



# STATE OF INDIANA

Eric J. Holcomb, Governor

DEPARTMENT OF ADMINISTRATION  
DOC OMBUDSMAN BUREAU

Indiana Government Center South  
402 West Washington Street, Room W479  
Indianapolis, IN 46204

Dear Governor Holcomb, Speaker Bosma, President Pro Tempore Bray, and Commissioners Carter and Crane:

Pursuant to I.C. 4-13-1.2-10, I am pleased to submit to you the 2018 Annual Report ("Report") of the Indiana Department of Correction ("Department") Ombudsman Bureau ("Bureau").

Included in this Report, you will find a detailed breakdown of complaints received by the Bureau in 2018, as well as a complete accounting of the Bureau's activities. Here are a few highlights:

- The Bureau was able to substantiate a \$178,436.95 savings to the State;
- The overall number of complaints and contacts combined remained constant from the year 2017;
- Medical complaints remained the largest category of complaints and comprised 35% of all complaints received for the year;
- New Castle Correctional Facility medical complaints comprised 42% of the total number of medical complaints received for the year;
- New Castle Correctional Facility medical complaints comprised 65% of the total number of substantiated medical complaints for the year; and
- Complaints from Adult Male Medium Security facilities comprised 71% of all complaints received by the Bureau.

The Bureau, unfortunately, temporarily lost access to receiving electronic complaints; however, before the Bureau lost access this was by far the most popular method of contact used by the offender population. Electronic complaints comprised 53% of the total number of complaints received by the Bureau, 81% of investigated complaints, and 87% of all substantiated complaints.

Also included in the Report is a discussion of Department-wide challenges as observed through the complaints the Bureau received. While the Bureau certainly does appreciate the efforts of the Department, we believe that the Department can rise to the "Next Level" by further addressing the challenges addressed in this Report. The most significant challenge of the Department as observed by the Bureau is staff hiring and retention. The Report fully discusses the Bureau's view on this issue and our recommendations.

I am deeply honored and humbled to serve you and the people of our great State. May God bless you, our State, our work, and the great people of the State of Indiana.

With much appreciation,

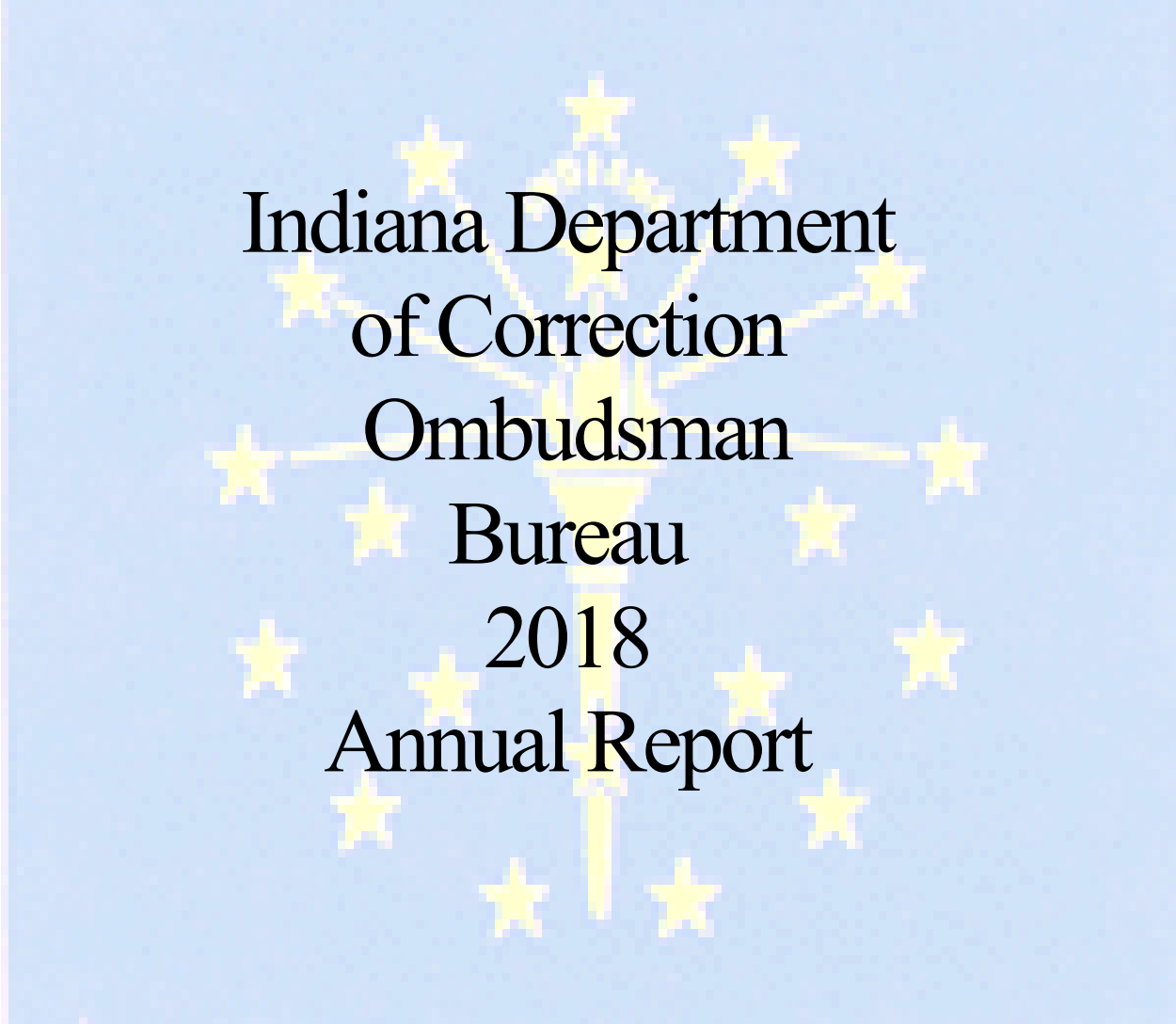
A handwritten signature in black ink that reads "Charlene A. Burkett".

Charlene A. Burkett  
Indiana Department of Correction  
Ombudsman Bureau Director

# Indiana Department of Correction Ombudsman Bureau

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402 West Washington Room W479  
Indianapolis Indiana 46204

The graphic features a light blue background with a faint, stylized map of Indiana in the center. The map is composed of yellow stars connected by thin lines, forming the outline of the state. Overlaid on this graphic is the text "Indiana Department of Correction Ombudsman Bureau 2018 Annual Report" in a black, serif font, centered vertically and horizontally.

## Indiana Department of Correction Ombudsman Bureau 2018 Annual Report

*A synopsis of the activity in 2018 of the  
Indiana Department of Correction  
Ombudsman Bureau  
Charlene A. Burkett, Director*

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### **Attachments:**

Attachment 1 .....	2018 Policies and Procedures
Attachment 2 .....	The Complaint Process 2018
Attachment 3 .....	Spreadsheet of all 2018 Complaints

## I. 2018 Activity Summary

In most of the Indiana Department of Correction (“IDOC” or “Department”) Ombudsman Bureau’s (“Bureau”) activities in 2018, the Bureau continued its normal course of activities. However, the Bureau was, for the first time, able to track an estimated cost savings to the State. According to an internal estimate, the Bureau saved the State a total of \$178,436.95.

In the course of its normal activities, the Bureau continued to receive, investigate, and substantiate complaints. The Bureau addressed a total of 4,107 complaints and contacts<sup>1</sup> in calendar year 2018 (1,482 complaints and 2,625 contacts). It is noteworthy that in the month of December the Bureau lost email contact with the offender population, due to the IDOC changeover to a new tablet communication system. Since that time, the Bureau experienced a 71% decrease in the number of complaints and contacts in December, 2018 compared to December, 2017.<sup>2</sup> In the summer of 2019, the Bureau regained the ability to communicate with offenders by email. At that time, we fully expect to see an increase in both complaints and contacts.

While the Bureau’s numbers remained consistent in the overall number of complaints and contacts in calendar year 2018, the number of investigated and substantiated complaints decreased. In 2018, the Bureau investigated 871 complaints and substantiated 158. Notably, of the 871 investigated complaints, 444 were medical. In other words, 51% of all investigated complaints for the year were medical complaints. Of the 158 substantiated complaints, 113 were medical. In other words, 72% of the substantiated complaints were medical complaints.

Again, medical complaints were the largest category of complaints in which the Bureau received, investigated, and substantiated complaints in 2018. While the overall number of complaints reduced slightly, the overall percentage of medical complaints stayed the same, comprising 35% of all complaints received for the year.

In 2018, the Bureau continued to receive the majority of its complaints from Male Medium Security Level facilities. While the percentage has slightly fallen since 2017, the 71% of this year is comparable to that of the 76% in 2017. New Castle Correctional Facility (“New Castle”), once again, was the facility from which the Bureau received the most complaints.

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<sup>1</sup> A contact is defined as communication received by the Bureau which does not meet the definition of a complaint. (See Attachment 1.)

<sup>2</sup> The sharp decrease in complaints in the latter part of 2018 is attributable the fact that as of December 1, 2018, offenders were no longer able to access the Bureau’s email on the JPay system. At that time, offenders were only able to contact the Ombudsman by phone or mail, which greatly reduced the contacts received by the Bureau. However, as stated above, beginning in the summer of 2019, offenders are again able to communicate with the Bureau by email.

## **II. Program Overview**

### **About the Bureau**

The Legislature first enacted legislation forming the Bureau in 2002. The Bureau is charged with receiving, investigating, and attempting to resolve matters, including those involving the health and safety of offenders housed in the IDOC. The Bureau determines whether a matter is being handled according to law, IDOC policy, and/or procedure.

### **Our Process**

The Bureau requires offenders to attempt to resolve matters through the IDOC first, before filing a complaint with the Bureau.<sup>3</sup> This assumes offenders are receiving access to the applicable process and that the appropriate process is functioning as it should. If offenders are having trouble with a particular process, the Bureau assists with this.

When an offender contacts the Bureau with a general question that does not meet the definition of a complaint, these are counted as contacts. The number of contacts have greatly increased since the inception of JPay<sup>4</sup> due to the high number of offenders who contact the Bureau through JPay, but whose interaction with the Bureau does not rise to the level of a complaint. The Bureau thought it was important to distinguish between contacts and complaints due to the high number of interactions it has with offenders that do not indicate an issue with the IDOC, but instead seek information.

After a complaint is filed with the Bureau, the Bureau decides whether further investigation is required into the matter. If the Bureau determines that no further investigation is necessary, then the complaint is disposed of in one of four ways: (1) the offender is referred to the IDOC, (2) a determination of “no violation” is made, (3) a determination of “no jurisdiction” is made, or (4) a request for more information is made.

If a complaint requires further investigation, the Bureau will contact the appropriate IDOC personnel and make a recommendation to IDOC regarding resolution of the matter. The IDOC then reviews the matter and reports its action back to the Bureau. If the Bureau deems it appropriate, further investigation into the matter may occur. The investigation may entail the Bureau contacting IDOC personnel to gain further information, visiting the facility, or interviewing the offender and/or other individuals.

After the investigation is complete, the Bureau then issues a response back to the complainant indicating whether the matter was investigated and any findings that can be included. At all times security of IDOC facilities a top priority of the Bureau. Additionally, the Bureau issues

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<sup>3</sup> See Attachment 2 for a flow chart of this process.

<sup>4</sup> JPay is the electronic kiosk used by offenders that allows them to send e-mails. The Bureau allows the offenders to send e-mails to the Bureau through this system.

a monthly report, including any findings pertaining matters investigated by the Bureau that month. This report is posted on the Bureau's website and submitted to the Governor's Office.

If the Bureau substantiates a complaint, this means the Bureau has found the complaint is true and some IDOC action is necessary to remediate the matter. Assists occur in the same manner, however, the key difference between a substantiated complaint and an assist is whether the offender has attempted to resolve the issue within the IDOC before contacting the Bureau. If an offender has not attempted to resolve the matter within the IDOC, this is an "assist," whereas substantiated complaints occur after the IDOC has already been alerted of the issue.

### **Administration**

The Bureau currently consists of its Director, Charlene Burkett and an Assistant. Director Burkett was originally appointed in 2005 by Governor Mitchell E. Daniels, Jr., reappointed by Governor Michael R. Pence in 2013, and reappointed again by Governor Eric J. Holcomb in 2017.

### **Appropriations**

The current budget appropriation for the Bureau is \$146,644. The entire budget is used for employee salaries and benefits, as well as equipment and supplies. The appropriated budget does not cover necessary travel expenditures to facilities to investigate complaints. Notably, the Bureau's budget continues to fall short failing to cover even employees' salaries and benefits or necessary supplies, thus the Indiana Department of Administration which houses the Bureau, has transferred over \$50,000 to the Bureau's budget to cover the shortfall in one fiscal year.

## **III. 2018 Activity Overview**

### **Outreach and Training**

The number of complaints that the Bureau received throughout the year is a testament to the fact that the Bureau has fulfilled its statutory duty of establishing procedures "to receive and investigate complaints." I.C. 4-13-1.2-7(a) (1).

In a further effort to ensure the offender population is aware of the Bureau and how to properly use the Bureau, the Director attended Dormitory Representative Meetings at facilities and addressed the offender population. Communicating in this way with the offender population has been successful because it allows the Bureau to explain the Bureau's process to the offenders.

The Director also attended the United States Ombudsman Association's Annual Fall Conference where the Director was able to interact with other public sector ombudsmen from around the world.

