



A REPORT
TO THE
MONTANA
LEGISLATURE

LEGISLATIVE AUDIT
DIVISION

15P-03

PERFORMANCE AUDIT

Oversight of Crossroads Correctional Center

Department of Corrections

NOVEMBER 2016

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PERFORMANCE AUDITS

Performance audits conducted by the Legislative Audit Division are designed to assess state government operations. From the audit work, a determination is made as to whether agencies and programs are accomplishing their purposes, and whether they can do so with greater efficiency and economy.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives. Members of the performance audit staff hold degrees in disciplines appropriate to the audit process.

Performance audits are performed at the request of the Legislative Audit Committee which is a bicameral and bipartisan standing committee of the Montana Legislature. The committee consists of six members of the Senate and six members of the House of Representatives.

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November 2016

The Legislative Audit Committee
of the Montana State Legislature:

This is our performance audit of oversight of the private prison, Crossroads Correctional Center, by the Department of Corrections.

This report provides the Legislature information about the oversight mechanisms used by the department to monitor compliance with the contract for the private prison. While audit work determined inmates at the facility are being housed according to contract requirements in most of the areas we reviewed, we did identify opportunities to strengthen oversight by the department. This report includes recommendations for enhancing oversight of the private prison in the areas of staffing levels, health services, and food service. A written response from the department is included at the end of the report.

We wish to express our appreciation to department and contractor personnel for their cooperation and assistance during the audit.

Respectfully submitted,

/s/ Angus Maciver

Angus Maciver
Legislative Auditor

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	Clinical Services	Connie Winner, Division Administrator
	Data Quality and Statistics	Mark Johnson, Bureau Chief


 MONTANA LEGISLATIVE AUDIT DIVISION

 PERFORMANCE AUDIT
 Oversight of Crossroads Correctional
 Center
 Department of Corrections

NOVEMBER 2016

15P-03

REPORT SUMMARY

The Department of Corrections exercises oversight of the operation and management of Montana's private prison, Crossroads Correctional Center. The department paid the contractor over \$15.6 million for use of this facility in fiscal year 2016 for the housing of state inmates at CCC. Although the contractor houses state inmates according to contract requirements in most of the areas reviewed, the department should enhance its oversight, particularly in the areas of security staffing, health services, and food service.

Context

The Department of Corrections (department) assigns offenders to correctional facilities and programs throughout the state. About 17 percent of the 15,413 adult offenders under department supervision at the end of fiscal year 2014 were in prison, as opposed to placement in community corrections programs or other custody or supervision. One of the prisons housing offenders in the state's custody is the privately operated prison in Shelby, Crossroads Correctional Center (CCC). This facility currently houses around 600 of the approximately 2,600 state inmates. A contract between the department and the private contractor defines the requirements for incarceration conditions at the facility. The department is responsible for ensuring CCC inmates are housed according to contract requirements and applicable correctional standards. The primary mechanisms used by the department to monitor conditions at CCC are an on-site contract monitor, an annual licensing process, and an inmate grievance system. The department also relies on other processes for monitoring the facility, such as local inspections and independent accreditations by the American Correctional Association and the National Commission on Correctional Health Care.

Concerns about conditions at CCC have been expressed to legislators by members of the public. To address these concerns and to determine the need to conduct further audit work, we administered a survey to former CCC inmates. Survey results identified four prison condition areas warranting further audit work:

- ◆ Prison staffing
- ◆ Health services
- ◆ Food service
- ◆ Housing unit temperature

Audit work was conducted in each of these four areas to determine if issues existed and whether the monitoring by the department in these areas was sufficient.

Results

Our audit work determined the contractor generally meets contract requirements in the areas of staffing levels, food service, health services, and housing unit temperature. While the department has oversight in these areas, our work identified limitations to this oversight that increase the risk for

potential issues at CCC going undetected by the department. While no deficiencies in the oversight of housing unit temperature were found, the audit report makes three recommendations to improve department oversight of operations at CCC in the other areas. These recommendations relate to enhancing department oversight by:

- ◆ Defining expectations for monitoring activities at CCC in the areas of staffing, health services, and food service, including the nature, extent, frequency, and documentation of these activities.
- ◆ Analyzing health services data from CCC and making comparisons with a similar public correctional facility.
- ◆ Requiring regular reviews of the CCC menu by an independent nutritionist and enforcing the implementation of recommended improvements.

Recommendation Concurrence	
Concur	3
Partially Concur	0
Do Not Concur	0
Source: Agency audit response included in final report.	

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Chapter I – Introduction and Background

Introduction

The mission of the Department of Corrections (department) is to enhance public safety, support the victims of crime, promote positive change in offender behavior, and reintegrate offenders into the community. Achieving this mission can involve placing offenders in correctional facilities and programs across the state. About 17 percent of the 15,413 adult offenders, approximately 2,600 offenders, under department supervision at the end of fiscal year 2014 were in prison, as opposed to placement into community corrections programs or other custody or supervision. The department uses a variety of facilities to house male inmates, including the Montana State Prison (MSP), regional prisons, and a private prison. The regional prisons are operated by county governments, while the private prison, Crossroads Correctional Center (CCC), is operated by a private contractor on behalf of the department.

Inmates from CCC and their family members have expressed ongoing concerns over the welfare and treatment of the offenders housed there, sparking legislative interest. Based on continued concerns about the facility and the prioritization of the topic by the Legislative Audit Committee, we conducted a performance audit related to the oversight of CCC by the department. Overall, we found that inmates at the facility are being housed according to contract requirements in most of the areas we reviewed. However, there are aspects of the oversight activities performed by the department that could be improved. This chapter provides information about the main oversight mechanisms used by the department and the scope, objectives, and methodologies of the audit.

Catalysts for the Audit

During the 2011 interim, we received requests from several members of the legislature to conduct a performance audit of the oversight of the contract for CCC due to concerns expressed by members of the public about the conditions there. As part of this request, the Legislative Audit Division conducted audit assessment work and determined a performance audit was not warranted at that time, as no instances of noncompliance or inhumane conditions were identified and the oversight mechanisms in place appeared to be comprehensive. Concerns about conditions at the facility continued to arise during the 2015 Legislative Session. As a result, the Legislative Audit Committee prioritized the topic for fiscal year 2015. In order to address the concerns about conditions at CCC and to avoid duplicating previous work, we conducted a survey of former inmates from CCC to identify which contract areas, if any, warranted examination.

Audit Scope

Audit work focused on oversight of CCC by the department in terms of contract compliance and the monitoring of activities at CCC. This audit does not address whether private prisons should exist in Montana and does not include a cost-benefit analysis for private correctional facilities versus state-run facilities. In determining the scope of the audit, we administered a survey to former inmates who spent time at CCC during the last three years of their most recent incarceration and had been released between October 2012 and October 2015. This allowed us to identify which prison condition areas, if any, warranted further audit work. Based on the responses to the survey, we identified four prison condition areas that warranted further work. These four areas were staffing levels, health services, food service, and housing unit temperature.

In order to evaluate services provided by CCC in the four areas identified in the survey results, we made a series of unannounced visits to the facility over the course of several months and also conducted data analysis work to measure the effectiveness of CCC operations. Our data analysis work compared CCC to MSP on basic ratios of inmates to security staff and on access and timeliness of health services. Making determinations about the effectiveness of MSP operations was beyond the scope of this audit. Rather, we analyzed CCC data and MSP data to determine whether the private facility was operating comparably to MSP. The prison populations are not identical between the two facilities. While MSP houses around 1,450 state inmates, CCC houses around 600 state inmates and around 100 federal inmates. To create an effective comparison, we excluded federal inmates from our audit work, as federal inmates are housed separately from state inmates in the facility and are managed under different requirements. Except where specifically noted, our review focused on records and activities for calendar year 2015.

Audit Objectives

Ongoing allegations of poor conditions at CCC led us to establish our first audit objective, which included a survey of former CCC inmates. Audit work addressing the first objective helped narrow the scope of the audit to four prison condition areas warranting further audit work. These four areas were staffing levels, health services, food service, and housing unit temperature. Four subsequent objectives were then developed to address each of these areas. The five audit objectives for the audit were:

1. Determine whether the experiences of recently released inmates who served time at CCC indicate conditions at CCC are in compliance with the contract for the operation and management of the facility.
2. Determine whether CCC maintains staffing levels that provide for a safe prison environment and whether the department effectively and efficiently

monitors the staffing levels, as outlined in the operations and management contract.

