



*A Joint Committee of the Ohio General Assembly*

# REPORT ON THE UNANNOUNCED INSPECTION OF INDIAN RIVER JUVENILE CORRECTIONAL FACILITY

JANUARY 9, 2025

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REPORT ON THE  
UNANNOUNCED INSPECTION OF  
  
**INDIAN RIVER JUVENILE  
CORRECTIONAL FACILITY**  
  
JANUARY 9, 2025

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# OVERVIEW



## Facility Overview

Indian River Juvenile Correctional Facility (IRJCF) houses youth between the ages of 12-20. It is one of the higher-security youth facilities in the state, as youth are housed in an individual-cell environment. The facility is situated on 40 acres in Massillon Ohio. The facility's rated capacity is 165 youth. As of January 30, 2025, the facility housed 163 youth. As of February 1, 2025, the facility employed 241 total staff of which 102 were youth specialists. There were 70 total vacancies (22.5%), including 45 youth specialist vacancies (30.6%).

In its October 2-4, 2023, American Correctional Association (ACA) Reaccreditation audit, the facility scored 100% compliance for 37 applicable, mandatory standards, and 99.7% on the 316 applicable, non-mandatory standards. It was reported that they are anticipating their next ACA audit to take place in October of 2026.

In its October 29-31, 2024, Internal Management Audit (IMA) of ACA standards, the facility scored 100% compliance for the applicable, ACA mandatory standards, 98% on the applicable, ACA non-mandatory standards and 61% for applicable Ohio standards. The standards found to be in noncompliance were regarding zoning/safety codes, Master Tool/SRI inventory, youth dress code, Operations Manager's sign-in log, active aggressor training, court and parent/guardian notifications, individual program plan, property records, transfer records, intake records, House Meeting Binders, youth programs, IDT's, community service hours for designated PRIDE level, large muscle recreation, substance use intervention, drug test input into system, annual saturation testing, youth monitoring logs, separation monitoring logs, mental health assessment inconsistencies, Behavioral Health/Case Manager staff and youth meetings, YO-RIC cards, canteen, facility vacancy rate, Training Advisory Committee, and staff training.

## Inspection Overview

Preparation for the inspection of Indian River Juvenile Correctional Facility took place in the month prior to site visitation. The most recent inspection of the facility, completed in 2024, was reviewed to identify areas of previous concern or praise. The CIIC database of concerns received from youth, constituents, and staff was analyzed for topics of frequent concern. Facility staff were not notified of the inspection until an hour prior to arrival.

The day of inspection, Thursday, January 9, 2025, consisted of an interview with the Superintendent, review of safety and security, a full facility tour, review of health and wellbeing, review of fair treatment, review of rehabilitation and reentry, and review of fiscal accountability. A teleconference was held between CIIC staff, DYS executive staff, and IRJCF executive staff on April 21, 2025, to review any discrepancies.

**Date of Inspection:** January 9, 2025

**Type of Inspection:** Unannounced

### **Legislators/Legislative Staff Present:**

Rep. Matthew Kishman

Rep. Jodi Salvo

Patrick Semmens, Legislative Aide to

Rep. Kishman

### **CIIC Staff Present:**

Chris Albanese, Executive Director

Jeff Noble, Chief Inspector

Matt Eiting, Communications and Policy Coordinator

Hannah Kramer, Project Manager

### **Superintendent:**

Kenneth Black

### **Youth Surveys:**

*Youth survey results are displayed throughout the report compared to the results of previous surveys. The response rate resulted in a margin of error of approximately +/- 9% at a 95% confidence level. Each result can be stated that, "we are 95% confident that the true response is within 9% of the reported response." 69 youth participated in the 2025 survey.*

*In 2024, the margin of error was +/- 12%, with 46 youth participating.*



# RATINGS SUMMARY

## Methodology

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

	2024	2025
SAFETY & SECURITY	IN NEED OF IMPROVEMENT	IN NEED OF IMPROVEMENT
Violence Outcome Measures	In Need of Improvement	In Need of Improvement
Use of Force	In Need of Improvement	In Need of Improvement
Control of Illegal Substances	Acceptable	Acceptable
Youth Perception of Safety	Acceptable	Good
Unit Security Management	In Need of Improvement	Good
Institutional Security Management	In Need of Improvement	In Need of Improvement
Prison Rape Elimination Act	Deferred	In Need of Improvement
HEALTH & WELLBEING	GOOD	GOOD
Unit Conditions	Good	Good
Medical Services	Good	Good
Behavioral Health Services	In Need of Improvement	In Need of Improvement
Food Services	Exceptional	Exceptional
Recreation	Good	Good
FAIR TREATMENT	ACCEPTABLE	ACCEPTABLE
Staff/Youth Interactions	Acceptable	Good
Youth Grievance Procedure	Deferred	Good
Youth Discipline	In Need of Improvement	In Need of Improvement
Library & Legal Services	Good	Good
WORKFORCE READINESS	ACCEPTABLE	ACCEPTABLE
Reentry Planning and Programming	In Need of Improvement	In Need of Improvement
Family & Community Connections	Deferred	Good
Academic Programming	Good	Good
Vocational & Work Skill Development	Deferred	Good
FISCAL ACCOUNTABILITY	DEFERRED	ACCEPTABLE
Fiscal Wellness	Deferred	Acceptable
Energy & Waste Management	Deferred	Acceptable
Staff Management	Deferred	In Need of Improvement

# Safety and Security

## Key Findings

In 2024, there was a 24% increase in acts of violence (359). This equated to roughly 6 acts of violence per week.

In 2024, there were 115,934 hours of Transitional Separation, roughly 2,415 hours per week.

In 2024, there were 1,351 uses of physical restraint, which was 28.1 per week. Additionally, the rate of unique youth involved in a physical restraint increased in the same timeframe.

As of January 30, 2025, there were 35 active and 78 passive STG members.

In 2024, there were no alleged PREA incidents.

SAFETY & SECURITY	2024	2025
	IN NEED OF IMPROVEMENT	IN NEED OF IMPROVEMENT
Violence Outcome Measures	In Need of Improvement	In Need of Improvement
Use of Force	In Need of Improvement	In Need of Improvement
Control of Illegal Substances	Acceptable	Acceptable
Youth Perception of Safety	Acceptable	Acceptable
Unit Security Management	In Need of Improvement	Good
Institutional Security Management	In Need of Improvement	In Need of Improvement
Prison Rape Elimination Act	Deferred	Acceptable

## Violence Outcome Measures: In Need of Improvement

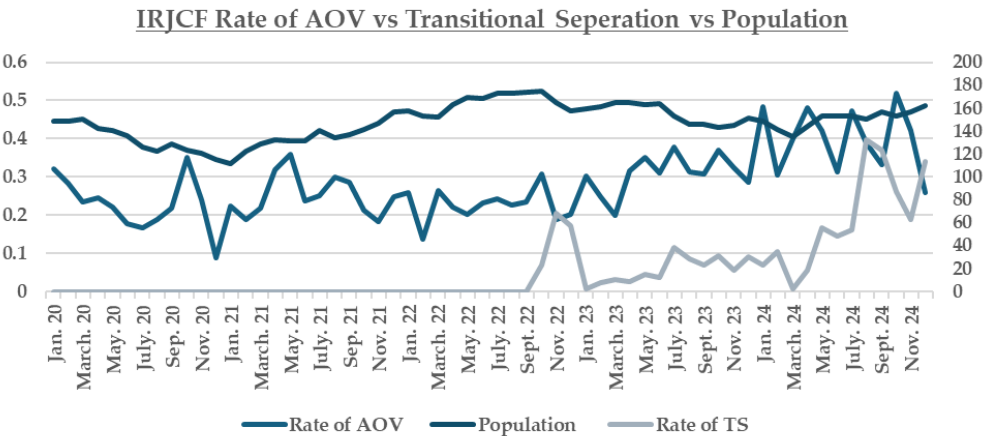
Evaluation of violence focuses on the number and rate of acts of violence, disciplinary findings for physical harm, fights and assaults, the number of homicides, and disturbances at the institution during a year, in comparison to the previous years.

### Acts of Violence

At IRJCF, staffing is at critical levels. Due to short staffing, the rate of Transitional Separation increased exponentially in 2024. Simultaneously, while youth are spending significantly more time in solitary confinement, the violence is continuing to increase.

In 2023, there were 289 act of violence classifications. In 2024, this number rose to 359, a 24% increase.