The Director also attended the American Correctional Association's Annual Conference. Not only was the Director able to hear from other corrections professionals from around the world,

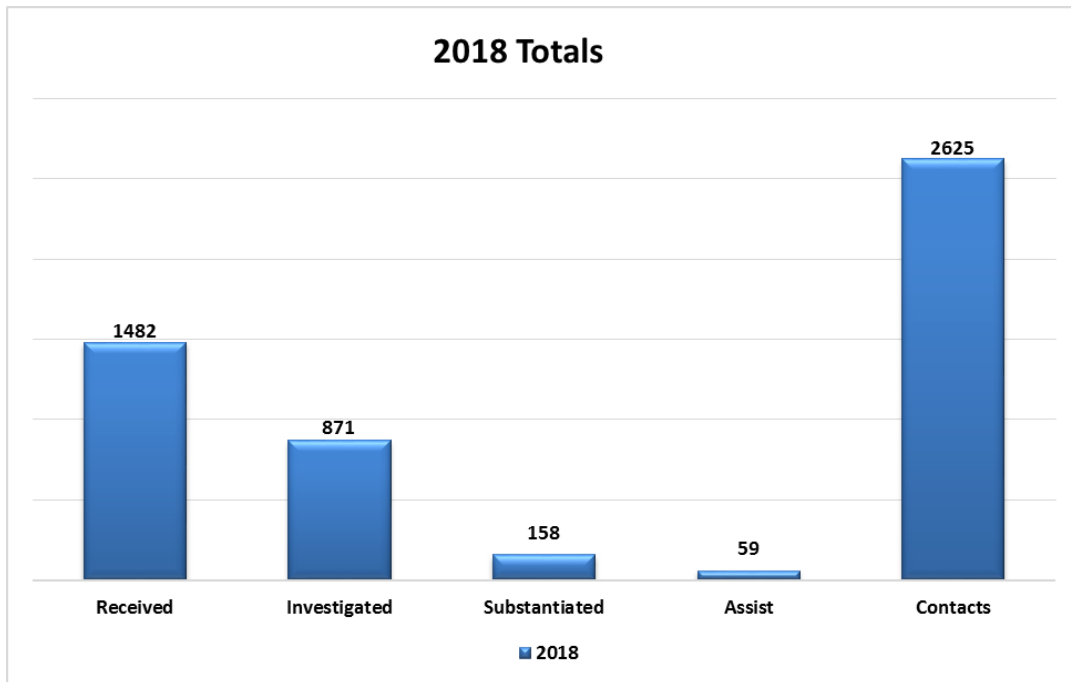
but she also was invited to a global professional network of Corrections Ombudsmen from around the world and attended the inaugural meeting for the group.

#### IV. By the Numbers

##### The Year in Review

In 2018, the Bureau received a total of 1,482 complaints and received an additional 2,625 contacts. Of the 1,482 complaints received, 871 were investigated. Of the 871 investigated complaints (which represents 59% of the total number of received complaints) 158 complaints (18% of the investigated complaints) were substantiated. Another 7% of the investigated complaints were assists. (See Figure 1 below.)

Figure 1



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The Bureau received 1,482 complaints in 2018. While the total number of complaints decreased by over 500 for the year, the number of contacts rose by almost the same number. This means that, although the Bureau received fewer complaints, it received approximately the same number of contacts, or offenders simply seeking information. (See Figure 2 below.)

**Figure 2**

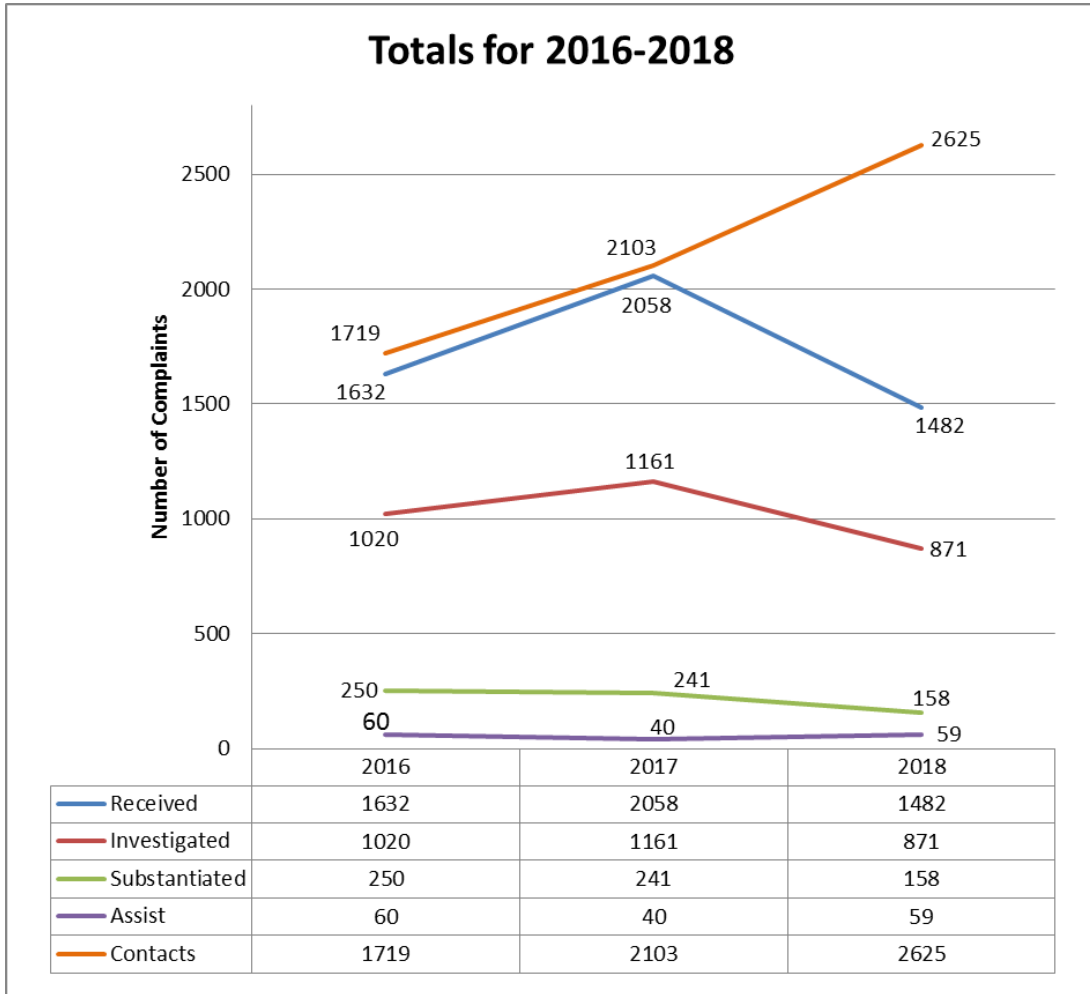
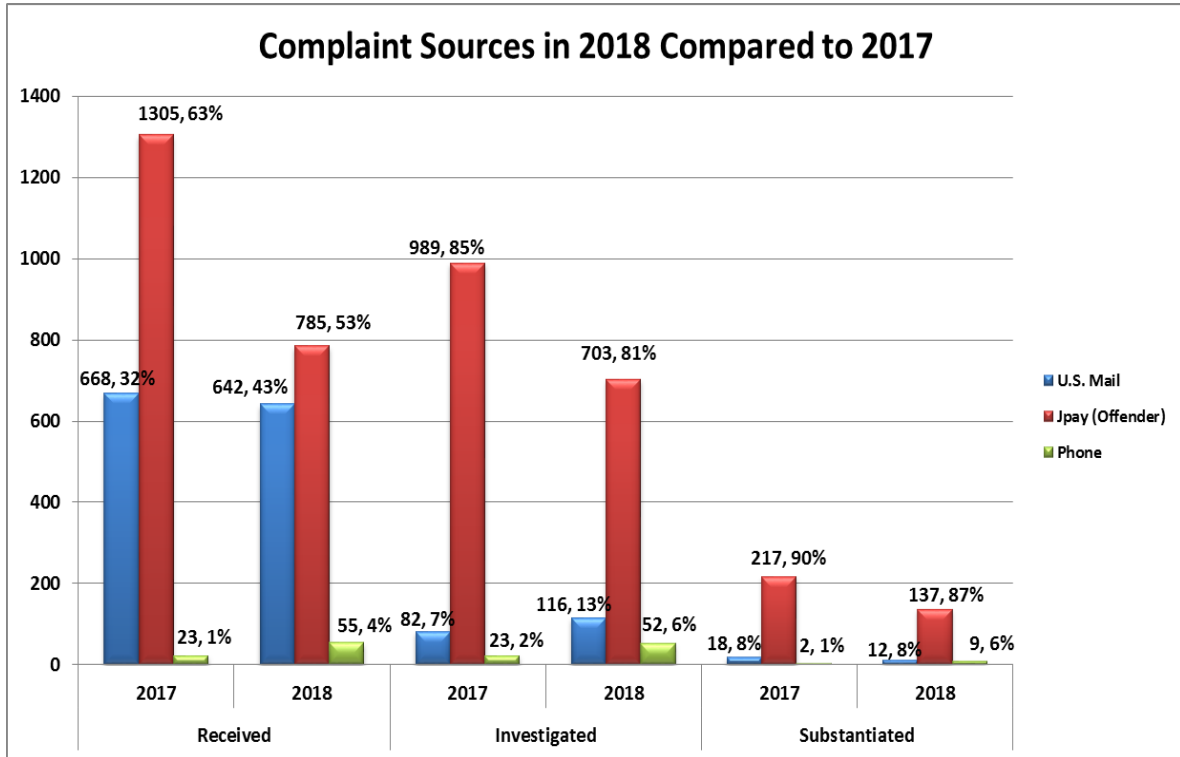




Figure 3 below shows the sources of the Bureau’s complaints received in 2018. While the Bureau continued to receive most of its complaints via email through JPay, this percentage is less significant than the prior year, 2017. Recall that the Bureau began to lose email communication directly with offenders at some facilities beginning in September and entirely lost access with all facilities in the beginning of December.

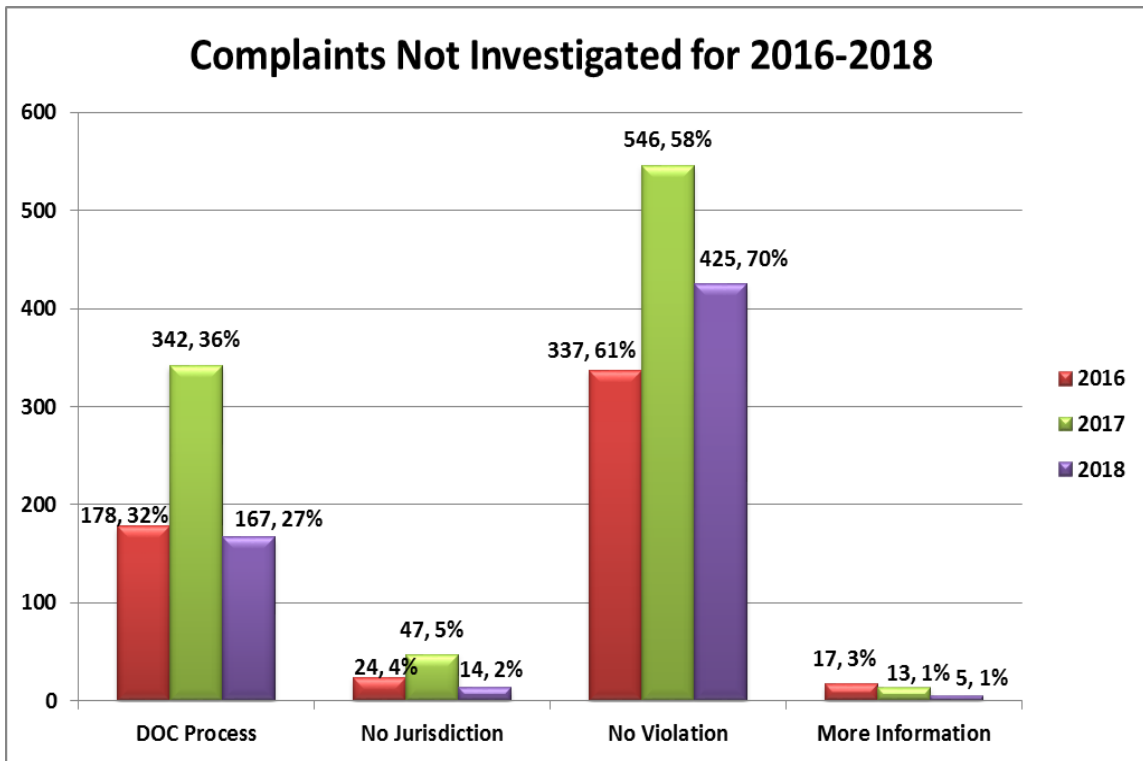
**Figure 3**



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As in years past, the Bureau has tracked the number of complaints termed “not investigated.” These comprise 41% of all received complaints. Of the complaints not investigated, 425 (70%) were determined to have no violation. The percentage of complaints determined to have no violation was much higher when compared to 58% from 2017. Just 167 complaints (27%) were sent back to the IDOC process. This indicates that more of the complaints that the Bureau received had already completed the IDOC process, as our policies require. (See Figure 4.)

**Figure 4**



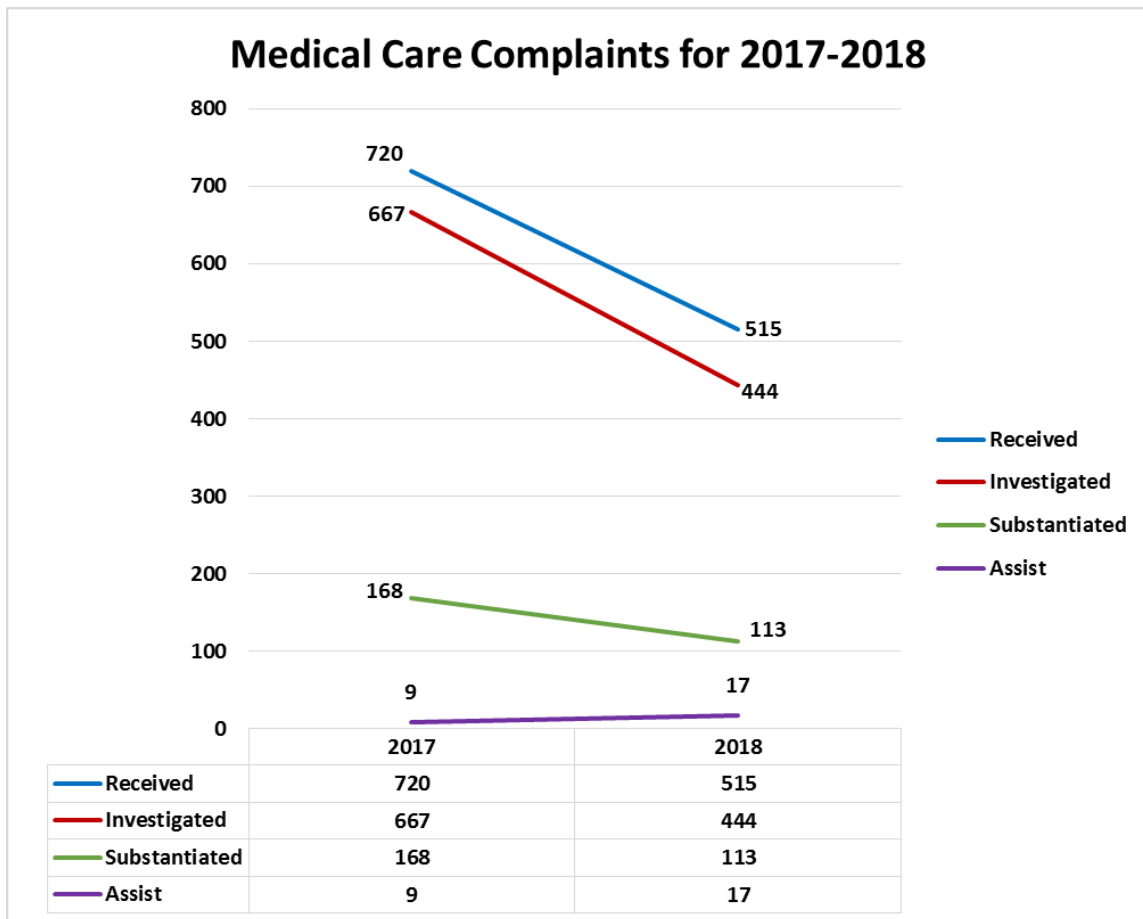
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## Complaint Characteristics

As in years past, the Bureau received, investigated, and substantiated more medical complaints than any other type of complaint in 2018.<sup>5</sup> While it may appear that the overall number of complaints in general, as well as medical complaints, has declined, it is important to recall that the overall percentage of medical complaints received by the Bureau has stayed the same at 35%. Additionally, the percentage of medical complaints investigated stayed close to the same, as did the percentage of substantiated medical complaints.