3. Determine whether CCC provides food service that complies with the requirements of the operations and management contract and whether the department effectively and efficiently monitors the food service at the facility.
4. Determine whether CCC provides health care services that comply with the requirements of the operations and management contract and whether the department effectively and efficiently monitors the health care services at the facility.
5. Determine whether CCC maintains environmental conditions related to temperature that comply with the requirements of the operations and management contract and whether the department effectively and efficiently monitors the environmental conditions at the facility.

Audit Methodologies

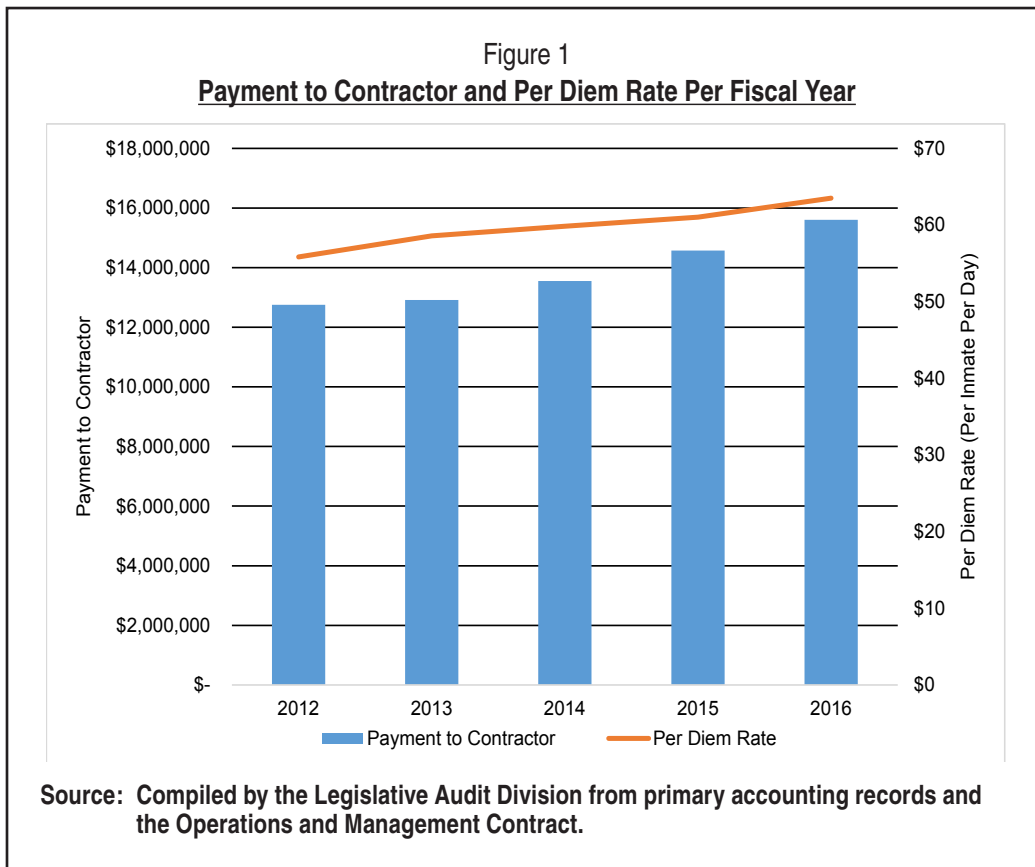
To address our audit objectives, we completed the following methodologies:

- ◆ Conducted a mail survey of former inmates of CCC to obtain their opinions about living conditions in the facility relating to contract requirements.
- ◆ Analyzed survey results in order to identify which, if any, prison condition areas at CCC warranted further audit work. Four areas were highlighted, including staffing levels, health services, food service, and housing unit temperature. The remaining methodologies were conducted in each of these four areas.
- ◆ Obtained and reviewed statute, contract requirements, administrative rule, department policy, and industry guidelines.
- ◆ Interviewed department staff, including the on-site contract monitor and off-site staff involved in oversight.
- ◆ Interviewed contractor staff, including facility managers and those involved in operations.
- ◆ Conducted five unannounced visits to CCC over the course of several months and performed observation work.
- ◆ Crosschecked CCC shift rosters with the facility's time-keeping records for four randomly selected weeks in 2015.
- ◆ Obtained and analyzed security staffing data from CCC from eight randomly selected weeks in 2015 and compared the data with staffing data from MSP on basic measures of inmate to security staff ratios.
- ◆ Obtained and analyzed 2015 health care request data from a random sample of 42 CCC inmates and compared with health care request data from a random sample of 42 MSP inmates to make determinations about access and timeliness of health care at CCC.

Crossroads Correctional Center Contract Terms

The use of private prisons to house state inmates was approved by the Montana Legislature during the 1997 Legislative Session. Two contracts now exist between the department and the private contractor at CCC: a contract for the design and build of the facility, and a contract for its operation and management. The design and build contract term is for 20 years from September 1, 1999, to August 31, 2019. At the end of the 20 years, the department may renew the design and build contract for up to two 5-year periods or may purchase the facility. The contract for the operation and management of CCC was awarded in 1998 and housing of state inmates in the facility began in 1999. The contract term for the operation and management of the facility began September 1, 1999, with the option to renew every two years, and ends June 30, 2019. At the end of this term, the department may choose to assume operations of the facility or to continue to contract for its operation. This audit focused on the operations and management contract for CCC and is referred to as the contract in this report.

The department pays the contractor a per diem rate that changes annually in consideration of the services provided. The per diem rate is \$64.73 per state inmate per day for fiscal year 2017. Figure 1 shows what the department has paid the contractor based on the per diem rates for fiscal years 2012 through 2016.



The per diem rate has increased from \$55.84 per inmate per day in fiscal year 2012 to \$63.51 per inmate per day in fiscal year 2016. Increases to the per diem rate reflect legislatively approved increases to this rate within the appropriations process. While the per diem rate has increased each fiscal year, the total payment to the contractor is based on the number of state inmates housed at CCC. Therefore, the increase in the per diem rate may not result in a proportional increase in payment to the contractor. CCC currently houses around 600 state inmates and around 100 federal inmates who are statutorily required to be housed separately from the state inmates. State inmates are assigned to the facility by the department based on a number of factors, such as the inmate's classification and custody level, health needs, security concerns, victims' issues, and program needs.