Transitional Separation also increased. Transitional Separation is separation/solitary confinement due to a lack of staff. In 2023, there were a total of 34,792 hours of Transitional Separation. This equated to 669.1 hours of Transitional Separation per week. In 2024, there were 115,934 hours of Transitional Separation, 2,229.5 hours per week.



In 2024, the average monthly population reduced. In 2023, there were an average of 156 youth per month at Indian River. In 2024, there were an average of 151 youth per month.

In 2024, there were less youth, youth spent more time in their cells/rooms, and there were more acts of violence.

# Safety and Security

## Violence Outcome Measures: In Need of Improvement, Continued

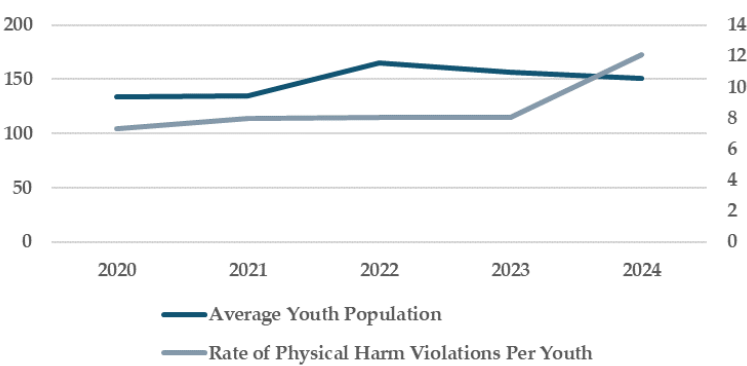
### Physical Harm

Policy (156-DSC-01) defines the Youth Rules of Conduct. Rules 1-5 are categorized as Physical Harm Violations. From 2023-2024 the number of Physical Harm Violations increased from 1,250 to 1,823.

### Homicides and Disturbances

There were no homicides at IRJCF during 2020-2024, and to-date in 2025. There were no disturbances from 2020-2021. There were two disturbances in 2022, none in 2023, and one in 2024.

IRJCF Rate of Physical Harm Violations vs Population



### Fights and Assaults

From 2023 to 2024, the total number of fights and assaults continued to increase. In 2023, there were 11.4 fights and assaults per week. In 2024, there were 13.6 fights and assaults per week. Positively, the number of assaults on staff continued to decline from 2022 to 2024.

IRJCF Fights and Assaults					
	2020	2021	2022	2023	2024
Youth on Youth Fight	116	89	76	134	169
Youth on Youth Assault	148	199	240	315	396
Youth on Staff Assault	98	102	122	99	88
Total	362	377	438	548	653

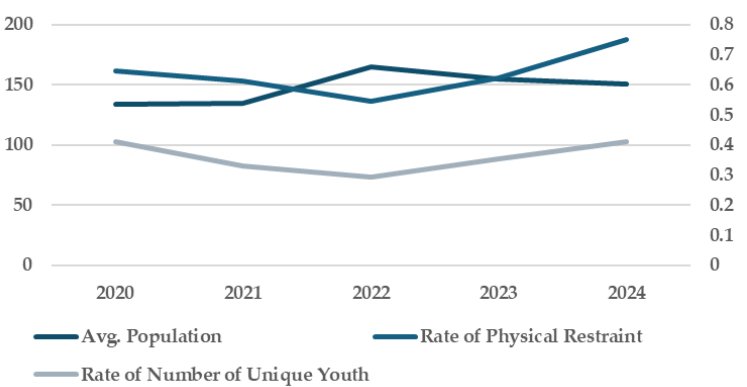
## Use of Force: In Need of Improvement

Evaluation of use of force focuses on the number and rate of uses of force at the institution, evaluation of a random sample of completed use of force reports, and staff interviews.

### Number and Rate of Uses of Force

In 2024, the rate of use of physical restraint on a youth continued to increase. In 2023, there were 1,159 uses of physical restraint, which was 22.3 per week. In 2024, there were 1,351 uses of physical restraint, which was 26 per week. Additionally, the rate of unique youth involved in a physical restraint increased in the same timeframe.

IRJCF Rate of Physical Restraint vs Population



### Use of Force Review

Ten previous use of force incidents were reviewed (163-UOF-04). All ten incidents followed standard protocols. Video documentation was watched for all incidents. Youth Specialist use of force applications were appropriate according to policy. Minor injuries were noted to staff or youth. In two instances OC (pepper) spray was deployed. All Unit Managers and security supervisors (Operations) carry OC, and the delay in their response to the incident allowed youth to continue struggling with Youth Specialists well after force was initiated. If decontamination was required, after the deployment of OC (pepper) spray, youth were immediately decontaminated (168-MED-33).

# SAFETY AND SECURITY

## Control of Illegal Substances: Acceptable

Evaluation of control of illegal substances focuses on the percentage of youth who tested positive for an illegal substance at the institution during a year in comparison to previous years, a review of the facility Monthly Drug Testing Reports, and types of substances available.

### Drug Testing Results

The percentage of total positive drug tests increased from 2023 to 2024. In 2024, the number of for cause drug testing increased and the percentage of positive decreased from 2023. Facility transfer drug testing numbers reduced from 2023 along with the percentage of positive results.

	2022		2023		2024	
	# Tested	% Positive	# Tested	% Positive	# Tested	% Positive
Facility Transfer Drug Testing	147	0%	88	8.0%	34	5.9%
For Cause Drug Testing	196	1.5%	115	30.4%	155	28.4%
Total Testing Average	1,100	0.7%	675	9.9%	825	11.4%

### Monthly Drug Testing Reports

ODYS requires each facility to administer monthly drug tests to 10% of their population within five business days of the population being identified (182-SAS-02). Most monthly drug tests were not administered as required by policy, either failing to test all youth identified or tested outside of the assigned window of five business days.

In its October 29-31, 2024, Internal Management Audit (IMA) several drug-related standards were found to be in noncompliance. Standards were regarding drug intervention following a positive drug test, entering drug test results into the corresponding database within the required timeframe, and annual saturation testing.

Youth Survey Question(s)	2023	2024	2025
What illegal substances are available at your facility?	None 52.7%	None 67.4%	None 70.0%
	Prescription Pills 24%	Marijuana 32.6%	Marijuana 26.6%
	Marijuana 19%	Prescription Pills 27.9%	Tobacco 21.7%
	Alcohol/Hooch 18%	Tobacco 25.6%	Alcohol 15.0%
	Tobacco 16%	Alcohol/Hooch 20.9%	Prescription Pills 13.3%
	Cocaine 9%	Suboxone 11.6%	Heroin 8.3%
	Heroin 7%	Heroin 4.7%	Suboxone 8.3%
	Suboxone 7%	Cocaine 4.7%	Cocaine 6.7%

# Safety and Security

## Youth Perception of Safety: Acceptable

Evaluation of youth perception of safety includes youth interviews and anonymous youth survey results.

### Youth Interviews

During inspection, multiple interviewed youth expressed concern with the power of gang members, noting particular concern when gang members are able to be in close vicinity and coordinate with one another.

Youth Survey Question(s)	2023	2024	2025
	"Safe or Neutral"		
Do you feel safe from other youth here?	63.2%	73.4%	73.9%

## Unit Security Management: Good

Evaluation of Unit Security Management includes a review of Youth Specialist Security rounds, a review of executive rounds, a review of room/cell searches, and a visual observation of room/cell visibility and property control.

### Youth Specialist Security Rounds

Youth Specialists were consistent in documenting security rounds in the requisite 30-minute, staggered intervals (174-UMA-01), with the exception of one unit. The facility installed electronic equipment at each youths’ door to electronically record rounds, in hopes to reduce time between rounds and improve accountability concerns.

### Executive Rounds

Executive rounds were reviewed and appeared mostly consistent with policy (150-FAM-01). The sign-in sheets in each unit were reviewed and the administrators were making consistent rounds in each unit. There were a few administrative vacancies, which required other staff to make rounds for that position.

### Room/Cell Searches

Youth Specialists are required to search youth rooms/cells for contraband, including drugs and weapons, each shift. Staff were consistent in the documentation of room searches (174-UMA-01).

### Visibility and Property Control

Room/cell security checks indicated good visibility and property control (174-UMA-01). The rooms were orderly and property control was well within specifications. Most youth had very limited personal property.