For a comparison to the previous year, see Figure 5.

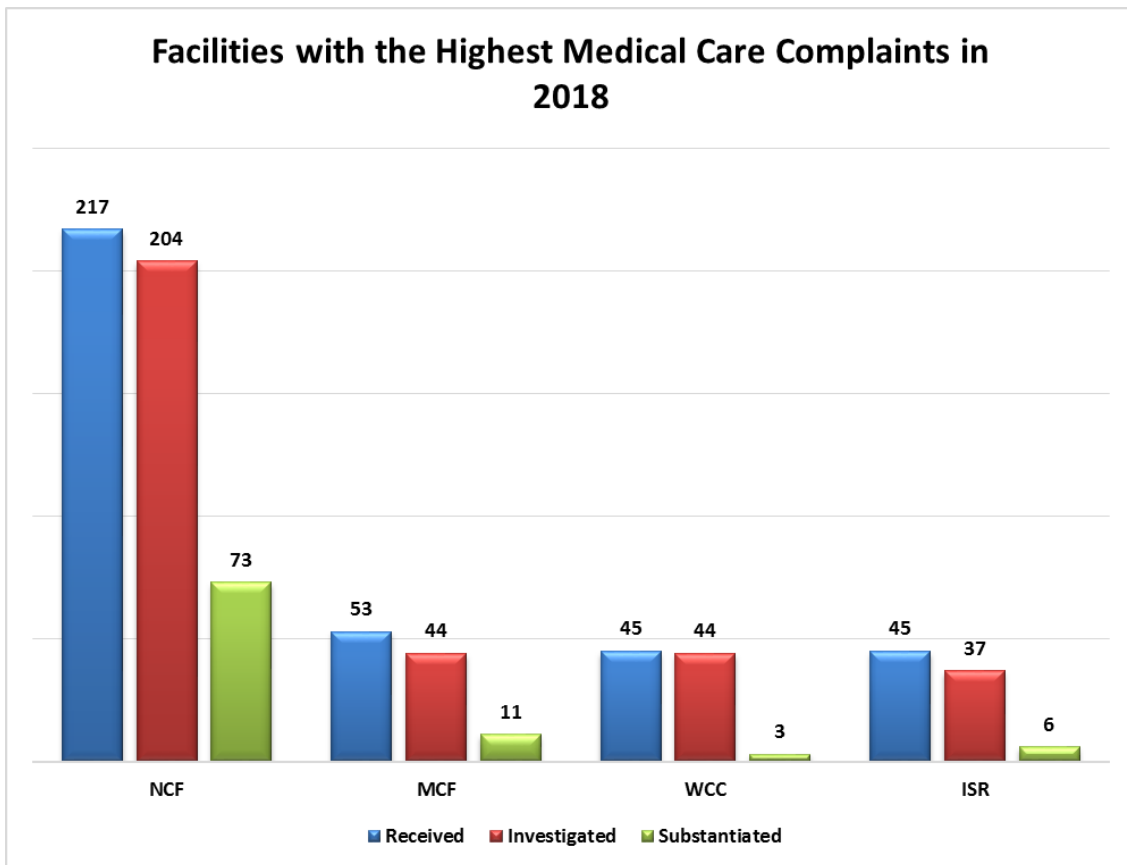
Figure 5



<sup>5</sup> See Attachment 3 for a complete listing of all complaint categories.

As in past years, the Bureau received the most medical complaints from New Castle. As a matter of fact, out of the 515 medical complaints the Bureau received in 2018, 217, or 42%, were from New Castle. Not only did the most medical complaints come from New Castle, which is a Men’s Level Two Security facility, but also the second and third most overall are Men’s Level Two Security facilities, Miami Correctional Facility and Westville Correctional Facility, respectively. However, Pendleton Correctional Facility tied Westville Correctional Facility for the third most overall complaints received with 45. This number not only represents the most complaints received for a Level Three Security Level facility, but also represents a 29% increase from 2017. Notably, Plainfield Correctional Facility fell out of the top three this year, only receiving a total of 38 medical complaints for the year, compared to 59 in 2017. This number represents a 36% decrease from the number of medical complaints received in 2017. As in 2017, New Castle more than doubled the number of medical complaints of any other facility. The facility has continued to struggle with maintaining effective leadership in their medical department.

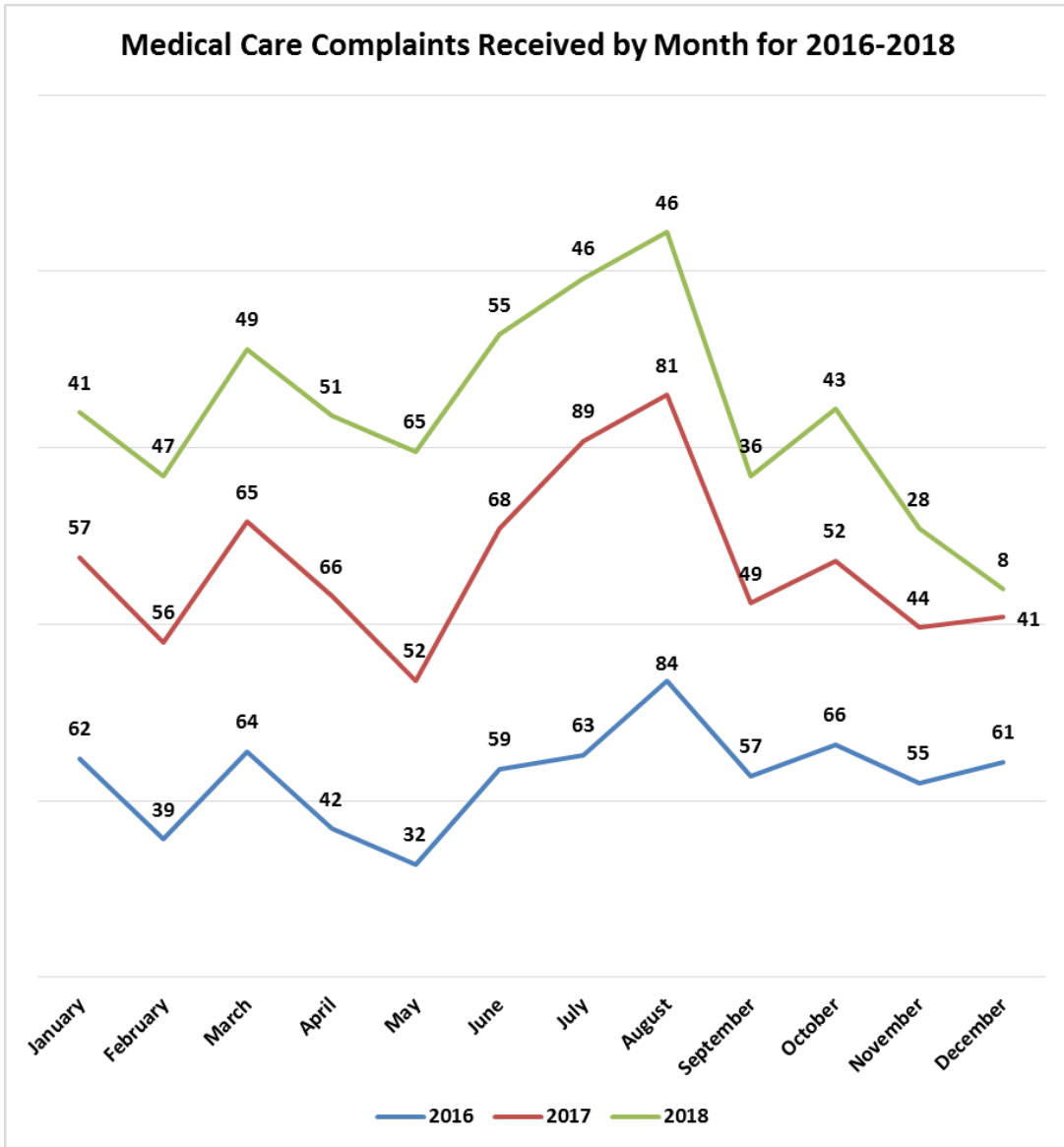
**Figure 6**



NCF – New Castle Correctional Facility, MCF – Miami Correctional Facility, WCC – Westville Correctional Facility, ISR – Pendleton Correctional Facility

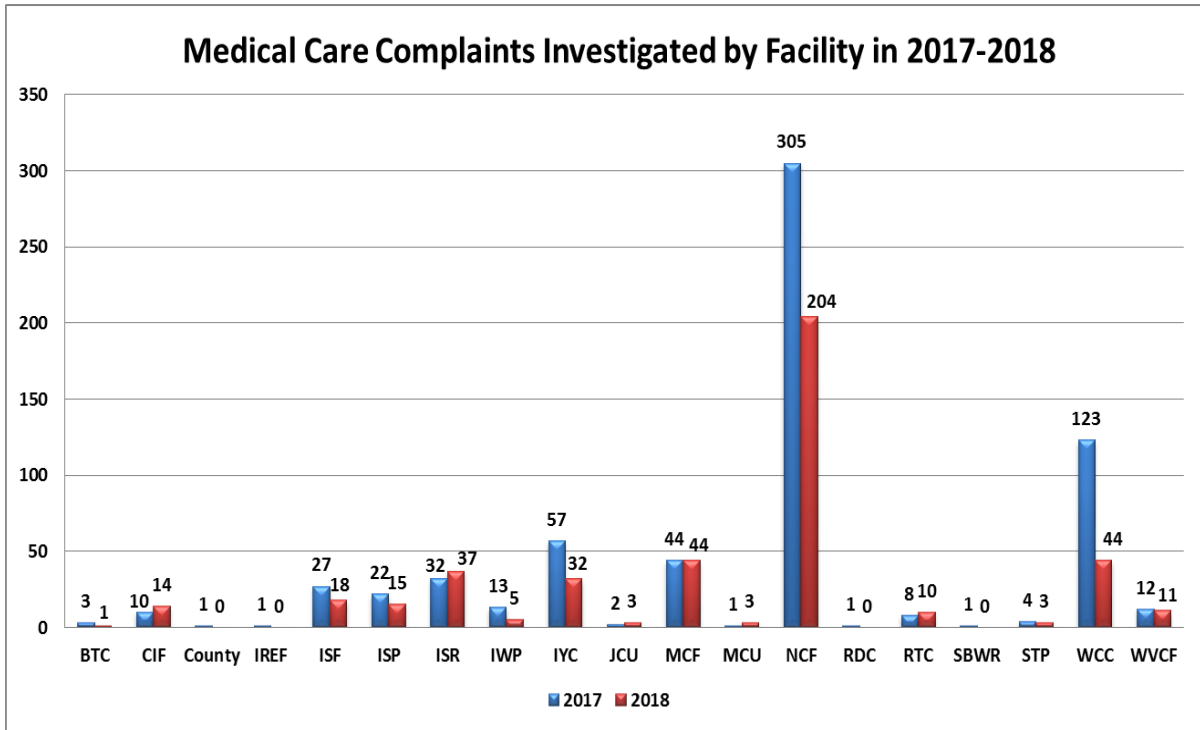
When comparing the number of medical complaints received month-by-month as compared to years past, the trend is very consistent to the number received each month in the past two years. (See Figure 7 below.) Over the past two years, the number of complaints received each month has remained astoundingly consistent. The warmest months gave way to the highest number of medical complaints received.

**Figure 7**



With respect to investigated complaints, New Castle medical complaints far outnumbered any other facility, comprising 46% of all investigated medical complaints. Each year the number has represented a steady 46% of all investigated medical complaints. (See Figure 8 below.)

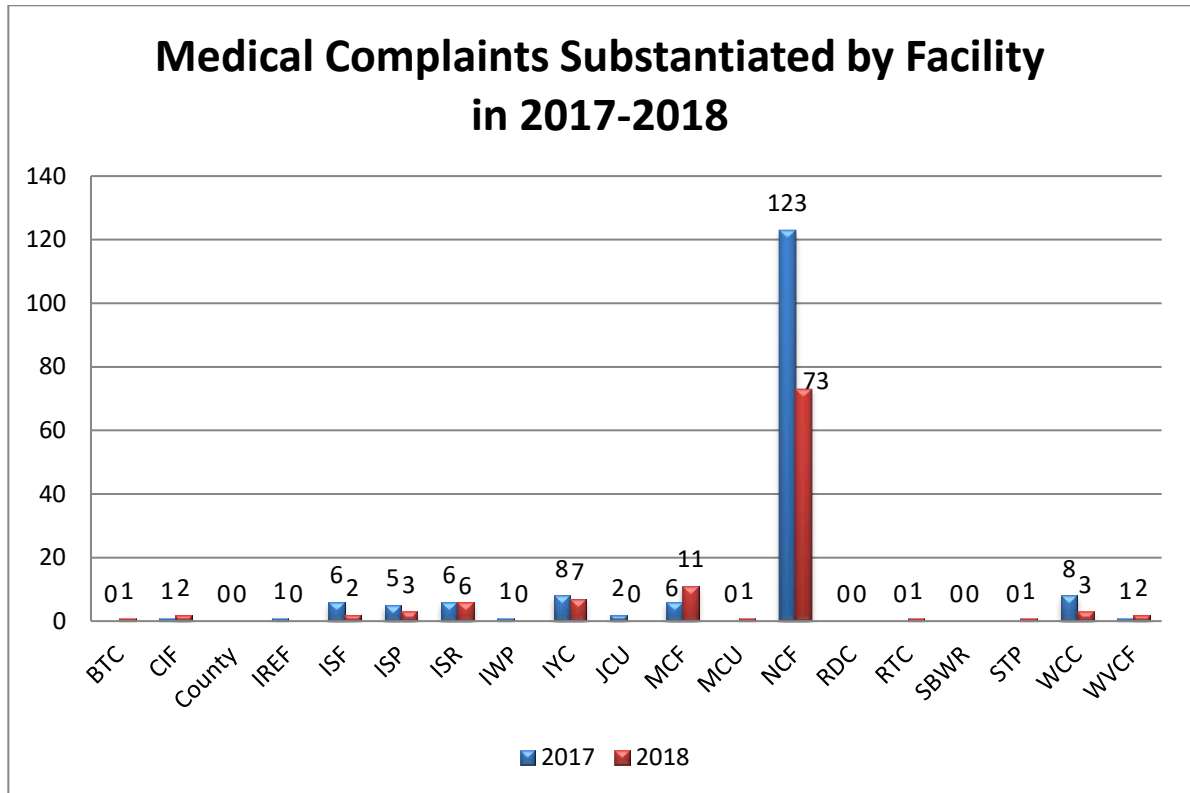
**Figure 8**



BTC – Branchville Correctional Facility, CIF – Correctional Industrial Facility, County – County Facilities, IREF – Indianapolis Re-Entry Educational Facility, ISF – Putnamville Correctional Facility, ISP – Indiana State Prison, ISR – Pendleton Correctional Facility, IWP – Indiana Women’s Prison, IYC – Plainfield Correctional Facility, JCU – Edinburgh Correctional Facility, MCF – Miami Correctional Facility, MCU – Madison Correctional Facility, NCF – New Castle Correctional Facility, RDC – Reception Diagnostic Center, RTC – Rockville Correctional Facility, SBWR – South Bend Community Re-Entry Center, STP – Heritage Trail Correctional Facility, WCC – Westville Correctional Facility, WVCF – Wabash Valley Correctional Facility

Notably, New Castle medical complaints comprised 65% of the total number of medical complaints substantiated for the year 2018. While this percentage is slightly lower than the 73% in 2017, New Castle medical complaints still represent the majority of substantiated complaints.

