housing unit inspected comply with DRC standards for cleanliness: ☒Yes ☐No ☐N/A

Additional Notes: D4 houses juvenile IPs sentenced as adults, aged 15 to 17 years old, with an average age of 17. The unit is staffed by two correctional officers, with a case manager, unit manager, sergeant, and lieutenant also assigned.

Limited Privilege Housing (LPH) are specialized units designed for youth requiring increased supervision or limited privileges. The LPH range contains two cells designated for constant watches. Overall, the area was observed to be clean, organized, and quiet. Although each cell is equipped with two beds, youth are typically housed one per cell for greater safety and individualized care. Juvenile IPs on the LPH range have access to indoor recreation, a TV room, and tablets while out of their cells. Recreational activities are scheduled daily to promote physical health and social interaction, and youth may use tablets for educational and communication purposes. Educational programming includes individualized instruction and support from teachers, ensuring that youth continue learning while on LPH status.

General population juvenile IPs attend scheduled activities throughout the day, including education, recreation, medical procedures, programming, visitation, and volunteer sessions. Programming includes life skills workshops and counseling, while volunteer sessions may involve community service projects or mentorship opportunities.

Juvenile IPs are required to attend school five days per week, Monday through Friday from 7:45 a.m. to 2:00 p.m. The curriculum includes science, physical education, health, English, social studies, and math. Elective courses offered are music and art. Classwork is provided both in classroom settings and in person.

General population juvenile IPs recreation time is scheduled daily from 3:00 to 4:00 p.m. Juvenile IPs have access to the same recreation activities regardless of unit assignment. The day room in the general population range is equipped with a large fan, microwave, water fountain, a large television, and seating.

Juvenile IPs report to medical for pill call while en route to meals if they are prescribed maintenance medication. For outside medical needs, juvenile IPs attend appointments at The Ohio State University and Franklin Medical Center, which provide specialized healthcare services.

An Anger Control program is available to juvenile IPs on Fridays. The program is structured to help participants identify triggers, develop coping strategies, and improve emotional regulation, with the goal of reducing behavioral incidents and supporting overall rehabilitation.

Juvenile IPs receive visits on weekends. Volunteers visit the unit on Wednesday evenings twice per month. The Epiphany program, a church-based initiative, engages juvenile IPs once per month, providing mentorship and support. No violations of DRC policy were noted or observed during the inspection.

E. SPECIALIZED HOUSING #5

Name/Identifier: D-1

Type of Specialized Housing: ☐ Special Management Housing (*55-SPC-02*) ☐ RTU (*67-MNH-23*)
☐ Reception (*52-RCP-01*, *02*, *06*) ☐ Death Row (*67-MNH-31*, *52-RCP-02*)
☐ Limited Privilege Housing ☐ Level 1/Outside Worker ☐ Nursery
☐ Dementia ☐ Protective Custody ☒ Other: Watch Status Unit

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Does the unit have appropriate signage/information displayed: ☒Yes ☐No ☐N/A

Does this specialized housing offer programming: ☒Yes ☐No ☐N/A

Type of unit: ☐Open Dorm ☒Cells

Housing unit max capacity: 30

Are equipment and facilities in working order: ☒Yes ☐No ☐N/A

Does the housing unit inspected comply with DRC standards for cleanliness: ☒Yes ☐No ☐N/A

Additional Notes: D-1 houses IPs under assessment by mental health staff or IPs experiencing a mental health crisis. Mental health staff, two corrections officers, and any additional officers (depending on the number of IPs on mental health watch status) are assigned within the unit. There are six showers within the unit designed to accommodate IPs on mental health watch status.

While inspecting the area, there were two IPs attending the Creating Opportunities for Personal Empowerment (COPE) program. The COPE program focuses on helping IPs with coping skills and emotional resilience by managing stress, improving emotional regulation, and developing healthier behaviors. While the exact name and structure can vary by facility, COPE programs are part of broader mental health and rehabilitation initiatives aimed at reducing recidivism and supporting reintegration. No violations of DRC policy were noted or observed during the inspection.