# SAFETY AND SECURITY

## Institutional Security Management: In Need of Improvement

*Evaluation of security management focuses on escapes, disruptive behaviors, and STG (gang) management.*

### *Escapes*

During inspection, the sallyport (facility secure entrance) was utilized. Upon exit, a basic security function of the sallyport did not work.

There were no escapes from 2021 to 2024, or to-date in 2025.

In response to an uptick in youth manipulating locks, the existing locks were modified to prevent manipulation. This was a noted concern since October, 2022.

### *Disruptive Behavior*

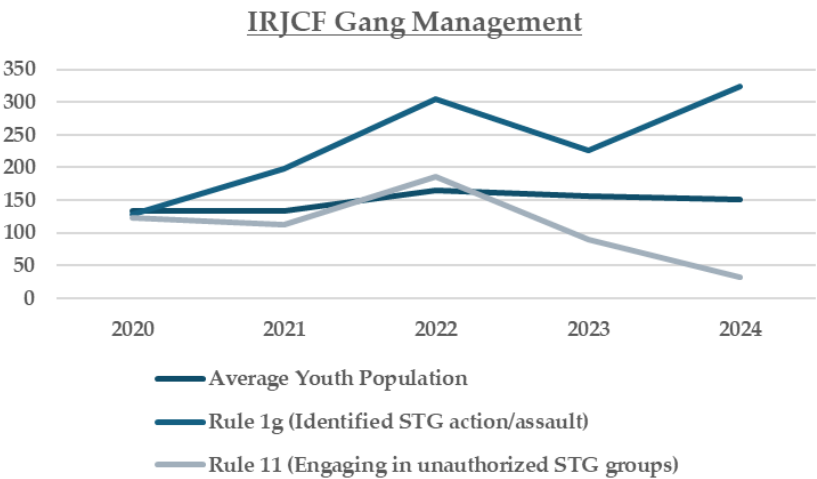
Disruptive Behaviors are defined in DYS policy (156-DSC-01) as a violation of Rules 10—20 of the Rules of Youth Conduct. IRJCF saw an increase in the number of Disruptive Behaviors in 2024, compared to 2023. In 2023, there were 2,397 rule violations of Rules 10-20. In 2024, there were 2,888 violations of Disruptive Behavior.

### *Security Threat Group Management (Gangs)*

As of January 30, 2025, there were 35 active and 78 passive STG members. Overall in 2024, there was an average of 24 active and 65 passive STG members.

Upon receipt of facility STG meeting minutes, IRJCF failed to conduct STG meetings, in which gang-related matters are to be discussed (173-PRG-01). This was reported to be due to a vacant Gang Intervention Specialist position.

Youth and staff at IRJCF relayed that gangs and gang activity were prominent concerns. Gang members were reportedly requesting to be housed in specific units, in which these requests were approved. Additionally, gang-related violence and peer pressure to join a gang were voiced as concerning. These opportunities were reportedly greater when youth are intermixed.



# Safety and Security

## Prison Rape Elimination Act (PREA) and Sexual Violence: Acceptable

Evaluation of Prison Rape Elimination Act (PREA) and sexual violence includes a review of the most recent PREA audit report, and interview with the PREA Coordinator, the number of reported incidents, and anonymous youth survey responses.

### PREA Audit Report

The facility met all 43 and exceeded 0 standards on its August 18, 2023, PREA audit report. No corrective action was required as all standards were met.

### PREA Allegations and Investigations

In 2024, there were no PREA incidents or investigations.

### PREA Requirements

Required entry notification for different-gendered staff were tested and functioned according to policy. PREA required curtains were in every shower. All units had PREA notification posters.

### PREA Coordinator Interview

An interview with the facility’s PREA Coordinator explained the process that the facility uses to monitor youth identified as victims or potential victims and abusers. Also explained was the process to track and separate LGBTQIA+ youth from potential abusers. The Stark County Rape Crisis Center was relayed to partner with IRJCF for PREA related issues post release.

From 2023 to 2024, there was a 85.7% increase in total Sexual Acts of Violence. The majority of the reported Sexual Acts of Violence were reported to be Youth Sexual Misconduct. Sexual misconduct can include the act of throwing bodily fluids on fellow youth or staff.

Investigations/Allegations	2021	2022	2023	2024
Total Alleged Incidents	7	7	2	0
Outcomes	0 Substantiated	0 Substantiated	0 Substantiated	0 Substantiated
	6 Unsubstantiated	6 Unsubstantiated	1 Unsubstantiated	0 Unsubstantiated
	1 Unfounded	1 Unfounded	1 Unfounded	0 Unfounded

Staff at the facility expressed concerns regarding the throwing of bodily fluids, such as mixtures of urine, feces, and semen, and the lack of accountability required of youth following such incidents. Staff may consider required accountability issues as youth not being lacked in separation/solitary confinement long enough for them to calm down, youth not be-	IRJCF Sexual Acts of Violence					
		2020	2021	2022	2023	2024
	Youth on Youth Rape	0	0	0	0	0
	Youth Sexual Misconduct	9	18	8	25	59
	Youth on Staff Sexual Imposition	3	1	3	5	6
	Youth on Staff Sexual Harassment	2	4	17	5	N/A
	Total	14	23	28	35	65

# SAFETY AND SECURITY

## Prison Rape Elimination Act (PREA) and Sexual Violence: Acceptable, Continued

Youth Survey Question(s)	"Yes"		
	2023	2024	2025
<i>Have you been harassed or threatened by other youth here?</i>	56.6%	47.8%	37.3%
<i>Have you ever been abused by youth here?</i>	35.5%	28.3%	23.9%
<i>Have you been harassed or threatened by staff here?</i>	34.2%	28.3%	23.9%
<i>Have you ever been abused by staff here?</i>	10.7%	8.7%	4.7%
<i>Do you know how to report sexual harassment or abuse?</i>	93.3%	84.8%	83.3%

# HEALTH AND WELLBEING

**Key Findings**

One unit utilized monopoly money to teach life lessons such as budgeting and money management.

Unit conditions were rated as “good” based on overall cleanliness, appearance, and order.

From 2023-2024 trips to the emergency room decreased while the number of instances that required an emergency squad to be called doubled.

As of February 1, 2025, Behavioral Health had a 53.3% vacancy rate.

A social worker focus group conducted at the time of inspection revealed that staff and youth safety was a prominent concern, as well as continuity of care based on staffing levels.

The meal sampled by the CIIC at the time of inspection was rated as “exceptional.”

Youth housed at IRJCF had numerous recreational opportunities including CrossFit, movie nights, and holiday themed projects.

**Functional Equipment**

All phones, cable televisions, computers, video game consoles, microwaves, drinking fountains, and fans were operational. Staff stated maintenance requests occur timely when they do occur.

**Required Informational Postings**

All CIIC memos, PREA notification posters (179-YSA-01), grievance procedure (159-YRI-07), program lists (102-REN-03), youth rules of conduct (156-DSC-01), structured facility schedules (150-UMA-04), and fire evacuation maps (110-SAF-05) were appropriately posted. Cleaning materials were secured (110-SAF-11).

**Required Documentation**

All units contained the required house meeting notebook with minutes according to policy, employee sign in sheets, and unit logbook (174-UMA-01).

	2024	2025
HEALTH & WELLBEING	Good	Good
Unit Conditions	Good	Good
Medical Services	Good	Good
Behavioral Health Services	In Need of Improvement	In Need of Improvement
Food Services	Exceptional	Exceptional
Recreation	Good	Good

**Unit Conditions: Good**

*Evaluation of unit conditions includes an observation of cleanliness and order, working order of functional equipment, required informational postings, and a review of required documentation. consists of direct observation of housing areas.*

**Unit Facilities**

A tour of all housing units was conducted at the time of inspection. One unit was designated for high school graduates, one for reentry, and one housing youth with special needs.

Units consisted of a dayroom, one-person rooms/cells, and shared individual restrooms and showers. Additionally, each unit has two rooms designed for youth in danger of harming themselves, and a decompression room.

**Cleanliness and Order**

All dayrooms/common areas were rated as “good,” based on their general cleanliness, appearance, and order (121-CAM-04). The youth room conditions were also rated as “good,” with consistency of mandated room organization across the facility. Bathroom and shower conditions were rated as “good.”

# HEALTH AND WELLBEING

## Medical Services: Good

Evaluation of medical services consists of a tour of the medical facilities, staffing, interview with the Health Services Administrator, a nurse focus group, data review of staff and youth injuries, medical separation hours, and anonymous youth survey responses.