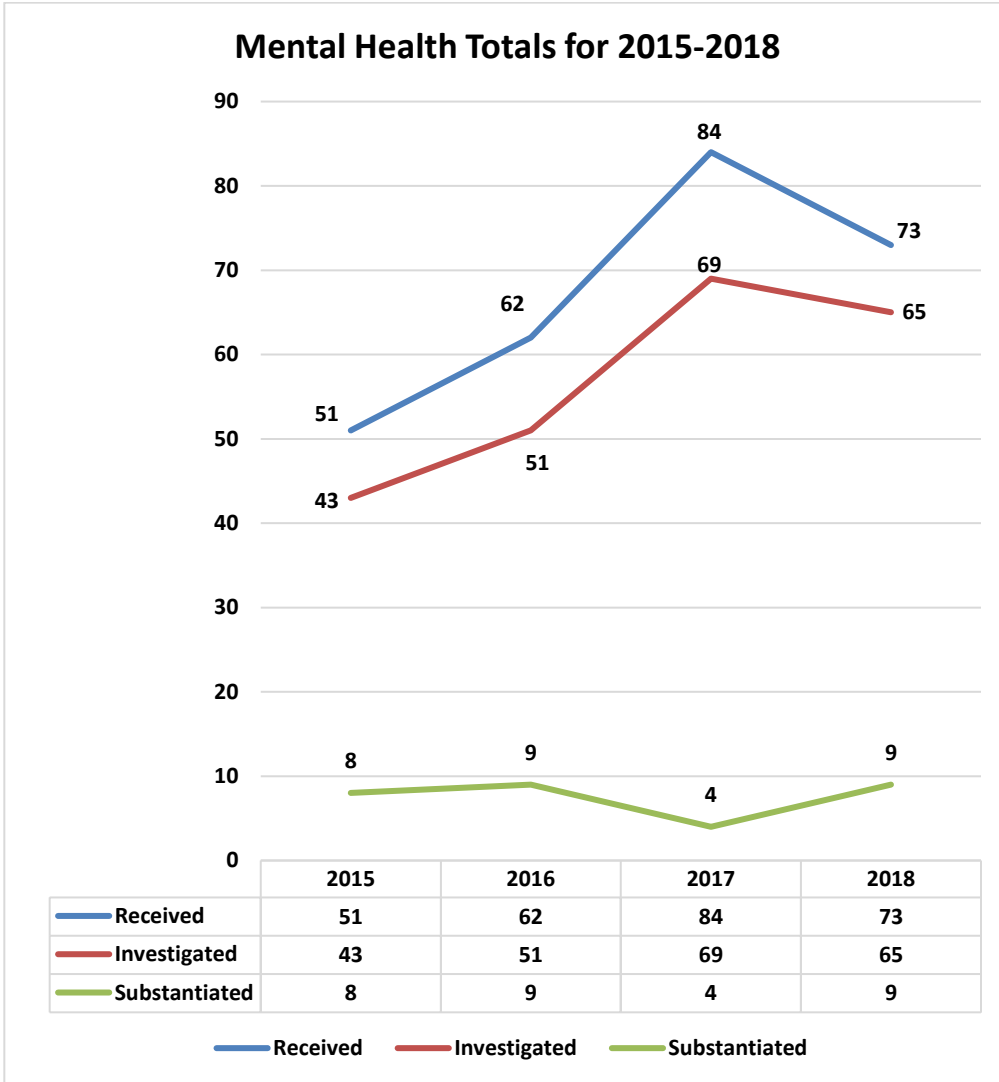
Figure 9



BTC – Branchville Correctional Facility, CIF – Correctional Industrial Facility, County – County Facilities, IREF – Indianapolis Re-Entry Educational Facility, ISF – Putnamville Correctional Facility, ISP – Indiana State Prison, ISR – Pendleton Correctional Facility, IWP – Indiana Women’s Prison, IYC – Plainfield Correctional Facility, JCU – Edinburgh Correctional Facility, MCF – Miami Correctional Facility, MCU – Madison Correctional Facility, NCF – New Castle Correctional Facility, RDC – Reception Diagnostic Center, RTC – Rockville Correctional Facility, SBWR – South Bend Community Re-Entry Center, STP – Heritage Trail Correctional Facility, WCC – Westville Correctional Facility, WVCF – Wabash Valley Correctional Facility

The Bureau has experienced significant growth in mental health complaints since the Bureau began tracking them in 2014. (See Figure 10 below.) Perhaps most significantly, the Bureau only substantiated four mental health complaints in the year 2017, compared to nine in 2018. While this is only an increase of five complaints, this increase represents over a 50% increase overall in substantiated mental health complaints in one year. Even more importantly, the overall number of mental health complaints, both received and investigated, has slightly decreased.

**Figure 10**

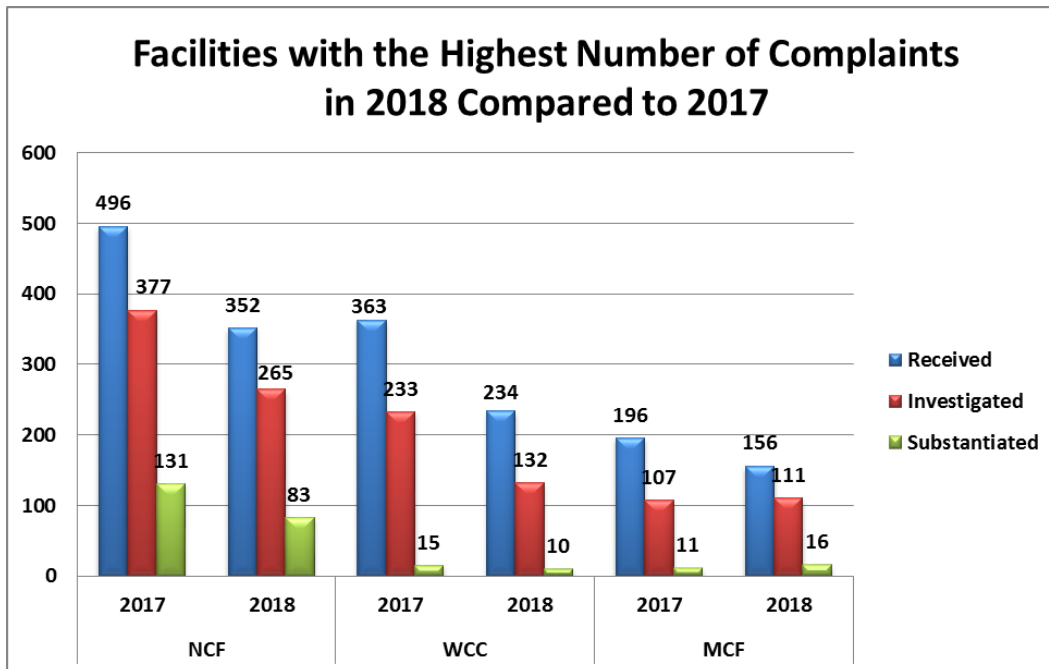




### Male Medium Security Level Facilities<sup>6</sup>

Figure 11 below depicts facilities with the highest numbers of complaints received, investigated, and substantiated. The facilities with the highest number of complaints continue to be the Male Medium Security Level Facilities. While Male Medium Level Facilities represent 55% of the IDOC population, complaints from these facilities account for 71% of the complaints filed with the Bureau. Although the overall number of complaints the Bureau received was lower for the year from Miami Correctional Facility, the Bureau still received the third highest number of complaints from Miami in 2018. The overall number of complaints received from Male Medium Security Level facilities decreased by 5% in 2018 compared to 2017. While New Castle has remained the facility from which we receive, investigate, and substantiate the most complaints, the other Male Level Two Facilities from which we receive the most complaints has changed since 2017. In 2017, the facilities with second and third most complaints received, respectively, were Westville Correctional Facility and Plainfield Correctional Facility. In 2018, however, Miami Correctional Facility replaced Plainfield Correctional Facility in third place overall. Notably, however, the number of complaints that Miami Correctional Facility received in 2018, even though it was the third most overall, is still lower than in 2017 for the facility. (See Figure 11 below.)

Figure 11

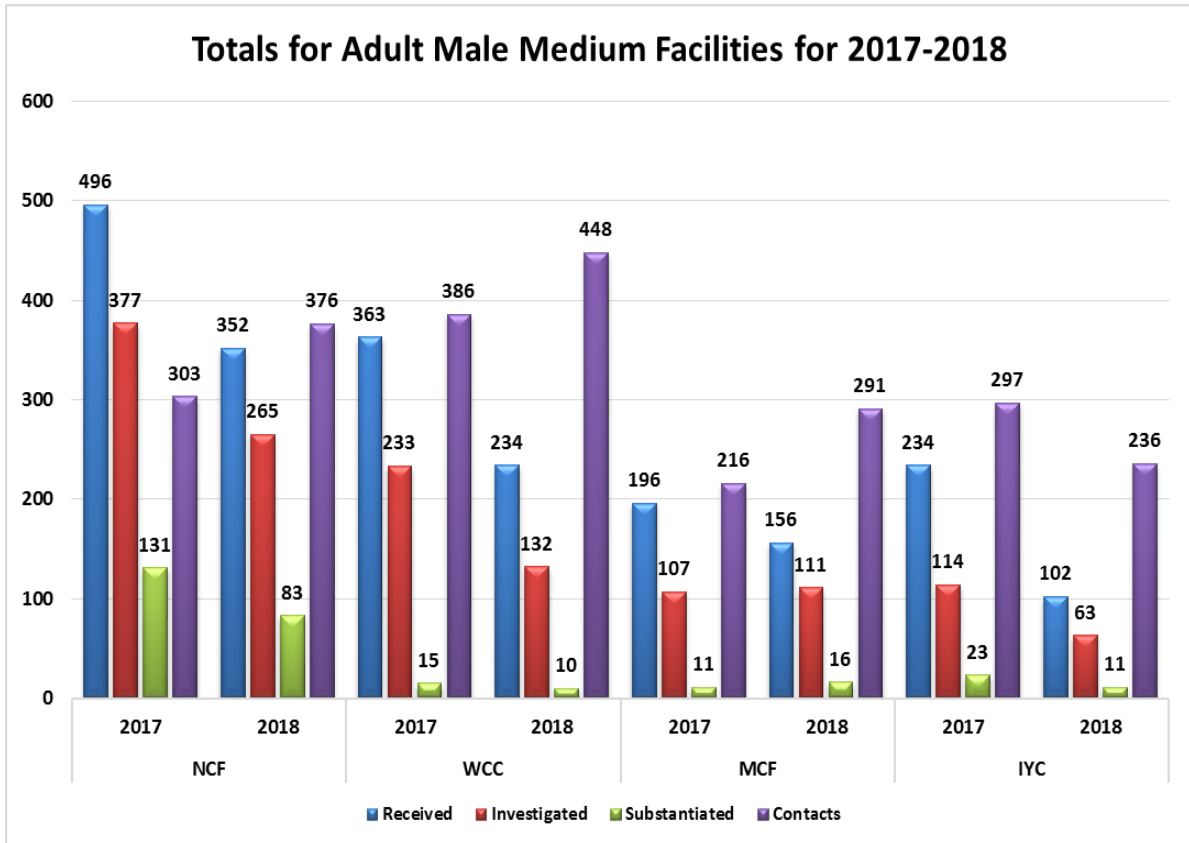


NCF – New Castle Correctional Facility, WCC – Westville Correctional Facility, MCF – Miami Correctional Facility

<sup>6</sup> The IDOC identifies its Male Medium Level Security Facilities as having a moderate degree of security measures in place. Housing is either dormitory-style or single cell.