F. SPECIALIZED HOUSING #6

Name/Identifier: C-1

Type of Specialized Housing: ☐ Special Management Housing (*55-SPC-02*) ☐ RTU (*67-MNH-23*)
☐ Reception (*52-RCP-01*, *02*, *06*) ☐ Death Row (*67-MNH-31*, *52-RCP-02*)
☐ Limited Privilege Housing ☒ Level 1/Outside Worker ☐ Nursery
☐ Dementia ☐ Protective Custody ☒ Other: Cadre

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Does the unit have appropriate signage/information displayed: ☒Yes ☐No ☐N/A

Does this specialized housing offer programming: ☒Yes ☐No ☐N/A

Type of unit: ☐Open Dorm ☒Cells

Housing unit max capacity: 124

Are equipment and facilities in working order: ☒Yes ☐No ☐N/A

Does the housing unit inspected comply with DRC standards for cleanliness: ☒Yes ☐No ☐N/A

Additional Notes: Due to CRC being a reception-style facility, the unit team assign IPs that are approved to work within sensitive work areas and outside of the fence. These IPs assist with facility maintenance, food service, groundskeeping, barbering, and IP peer support. This unit also operates the staff dog daycare/boarding program. These IPs are supervised by CRC staff. No violations of DRC policy were noted or observed during the inspection.

G. SPECIALIZED HOUSING #7

Name/Identifier: R-2

Type of Specialized Housing: ☐ Special Management Housing (*55-SPC-02*) ☐ RTU (*67-MNH-23*)
☒ Reception (*52-RCP-01*, *02*, *06*) ☐ Death Row (*67-MNH-31*, *52-RCP-02*)
☐ Limited Privilege Housing ☐ Level 1/Outside Worker ☐ Nursery
☐ Dementia ☐ Protective Custody ☒ Other: Orientation

Executive staff/supervisors conduct unannounced rounds: ☒Yes ☐No ☐N/A

Does the unit have appropriate signage/information displayed: ☒Yes ☐No ☐N/A

Does this specialized housing offer programming: ☒Yes ☐No ☐N/A

Type of unit: ☐Open Dorm ☒Cells

Housing unit max capacity: 118

Are equipment and facilities in working order: ☒Yes ☐No ☐N/A

Does the housing unit inspected comply with DRC standards for cleanliness: ☒Yes ☐No ☐N/A

Additional Notes: At the time of inspection, R-2 was clean and orderly. Staff consisted of two correction officers, a unit sergeant, a case manager, and a unit manager. Following the initial intake process, IPs are assigned to R-2 for their first seven days. During this orientation period, IPs undergo assessments to identify medical, recovery, educational, and programming needs. IPs also receive instruction on facility expectations, including escort procedures, uniform requirements, personal and unit cleanliness standards, and are informed of the facility's rules and procedures as outlined in the IP Handbook. No violations of DRC policy were noted or observed during the inspection.

ADDITIONAL NOTES FROM INSPECTION

Prison Rape Elimination Act (PREA)

PREA provides for the analysis of the incidence and effects of prison rape in federal, state, and local institutions. PREA provides information, resources, recommendations, and funding to protect IPs from prison sexual assaults and rapes. PREA applies to all DRC institutions, including privately operated and juvenile correctional facilities.

As the law enforcement agency responsible for investigating criminal offenses inside correctional institutions, the Ohio State Highway Patrol tracks sexual assaults using the PREA incident system. CFIS interviewed the PREA coordinator who confirmed that CRC had one substantiated PREA case in the past 12 months. PREA signage and local rape crisis center information were appropriately posted.

In addition, CRC has PREA victim support teams, made up of staff who can assist the victim with information and emotional support services.

No violations of DRC policy 79-ISA-01, Prison Rape Elimination Act, were observed.

Staff Recruiting and Retention

On the date of the inspection, CRC had a vacancy rate of 12%, which is above the agency average of 10.04%. Information about hiring events and job openings was posted.

Naloxone (Narcan) Kits

CRC offered Narcan kits to IPs on the day of their release. Each kit contained two doses of naloxone and 10 fentanyl test strips. The kits are stored within a “Harm Reduction Vending Machine,” which is located within a discrete area. CRC complied with DRC 10-SAF-20, Naloxone Safety and Health Procedures.