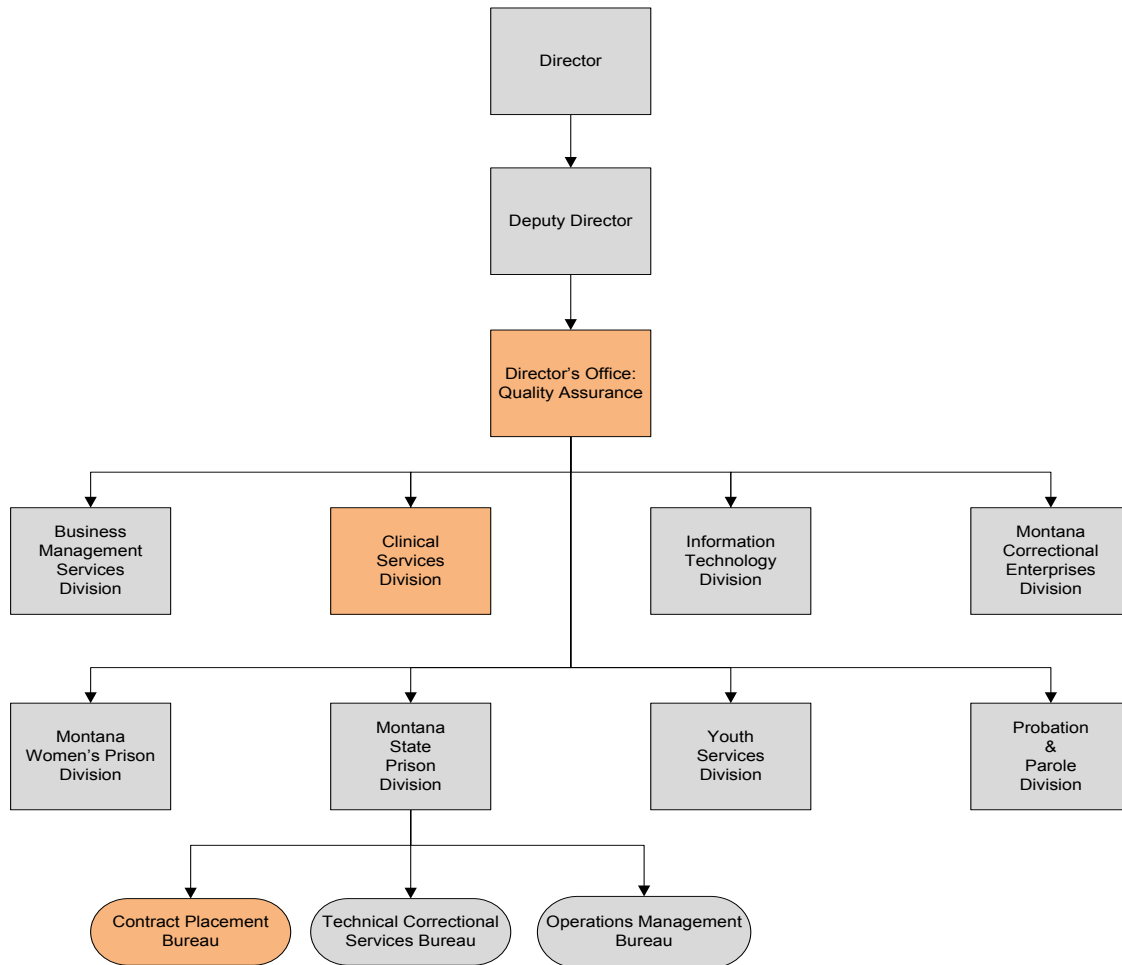
The Department of Corrections Is Responsible for CCC Oversight

State law authorizes the department to use private correctional facilities, such as CCC, to confine persons convicted of crimes. Statute requires the department to oversee private correctional facilities by:

- ◆ Authorizing their construction and operation.
- ◆ Deciding which inmates are housed in them.
- ◆ Adopting administrative rules related to the security, safety, health, treatment, and discipline of persons confined in them.
- ◆ Conducting annual licensing inspections of them.
- ◆ Biennially reporting results of these inspections to the legislature.

The department is made up of several divisions responsible for the various correctional programs and facilities in the state, one of which is the Montana State Prison (MSP). The function of MSP is to provide male felony offenders with a secure environment, which includes oversight of contract beds in regional and private prisons. While the most direct oversight of CCC is done by MSP staff within its Contract Placement Bureau, additional oversight activities are performed by other parts of the department. Figure 2 (see page 6) highlights the functions of the department that conduct the primary oversight activities related to CCC, which are described in more detail later in this chapter.

Figure 2
Department of Corrections Organizational Chart



Source: Compiled by the Legislative Audit Division from department information.

Primary Oversight Mechanisms

The operations and management contract specifies requirements in many areas, such as staffing, security, health services, food service, and access by the department. The department relies on a variety of mechanisms to oversee compliance with the contract and to monitor activities at CCC. The primary mechanisms relied upon by the department include an on-site contract monitor, an annual licensing inspection, an inmate grievance process, and outside accreditation processes and inspections. Each of these are discussed in the sections below.

MSP Contract Placement Bureau: On-Site Contract Monitor

The most direct oversight of CCC by the department occurs by means of a full-time, on-site contract monitor. The contract monitor is employed by the department and reports directly to the MSP Contract Placement Bureau Chief. The contract monitor has an office within the facility and has full access to the facility and facility records. The monitor conducts various daily monitoring activities, such as walkthroughs of the facility, and provides monthly reports to the department addressing each contract area, such as personnel, security and control, health services, and food service.

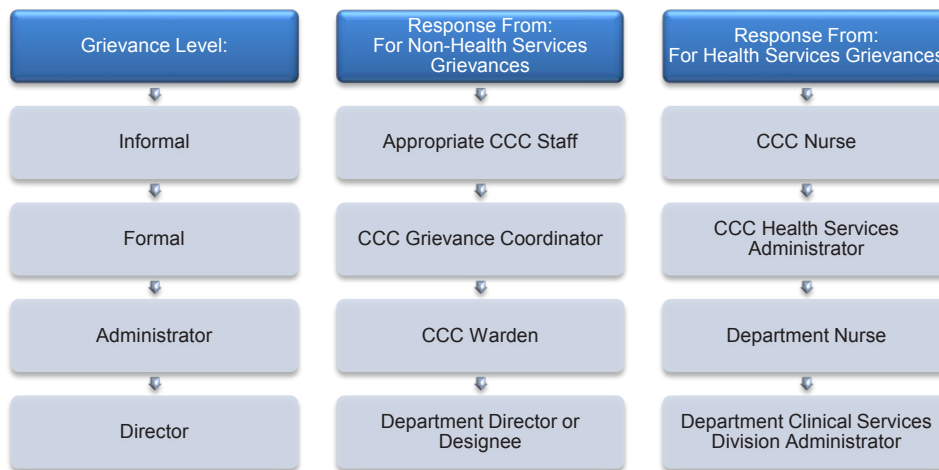
Quality Assurance Office: Annual Licensing Inspection

While the Contract Placement Bureau is responsible for daily oversight duties, state law requires the department to annually license private correctional facilities and to inspect them to determine compliance with applicable standards, department rules, and contract requirements. This is completed by the Quality Assurance Office, which is part of the department's Director's Office. This licensing process involves a team of various department staff, such as staff from MSP, policy professionals, and health care professionals, visiting the facility every fall. The team uses a licensing instrument during this process, which is a checklist used to document compliance with the requirements outlined in the department's administrative rules. The department is statutorily required to submit biennial reports on these compliance inspections to the legislature.

Inmate Grievance Process

Per contract requirements, CCC must have an inmate grievance process that substantially complies with the department's inmate grievance policy. While the grievance process at CCC does not include direct oversight by the department, it plays a role in the department's ability to assess conditions at CCC. Inmates at CCC can file written complaints about issues they perceive within the facility, such as food service, staff conduct, health care, and other conditions of confinement. These complaints are resolved in a four-stage grievance process. Either contractor or department staff respond at each stage of the grievance process, depending on whether the grievance was related to health services. The flow chart (see page 8) shows each of the four stages of the grievance process and the staff responsible for responding to the inmate's grievance.

Figure 3
Inmate Grievance Process at CCC



Source: Compiled by the Legislative Audit Division from department information.

Outside Accreditation and Inspections

The department also relies on outside oversight mechanisms such as accreditation and inspections. State law requires private correctional facilities to conform to applicable American Correctional Association (ACA) and National Commission on Correctional Health Care (NCCHC) standards. To this end, the contract for CCC requires the contractor to achieve and maintain ACA and NCCHC accreditation for the life of the contract. The accreditation processes for the ACA and NCCHC involve on-site reviews by accreditation teams from the ACA and NCCHC about every three years. The contractor is also required to file documentation with these entities in between their on-site reviews to renew the accreditation each year.

The contractor must also follow applicable federal, state, and local laws, rules, and regulations such as health and safety codes. Therefore, CCC is subject to state and local inspection authorities such as the state fire marshal and the county health department. CCC also operates a licensed, six-bed infirmary within the facility, which includes a separate, triennial infirmary licensing process conducted by the Montana Department of Public Health and Human Services.

Report Contents

The remainder of this report includes additional background and details our findings, conclusions, and recommendations. It is organized into five additional chapters:

- ◆ Chapter II describes how a mail survey of former inmates from CCC was used to determine which prison condition areas warranted further audit work.
- ◆ Chapter III addresses staffing levels at CCC and how the department should better define the expectations for monitoring activities related to staffing.
- ◆ Chapter IV discusses access and timeliness of health services at CCC and how the department should improve its oversight in this area.
- ◆ Chapter V explains how food service is provided at CCC and how the department should strengthen its oversight in this area.
- ◆ Chapter VI presents information on how housing unit temperatures are maintained and monitored at CCC and explains how the department is providing satisfactory oversight in this area.