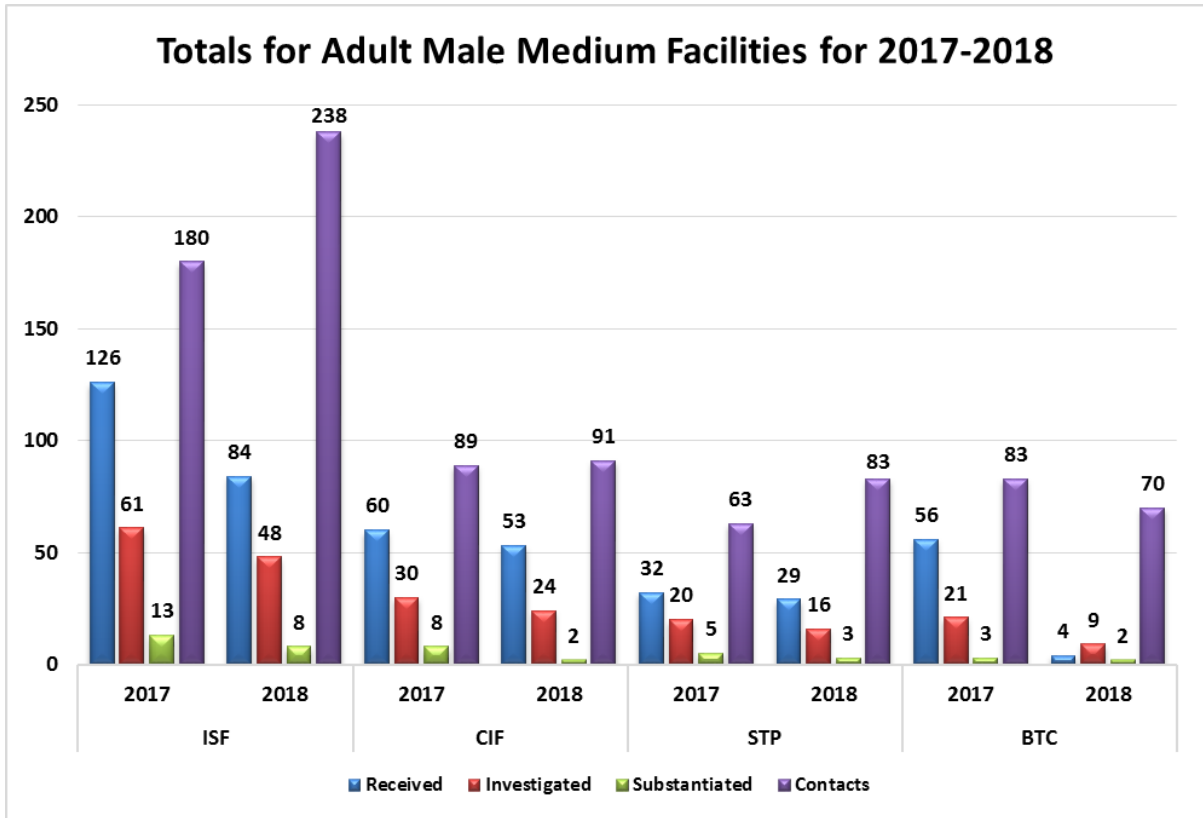
Figures 12 and 13 below show a comparison in the numbers of received, investigated, and substantiated complaints and contacts made from each of the Medium Security Level Men’s Facilities in 2018 as compared to 2017. While New Castle medical complaints still comprised over 42% of the total number of healthcare complaints overall, New Castle complaints comprised 24% of the total number of complaints the Bureau received for the year. Also, while all facilities experienced a decrease in complaints, Branchville Correctional Facility and Putnamville Correctional Facility (“ISF”) experienced larger decreases than the other facilities.

**Figure 12**



NCF – New Castle Correctional Facility, WCC – Westville Correctional Facility, MCF – Miami Correctional Facility, IYC – Plainfield Correctional Facility

Figure 13



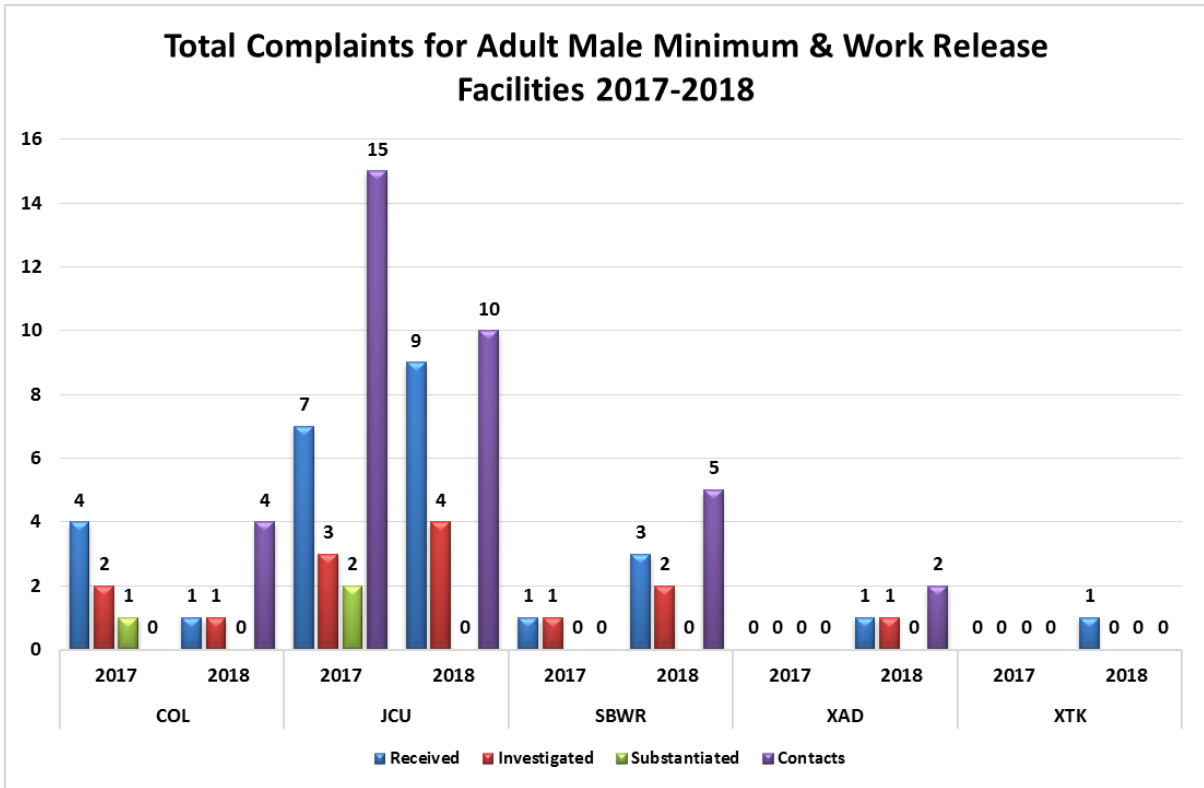
ISF – Putnamville Correctional Facility, CIF – Correctional Industrial Facility, STP – Heritage Trail Correctional Facility, BTC – Branchville Correctional Facility

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For a complete listing of all facilities in 2018, see Figures 14-17 below.

Figure 14 below illustrates total complaints received from Adult Male Minimum Security Level facilities and work release centers. These facilities comprise 9% of the IDOC population and 1% of the complaints that we received in 2018.

**Figure 14**

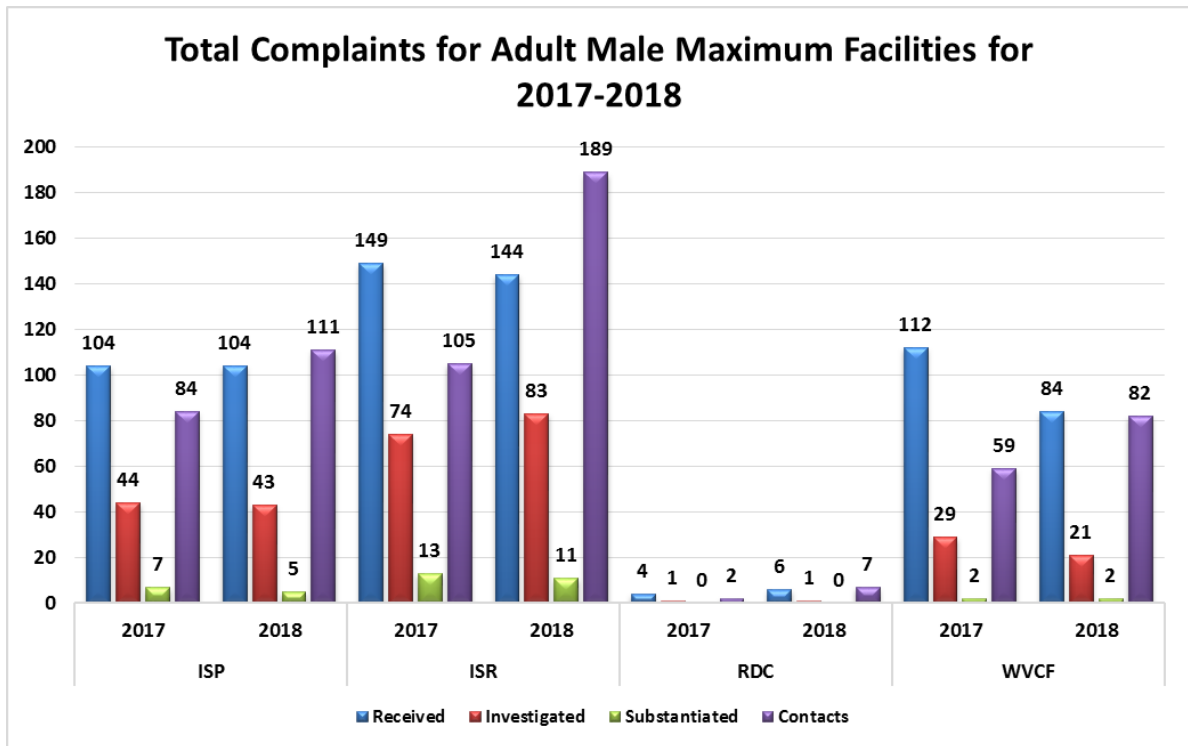


COL – Chain O’Lakes Correctional Facility, JCU – Edinburgh Correctional Facility, SBWR –South Bend Community Re-Entry Center, XAD – Community Transition Program, XTK – Tippecanoe Work Release

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Figure 15 depicts the number of complaints received, investigated, and substantiated and the contacts made in calendar year 2018 for Male Maximum Security Level facilities. For the most part, these numbers have stayed consistent with 2017. The Bureau received 23% of its complaints from this population. As previously mentioned, the Bureau receives more complaints from the Pendleton Correctional Facility than any of the other Maximum Security facilities. However, the Bureau experienced the largest increase in contacts in Maximum Security facilities from the Wabash Valley Correctional Facility. Overall for the Maximum Security facilities, the number of contacts increased from 2017, while the number of complaints decreased. Of note is that when the number of complaints and contacts are added together for each year, the number is close to the same (2017 complaints + 2017 contacts = 369 and 2018 complaints + 2018 contacts = 338). This indicates that the contacts that the Bureau had regarding the facilities did not give rise to a complaint as often as in the prior year.

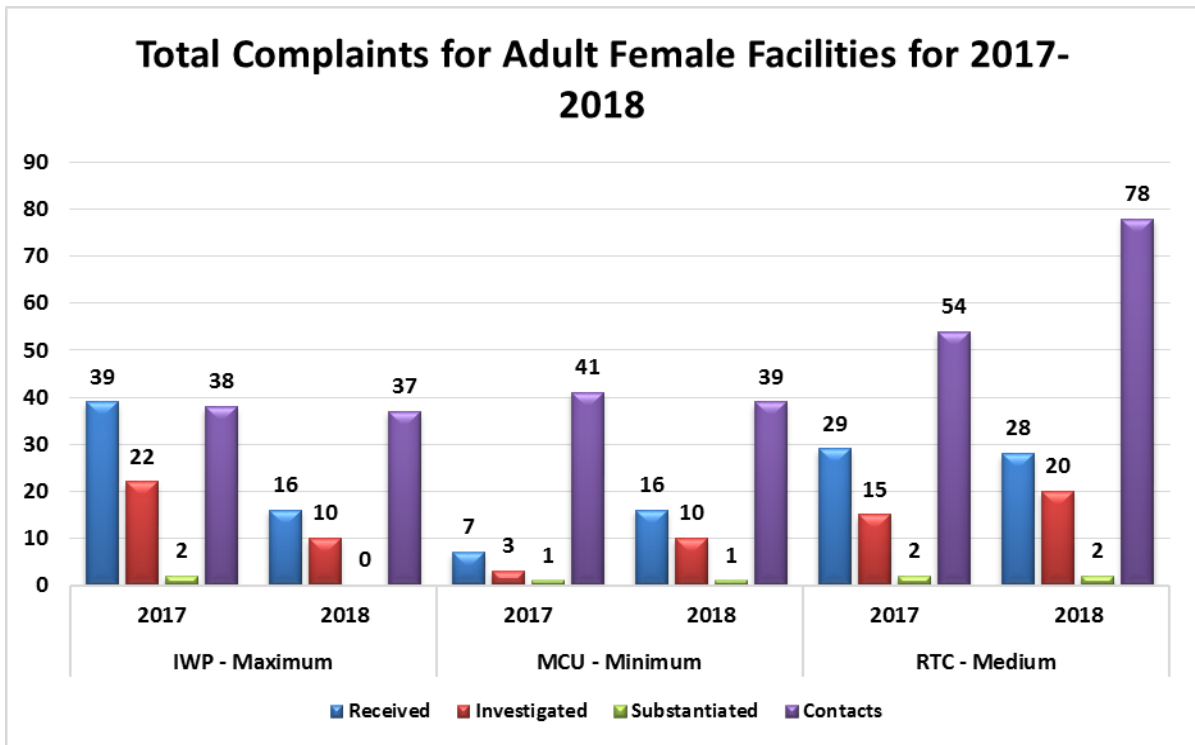
**Figure 15**



ISP – Indiana State Prison, ISR – Pendleton Correctional Facility, RDC – Reception Diagnostic Center, WVCF – Wabash Valley Correctional Facility

Figure 16 shows the complaint totals for the female facilities. Complaints from the female facilities account for 6% of the complaints received by the Bureau, while females comprise 9% of the IDOC population. This is slightly higher than the 4% in 2017. Also significant is the drop in investigated complaints at the Indiana Women’s Prison (“IWP”). Most notable here is the increase in contacts from Rockville Correctional Facility, which seems to be an actual increase, due to the fact that the number of complaints stayed consistent since 2017.