Administrative Duty Officer Reports (ADO)

The CFIS Team reviewed the ADO 50-PAM-02 reports from April 1 to May 20, 2026, which were provided upon request. An ADO report is completed daily by the designated executive staff tasked with completing inspection rounds. The designated rounds cover food service, visitation, housing, recreation, and any other area designated by the warden. Upon completion of the ADO rounds, a report documenting the rounds is provided to the warden’s office for review. The report includes the date and time of the rounds, areas visited, observations, concerns and recommendations. The ADO reports reviewed by CFIS were completed in a timely manner in accordance with DRC policy 50-PAM-02.

Security and Safety

CRC housing units were appropriately staffed. Restrooms were clean with all showers, sinks, and toilets in good working conditions. Units had essential items such as ice machines, and water fountains. All essential items were in working order. No maintenance issues were reported or observed. Fire evacuation plans were posted in conspicuous areas. Cleaning products and supplies were secured appropriately. According to the DRC sign-in logbook, staff were conducting rounds according to DRC policy 50-PAM-02.

No security issues were noted, and no DRC policy violations were noted or observed during the inspection.

Drug Prevention and Testing

DRC has increased efforts towards contraband interdiction throughout all facilities statewide to assist in the reduction of contraband conveyance and unauthorized items brought into facilities. Additional DRC canine teams are being formed to assist in contraband interdiction.

In addition, DRC's centralized mail processing center in Youngstown receives, inspects, and scans all mail. Mail is then sent to IPs electronically via their tablets per DRC policy, 75-MAL-01, Incarcerated Population Mail. The table below illustrates CRC's drug testing results during the month of April 2026.

Test Category	Number of Tests	Results
Random testing	12	0 positives
For cause	31	20 BUP positives, 1 FYL positives, 2 THC positives
Program testing	0	0 positives

During the reporting period from April 2026 to the date of inspection, the following contraband was seized: 19 grams of crushed Suboxone pills, 25 Suboxone strips, one nicotine pouch, 29 grams of tobacco, one-eighth sheet of tainted paper, two unidentified pills, one Seroquel pill, 114 pieces of synthetic drugs, 58 pieces of Suboxone, three grams of marijuana, and less than one gram of tobacco.

Security Threat Groups (STG)

STGs are organized groups within correctional facilities that are often linked to gang activity/organized crime and pose significant risks to the safety and security of the facility. Classifying an individual as an STG member assists the facility, and DRC, in proper tracking, housing, and monitoring of trends.

CRC has identified 149 STG members belonging to 29 different STGs. The top six groups are: Bloods (22 members), Folks/Gangster Disciples (11 members), Heartless Felons (17 members), White Supremacist (26 members), Cincinnati White Boys (10 members), and Aryan Brotherhood (11 members).

Institutional Overtime

Corrections officers worked a total of 8,440.90 overtime hours during pay periods from April 18 to May 15, 2026. No violations of DRC policy 35-PAY-01, Employee Pay, Timekeeping and Overtime Issues, were noted.

Annual Evacuation Drills

CFIS verified that CRC's health and safety coordinator conducts quarterly fire drills on all shifts in compliance with DRC policy 10-SAF-05, Fire Prevention and Safety Practices.

Special Events/Family Engagement Events

Over the past 12 months, CRC has hosted at least seven special events including but not limited to: Change of Heart Ministry Reunion, Rock City Spring Concert, Rock City Baptismal Services, Catholic mass conducted by Archbishop Earl Hernandez and The Four-Seven "Christmas Miracle Celebration." Events were conducted in compliance with DRC policy 77-REC-01.

CONCLUSION

CRC operates in accordance with established standards, reflecting commitment to safety and proactive engagement with families and the community. The grievance process is efficient and transparent, yielding outcomes grounded in policy, while staff consistently demonstrate professionalism and expertise during inspections. Housing units comply with required benchmarks, and programs are thoughtfully designed to assist IPs in their transition to permanent institutions. Collectively, these efforts foster a secure environment, promote positive social behavior, and facilitate ongoing rehabilitation.

Despite these strengths, two areas of concern within the TPU require attention to ensure that conditions of confinement meet expectations for IPs: staff occasionally fail to include service times within DRC 4117s, and several vacant cells contained deteriorating showers and the presence of an odor. CRC leadership have stated that they have created plans to solve these issues. CFIS will conduct a reinspection at a future date to confirm these issues have been resolved.

DAVE YOST
OHIO ATTORNEY GENERAL

REPORT ON THE INSPECTION OF

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