### Medical Facilities

Medical facilities were observed to include two exam rooms, a dental room, staff offices, a waiting area, and chart storage area. All areas appeared spacious and orderly at the time of inspection.

### Staffing

As of February 1, 2025, staffing consisted of one Nurse Supervisor, ten Nurses, one Psych/MR Nurse, one Phlebotomist, and one Psych/MR Nurse Coordinator. There were no vacancies at the time of inspection (0% vacancy rate).

### Health Services Administrator Interview

An interview was conducted with the Health Services Administrator (HSA) at the time of inspection. The following was relayed: new staff are trained on policies and procedures at the Academy, as well as through on-the-job training (168-MED-02); staff meet daily for both clinical and administrative reasons (168-MED-02); department head meetings are attended quarterly (168-MED-02); youth receive a supply of prescribed medication upon release (168-MED-06); new youth receive a comprehensive health history screening at the time of intake (168-MED-12); doctors are in the facility twice a week to respond to youth concerns but are available 24/7 (168-MED-09); when a youth is placed in separation, Operations (security) staff call medical staff to inform them (168-MED-09); when a youth is placed in separation medical staff make rounds to the youth on every shift (168-MED-09).

### Nurse Focus Group

A focus group of nurses was conducted at the time of inspection. The following was relayed: nursing staff highlighted that some of the things they do well include patient care, communication between nurses, and communication with youth; the biggest obstacles reported were low staffing levels and having to deliver medications to the unit; the interactions between patients and staff was rated as “good;” staff relayed that they “sometimes” feel adequately supported by supervisory staff; communication between medical staff and other departments was rated as “in need of improvement;” suggestions to improve the worksite included improving staffing levels and the discontinuing of asking medical staff to do security tasks such as youth escorts.

### Staff and Youth Injuries

Staff that are injured and require on-site first aide or an ambulance trip are not tracked by DYS.

The remaining staff injury data was not provided upon request. DYS stated they do not keep this data.

Youth injuries can occur as part of a recreation activity, from a fight or assault, or from any other accident around facility living.

From 2023-2024 trips to the emergency room decreased while the number of instances that required an emergency squad to be called doubled.

	Incidents of Staff Injury			
	2021	2022	2023	2024
Staff Injuries	112	127	89	N/A
Staff Injuries Requiring Outside Medical Attention	73	108	75	N/A

	Incidents of Youth Injury			
	2021	2022	2023	2024
Incidents Requiring Emergency Room Trips	18	12	24	17
Incidents Where Emergency Squad Was Called	5	6	5	10
Incidents Requiring First Aide and Physician Referral	23	24	23	25
Incidents Requiring First Aide	531	529	629	702
Incidents Where No Treatment Was Necessary	769	1,033	1,179	1,667
Total	1,346	1,604	1,860	2,421



# HEALTH AND WELLBEING

## Medical Services: Good, Continued

Medical Separation Hours						Youth may be placed in separation for medical necessity. In 2024, there have been no recorded separations under “Medical Isolation (COVID-19)” and “Quarantine (COVID-19).”
Medical Separation	2020	2021	2022	2023	2024	
Medical Isolation (COVID-19)	7,733	10,228	8,089	1,842	0	
Medical Level Four (Medical Isolation/Non-COVID)	1,304	479	2,225	0	621	
Quarantine (COVID-19)	31,138	27,289	30,856	8,119	0	
Total Separation	55,910	56,293	85,863	61,277	132,730	

Youth Survey Question(s)	“Satisfied or Neutral”		
	2023	2024	2025
How satisfied are you with the quality of care you get from nurses?	89.7%	77.3%	81.7%
How satisfied are you with the quality of care you get from doctors?	89.0%	86.0%	76.4%
On average, how long does it take to see the nurse when you are sick?	“Within 2 days “		
	92.4%	80.5%	86.6%
If you are on the chronic care caseload, do you see medical regularly?	“Yes”		
	61.5%	52.6%	58.1%

## Behavioral Health Services: In Need of Improvement

Evaluation of behavioral health services consists on a tour of behavioral health facilities, staffing, an interview with the Behavioral Health Services Administrator, a focus group of Social Workers, a review of a random selection of Red Folders, programming, and anonymous youth survey results.

### Behavioral Health Facilities

DYS combines mental health and recovery services into behavioral health. At IRJCF, facilities consisted of staff offices. Group programs meet in the dayroom or common areas of the housing units. Overall, the areas appeared to have sufficient space for staff to conduct programming duties, and the areas were noted to be clean and organized. IRJCF had a dedicated mental health unit, the Special Living Unit, which houses youth with mental illness and cognitive or developmental disabilities. The unit was observed to be orderly and well maintained. One unit had a lizard and turtle to provide stress release and a more normal adolescent environment, while another unit utilized monopoly money to teach life lessons such as budgeting and money management.

Caseload	
M1 (Serious Mental Illness)	10
M2 (Moderate Mental Illness)	74
M3 (Mild Mental Illness)	43
Total	127

\*Caseload data as of January 30, 2025

### Staffing

As of February 1, 2025, staffing consisted of one Behavioral Healthcare Supervisor 2, two Behavioral Healthcare Supervisor 1’s, one Social Worker, and three Behavioral Healthcare Providers. Vacancies included three Behavioral Healthcare Provider, one Behavioral Healthcare Provider 2, three Psychologists, and one Psych Assistant (53.3% vacancy rate).

# HEALTH AND WELLBEING

## Behavioral Health Services: In Need of Improvement, Continued

### Behavioral Health Programming

The CIIC requested program enrollment and waitlist data for 2025. The DYS responded they were unable to provide the request. This is a concern as courts and the Release Authority rely on these programs for sentencing and release. This is the third year in a row the DYS has been unable to provide the requested program information. IRJCF stated they offer various programming opportunities. Programming included Core A/B, LNSO (Low Needs Sex Offender), Substance Abuse Education, and Youth Sexual Misconduct.

### Behavioral Health Administrator Interview

An interview was conducted with the Behavior Health Supervisor (BHS) and the Behavioral Health Administrator (BHA) during inspection. The following was relayed: all youth that come into the facility are given an Integrated Treatment Plan (167-BHS-03); a behavioral health screening and an initial drug screen is conducted at the time of intake (167-BHS-09); all youth receive a drug screen prior to release (182-SAS-02); all youth ordered by the court to receive specific substance use treatment are provided that treatment prior to release and the order

### DYS Policy 167-BHS-06 2024

Suicide Watch	103
Observation	7
Self-Injurious Behavior	14
Non-Suicidal Self Injury	32
Suicidal Ideation	19
Suicide Attempts	0
Suicides	0

in which youth receive it depends on their release date (102-SAS-03); suicide screenings are conducted at the time of intake (167-BHS-06); suggestions for an improved worksite included the addition of behavioral health and security staff.

### Social Worker Focus Group

A Social Worker focus group was conducted at the time of inspection. The following was relayed: recurring challenges include the lack of staff and safety of both staff and youth; the biggest day-to-day obstacles include traveling between units to meet with youth on their case-load and not being able to attend Inter-Disciplinary Meetings and Release Reviews; communication between youth and behavioral health staff was rated as “good,” while communication between security and behavioral health staff was rated as “in need of improvement.”

### Red Folders

Red Folders contain all documentation of a youth placed on precautionary status (167-BHS-06). Ten Red Folders were reviewed during inspection, and it was found that all contained the required documents. Upon reviewing the documentation, it was found that many Youth Monitoring Logs (DYS2113) were missing critical information such as Unit Manager/Operations Manager sign-offs which are required to be completed each shift that the youth remains on observation.