**Figure 16**

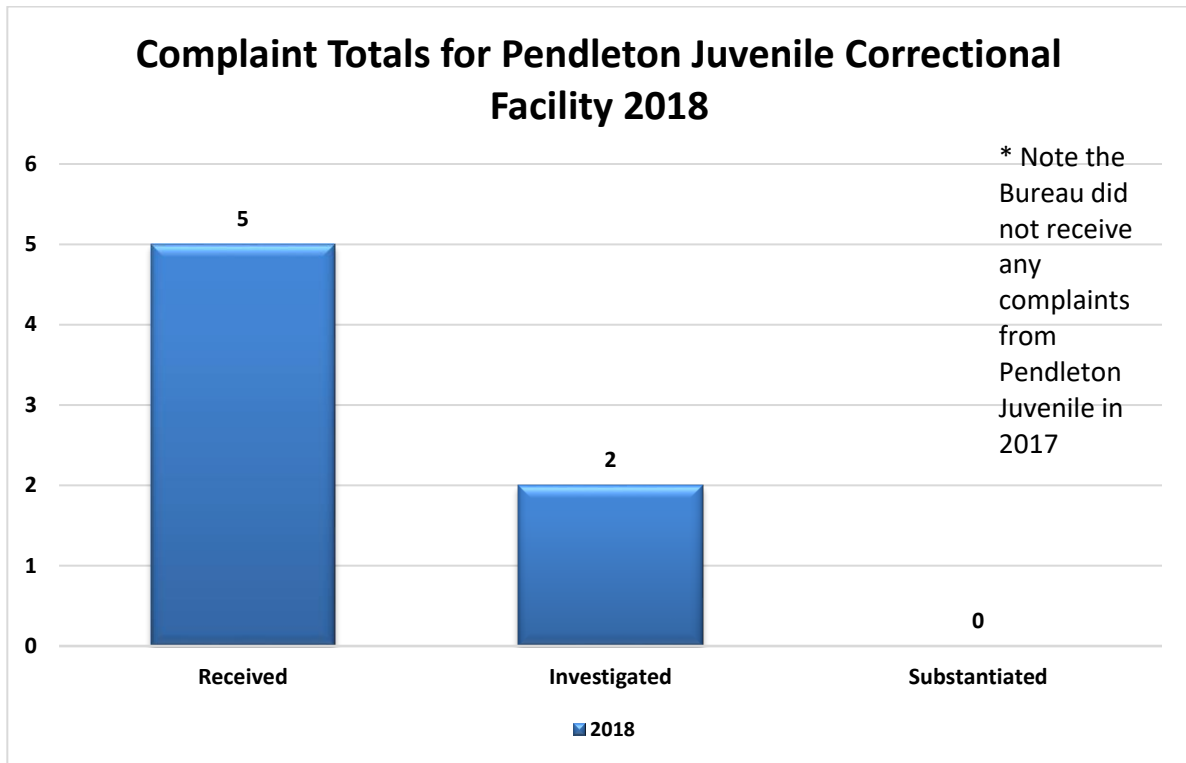


IWP – Indiana Women’s Prison, MCU – Madison Correctional Facility, RTC – Rockville Correctional Facility

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The only juvenile facility (male or female) the Bureau received complaints from in 2018 is Pendleton Juvenile Correctional Facility. While the Bureau only received five complaints from this facility in 2018, in 2017, the Bureau had not received any complaints.

**Figure 17**



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## V. **Complaint Analysis**

### **Substantiated Complaints**

The Bureau substantiated 158 complaints in 2018.<sup>7</sup> Since over 72% of the substantiated complaints were medical, the Bureau continued to address these issues with the medical department. The Director met weekly with the IDOC Healthcare Services Director as well as other medical and mental health staff to discuss medical complaints. Additionally, the Director also traveled to facilities to help resolve complaints. The Bureau also corresponded with medical personnel at the facilities themselves.

### **New Castle Medical Complaints**

Consistent with recent past years, New Castle medical complaints far outnumbered any other type of substantiated complaint consisting of 46% of all substantiated complaints and 65% of all substantiated medical complaints. The Bureau has continued to work with the medical personnel in the IDOC Central Office as well as the medical personnel at the facility to identify which processes were not working and what issues needed to be addressed.

Staff retention remains an issue at New Castle. While the facility medical staff has finally seemed to gain some consistency after a tumultuous year or two. It has taken time to find reliable medical staff members who were willing to work well with the team and that would function well in each area. For example, once a permanent staff member was placed in the new medication room, many of the medication errors seemed to resolve. Without the requisite staff available to implement improvements, the errors cannot be fixed properly.

As in 2017, medication complaints remain the most common type of medical complaints. While some of the medication related issues can be attributed to medications which were found missing in the facility, other issues remain, particularly with respect to renewal of medications. Despite the ongoing struggles with the renewal of medications, once the facility opened a new secure space to keep medications secure and implemented new policies in accordance with this, many of the medication errors were solved.

Another issue related to medication complaints is the prescribing of medications. A review of prescribed medications is badly needed. However, because the facility does not have consistency in providers, this is a challenge. Many offenders are prescribed medications that they either do not really need or offenders are overprescribed medications. New Castle has attempted to address this issue, but due to the staff being needed to keep up on current workload of offenders, it is hard to conduct a thorough review of every offender's prescribed medication.

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<sup>7</sup> For a complete listing of all substantiated complaints, see the monthly reports posted on the IDOC website. [www.idoc.in.gov/2318.htm](http://www.idoc.in.gov/2318.htm)



While New Castle's administration has continued to attempt to work with the medical department to make improvements and to support offenders' medical needs, it continues to have struggles. The facility has, however, worked with the medical department to devise a plan to reduce backlogs and ensure that offenders are receiving their medications and timely medical care.

## **IDOC-Wide Recommendations**

### **1. Improve transparency in the IDOC through review of internal processes.**

#### **Restrictive Housing Reviews and Release Dates**

The Bureau is contacted by the restrictive housing<sup>8</sup> population within the IDOC more than any other population. When the Bureau reviews these matters, the Bureau always reviews how long the offender has been in restrictive housing, the reason behind the offender's placement there, and when the last review of the placement occurred. The correction industry as a whole has begun to recognize the use of restrictive housing for long periods is inhumane and can cause serious mental health problems. The industry-wide trend is moving away from the use of restrictive housing. Some states have done away with restrictive housing altogether.

IDOC should implement new procedures to ensure further transparency in the review process. When an offender is placed in restrictive housing, it is often due to an incident at the IDOC facility. It is not uncommon for Internal Investigations or the facility Warden to place the offender on restrictive housing. Currently, IDOC policy calls for a review of restrictive housing status to occur by the Treatment Team or Classification Committee at the facility every seven days for the first two months and then every thirty days thereafter. (IDOC policy #02-01-111, page 14). Very few, if any, offenders are ever released based upon these reviews. Since the Classification Team is located at the facility where the Warden is often the one directing that the offender be placed in restrictive housing, this could potentially create a conflict between the Classification Committee, the Treatment Team, and the Warden. If the Classification Committees or Treatment Teams began releasing offenders upon these reviews, this could create an uncomfortable environment between staff at the facility. Thorough review of this procedure is necessary.

The transparency of restrictive housing reviews could also be improved by consistently noting these reviews in the Offender Case Management System ("OCMS"). Currently, as the Bureau has observed in its review of restrictive housing offenders, these reviews may or may not be included in the OCMS which is used by IDOC to track all information regarding each offender. If these reviews were always included in OCMS, this would provide more transparency.

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<sup>8</sup> Restrictive housing is defined as "a form of housing for offenders whose continued presence in the general population would pose a serious threat to life, property, self, staff, other offenders, or to the security or orderly operation of a facility." Indiana Department of Correction Manual of Policies and Procedures, Disciplinary Restrictive Status Housing.

Transparency could also be increased by providing defined release dates from restrictive housing for all offenders located in restrictive housing.

### **Drug Trafficking**

Transparency could also be improved in the IDOC through regular random urinalysis screening of IDOC employees. One of the biggest issues that plagues the facilities is the trafficking of drugs. Once drugs are discovered, it is very difficult to determine exactly where the drugs came from. It is safe to assume that some of the drugs are getting in through staff members. If IDOC employees were to receive random urinalysis screenings more frequently, then perhaps employees would be more deterred from trafficking drugs into the facilities.

Another way to tackle the drug trafficking problem in the IDOC is to make a spectacle of those caught trafficking drugs into the facilities. While the IDOC ensures that when traffickers are caught a spectacle is made through the local newspaper, the IDOC does not seem to follow up on these cases once sentencing occurs. Through making a further spectacle of these cases once sentencing occurs, this may help deter traffickers. If harsher sentences need to be imposed, in order to make a spectacle of the trafficker, then the IDOC could work to ensure prosecutors are requesting tough sanctions in these cases.

### **The Use of Physical Force**

The Bureau reviewed several “Use of Force” incidents over the past year. In reviewing these incidents, it occurred to the Bureau that the industry as a whole has been moving away from using the terminology “Use of Force”. The Department could review its use of this terminology. The industry is moving away from using terms such as “Use of Force” in favor of less threatening terms such as “Offender Management Techniques.” While changing the name of the policy would not necessarily change the procedures themselves, but it would indicate incorporation of lesser means of force.

Not only could the name of the policy itself be reconsidered, but also the application of such techniques to a person who has a specific medical condition should also be contemplated in the policy. Currently, the policy does not call for a review by the Medical Director or consideration of the offender’s current mental health or medical conditions before use of force or other offender management techniques are used. By requiring the Medical Director to sign off before these techniques are used (where possible and/or practical), the Department could avoid using these techniques where the offender may be suffering from an adverse or potentially dangerous health condition (i.e. seizure, etc.) or mental health episode that could harm the offender or that might expose the State to unnecessary legal risk.

Transparency could also be improved through further review of the policy dictating when a staff assault occurs. Under current policy, when a staff assault takes place in a facility the Regional Director reviews the matter to determine whether further action is necessary. From the Bureau’s review of these incidents, often, when a staff assault takes place and a conduct report is issued as a result of the incident, no further review is called for. This assumes that proper force was used on the offender. Often, when the Bureau reviewed such incidents, the

response that the Bureau receives is “this offender received a conduct report for assaulting the Officer.” While this may be true, it does not mean that the incident could not be reviewed further or that proper force was used by the officer. As a matter of fact, the Bureau has called on matters for review where this was the case. The first response that the Bureau received in regard to the matter was that the offender received a conduct report. After the Bureau made the point that the matter could still be reviewed further, then it was reviewed further and the actions of staff were not found to be appropriate.

The concern is that to improve transparency within the process when a staff assault such as this occurs the Office of Internal Investigations should immediately be involved. This would alleviate the need for the review by the Regional Director who stands in the direct line of command as the Warden. Instead, removing the review of staff assaults to the Office of Investigations and Intelligence this makes the review more transparent, since the review is then not being conducted through the same chain of command.

**2. Provide a focus on improving the security within facilities through conducting a thorough review of current staff development and training procedures as well as a review of current search procedures in restrictive housing.**

**Investing in Staff**

One of the biggest problems facing the Department today has been the hiring and retaining of staff. The IDOC has experienced its lowest staffing numbers in years. Staffing numbers in housing units throughout the facilities have remained dangerously low. These low staffing numbers have a direct correlation to the increase in assaults within the facilities. The Bureau has received many complaints concerning low staffing numbers and has experienced an increase in complaints concerning officer misbehavior and conduct reports. Changing these assault rates will also improve staff retention rates. In order to change the assault rates, we must address the root cause of the problem: low staff rates.

Recently, the Department has addressed the issue of low staffing numbers by raising the minimum pay of officers. While this may help in hiring more staff, this does not help retain officers once they are hired. In an effort to invest in its staff to help retain staff, the Department should provide a robust staff development and training program as well as a retention incentive. It is well known that the more an agency invests in its staff, the more the agency gets back from the staff. When staff is happier and feels more appreciated, the staff has a better feeling overall towards their employer, their jobs, and, in turn, the offenders. When staff have more goodwill towards the Department and their jobs, this would create a happier employee and a happier workplace, which has shown in other Departments will decrease assaults.

Making the improvements discussed above will also help with retention. When a current staff member expresses to others that he or she is happy, this translates into others wanting to join the Department as well. If the Department invests in its current staff and focuses on staff development and training, this will result in new staff being drawn into the Department as well as decreasing staff assaults.

Other Departments have addressed this issue by investing in their staff. The rewards have been proven time and time again that the more that an employer invests in its staff, the rewards are reaped through positive staff response. Investing in staff has proved time and time again to improve staff skills and morale, which directly results in increasing staff numbers and staff retention. Through the review of its current staff development and training program and implementation of a robust training and development program coupled with providing incentives such as spot bonus awards, the IDOC could begin to overcome its staffing challenges.

### **Review of Current Search Procedures**

Further security improvements should be made through review of search procedures in Restrictive Housing Units. Review of current search procedures could lead to implementation of new search procedures, such as requiring offenders to be searched before and after an offender is escorted from his cell. Currently, policy does not require that offenders are searched before being escorted from a cell. If such search procedures were implemented, if an offender were attempting to hide a weapon to commit an assault, this could potentially be prevented thereby resulting in a safer environment for both offenders and staff.

### **3. Review the current Disciplinary Code, taking into consideration conduct offenses and procedures.**

In the current Disciplinary Code, trafficking related conduct offenses are a Class B offense that could be increased to a Class A offense. Also, these cases are not prosecuted by local prosecutor's offices. Implementing more stringent punishments for using or trafficking drugs within IDOC facilities would deter the use of illegal substances within facilities in the Bureau's view.

Another consideration when reviewing the current Disciplinary Code is an automatic review of an offender's medication be conducted when an offender is written a conduct report for certain conduct offenses such as trafficking, unauthorized possession, and refusal of providing a sample for a drug test. If an offender receives a conduct report for such offenses currently, review by the medical department of the medications the offender is prescribed is not currently policy.

This review could be impactful in a number of ways. It could determine whether an offender is actually taking his medication and/or what other medications may be in his system. It would also allow for the medical department to determine whether other medications could possibly have an adverse reaction with those medications prescribed. While a drug test itself may note which medications are found in his system, under current policy, this is not necessarily cross referenced with currently prescribed medications. Performing an automatic review of medications may not only help detect unprescribed medications and/or drugs which are in a person's system, but it could also aid in reducing the number of drugs throughout the facilities.

## **VI. 2018 Wrap-Up**

### **Looking Forward**

The Bureau will continue to perform its duties outlined in the Indiana Code, including the obligation to receive and investigate complaints and to make recommendations regarding the complaints it receives. The Bureau will also continue to strive to be responsive to each person who contacts it. Furthermore, the Bureau will continue to inform the offender population on how to effectively use the Bureau. Finally, the Bureau will monitor its estimated cost savings and effectiveness on an ongoing basis.

### **Acknowledgements**

The Bureau would like to acknowledge the IDOC staff who provides assistance to the Bureau to resolve matters. The Bureau appreciates the cooperation and professionalism of the IDOC staff in resolving issues. The Bureau further appreciates the camaraderie with IDOC in resolving offenders' complaints.

The Bureau would further like to acknowledge Governor Holcomb's administration for the support that it has provided to the Bureau in its efforts and appreciates being a valued team member of the Governor's administration.

It is our pleasure year after year to be able to continue to serve Hoosiers. We strive for continual improvement and are always reaching to provide the Next Level of customer service to the citizens of our State.