Chapter II – Survey of Former Inmates

Introduction

In 2011, we performed audit assessment work related to the contract oversight of Crossroads Correctional Center (CCC) based on legislative interest. At that time, we determined a performance audit was not warranted. However, the Legislative Audit Committee prioritized a performance audit to evaluate oversight of the private prison for fiscal year 2015 based on continued concerns about conditions at the facility. An often overlooked source of data that can be used to evaluate incarceration conditions is a survey of inmates. In order to address the concerns about confinement conditions at CCC, we administered a survey to former inmates who were incarcerated there. We used the results of the survey to help define the scope of the audit by identifying areas where the Department of Corrections' (department) oversight of CCC operations warranted further audit work. Based on former inmate responses, four prison condition areas warranted further audit work, including staffing levels, health services, food service, and housing unit temperature. This chapter provides more information about the survey we conducted and the results we obtained.

Overview of the Survey Methodology

Surveys of inmates can be used to obtain information about the prisons in which they are incarcerated. In order to address concerns about incarceration conditions at CCC, we developed a mail survey of former inmates of CCC. The survey included basic questions related to conditions at CCC in several areas relevant to contract requirements, including:

- ◆ Safety and security
- ◆ Health services
- ◆ Food service
- ◆ Religious programming and activities
- ◆ Access to rules and policies of the facility
- ◆ Recreation
- ◆ Visitation
- ◆ Mail services
- ◆ Access to legal assistance
- ◆ The grievance process
- ◆ Segregation
- ◆ Access to hygiene products
- ◆ Environmental conditions

- ◆ Involvement of facility staff in sentence or parole decisions
- ◆ Educational programs

The survey also included an opportunity for respondents to provide comments. Survey respondents generally provided detail in the comments regarding their specific concerns about the facility. For example, the respondents would describe particular experiences or expound on their answers to survey questions. Legal counsel from the Legislative Audit Division reviewed the comments to identify any potential legal considerations. The comments were used as further context for analyzing responses to individual questions.

Obtaining Unbiased and Confidential Information from Former Inmates

Obtaining unbiased information from incarcerated individuals is often difficult. Inmates may not always be forthcoming about conditions inside of prisons. One reason for this is actual or perceived intimidation or retaliation from corrections officials. Because our audit was initiated, at least in part, due to allegations of abuse, mistreatment, or poor conditions at CCC, it was important that our work be based on credible information. To avoid bias in the results, we deliberately addressed our survey only to former inmates who were no longer in secure facilities. We also provided respondents with strict confidentiality, including an assurance that their individual responses would not be shared with corrections officials. In combination, these measures were designed to minimize negative repercussions for former inmates and promote honest and forthright disclosure.

We mailed the survey to 382 individuals who had been incarcerated at CCC during the last three years of their most recent incarceration and had been released from CCC between October 2012 and October 2015. The individuals who received the survey were former inmates of CCC and were either out on probation and parole or were in another facility such as a prerelease, a treatment program, or county jail. We did not mail the survey to individuals who left CCC to return to the state prison. Survey recipients were given three weeks to complete and return the survey.

Analyzing Survey Results

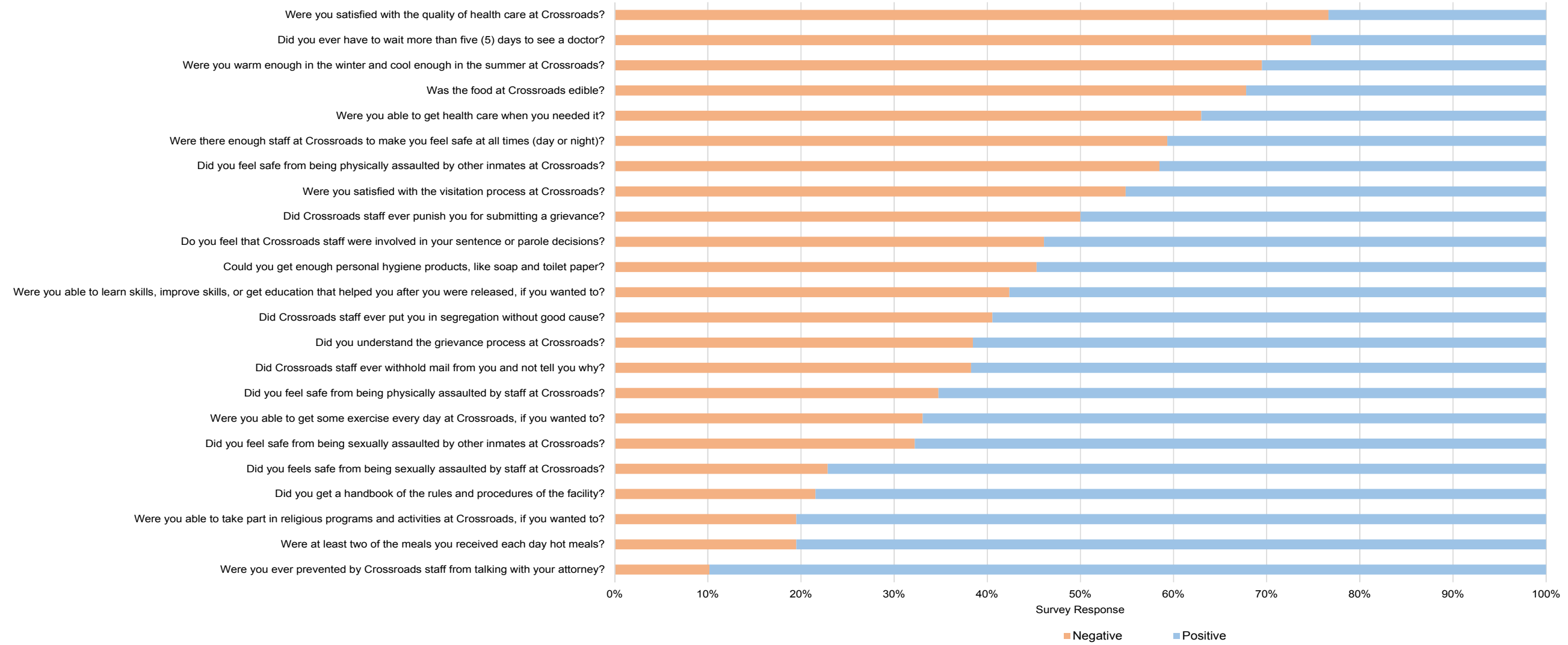
Of the 382 individuals to whom the survey was mailed, 118 responded, for a response rate of 30.9 percent. We considered this number of responses to be sizeable and to represent a large enough portion of the survey population to conduct a meaningful analysis of inmate concerns regarding conditions within the CCC facility. We conducted a nonresponse analysis to verify the group of survey respondents was representative of the intended former inmate population. For example, we considered the representative

nature of the respondent group in terms of factors such as incarceration length, race, and offense type. We then used the survey results to identify which, if any, prison condition areas warranted further audit work.

The survey questions asked former inmates for their opinions on various prison condition areas, such as food and health services, among others. Before the survey was administered, we estimated a negative response level for each question. The negative response level for each question represented a level of negative response that could reasonably be expected on a typical inmate survey based on national surveys, studies, and other sources. For example, one of the questions on the survey was “Were you able to get health care when you needed it?” We determined the negative response threshold for this question to be 30 percent, based on national research and surveys in other states, meaning that if the survey response rate exceeded 30 percent we would examine the risk in that area. Additionally, we considered that some proportion of respondents might respond negatively to almost all survey questions due to the fact that they were incarcerated.

Once the survey responses were obtained, we categorized responses to each question as being positive or negative. For example, a yes response to the question “Were you satisfied with the quality of health care at Crossroads [CCC]?” was considered positive, while a yes response to the question “Did Crossroads [CCC] staff ever punish you for submitting a grievance?” was considered negative. Figure 4 (see page 14) shows the proportion of negative versus positive responses to each question on the survey of former CCC inmates ranked by the proportion of negative response.