Behavioral Health Programs	Enrollment	Waitlist
Anger Control Training	N/A	N/A
Core A	N/A	N/A
Core B	N/A	N/A
LNSO (Low Needs Sex Offender)	N/A	N/A
PREP		
Reception/Orientation	N/A	N/A
Substance Abuse Education	N/A	N/A
Substance Abuse Phase I	N/A	N/A
Substance Abuse Phase II	N/A	N/A
SNSO (Standard Needs Sex Offender)	N/A	N/A
Victim Awareness	N/A	N/A
Youth Sexual Misconduct	N/A	N/A

### “Satisfied or Neutral”

Youth Survey Question(s)	2023	2024	2025
How satisfied are you with the quality of care you get from Mental Health?	86.7%	70.7%	76.5%
		“Yes”	
Do you feel you are able to get into Recovery/Addiction Services?	40.6%	40.9%	59.1%

# HEALTH AND WELLBEING

## Food Services: Exceptional

*Evaluation of food services includes a tour of the food services facilities, staffing, and interview with the Food Services Director, safety and sanitation observation, attending the youth meal, a review of previous audits, and anonymous youth survey results.*

### *Food Service Facilities*

Indian River Juvenile Correctional Facility had two separate dining areas. The dining room floors, tables, and ceilings were clean and free of debris. The serving lines were also clean, orderly, and free of food particles. The food preparation and storage areas were found to be organized and clean at the time of inspection. The freezer and cooler were found to be organized, clean, and maintained proper temperatures. One thermometer was not operational, thus there was a backup to ensure food was being kept at the proper temperatures.

### *Staffing*

As of February 1, 2024, staffing included one Food Service Manager, one Food Service Supervisor, and twelve Food Service Workers. There were no vacancies at the time of inspection (0% vacancy rate). The facility also employed eight youth workers in Food Services.

### *Safety and Sanitation Observation*

The tool cage was inspected and found to be orderly with documentation of tool use up-to-date and secure. Daily sanitation schedules, tool storage, chemical storage, and temperature logs (DYS 2080-DYS 2084) were reviewed on site and appeared accurate according to policy (160-FSM-06). Temperatures of all food items on the food line were taken and found to be appropriate. The dishwasher was observed, and all cycles met the proper temperatures for sanitation (160-FSM-06).

### *Meal Period Attendance (ORC 5120.1-8-10)*

The meal sampled by CIIC contained chicken wings with sauce, mac ‘n cheese, carrots, two rolls with butter, fruit and milk. Vegetarian options were available as substitute meals. Staff also relayed that medical and religious diets were available and are submitted accordingly by the Medical Department or the Chaplain. The portion sizes and taste were rated “exceptional.”

### *Food Service Manager Interview*

An interview with the Food Service Manager (FSM) was conducted at the time of inspection. The following was relayed: monthly meetings are held with Food Service Workers, as well as a weekly touch-bases with individual workers; department head meetings are held weekly, and have been called more frequently as needed; there are no formal food service programs, although Level 3 and 4 youth have the opportunity to work in the kitchen and earn their ServSafe certification; all staff were ServSafe certified and had signed their Health Policy Agreement (160-FSM-01); there were no maintenance concerns at the time of inspection and only one request for new ovens; Food Service had recently received new blast chillers and were waiting to receive their new cold passthrough cooler; there were no pest or health-related concerns regarding Food Service, as well as no staff retention or performance concerns; there were concerns that youth are exceeding their daily caloric limits due to incentive meals from chain restaurants.

### *Previous Audits*

The most recent health inspection report on January, 23, 2025, had no critical observations. The following was noted, “Facility clean and organized. Excellent cold hold temps. PIC knowledgeable in policies and procedures.”

Youth Survey Question(s)	“Satisfied or Neutral”		
	2023	2024	2025
How satisfied are you with the food in the dining hall?	50.6%	64.5%	68.1%

# HEALTH & WELLBEING

## Recreation: Good

*Evaluation of recreation consists of a tour of recreational facilities, staffing, an interview with the Activity Therapist Administrator, programs, and anonymous youth survey results.*

### *Recreation Facilities*

Youth recreation facilities consisted of indoor and outdoor facilities. Indoor facilities at IRJCF consisted of a large gym, weight room, game room, and an outdoor area. The gym contained a basketball court with stands for spectators. The weight room had multiple weight machines and youth were being monitored by staff for safety. The game room held multiple video game stations. They also regularly offered programs such as a fatherhood program, youth pastor programs, movie nights, pool tournaments, pumpkin painting, and making Christmas ornaments. Staff make an active effort to include family members with youth when they can. They recently added a CrossFit room as well, which will open soon, with free weights, benches, and squat racks.

### *Staffing*

As of February 1, 2025, staffing consisted of one Activity Therapist Administrator and six General Activity Therapists. There were no vacancies at the time of inspection (0% vacancy rate).

### *Programs*

The outdoor area had two basketball courts, mobile bicycles, a walking track, baseball and soccer fields, and stationary equipment. All youth received at least one hour of recreation time per day with an additional hour available during non-school days. Facilities appeared clean, orderly, and in good condition. Intramural sports such as soccer, softball, basketball, and flag football are offered two times per week dependent on the weather and seasons. There are also programs such as chess, mentoring, and community service that allow for stationary recreation programming.

### *Recreation Director Interview*

An interview was conducted with the Recreation Director who relayed the following: physical fitness evaluations are completed twice a year (177-REC-01); youth are notified of recreation opportunities at intake and through flyers and sign-up sheets in housing units; at the inspection, recreation had recently become fully staffed with six General Activity Therapists; in the winter, one housing unit can recreate indoors at a time, and in the summer, two housing units can recreate at a time with one being indoors and one being outside; PRIDE level 3 and 4 youth can use video game equipment a few times a week.

Youth Survey Question(s)	"Satisfied or Neutral"		
	2023	2024	2025
<i>How satisfied are you with recreation?</i>	60.0%	73.3%	76.1%

# FAIR TREATMENT

**Key Findings**

Interviewed youth indicated that interactions between staff and youth were neutral.

The CIIC reviewed ten grievances at the time of inspection. All were investigated and responded within policy requirements (159-YRI-07). Overall, grievance responses were rated as “good.”

There were no Youth Behavioral Intervention Hearing’s occurring on the day of inspection, and thus were not observed.

In 2024, there was an average of 612 instances of separation/seclusion per week.

In 2024, there were an average of 198 hours of act of violence separation per week.

	2024	2025
FAIR TREATMENT	ACCEPTABLE	ACCEPTABLE
Staff/Youth Interactions	Acceptable	Good
Youth Grievance Procedure	Deferred	Good
Youth Discipline	In Need of Improvement	In Need of Improvement
Library & Legal Services	Good	Good

**Staff/Youth Interactions: Good**

*Evaluation of staff/youth interactions consists of staff and youth interviews, and anonymous youth survey results.*

*Youth Interviews*

Interviewed youth indicated that interactions between staff and youth were neutral. Some youth indicated that staff/youth interactions were poor due to ineffective communication from Youth Specialists and attempts to redirect youth. Most youth indicated that staff were fair, helpful, and followed policy.

Youth Survey Question(s)	“Yes”		
	2023	2024	2025
Have you been harassed or threatened by staff here?	34.2%	28.3%	23.9%
Have you ever been abused by staff here?	10.7%	8.7%	4.7%
Are the Youth Specialists usually professional and helpful?	48.0%	62.2%	59.1%

**Youth Grievance Procedure: Good**

*Evaluation of the youth grievance procedure includes an interview with the Grievance Coordinator, a review of a random sample of grievances, the grievance untimely rate, and anonymous youth survey responses.*

The Grievance section from the previous inspection report was rated as “Deferred” due to the lack of data provided by the DYS upon request.

*Grievance Coordinator Interview*

An interview was conducted with the Grievance Coordinator (GC)/Investigator in which the following was relayed: Youth are educated on the grievance procedure during both reception and intake orientations, where they receive the Youth Grievance Procedure Handbook. The GC also attends monthly house meetings in each unit, and conducts rounds throughout the facility to allow for communication with youth. Youth can file grievances both by placing paper grievances in the GC’s lockboxes located in all units and other high traffic areas, and by filing electronically through their tablets. Grievance boxes for written submittals of grievances were present in the units. It was indicated that the GC goes directly to the housing unit if a youth submits a grievance via their tablet, or paper, and handles generally within two days, which was demonstrated by the responses provided during the inspection. The GC relayed that the top complaints were YBIR hearings, restroom calls, the time frame officers take to provide the break, and how the staff speak to them.



# FAIR TREATMENT

## Youth Grievance Procedure: Good, Continued

### Grievance Review

The CIIC reviewed ten completed grievances at the time of inspection. All were investigated and responded within policy requirements (159-YRI-07). A review of these responses focuses on timeliness, professionalism, understanding of the complaint, thoroughness of response, and whether the grievance coordinator attempted to resolve the issue at the lowest level possible. Overall, the reviewed responses were rated as “good.”