## Attachment 1 - Page 1 of 5

### INDIANA DEPARTMENT OF CORRECTION OMBUDSMAN BUREAU 2018 POLICIES & PROCEDURES

#### I. Definitions

The Indiana Department of Correction (“IDOC” or “Department”) Ombudsman Bureau (“Bureau”) Policy references the following terms, defined here:

- A. Assist – A complaint that requires further action by the IDOC, but the offender has not necessarily attempted to resolve with the IDOC prior to contacting the Bureau.
- B. Assistant – A person serving the role classified as AA3 for the State of Indiana who is charged with assisting in performing the duties of the Bureau.
- C. Bureau – The Indiana Department of Correction Ombudsman Bureau established in I.C. 4-13-1.2-3.
- D. Complaint – Communication received by the Bureau from any source that concerns the IDOC and contains an issue the Bureau can address.
- E. Contact – Communication the Bureau receives that does not meet the requirements of a complaint stated herein.
- F. Complainant – A person who submits a complaint to the Bureau.
- G. IDOC –The Indiana Department of Correction.
- H. Director – The person charged with fulfilling the duties under I.C. 4-13-1.2-7 and appointed under I.C. 4-13-1.2-4.
- I. Family Member – Any person who is related to an incarcerated individual in an IDOC facility in the State of Indiana.
- J. Follow-up Complaint – A complaint that has previously been logged into the Access Database by the Bureau.
- K. Investigation – An in depth examination of a complaint.
- L. JPay – The electronic kiosk used by offenders that allows them to send e-mails. The Bureau allows the offenders to send e-mails to the Bureau through this system.
- M. New Complaint – A complaint received by the Bureau that has not previously been logged or reviewed by the Bureau.
- N. Substantiated Complaint – A complaint that is found to be true and requires a recommendation for the IDOC to take some action on the matter.

## **Attachment 1 - Page 2 of 5**

### **II. Mission Statement**

- A. To work in concert with the IDOC towards the common goal of public safety through making recommendations to the IDOC in order to ensure that the health and safety of offenders are protected and IDOC policies and procedures as well as state laws and rules are upheld.

### **III. Purpose and general principle**

- A. Purpose: It is the purpose of the Bureau to develop policies and procedures that promote the expeditious resolution to complaints received from persons incarcerated in the IDOC, their family members and other interested parties. These specifically-designed procedures and policies provide for the consistent implementation of complaint resolution activities and promote the enforcement of IDOC policies and procedures, the health and safety of offenders, and state law.
- B. General Principle: These policies and procedures establish procedural guidelines for consistent handling and resolution of complaints submitted for resolution to the Bureau. The following procedures should apply in the handling of each complaint submitted to the Bureau.

### **IV. Intake Procedures**

The Bureau receives complaints by mail, e-mail<sup>9</sup>, telephone and JPay.

- A. The Bureau requires offenders to attempt to resolve matters within the IDOC before contacting the Bureau and should provide proof of having done so when contacting the Bureau.
- B. The Bureau will only accept complaints addressed specifically to the Bureau.
- C. The Bureau will only accept as complaints matters concerning whether the Department:
  - 1. Violated a specific law, rule or department written policy; or
  - 2. Endangered the health or safety of a person.

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<sup>9</sup> The Bureau lost email access to offenders beginning in September 2018 and lost full access December 1, 2018.

## **Attachment 1 - Page 3 of 5**

- D. The Bureau requires offenders to use the Ombudsman Complaint Form, if at all possible.
- E. The Bureau requires offenders to send all relevant paperwork with their complaints, if at all possible.
- F. The Director reserves the right to refuse complaints which contain subject matter not under the jurisdiction of the Bureau or adequate information is not provided.
- G. If the Bureau has already addressed a matter, further correspondence regarding the matter will be noted and filed.

### **V. Determining Appropriate Action**

- A. As soon as possible after receipt of a piece of correspondence, a determination will be made whether the correspondence should be given a complaint number or entered into the contact log.
- B. When counted as a complaint, the Assistant determines whether a complaint needs:
  - 1. Further review, in which case it is given to the Director.
  - 2. Further investigation, in which case it may be given to the Director.

### **VI. Response Procedures**

Responses to correspondence from offenders will be made in writing and sent through the U.S. Mail only. The Bureau will not reply to offender correspondence via e-mail. Responses should be made in a reasonably timely manner after receipt of the complaint and should be in writing as follows:

- A. More Information Required
  - 1. When new correspondence is received by the Bureau with insufficient information, then the letter of response instructs the complainant to send the Bureau additional information.
- B. No Violation Letters
  - 1. If all information is reviewed and the Bureau determines that no violation of IDOC policy or procedure has occurred, the Bureau shall respond with a letter expressing that no violation has been found in the matter and no investigation is necessary.



## **Attachment 1 - Page 4 of 5**

### **C. No Jurisdiction Letters**

1. If the Complainant has submitted a complaint concerning a matter that the Bureau does not have the statutory power to address, the complainant is sent a letter explaining that the Bureau does not have jurisdiction over such a matter.

### **D. Use the IDOC Process Letters**

1. If the Bureau receives a letter from a complainant and it has come to be determined that the complainant has not completed a IDOC process that could be used to resolve the complaint, the Bureau may send the complainant a letter explaining that the offender must first complete the IDOC process available to the offender. See exceptions to this in section VII part A.

### **E. Report of Investigation**

2. As required by I.C. 4-13-1.2-5(b), the Bureau at the conclusion of an investigation reports findings to the complainant via letter.

### **F. Summary of Findings**

1. As required by I.C. 4-13-1.2-5(d), the Bureau shall submit on a monthly basis a report that contains a summary of findings for all substantiated complaints.

## **VII. Procedures Upon Investigation**

- A. The Bureau may conduct an investigation into a matter when an offender has completed the appropriate DOC process or when an offender may not have completed this process, but the matter involves a health or safety matter.
- B. Investigations shall be completed in a timely manner.

## **Attachment 1 - Page 5 of 5**

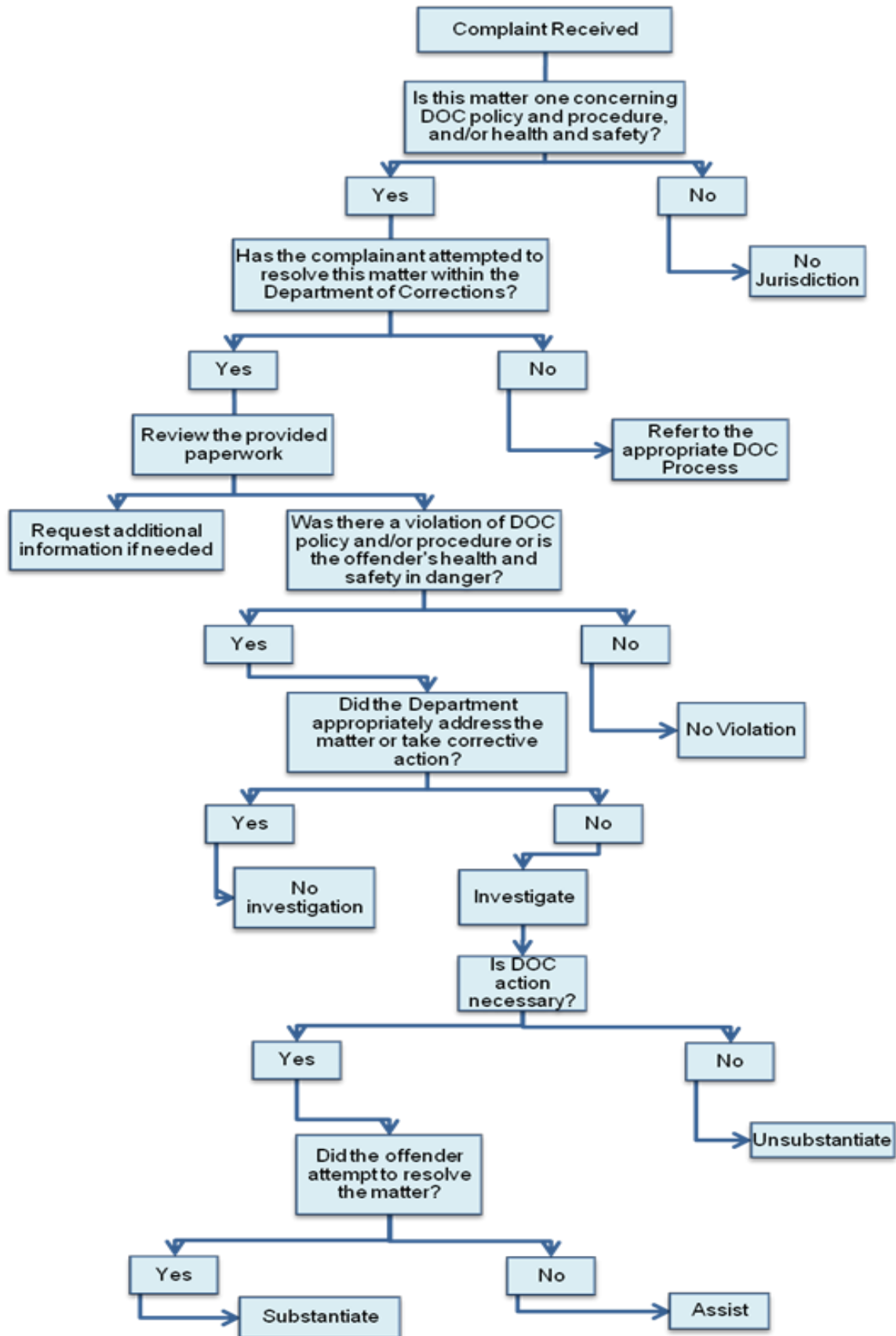
- C. Once it is determined that a complaint requires an investigation, one or more of the following people may need to be contacted:
1. Facility contact
  2. Final review authority
  3. Grievance Officer
  4. Superintendent
  5. Offender
  6. Offender's Family
  7. Policy Manager
  8. Classification
  9. Assistant Superintendent
  10. Central Office personnel
  11. Medical personnel
  12. Other personnel
- D. Once the appropriate contact has been made, it may be necessary to visit the facility in order to address the issue.
- E. It may also be necessary to hold a meeting at the facility with the offender and the relevant IDOC personnel.
- F. Once the relevant people have communicated, one of three determinations may be made: that the complaint is true and needs IDOC action; that it is not true; or that the IDOC has already addressed the issue, as described in section I.
- G. A recommendation, as described below in section VIII, is made when a complaint is substantiated.
- H. Reports of investigation are written as described above in section VI part E.
- I. After completion of these Procedures upon investigation stated above a complaint is considered resolved by the Bureau and is closed.

### **VIII. Making Recommendations**

- A. As an investigation ensues, the Director may find it appropriate to make a recommendation as to action necessary when a complaint is substantiated.
- B. Recommendations should be made to the personnel who directly oversee the issue or facility contact person, but the Director may notify other facility/Central Office personnel.
- C. All recommendations and complaints must be reported to the IDOC Commissioner monthly.

# Attachment 2

## IDOC Ombudsman Complaint Process



Attachment 3 - Page 1 of 4

Indiana Ombudsman Bureau

Complaint Summary Report - Male Minimum Security Level Facilities, Work Release Centers, and County Jails

From: 1/1/2018 To: 12/31/2018

Received, Investigated, Substantiated, Assisted, Contacts

	Total	COL	JCU	SBWR	XAD	XMR	XTK	PD	County
Case Management	1,1,0,1,0			1,1,0,1,0					
Classification (Codes)	0,0,0,0,1		0,0,0,0,1						
Classification (other than disciplinary)	1,1,0,0,1		1,1,0,0,1						
Classification (Time Cut)	2,0,0,0,4	0,0,0,0,2	2,0,0,0,1						0,0,0,0,1
Clothing	0,0,0,0,0								
Commissary	0,0,0,0,4								0,0,0,0,4
Confinement Conditions	0,0,0,0,11								0,0,0,0,11
Correspondence	0,0,0,0,1	0,0,0,0,1							
Credit Time	0,0,0,0,1		0,0,0,0,1						
Dental	0,0,0,0,0								
Disciplinary Action	4,0,0,0,6		2,0,0,0,1	1,0,0,0,2	0,0,0,0,1	0,0,0,0,2	1,0,0,0,0		
Excess Force	0,0,0,0,2								0,0,0,0,2
Food	0,0,0,0,1								0,0,0,0,1
Grievance	0,0,0,0,0								
Housing	0,0,0,0,4							0,0,0,0,2	0,0,0,0,2
Legal	0,0,0,0,37					0,0,0,0,1			0,0,0,0,36
Medical Care	3,3,0,0,9		3,3,0,0,1						0,0,0,0,8
Mental Health	2,2,0,0,1								2,2,0,0,1
Offender Safety	0,0,0,0,3		0,0,0,0,1						0,0,0,0,2
Offender Trust Accounts	2,2,0,0,2			1,1,0,0,1	1,1,0,0,1				
Offender Violence	0,0,0,0,0								
Officer Misbehavior	1,1,0,0,4		0,0,0,0,1	0,0,0,0,1					1,1,0,0,2
Parole	3,1,1,0,4							1,0,0,0,2	2,1,1,0,2
Personal Property	0,0,0,0,1								0,0,0,0,1
Phone	0,0,0,0,0								
Programs	1,1,0,0,2	1,1,0,0	0,0,0,0,1						0,0,0,0,1
Recreation	0,0,0,0,0								
Religious	0,0,0,0,1								0,0,0,0,1
Sanitation	0,0,0,0,0								
Security	0,0,0,0,0								
Sex Offender	0,0,0,0,0								
Transfer	5,1,1,0,2	0,0,0,0,1	1,0,0,0						4,1,1,0,1
Visitation	0,0,0,0,3		0,0,0,0,1	0,0,0,0,1					0,0,0,0,2
Work	0,0,0,0,1								
<b>Total</b>	<b>25,13,1,106</b>	<b>1,1,0,0,4</b>	<b>9,4,0,0,10</b>	<b>3,2,0,1,5</b>	<b>1,1,0,0,2</b>	<b>0,0,0,0,3</b>	<b>1,0,0,0,0</b>	<b>1,0,0,0,4</b>	<b>9,5,2,0,78</b>

Facility Key

COL - Chain O'Lakes Correctional Facility

PD - Parole Districts

JCU - Edinburgh Correctional Facility

County - County Jails

SBWR - South Bend Community Re-Entry Center

XAD - Community Transition Program

XMR - Marion County (Duvall Residential Center)