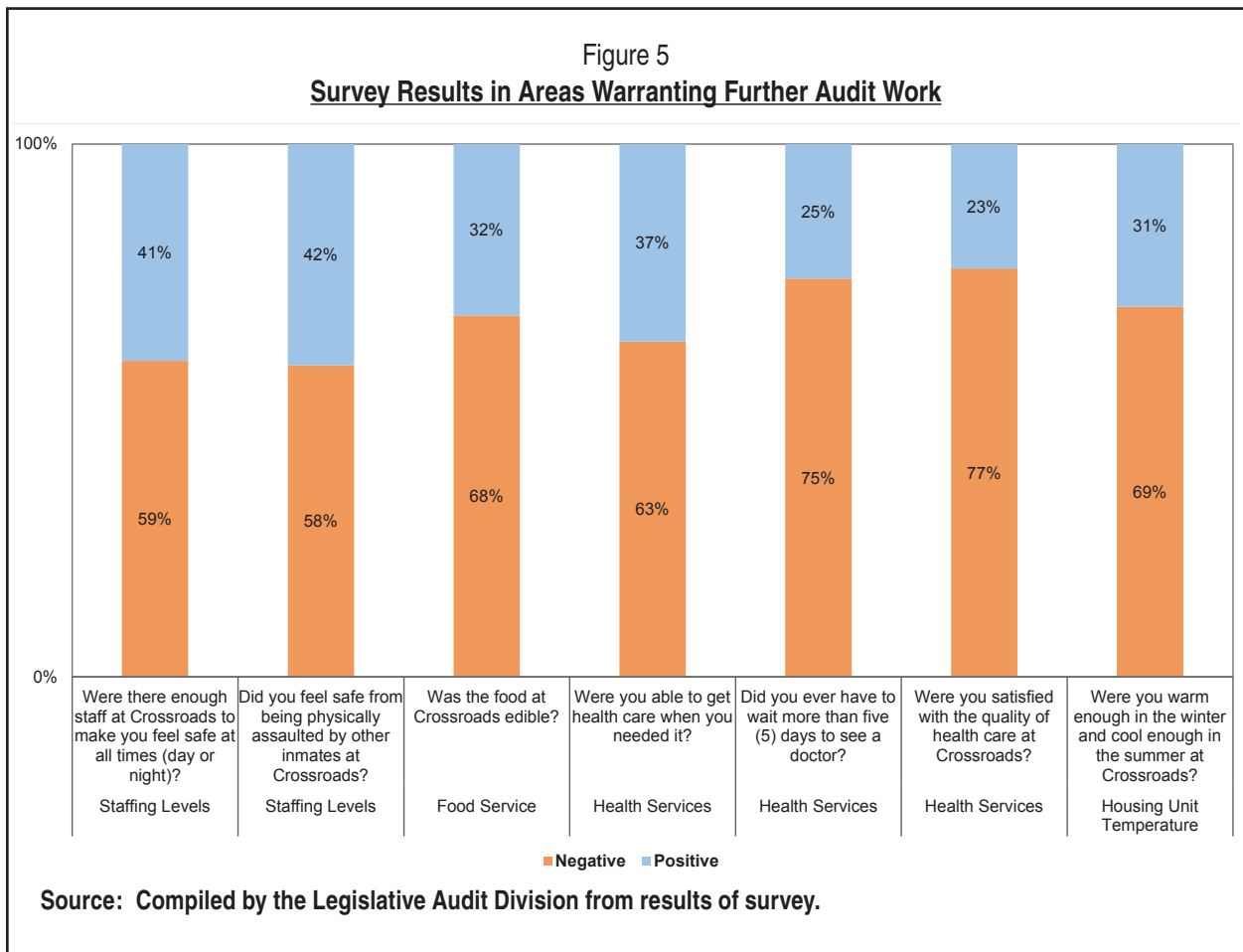
Figure 4
Results of Survey of Former CCC Inmates Ranked by Negative Response



Source: Compiled by the Legislative Audit Division from results of survey.

Survey Results Indicated Four Areas Warranted Further Audit

The survey results indicated most former CCC inmates did not perceive issues in every prison condition area. That is, in some areas, there was a relatively large percentage of respondents that responded positively, such as in the question related to access to an attorney. This allowed us to hone in on the prison condition areas representing the most risk in terms of the perception of the condition by former CCC inmates. Based on the results of the survey of former inmates, four prison condition areas had high levels of negative response, surpassed the expected negative response levels, and warranted further audit work. These areas were staffing levels, food service, health services, and housing unit temperature. Figure 5 below shows the survey responses in each of these four areas.



Audit work was then conducted in each of these four areas to make a determination about actual, as opposed to perceived, issues in that area or issues with contract oversight by the department. The following chapters describe the audit work conducted in these four areas and the resulting conclusions, findings, and recommendations.

Chapter III–Oversight of Security Staffing

Introduction

The staffing of correctional officers is an essential part of maintaining safety and security within a correctional facility. Our survey of former inmates identified the need to conduct further audit work related to staffing levels at Crossroads Correctional Center (CCC). The operations and management contract for CCC includes minimum security staffing requirements. This chapter describes our work to determine whether required security staffing levels are maintained by the contractor at CCC and whether the oversight of security staffing at the facility by the Department of Corrections is sufficient. Overall, we found that the contractor is meeting minimum security staffing requirements, as per contract specifications. However, we identified an aspect of department oversight in this area that should be improved.

Contract Requirements for Staffing

The contract for CCC outlines the minimum requirements for staffing patterns, mandatory security posts, and employee pay. Mandatory security post requirements in the contract identify the security posts within the facility and specify which ones must be occupied by a correctional officer on a daily basis. For example, there are 30 mandatory security posts for the day shift, three of which are security posts that must be staffed at all times within each of the two main state inmate housing units. The contract requires the contractor to notify the department's on-site contract monitor when mandatory posts have been vacant for more than two hours.

The contract also authorizes the number of positions at the facility. The contract currently authorizes 176.6 staff, with 15 designated for management and support, 58 for security operations, and 61.4 for unit management. The rest are designated for maintenance, services, programs, and health services. The contract requires the contractor to notify the department's on-site contract monitor when positions become vacant. If a position is left vacant for longer than 90 days, the contractor incurs a financial penalty, though the contractor can request a 30-day extension for filling the position.

Additionally, the contract requires the contractor to e-mail prior daily shift rosters to the department as documentation of security staff post assignments. This is typically done by the Chief of Security from the facility. The contractor must also print daily time records to confirm the attendance of staff reflected on the shift rosters and maintain them for one year. The contract monitor must have access to these records at all times. Other contract requirements necessitate sufficient training for staff and compliance with federal and state laws related to employment.

Staffing at Crossroads Correctional Center

The facility has a staff member designated as the Master Scheduler whose duties include preparing each shift's staff roster listing the correctional officers scheduled to work each security post. The shift roster is used throughout each shift to track when and which officers cover each security post. Security officers at the facility work 12-hour shifts, with the day shift being 6:00 a.m. to 6:00 p.m. and the night shift being 6:00 p.m. to 6:00 a.m. Some posts are only scheduled for part of the shift, such as a recreation officer. There are 30 mandatory security posts for day shifts, though two of them are visitation officer posts only staffed on weekends. During night shifts, there are 20 mandatory posts. Both day and night shifts include one or two relief officer posts that may be closed during the shift, if not needed.

Management at CCC indicated they have some ability to forecast the need for extra security staff. For example, when they become aware of inmate transport needs or when they plan to search the facility, they can schedule extra security staff. When security staff are late or absent for a shift, the contractor has several options for filling a security post. They can hold over staff from the previous shift, try to find a replacement, or use the shift relief officer.

Security officers "punch in and out" for each shift at a time clock using both their badge and fingerprint near the entrance of the facility, after going through a security screening process. Only nonexempt employees must punch in for their shift. There were 47 exempt employees during calendar year 2015 who were not required to punch in. Some examples of exempt employees at the facility are captains, lieutenants, human resources, and business staff. When nonexempt staff punch in at the time clock, these records are maintained in the contractor's electronic time-keeping system. Time-keeping system reports are pulled daily by contractor staff to verify that individuals listed as manning the security posts for each shift punched in. The warden of CCC also reviews the shift rosters weekly.

Data Analysis Indicated CCC Meets Security Staffing Contract Requirements

Audit work related to staffing included a review of staffing data from CCC. We obtained the daily shift rosters, time-keeping system reports, and inmate counts for eight randomly selected weeks from calendar year 2015. We crosschecked the shift rosters with the time-keeping system reports for four of these randomly selected weeks. While this crosscheck did not verify officers worked the posts they were assigned, it did verify the scheduled security staff were in the facility during the time of their shifts.