	Grievances Filed	Untimely Responses
2020	75	31%
2021	213	9%
2022	418	8%
2023	99	25%
2024	318	3%

Youth Survey Question(s)	“Yes”		
	2023	2024	2025
Are you able to use the youth grievance procedure?	69.3%	73.3%	71.0%

## Youth Discipline: In Need of Improvement

Evaluation of youth discipline includes inspection of Youth separation rooms, observation of Youth Behavior Intervention Hearings (YBIH), data review of Youth Behavior Incident Reports (YBIR), instances of separation, separation hours for acts of violence, and staff interviews.

### Separation/Seclusion Rooms

When youth require separation/solitary confinement, they are placed in their own rooms. Observations of youth rooms/cells appeared according to policy.

### Youth Behavioral Intervention Hearing

There were no Youth Behavioral Intervention Hearing’s occurring on the day of inspection, and thus were not observed.

### Separation/Solitary Confinement Instances and Duration

Separation, formerly known as Seclusion, has multiple uses within DYS facilities. However, it is not used as discipline. The goal of minimizing separation is defined in policy by the number of hours a youth is allowed to be kept in separation based on safety. If longer timeframes are necessary they must first be approved by a supervisor, the Superintendent, or Deputy Director.

From 2023 to 2024, the instances of separation/solitary confinement increased. Moreover, the instances of separation/solitary confinement for 0-4 hours also increased during the same timeframe. In 2023, there were an average of 218 instances of separation/solitary confinement per week. In 2024, there was an average of 612 instances of separation/solitary confinement per week.

### Separation/Solitary Confinement Instances by Duration

	2020	2021	2022	2023	2024
0-4 Hours	689	1,111	6,696	4,296	14,951
4.1-8 Hours	381	505	2,384	4,046	10,273
8.1-24 Hours	387	849	2,031	2,018	4,132
24.1-36 Hours	12	7	10	22	16
36.1-48 Hours	15	3	7	3	2
48.1-56 Hours	6	3	1	1	0
56.1-72 Hours	23	2	8	2	0
72+ Hours	341	317	345	80	0
Total	1,854	2,797	11,482	10,468	29,374

# FAIR TREATMENT

## Youth Discipline: In Need of Improvement, Continued

### *Act of Violence Separation/Solitary Confinement Hours*

When a youth commits an act of violence, they are placed in separation/seclusion for a timeframe dependent on the type of violence and speed in which the youth is prepared for release. From 2023 to 2024, act of violence separation/seclusion hours decrease, though total separation hours doubled in the same timeframe. In 2023, with an average population of 156 per month, each youth spent on average 6.22 hours per month in separation due to acts of violence. In 2024, with an average population of 151 per month, each youth spent on average 5.25 hours per month in separation due to acts of violence. In 2023, there were an average of 242 hours of separation due to acts of violence per week. In 2024, there were an average of 198 hours of act of violence separation per week.

	2020	2021	2022	2023	2024
Separation/Solitary Confinement Hours for Youth Involved in Acts of Violence	5,650	8,802	9,389	11,639	9,507
Total Separation Hours	55,910	56,293	85,863	61,277	132,730

## Library & Legal Services: Good

*Evaluation of library and legal services includes a tour of the library and legal services facility and an interview with the Librarian.*

### *Library and Legal Services Facility*

Indian River’s main library appeared clean with a sufficient supply of diverse material. Each housing unit also has a satellite library consisting of 2 or 3 full-sized bookshelves of reading material that is rotated quarterly. They were observed to be adequately stocked with a large selection of books with many different genres available such as: law, biographies, foreign languages, graphic novels, science fiction, mystery, fantasy, classic, and action. The librarian indicated youth can make requests of specific reading material. Youth recently held a “Book Election” where youth voted on their favorite books to see what was most popular.

Night and weekend hours were posted where the library was made available to youth (157-EDU-08), and staff relayed that youth also had access to a robust selection of reading materials that can be accessed in the housing unit satellite libraries.

### *Librarian Interview*

An interview was conducted with the Librarian at the time of inspection: The Librarian sends a schedule to housing units detailing who can use library services and when; staff are in the process of ensuring copywrites in the reference section are within the last 5 years (157-EDU-08); CIIC observed the minutes from the last two Library Review Committees (157-EDU-08).

# WORKFORCE READINESS

## Key Findings

As of February 1, 2025, unit staffing had a 29.4% vacancy rate.

Recently a room was created to host Ohio Means Jobs resources. The room contained colorful chairs, inspirational quotes painted on the walls, five Ohio Means Jobs computers, printed resources, and space for interview practicing.

IRJCF offers several unit programming opportunities.

In 2024, IRJCF had 128 volunteers, completing 721.20 volunteer hours.

IRJCF offered three vocational programs at the time of inspection, Construction Technology, Ground Transportation, and Media Production.

### Staffing

As of February 1, 2025, staffing included five Unit Managers and seven Correctional Program Specialists (Case Manager). Vacancies included one Unit Manager Administrator, three Unit Managers, and one Case Manager (29.4% vacancy rate).

### Unit Management Administrator Interview

At the time of inspection, the Unit Management Administrator position was vacant, therefore the interview was conducted with the Direct Deputy of Operations. The Direct Deputy of Operations relayed the following: all youth are classified within 14 days of admission (153-CLS-01) and all youth are reclassified every six months (153-CLS-03); daily reviews of all STG related YBIRs are being conducted by the Investigator (156-DCS-01); most youth that are enrolled in part-time education are also enrolled in a part-time job assignment, but not all of them (154-WRK-01); all facility required programming is being offered (173-PRG-02); Youth Council meetings are being held at the minimum of once a month (173-PRG-01); orientation was conducted at intake (174-UMA-01); behavioral health staff have meetings with youth every day in the units (173-UMA-01); IRJCF works closely with Cuyahoga County to educate youth on jobs in the community available upon reentry.

### Correctional Program Specialist (Case Manager) Focus Group

The CIIC held a focus group with Case Managers who relayed the following: gangs at IRJCF present serious problems as they negatively impact youth with trauma or are mentally underdeveloped and can increase violence levels; it is difficult to help train new staff on the job with their already high workload; they are often required to pick up other job duties because of the staff shortage which impacts their ability to perform case manager duties; there is not enough staff to adequately prepare youth for reentry; keeping non-STG kids away from STG kids would be beneficial; youth are not being held accountable for their actions; incentives need to be reworked so that the youth who are receiving the incentives are the ones who actually deserve it.

### Reentry Resource Area

Recently a room was created to host Ohio Means Jobs resources. The room contained colorful chairs, inspirational quotes painted on the walls, five Ohio Means Jobs computers, printed resources, and space for interview practicing.

	2024	2025
WORKFORCE READINESS	ACCEPTABLE	ACCEPTABLE
Reentry Planning and Programming	In Need of Improvement	In Need of Improvement
Family & Community Connections	Good	Good
Academic Programming	Good	Good
Vocational & Work Skill Development	Deferred	Good

## Reentry Planning & Programming: In Need of Improvement

Evaluation of reentry planning and programming includes staffing, an interview with the Unit Management Administrator, a Correctional Program Specialist focus group, an observation of the reentry resource area, and unit based programming data.

### Superintendent Interview

While maintaining focus on traditional education and programming, the new Superintendent at Indian River has also worked to allow youth to experience informal and real world experiences. Recently an all male bonfire was held in the yard, accompanied with life lessons, strong listening, and positive advice. Soon, the Superintendent hopes to bring the Build-A-Bed program inside the fence.

# WORKFORCE READINESS

## Reentry Planning & Programming: In Need of Improvement, Continued

### *Unit Programming*

The CIIC requested unit program and enrollment data for 2025. The DYS stated they were unable to provide the information. This is a concern as courts and the Release Authority rely on these programs for sentencing and release. This is the third year in a row the DYS has been unable to provide the requested program information.

IRJCF reported offering several unit programming opportunities including Chess Discovery, Ride-4-Life, Stepping Up Manhood, Power of Harmony, Cope Dealer, Passages, and Creative Hope Studios.

Program	Enrolled	Waitlist
New Freedom Program	N/A	N/A
Personal Responsibility and Education Program	N/A	N/A
Every Child Matters	N/A	N/A
Core B	N/A	N/A
Victim Awareness	N/A	N/A

## Family Engagement & Community Connections: Good

*Evaluation of family engagement and community connections consists of youth community service programming, volunteers and volunteer hours, visitation room observations, youth interviews, and anonymous youth survey results.*

### *Community Service Programming*

IRJCF had two community service projects at the time of inspection; Color a Smile and Crayons to Computers Crafts. Color a Smile is a non profit that distributes drawings from youth to senior citizens, troops overseas, and anyone in need of a smile. Crayons to Computers is a program in which youth complete packets of materials needed for schools in Hamilton County. This program allows teachers to go up to ten times a year to fill a cart with needed items for their classroom. It was reported that IRJCF had completed 5,261 community service hours in 2024.