XTK - Tippecanoe Work Release Center

Attachment 3 - Page 2 of 4

Indiana Ombudsman Bureau

Complaint Summary Report - Male Medium Security Level Facilities

From: 1/1/2018 To: 12/31/2018

Received, Investigated, Substantiated, Assisted, Contacts

	Total	BTC	CIF	ISF	IYC	MCF	NCF	STP	WCC
Case Management	3,2,0,0,5			1,0,0,0	0,0,0,0,2	0,0,0,0,1	1,1,0,0	1,1,0,0,1	0,0,0,0,1
Classification (Codes)	8,2,0,0,52	2,0,0,0,9	1,0,0,0,4	1,1,0,0,11	0,0,0,0,1	0,0,0,0,5	1,0,0,0,0	1,0,0,0,3	2,1,0,0,19
Classification (other than disciplinary)	17,12,0,2,28	2,2,0,0,2	3,1,0,0,1	3,2,0,1,8	1,1,0,0,4	2,2,0,0,4	1,0,0,0,4	3,2,0,1,0	2,2,0,0,5
Classification (Time Cut)	30,19,4,3,64	0,0,0,0,2	2,1,0,1,2	4,1,0,0,9	5,2,1,0,6	2,2,0,1,3	6,5,2,1,14	2,1,0,0,9	9,7,1,0,19
Clothing	5,0,0,0,29	0,0,0,0,1		0,0,0,0,2	0,0,0,0,1	0,0,0,0,2	4,0,0,0,14		1,0,0,0,9
Commissary	7,2,0,2,12	1,0,0,0,0	0,0,0,0,2	0,0,0,0,3	0,0,0,0,2	1,0,0,0,2	0,0,0,0,1	0,0,0,0,1	5,2,0,2,1
Confinement Conditions	38,19,0,5,49		0,0,0,0,5	5,4,0,0,5	4,2,0,1,11	0,0,0,0,3	8,5,0,1,5	1,1,0,0,3	20,7,0,3,17
Correspondence	23,8,2,1,82	1,1,0,0,3	0,0,0,0,7	0,0,0,0,6	2,1,1,0,4	6,3,1,0,6	8,1,0,1,31	0,0,0,0,3	6,2,0,0,22
Credit Time	26,13,7,1,49	3,1,0,0,0	0,0,0,0,2	8,5,3,0,6	2,2,1,0,12	5,2,1,1,13	2,2,1,0,5	2,0,0,0,7	4,1,1,0,4
Dental	27,24,3,0,31	1,0,0,0,0	0,0,0,0,1	0,0,0,0,1	2,0,0,0,5	0,0,0,0,1	3,3,1,0,2	1,1,1,0,1	20,20,1,0,20
Disciplinary Action	96,12,3,1,236	9,0,0,0,23	9,1,0,0,11	10,0,0,0,32	12,3,1,0,28	7,2,0,0,26	12,1,0,0,19	7,3,1,0,30	30,2,1,1,67
Excess Force	7,5,1,0,1			2,1,0,0,1		5,4,1,0,0			
Food	30,26,1,3,26	1,1,0,0,0	2,2,0,0,2	3,3,1,0,2	2,2,0,0,0	5,5,0,0,4	6,5,0,0,5		11,8,0,3,13
Grievance	19,5,1,1,60	2,1,1,0,2	1,0,0,0,5	1,0,0,0,13	0,0,0,0,8	4,3,0,0,10	9,1,0,1,11	0,0,0,0,2	2,0,0,0,9
Housing	19,11,0,0,45	1,1,0,0,0	2,2,0,0,3	2,2,0,0,6	2,2,0,0,17	2,1,0,0,5	3,0,0,0,5		7,3,0,0,9
Legal	27,11,0,1,48	1,0,0,0,0	1,0,0,0,3	0,0,0,0,3	5,3,0,1,5	6,3,0,0,11	3,1,0,0,14		11,4,0,0,12
Medical Care	400,360,100,13,296	3,1,1,0,4	20,14,2,1,9	20,18,2,3,14	38,32,7,0,25	53,44,11,0,53	217,204,73,8,139	4,3,1,0,1	45,44,3,1,51
Mental Health	53,47,7,1,21			3,3,1,0,3	1,1,0,0,3	12,9,0,1,8	25,23,5,0,4		12,11,1,0,3
Offender Safety	43,15,1,0,104	0,0,0,0,2	3,1,0,0,3	4,2,0,0,20	5,2,0,0,29	6,3,0,0,28	10,2,1,0,8	4,2,0,0,3	11,3,0,0,11
Offender Trust Accounts	15,12,0,2,55	1,0,0,0,0	1,1,0,0,0	0,0,0,0,7	1,1,0,0,10	4,4,0,0,11	2,1,0,0,9	1,1,0,1,3	5,4,0,1,15
Offender Violence	1,1,0,0,0						1,1,0,0,0		
Officer Misbehavior	21,12,0,0,90	3,0,0,0,3	2,0,0,0,5	3,2,0,0,14	1,1,0,0,8	6,5,0,0,26	5,3,0,0,13	0,0,0,0,3	1,1,0,0,18
Parole	20,8,0,2,28	3,0,0,0,1	1,0,0,0,1	4,3,0,1,6	3,3,0,1,8	2,2,0,0,2	4,0,0,0,7	0,0,0,0,1	3,0,0,0,2
Personal Property	25,12,1,1,42	2,0,0,0,1	1,1,0,1,3	2,0,0,0,4	1,0,0,0,6	9,5,1,0,7	6,4,0,0,6	0,0,0,0,1	4,2,0,0,14
Phone	5,5,1,2,11		0,0,0,0,3	0,0,0,0,1	1,1,0,1,3	1,1,0,0,1	1,1,0,0,1		2,2,1,1,2
Programs	25,4,0,2,115	6,1,0,0,7	1,0,0,0,2	1,0,0,0,9	3,0,0,0,8	3,1,0,0,24	3,1,0,1,12	1,0,0,0,2	7,1,0,1,51
Recreation	2,0,0,0,7	1,0,0,0,1	0,0,0,0,1		0,0,0,0,1	0,0,0,0,1	0,0,0,0,3		1,0,0,0,0
Religious	5,0,0,0,22			1,0,0,0,1	1,0,0,0,2	0,0,0,0,2	1,0,0,0,2		2,0,0,0,15
Sanitation	2,1,0,0,1				2,1,0,0,1				
Security	2,1,0,0,3		0,0,0,0,2			2,1,0,0,1			
Sex Offender	2,0,0,0,4					0,0,0,0,1	2,0,0,0,2		0,0,0,0,1
Transfer	29,8,1,0,108	1,0,0,0,5	1,0,0,0,5	5,1,1,0,39	6,2,0,0,16	5,3,0,0,11	4,0,0,0,11	0,0,0,0,4	7,2,0,0,17
Visitation	5,3,1,0,48	0,0,0,0,2	0,0,0,0,4	0,0,0,0,6	2,1,0,0,5	2,2,1,0,7	0,0,0,0,15	0,0,0,0,2	1,0,0,0,7
Work	17,8,1,1,61	0,0,0,0,2	2,0,0,0,5	1,0,0,0,6	0,0,0,0,5	6,4,0,0,12	4,0,0,0,14	1,1,0,1,3	3,3,1,0,14
<b>Total</b>	<b>1054,668,135,44,1833</b>	<b>44,9,2,0,70</b>	<b>53,24,2,3,91</b>	<b>84,48,8,5,238</b>	<b>102,63,11,4,236</b>	<b>156,111,16,3,291</b>	<b>352,265,83,13,376</b>	<b>29,16,3,3,83</b>	<b>234,132,10,13,448</b>

Facility Key

BTC - Branchville Correctional Facility	MCF - Miami Correctional Facility
CIF - Correctional Industrial Facility	NCF - New Castle Correctional Facility
ISF - Putnamville Correctional Facility	STP - Heritage Trail Correctional Facility
IYC - Plainfield Correctional Facility	WCC - Westville Correctional Facility

Indiana Ombudsman Bureau

Complaint Summary Report - Male Maximum Security Level Facilities

From: 1/1/2018 To: 12/31/2018

## Received, Investigated, Substantiated, Assisted, Contacts

	Total	ISP	ISR	RDC	WVCF
Case Management	0,0,0,2		0,0,0,2		
Classification (Codes)	0,0,0,4	0,0,0,2	0,0,0,2		
Classification (other than disciplinary)	9,3,0,4	4,3,0,1	1,0,0,1		4,0,0,2
Classification (Time Cut)	5,3,1,0,3	3,2,1,0,2	1,0,0,0		1,1,0,0,1
Clothing	3,2,0,0,2	1,1,0,0,1	1,1,0,0,1		1,0,0,0,0
Commissary	2,0,0,0,1	1,0,0,0,1			1,0,0,0,0
Confinement Conditions	14,8,1,0,8	5,3,0,0,0	5,5,1,0,7	1,0,0,0,0	3,0,0,0,1
Correspondence	12,0,0,0,6	8,0,0,0,3	2,0,0,0,1		2,0,0,0
Credit Time	1,0,0,0,4	0,0,0,0,2	0,0,0,0,2	1,0,0,0,0	
Dental	5,2,0,0,4	3,1,0,0,0	2,1,0,0,3		0,0,0,0,1
Disciplinary Action	35,2,0,0,50	9,1,0,0,12	16,1,0,0,25	2,0,0,0,2	8,0,0,0,11
Excess Force	7,4,0,0,0	2,0,0,0,0	4,4,0,0,0		1,0,0,0,0
Food	5,4,0,0,5	2,2,0,0,4	2,2,0,0,1		1,0,0,0,0
Grievance	20,8,0,0,19	6,3,0,0,8	10,4,0,0,8	0,0,0,0,1	4,1,0,0,2
Housing	15,4,0,1,14	0,0,0,0,3	5,2,0,1,7		10,2,0,0,4
Legal	8,3,0,0,19	0,0,0,0,3	3,2,0,0,7	1,0,0,0,0	4,1,0,0,9
Medical Care	93,63,11,4,63	33,15,3,2,24	45,37,6,2,30		15,11,2,0,9
Mental Health	16,14,2,0,10	5,5,0,0,1	9,8,2,0,5	0,0,0,0,1	2,1,0,0,3
Offender Safety	15,4,0,0,23	6,3,0,0,10	4,0,0,0,10	0,0,0,0,1	5,1,0,0,2
Offender Trust Accounts	7,2,1,0,12	1,1,1,0,3	3,1,0,0,6		3,0,0,0,3
Offender Violence	0,0,0,0,0				
Officer Misbehavior	16,6,0,0,30	4,0,0,0,2	5,2,0,0,17	1,1,0,0,0	6,3,0,0,11
Parole	0,0,0,0,1			0,0,0,0,1	
Personal Property	15,9,0,2,18	1,0,0,0,4	12,9,0,2,11		2,0,0,0,3
Phone	0,0,0,0,2		0,0,0,0,1		0,0,0,0,1
Programs	2,0,0,0,13	1,0,0,0,3	1,0,0,0,9		0,0,0,0,1
Recreation	0,0,0,0,0				
Religious	2,1,0,0,3	1,1,0,0,1	0,0,0,0,1		1,0,0,0,1
Sanitation	0,0,0,0,0				
Security	1,1,0,0,0	1,1,0,0			
Sex Offender	0,0,0,0,2				0,0,0,0,2
Transfer	13,2,0,0,23	4,1,0,0,6	4,1,0,0,9	0,0,0,0,1	5,0,0,0,7
Visitation	5,2,1,0,29	2,0,0,0,12	3,2,1,0,16		0,0,0,0,1
Work	12,1,1,0,15	1,0,0,0,3	6,1,1,0,7		5,0,0,0,5
Total	338,148,18,7,389	104,43,5,2,111	144,83,11,5,189	6,1,0,0,7	84,21,2,0,82

## Facility Key

ISP - Indiana State Prison

ISR - Pendleton Correctional Facility

RDC - Reception Diagnostic Center

WVCF - Wabash Valley Correctional Facility

Indiana Ombudsman Bureau

Complaint Summary Report- Women's Facilities and Juvenile Correctional Facilities

From: 1/1/2018 To: 12/31/2018

Received, Investigated, Substantiated, Assisted

	Total	MCU	RTC	IWP	PJCF
Case Management	1,1,0,1,2		0,0,0,0,1		1,1,0,1,1
Classification (Codes)	0,0,0,0,2		0,0,0,0,2		
Classification (other than disciplinary)	3,3,0,1,3		2,2,0,0,2	1,1,0,1,1	
Classification (Time Cut)	4,3,1,1,10	1,1,0,1,2	3,2,1,0,6	0,0,0,0,2	
Clothing	0,0,0,0,1		0,0,0,0,1		
Commissary	0,0,0,0,0				
Confinement Conditions	5,3,0,0,1	1,1,0,0,1	2,1,0,0,0	2,1,0,0,0	
Correspondence	1,1,0,0,8	0,0,0,0,1	0,0,0,0,3	1,1,0,0,4	
Credit Time	1,1,0,0,3	1,1,0,0,0	0,0,0,0,2	0,0,0,0,1	
Dental	2,2,0,0,2	1,1,0,0,0	1,1,0,0,2		
Disciplinary Action	4,0,0,0,19	2,0,0,0,6	0,0,0,0,7	2,0,0,0,6	
Excess Force	0,0,0,0,0				
Food	0,0,0,0,1		0,0,0,0,1		
Grievance	1,0,0,0,3	1,0,0,0,3			
Housing	0,0,0,0,5	0,0,0,0,3	0,0,0,0,1	0,0,0,0,1	
Legal	1,0,0,0,3	0,0,0,0,2	1,0,0,0,1		
Medical Care	19,18,2,0,28	3,3,1,0,2	11,10,1,0,21	5,5,0,0,5	
Mental Health	2,2,0,0,0		2,2,0,0,0		
Offender Safety	1,1,0,0,1		0,0,0,0,1		1,1,0,0,0
Offender Trust Accounts	3,1,0,0,5	0,0,0,0,3	1,0,0,0,1	1,1,0,0,1	1,0,0,0,0
Offender Violence	0,0,0,0,0				
Officer Misbehavior	1,0,0,0,19	0,0,0,0,3	0,0,0,0,11	0,0,0,0,4	1,0,0,0,1
Parole	0,0,0,0,1		0,0,0,0,1		
Personal Property	1,0,0,0,0		1,0,0,0,0		
Phone	0,0,0,0,0				
Programs	3,0,0,0,18	1,0,0,0,8	1,0,0,0,7	1,0,0,0,3	
Recreation	1,0,0,0,0			1,0,0,0,0	
Religious	0,0,0,0,2				0,0,0,0,2
Sanitation	0,0,0,0,0				
Security	0,0,0,0,0				
Sex Offender	0,0,0,0,0				
Transfer	4,1,0,0,9	0,0,0,0,2	2,1,0,0,1	1,0,0,0,6	1,0,0,0,0
Visitation	0,0,0,0,6	0,0,0,0,2	0,0,0,0,3	0,0,0,0,1	
Work	7,5,0,4,6	5,3,0,3,1	1,1,0,0,3	1,1,0,1,2	
Total	65,42,3,7,158	16,10,1,4,39	28,20,2,0,78	16,10,0,2,37	5,2,0,1,4

**Facility Key**

MCU - Madison Correctional Facility

RTC - Rockville Correctional Facility

IWP- Indiana Women's Prison

PJCF - Pendleton Juvenile Correctional Facility