The results of this review showed the shift rosters were confirmed by time-keeping system reports, indicating scheduled staff was at the facility during their shifts. However, during the course of this work we found out the historical reports generated from the time-keeping system we were provided did not initially include employees that no longer worked at the facility. Contractor staff later learned they needed a different level of access in the time-keeping system in order to pull historical weekly reports that show former employees. We followed up with contractor staff on a handful of instances where the historical rosters did not align with time-keeping reports. With increased access in the time-keeping system, contractor staff was able to verify the accuracy of the shift roster for these instances, with the exception of one shift where the roster was not updated to reflect the closing of a non-mandatory post in order to cover a mandatory post.

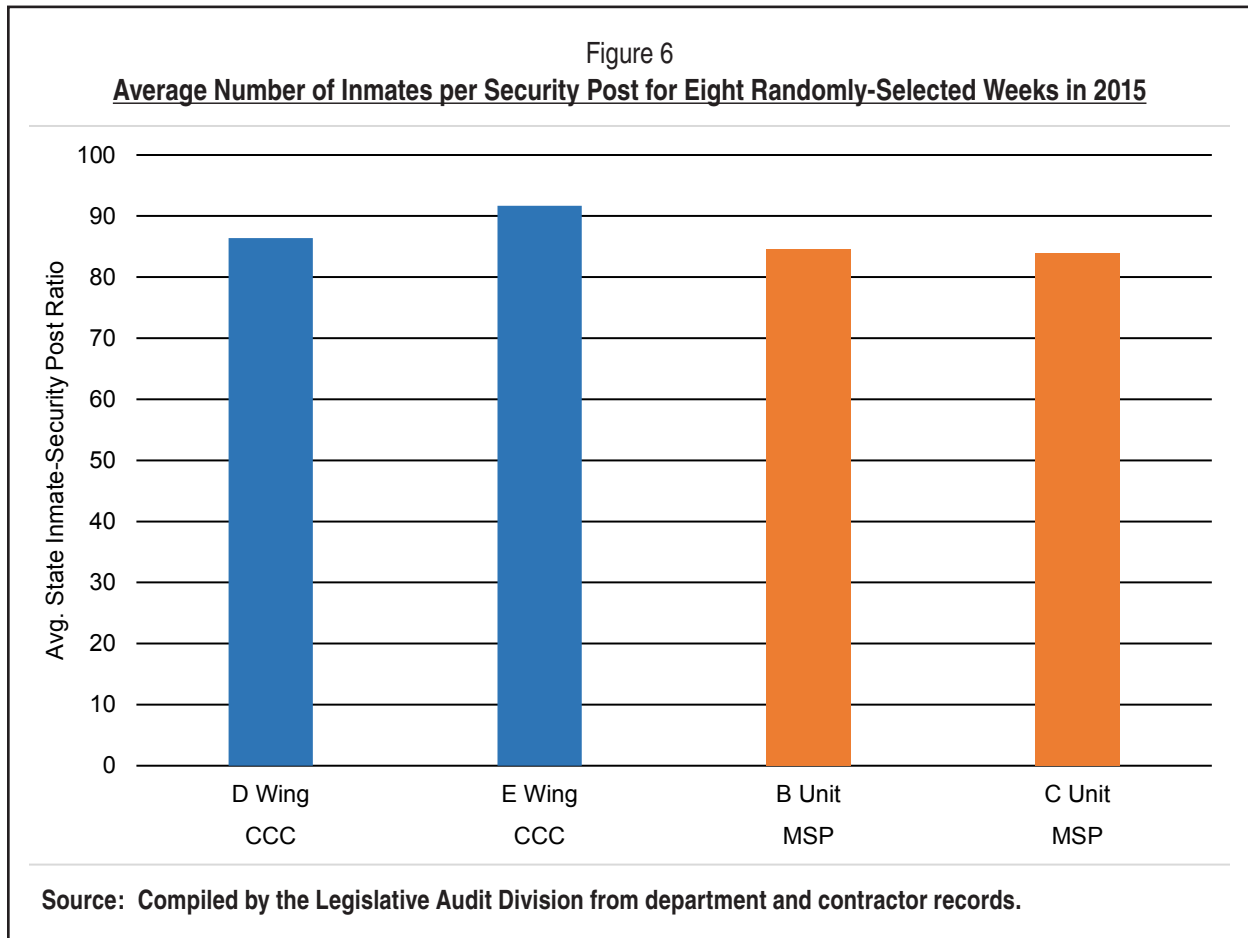
Part of our audit work also included five unannounced visits to CCC. During these visits we used the live shift roster to verify the correct staff were covering the mandatory posts in the two main state inmate housing units. During one visit there were two correctional officers covering security posts within the housing units that did not match the live roster. CCC management explained that adjustments had been made due to officer trainings taking place that day that were not reflected on the live roster. During each of our five unannounced visits, we observed that the mandatory security staffing level in the two main state inmate housing units was met.

Comparison of Security Staff to Inmate Ratios Indicated Comparable Security Staffing Levels

In order to get an understanding of the basic level of supervision of inmates by security staff at CCC, we conducted a comparison of inmate-security staff ratios at CCC to inmate-security staff ratios at the Montana State Prison (MSP). Before the results of this analysis can be understood, it is important to acknowledge the two prisons differ in a number of areas that may influence staffing needs, such as facility design, recruiting challenges, number of shifts, the nature of the offender population, programming and services, and how staffing is monitored and documented. For example, MSP is a compound of several buildings, houses offenders of higher custody levels than CCC, and has three shifts for security staff. In contrast, CCC is primarily under one roof and has two shifts for security posts. While we recognize that staff-inmate ratios do not capture or illustrate all areas influencing staffing needs, we determined a comparison of security staff-inmate ratios between MSP and CCC would provide a basic understanding of any large differences in staffing levels between the two facilities.

Using staff and inmate count data obtained from both facilities, we compared them on the ratio of total state inmates to security staff for the eight randomly selected weeks

in 2015. We excluded from this analysis the federal inmates at CCC and the security staff in the federal inmate housing unit. On average, CCC had a slightly higher total ratio of inmates to security staff during the day shift, but was similar to MSP on this ratio for the night hours. The D Wing and the E Wing house the majority of the state inmates at CCC. Based on input from department staff, we determined Housing Units B and C at MSP are most similar to these CCC housing units in terms of the custody levels of the offender populations that reside in them. We compared CCC and MSP on the average state inmate to security staff ratios over the eight weeks in 2015 for these housing units. Below is a chart showing the comparison:



Both the housing units at MSP and the housing wings at CCC had an average of around 80 to 90 state inmates per security post. That is, the ratio of state inmates to security staff was similar between Housing Units B and C at MSP and the D and E Wings at CCC. It should be noted that while there are around 80 to 90 inmates per security post, there are typically other types of staff available nearby that are also trained to deal with safety and security issues related to inmates, such as case managers. While the ratios were similar, the E Wing had a slightly higher average ratio than the D Wing at CCC. One reason for this is that the D Wing at CCC contains one pod

that houses all the close custody state inmates within the facility. Close custody is the second most secure custody level, between medium-high and maximum security. Inmates in other custody levels are not permitted to be housed with these close custody inmates, translating to an inmate population in the close custody pod that is generally lower than other pods. Therefore, the total inmate population in the D Wing is typically lower than the inmate population in the E Wing, with both wings having the same number of mandatory security posts.

While there are some guidelines related to the ratio of inmates to staff, best practices for the ratio of inmates to security staff on post within a correctional facility are less clear. The appropriate ratio of inmates to security staff on post depends on a number of factors, such as the design of the facility, the nature of the inmate population, and the programming and services available within the facility. Our comparison of inmates to security staff between MSP and CCC showed the security staffing levels at CCC are comparable to its state-run counterpart, at least for the housing units at CCC that contain the majority of state inmates.

CONCLUSION

The contractor for Crossroads Correctional Center meets the security staffing requirements in the contract and these staffing requirements provide for a security staffing level similar to Montana State Prison.