### *Volunteers*

In 2024, IRJCF had 128 volunteers, completing 721.20 volunteer hours. Volunteers contribute to the facility in numerous ways such as conducting programming. Such programming included Faith Family Church, Islamic Services, and Fresh Start/Guidestone.

### *Visitation*

The visitation room was observed. There were tv’s, PlayStations, chairs, and tables. There were five vending machines and one microwave to allow youth to share a snack with visitors. There were tablets and docking stations provided for youth to conduct video visits. A second visitation room was available to receive any overflow. Unique to Indian River, was a room made specifically for infants and young children to play while they visit their loved one. This room had assorted toys for all ages, as well as seating. The visitation room was also used for programming, when applicable.

No visitation regulations were posted in the visitation area (175-MAL-04). It was relayed by staff that visitors receive visitation regulations via mail prior to them visiting the facility. Visitation is open on Saturdays and Sundays.

Youth Survey Question(s)	2023	“Yes”	
		2024	2025
Have you had any problems with mail?	53.3%	43.5%	47.6%
Have you had any problems with telephones?	46.7%	46.7%	47.1%
Have you had any problems with visitation?	33.3%	39.1%	38.5%

# WORKFORCE READINESS

## Academic Programming: Good

Evaluation of Academic Programming consists of facility observations, staffing, and interview with the Principal, youth GED completions and diplomas, and anonymous youth survey responses.

During inspection two units of youth were taken off of Transitional Separation and moved to the school building for the purposes of deceiving the CIIC into thinking youth were attending school and the facility had sufficient staff to carry out such tasks. At this time, the CIIC was in the process of interviewing the Principle in which the Principal terminate the interview to figure out why the youth were entering the school. At this time, the Principal required the youth to return to their units.

Academic Programming Facility	Indian River High School	GED Completions	High School Diplomas
Indian River’s education facility is divided into three wings; two are used for core academic studies and the third houses career-focused vocational classrooms. All were clean and orderly during inspection.	2019-2020	17	11
	2020-2021	12	9
	2021-2022	10	11
	2022-2023	6	5
The CIIC observed an English class at the time of inspection. There was supposed to be three students in the class, but two of them walked out. Student Success Plans are held by the guidance counselors at a minimum of twice per year for each student. They are one-on-one meetings and may be held more frequently depending on the student.	2023-2024	5	7

Staffing  
As of February 1, 2025, academic staffing included one Principal, one Assistant Principal, two Administrative Professionals, two Guidance Counselors, nineteen Teachers, one Teachers Aide, and one Education Specialist. Vacancies included five Teachers (16.7% vacancy rate).

Principle Interview  
All staff had the appropriate education license for their position on file. The school principal ensured that education supplies were available for use when necessary (157-EDU-01). All tools are kept in the Career-Tech center of the school, and the inventory was checked daily (157-EDU-05). Student Success Plans are tracked and maintained through the Guidance Counselors who meets with students regularly (157-EDU-05). The current teacher to student ratio is 1:6. All students receive the ODE required 1,001 seat hours in a classroom and 5.6 hours in class per day (157-EDU-01). Violence in the school is an ongoing issue, and it is a threat to staff safety. There are too many youth in the school at a time, and youth often get frustrated with their work, contributing to higher violence levels.

Indian River High School declared ten youth truant from the period of July 1, 2024 to December 31, 2024.

Teacher Focus Group  
A focus group was conducted and the following was relayed: youth have better outcomes when cohorted with other youth from their unit; additional teachers are needed to create a secure and stable environment for the youth; teachers feel adequately supported by the school principal and supervisors; teachers are often asked to pick up Youth Specialist duties due to the staffing shortage; on several occasions, teachers have written youth up for rule violations and the YBIR disappears; youth are not being held accountable, making it more difficult for teachers to be seen as authority figures and create a proper environment for learning.



# WORKFORCE READINESS

## Academic Programming: Good, Continued

In October 2023, the tablet vendor for DYS changed the survey question and response options regarding academic programming. In 2024 DYS ensured the vendor changed the question and response options back to their original format.

Youth Survey Question(s)	"Yes"	"Easy or Neutral"	
	2023	2024	2025
How easy or difficult is it to get into Academic Programming?	N/A	67.5%	78.7%
Do you know how to get the following after release? Academic Programming.	58.9%	N/A	N/A

## Vocational & Work Skill Development: Good

Evaluation of vocational and work skill development consists of observations of the vocational facility, programming, and anonymous youth survey results.

### Vocational Facility

IRJCF had three active vocational spaces: a vehicle repair shop, a wood shop, and a greenhouse. All areas were found to be clean, orderly, and conducive to learning. There were two horticulture class areas: a greenroom and a classroom. They had two hydroponic indoor grow stations. The automotive tech area was an updated garage space with three lifts, a wheel balancer, an engine hoist, a spring compressor and more. A corner of the garage was a dedicated classroom area with a television and textbooks. The auto program has twenty kids in total enrolled. Ten of them go to class in the morning and ten go to class in the afternoon.

Program	Enrolled	Waitlist
Horticulture	9	0
Construction Tech	27	3
Ground Transportation	17	3

The CIIC inspected the tool cages, ensuring that all tools were properly stored, and the log books were being utilized correctly. The tool cage and log books appeared according to policy.

### Programming

IRJCF offered three vocational programs at the time of inspection, Construction Technology, Ground Transportation, and Media Production. Due to being in year one of their vocational program offerings with Indian River High School, there had been zero completions.

In October 2023, the tablet vendor for DYS changed the survey question and response options regarding vocational programming. In 2024, DYS ensured the vendor changed the question and response options back to their original format.

Youth Survey Question(s)	"Yes"	"Easy or Neutral"	
	2023	2024	2025
How easy or difficult is it to get into Career-Tech Training?	N/A	57.5%	76.6%
Do you know how to get the following after release? Career-Tech Training.	47.9%	N/A	N/A

# FISCAL ACCOUNTABILITY

**Key Findings**

IRJCF's General Revenue Fund (GRF) budget in FY 2024 was \$33,902,170. The facility utilized 96.2% of their budget.

Cost saving initiatives included replacing valves to save on water costs and recycling metal.

DYS no longer runs a sustainability audit therefore utility costs are not available.

As of January 27, 2025, there were eleven staff on leave, three of which were on Occupational Injury Leave. Including the number of staff on leave, the total vacancy rate rises to 26.0% and the youth specialist vacancy rate to 36.7%.

FISCAL ACCOUNTABILITY	2024	2025
	Deferred	Acceptable
Fiscal Wellness	Deferred	In Need of
Energy & Waste Management	Deferred	Deferred
Staff Management	Deferred	In Need of Improvement

**Fiscal Wellness: In Need of Improvement**

Evaluation of fiscal wellness includes a document review of annual per diems, the institution budget status report, fiscal audits, overtime, and capital improvement projects.

Annual Cost Per Youth	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024
	\$195,327.94	\$241,555.37	\$201,647.58	N/A	\$221,230

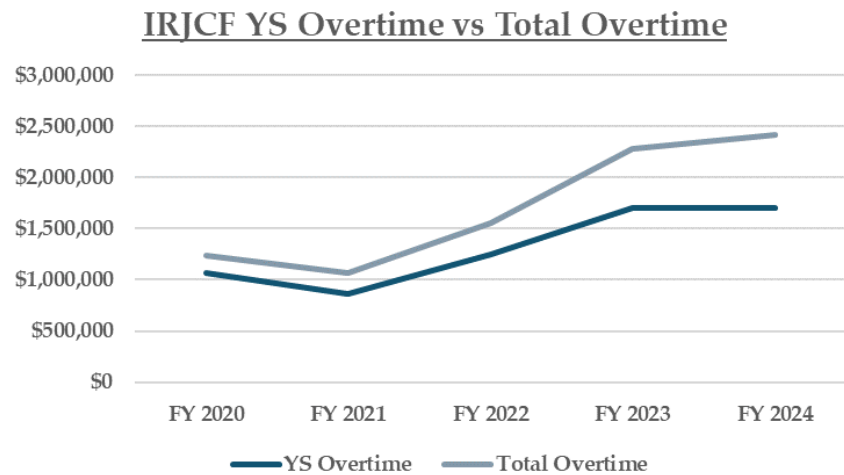
**Institutional Budget and Fiscal Audits**

IRJCF's General Revenue Fund (GRF) budget in FY 2024 was \$33,902,170. The facility utilized 96.2% of their budget.