Limitations in the Monitoring of Security Staffing by the Department

While we found the contractor was meeting contract requirements related to security staffing, we identified an area for improvement in the oversight of security staffing by the department. The main monitoring activities conducted by the department related to staffing are conducted by the on-site contract monitor and the department's Quality Assurance Office licensing team. In addition to periodic walkthroughs of the facility, the contract monitor crosschecks two randomly selected shifts per month with electronic time-keeping reports. The shifts checked are typically from two different days, one day shift and one night shift. While the contract monitor performs these crosschecks each month, there are no defined expectations from the department as to the type, frequency, nature, and documentation of the monitoring activities necessary to constitute sufficient monitoring of CCC staffing. We consider the crosschecking of two shifts per month by the contract monitor to be minimal considering that, during the course of a month, there are 60 shifts equating to around 1,500 individual posts.

As part of contract monitor duties, the contract monitor compiles a monthly report for the department on contract monitoring activities. One of the sections of this monthly report relates to staffing at CCC and typically includes information on:

- ◆ Number of vacant correctional officer positions.
- ◆ Results of the crosscheck of two shift rosters with time-keeping reports.
- ◆ General observations from walkthroughs within the facility.
- ◆ Number of hires, terminations, promotions, and transfers.
- ◆ Training for correctional officers.

While the on-site contract monitor performs daily oversight activities, the annual licensing conducted by the department's Quality Assurance Office includes some verification of staffing. The most recent licensing review took place in November 2015 for the calendar year 2016 license. Previous licensing reviews have identified issues related to staffing at the facility, such as an issue with filling positions within the time frames described in the contract. The licensing process primarily includes some level of staff verification that:

- ◆ The current staff rosters align with current contract requirements.
- ◆ Background checks are conducted on employees.
- ◆ Personnel files are maintained.
- ◆ Staff are trained.

According to department staff, the annual licensing process includes some crosschecking of shift rosters with payroll data. This process has identified some issues with security staffing at CCC in the past. However, as previously discussed, in our review of staffing data from the facility we identified an issue in crosschecking shift rosters with historical time-keeping system reports, of which the contractor and the department were unaware. This circumstance generates concerns with the extent of the verification of historical rosters during the annual licensing process.

The department relies, to some extent, on the contractor to self-report issues with staffing. The contract requires the contractor to notify the department's on-site contract monitor when they become aware of a potential or actual mandatory post vacancy of more than two hours. The contractor must also e-mail the department the previous day's shift rosters. However, these shift rosters alone do not verify scheduled staff actually worked their posts. Rather, these shift rosters indicate which staff were scheduled to work each security post within the facility. This presents a significant reliance on the contractor to come forward to the department when staffing issues arise.

Defined Expectations Needed in the Monitoring of Security Staffing

The Association of State Correctional Administrators (ASCA) manual on the Monitoring of Correctional Services Provided by Private Firms emphasizes the need to have defined expectations for on-site contract monitoring activities. It states, “To be certain the contract monitor is working diligently, benchmarks should be developed to ensure the monitor is out in the field performing direct monitoring tasks...” It goes on to discuss the need for the department to determine what the monitor should review and how often it should be reviewed. The department is ultimately responsible for determining the nature and scope of contract monitoring activities that will provide efficient oversight of CCC, including communicating the who, what, when, where, and why of those activities.

While the department has several mechanisms in place for monitoring security staffing at CCC, there are some limitations in the level of actual verification of security posts. Because the oversight of security staffing by the department has limitations, there is an increased risk that potential staffing issues could go undetected by the department and the department may not know whether mandatory staffing levels are truly being met. When issues with staffing levels and the staffing of mandatory posts occur, it has the potential to negatively influence the safety and security of inmates, staff, and the public.

RECOMMENDATION #1

We recommend the Department of Corrections improve oversight of Crossroads Correctional Center security staffing by defining the expectations for on-site oversight activities including the type, frequency, extent, and documentation necessary to verify mandatory security staffing levels are being met.

Chapter IV– Inmate Health Care Services

Introduction

Inmates at Crossroads Correctional Center (CCC) obtain health services through the facility's medical unit. This chapter describes the work conducted to determine whether access and timeliness requirements related to health services are being met and whether the oversight and monitoring of health services at the facility by the Department of Corrections are sufficient. Overall, we found that, while CCC meets the access and timeliness requirements for the initial triaging of health services requests, it does not always meet other contract requirements related to timeliness. We determined the department should do more to monitor health services at the facility in order to ensure CCC meets contract requirements related to health services and inmates are able to access timely health care.

How Inmates Access Health Services at CCC

Offender health care needs must be considered when assigning them to a correctional facility. Inmates are determined to be eligible for housing at CCC by the department partially based on the extent of their health care needs. The department considers factors related to health care when assigning inmates to CCC to ensure the health services available at CCC are sufficient to meet the health needs of the inmate. Inmates who are assigned to CCC are transferred there with their medical records. A variety of health services are provided in-house at the facility, including medical, psychiatric, dental, vision, pharmaceutical, and psychological services.

Inmates access non-emergency health care at CCC by submitting written health care requests (HCRs) to the facility's medical unit. HCRs are submitted by inmates for a variety of reasons. They are not always symptom-related or submitted for the purpose of getting an appointment with a health care professional. Inmates can submit requests for other reasons, such as to see medical records or to inquire about their medications. Inmates drop their completed HCR forms into a locked box within their housing unit.

Only health services staff at CCC have access to the locked box where inmates submit HCR forms. The forms are collected nightly by a nurse, logged, and triaged. Inmates who submit HCRs indicating a symptom must be triaged and seen face-to-face by a nurse within a 48-hour time frame. Other types of HCRs may be addressed according to different time frames. The medical unit responds to the inmate regarding his request on the HCR form and returns it to the inmate. The existence of an upcoming scheduled appointment is indicated in the response section on the form and an appointment schedule is posted on a bulletin board within the inmate housing units. Inmates can then attend scheduled appointments in the medical unit. This process of submitting

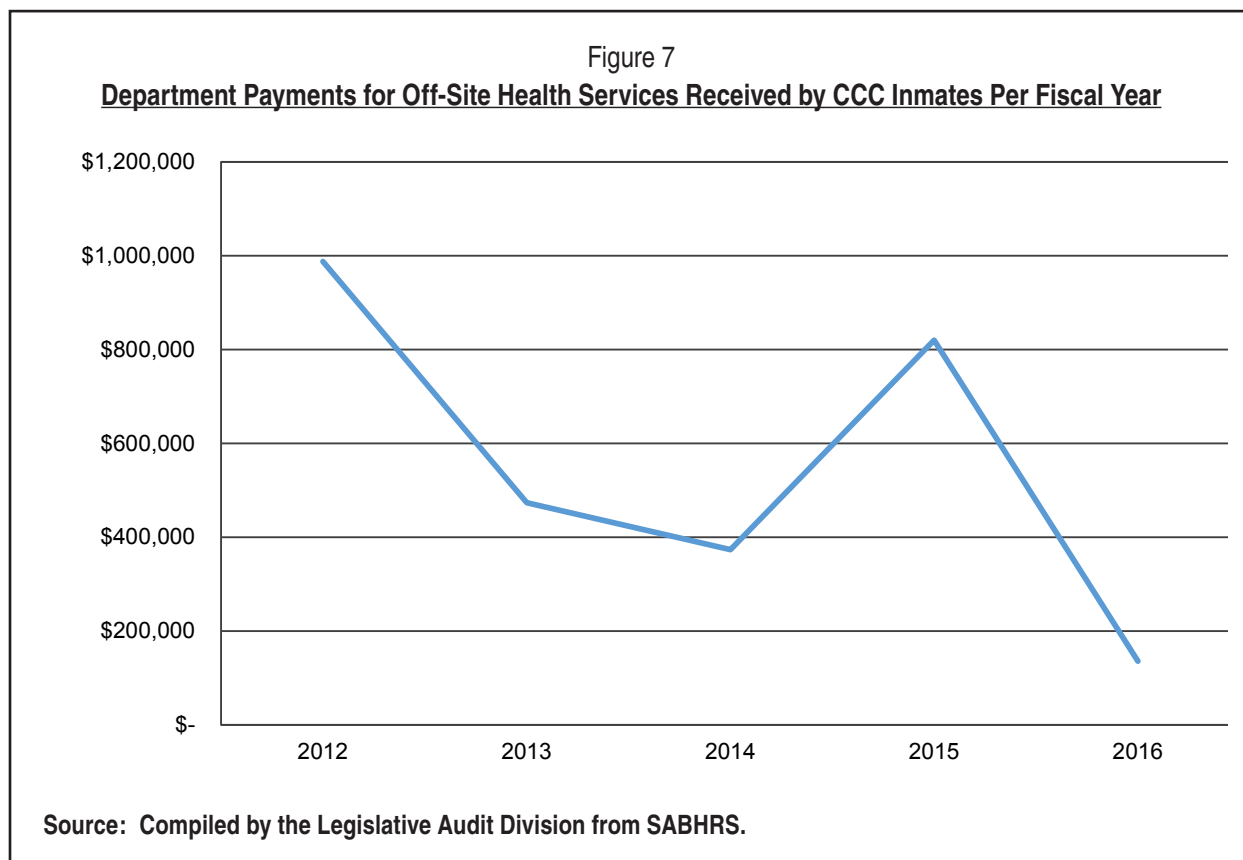
HCRs and scheduling visits is referred to as the sick call process. There are many HCRs submitted by inmates within CCC. The American Correctional Association (ACA) noted in its 2015 review of CCC that there are about 300 HCRs received in the medical unit at CCC each month.