The most recent Fiscal Audit provided was an audit of 2023. All internal funds were in balance and compliant. The only areas requiring corrective action were regarding asset management and payment cards.

While fiscal information is less transparent, in 2024 IRJCF spent \$22,455 on fast food for youth as incentive meals, in addition to their 3,200 calorie diet. Due to low staffing, overtime continues to rise.

	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024
YS Overtime	\$1,065,051	\$868,595	\$1,253,247	\$1,613,968	\$1,705,093
Total Overtime	\$1,243,164	\$1,064,442	\$1,557,583	\$2,219,695	\$2,423,086



Capital Improvement	
Projects FY 2025	Cost
Door Control Phase 2	\$43,740
Boiler Replacement	\$1,776,606
General Renovations	\$2,702,600

Due to the Ohio Juvenile Justice Working Groups recommendation to build smaller facilities, the DYS plans to demolish all parts of the facility excluding the school within the next few years.

# FISCAL ACCOUNTABILITY

## Energy & Waste Management: Deferred

*Evaluation of energy & waste management includes a document review of the utility costs and an interview of staff regarding the implementation of cost saving initiatives.*

This section is deferred due to a lack of information provided upon request.

### *Utility Costs*

Facility costs were not provided upon request, the second year in a row.

### *Cost Savings Initiatives*

An interview was conducted with the Business Administrator at the time of inspection. It was relayed that cost saving initiatives included replacing valves to save on water costs and recycling metal.

Energy Type	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024
Water (gal)	\$18,799	\$18,199	\$17,317	N/A	N/A
Natural Gas (ccf)	\$58,303	\$47,043	\$78,051	N/A	N/A
Electric (kwh)	\$211,667	\$203,443	\$225,398	N/A	N/A
<b>Total Costs</b>	<b>\$288,769</b>	<b>\$268,685</b>	<b>\$320,766</b>	<b>N/A</b>	<b>N/A</b>

## Staff Management: In Need of Improvement

*Evaluation of staff management includes a data review of staffing, vacancies, staff separation rates, employee training and evaluations, staff interviews, transitional separation, and anonymous staff surveys.*

Indian River staffing is critically low on staff resulting in frequent mandations of both new and tenured staff, as well as high levels of youth solitary confinement due to lack of staff.

### *Staffing, Vacancies, and Staff Separations*

As of February 1, 2025, the facility employed 241 total staff of which 102 were youth specialists. There were 70 total vacancies (22.5%), including 45 youth specialist vacancies (30.6%). More than half of IRJCF staff left in 2024.

Staff Separation	Number of Separations	Percentage of Staff
2022	105	35.6%
2023	123	44.1%
2024	135	56.0%

As of January 27, 2025, there were 11 staff on leave, three of which were on Occupational Injury Leave. Including the number of staff on leave, the total vacancy rate rises to 26.0% and the youth specialist vacancy rate to 36.7%.

### *Employee Training and Evaluations*

In FY 24 IRJCF employees completed 94% of mandated training. FY 23 mandated employee training was completed for 95% of staff. FY 22 saw 91.7% of staff training completed. Staff unable to be trained included those off work during the timeframe due to approved leave statue and staff hired during the training cycle.

In the CY 24 cycle, IRJCF staff completed 59% of their employee evaluations.

### *Staff Interviews*

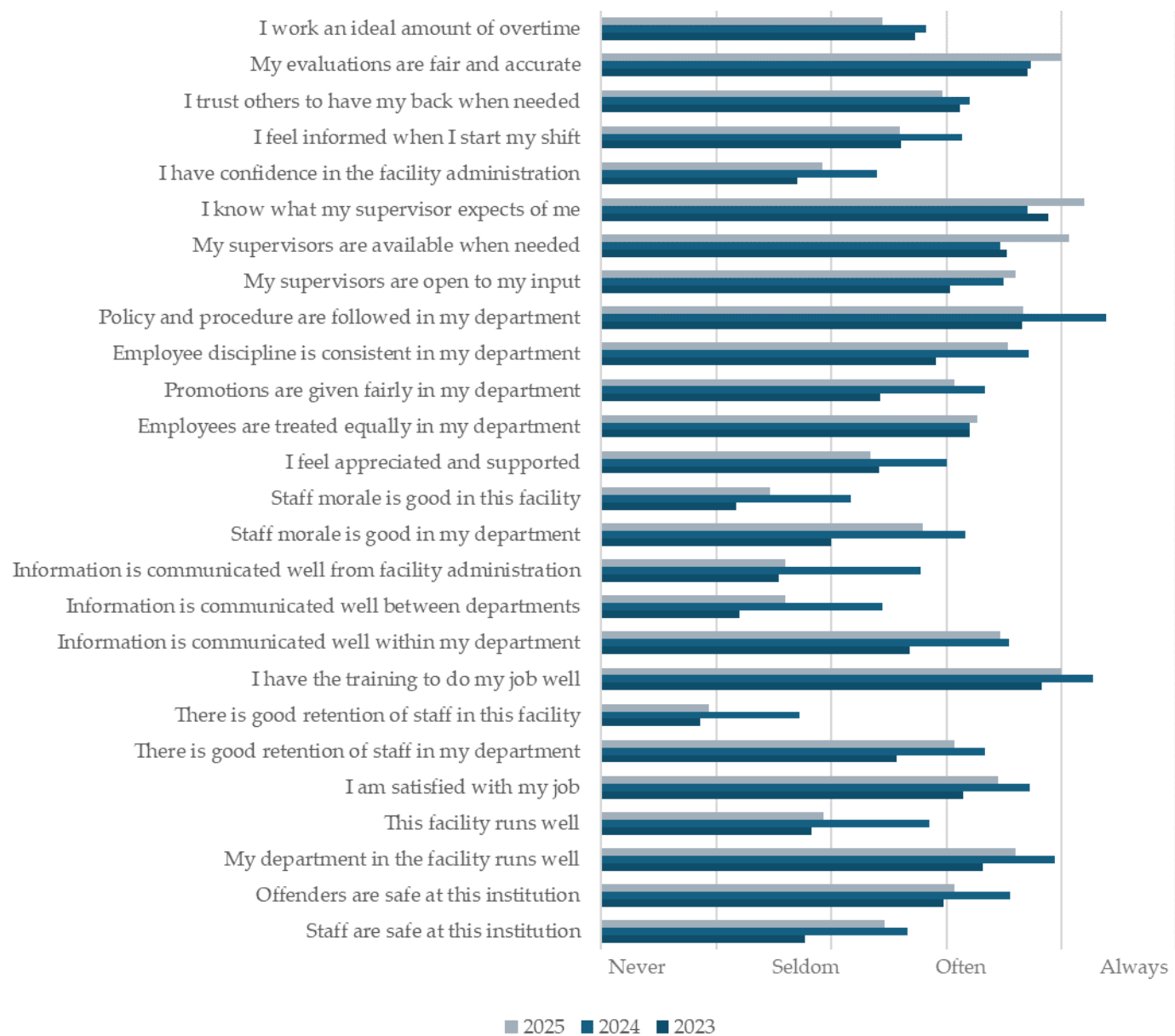
The CIIC interviewed eight Youth Specialists who provided the following insight regarding the IRJCF workplace environment. Most Youth Specialists rated staff safety as "low." Youth safety was rated as "low." Staff morale was also rated as "low." Most Youth Specialists stated that mandations are frequent, turnover is high, and promotions and discipline are not given fairly.

# FISCAL ACCOUNTABILITY

## Staff Management: In Need of Improvement, Continued

The CIIC received 29 responses, which makes up 12.0% of IRJCF staff.

### Staff Surveys



# CITATIONS

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- i. CIIC Inspection Report, IRJCF, 2024.
- ii. ACA Reaccreditation Audit, IRJCF, 2023.
- iii. ODYS Internal Management Audit, IRJCF, 2024.
- iv. DOJ PREA Audit, IRJCF, 2022.

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