Challenges in Correctional Health Care

Several challenges in correctional health care were raised during the course of audit work by both department and contractor health care staff. It is important to keep these challenges in mind when considering health services in prison. Inmates often have had little to no health care before incarceration. As a result, inmate populations tend to have more health issues than the general population. Additionally, inmates are more likely to have a lack of understanding of the community nature of health care in prison, how health care has changed, and the need to be proactive about one's health. These challenges can lead to misperceptions that contribute to the number of complaints and grievances related to health care in prison. For example, inmates may not understand that individuals in the community encounter similar challenges in seeing specialists in a timely manner. This contributes to the poor perception of health services in prison by inmates, which in turn can negatively impact the perception held by their family members.

CCC Correctional Health Care Costs

The contractor charges the department a per diem rate per inmate per day in consideration of the services provided. The per diem rate for fiscal year 2017 is \$64.73 per inmate per day for each state inmate housed at CCC. This per diem includes health services that are provided on-site in the CCC medical unit. Off-site health care services are billed to the department, though the contract states the contractor is responsible for the first \$1,000 of all off-site services per inmate per fiscal year that are not related to inpatient hospitalization. The medical unit at CCC must obtain pre-approval from the department for most off-site services. Figure 7 (see page 27) shows the amount the department has paid for off-site health services received by inmates at CCC for the last few fiscal years.



Expenses for off-site health services received by CCC inmates can change significantly from year to year, as seen in the figure. This is because the number and type of off-site health services needed by CCC inmates can vary from year to year, with a small number of inmates requiring more expensive off-site health services in some years. Department staff indicated the department's payment for off-site health services received by CCC inmates for fiscal year 2016 may be lower than previous years due to the expansion of Medicaid benefits and a change in the allocation of offender medical expenses.

Managing correctional health care costs presents a challenge in many states. The department aims to provide health care services to offenders under a system called managed care. Managed care is defined in department policy as "a health care delivery system designed to balance quality of services, access to care, and containment of costs." The concept of managed care is central in determining what health services should be provided to inmates in terms of what is medically necessary. Medical necessity generally refers to the accepted health care services appropriate, reasonable, or necessary for the evaluation and treatment of the inmate, according to applicable standards of care. Health care providers at CCC make the initial decision as to what services are "medically necessary" based on their professional medical assessments.

Medical cases where there is difficulty in determining the appropriate level of therapeutic care or whether a treatment is medically necessary can be resolved by the department's Medical Review Panel, a group of health care professionals designated by the department to review complex inmate health care cases.

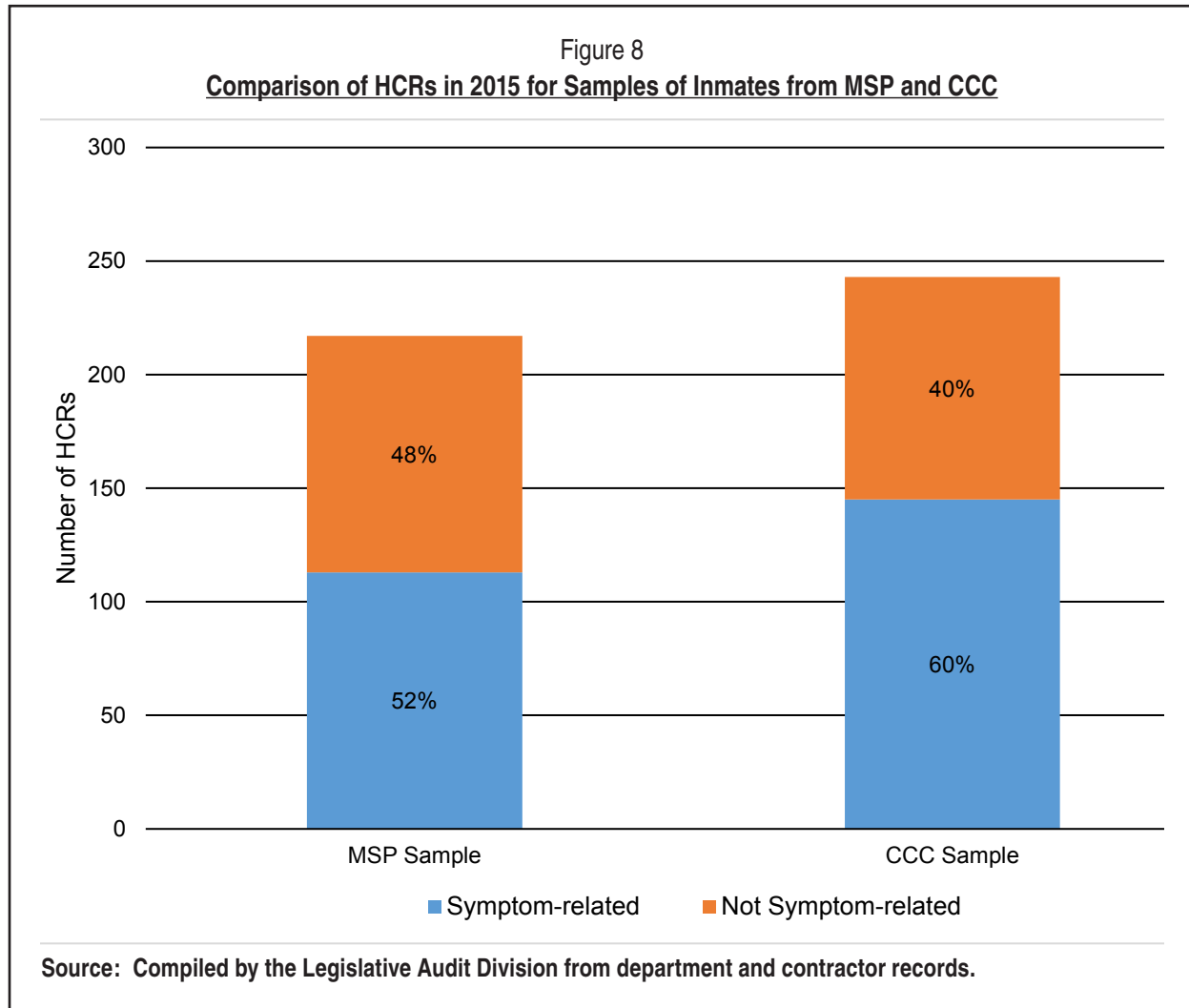
The Department Relies on Outside Accreditation

Department staff indicated they rely to some degree on the independent accreditation processes by the American Correctional Association (ACA) and the National Commission on Correctional Health Care (NCCHC) as one of the primary oversight mechanisms related to health care at CCC. Specific to health services, state law and the department's contract with CCC require the facility to maintain accreditation with the NCCHC, a nationally-recognized source for standards related to correctional health care. There are 69 NCCHC standards, some of which are marked as "essential" and some as "important." To be accredited, CCC's medical unit must meet all essential standards and at least 85 percent of the applicable important standards. NCCHC standards address a variety of aspects of health services in prison, such as available services, patient care, special needs, and personnel records and training. Some of the NCCHC standards speak to access and timeliness of health care in prison. For example, one NCCHC standard is that an inmate should be able to submit a HCR expressing having a symptom and be seen face-to-face by a health professional within 48 hours. HCRs that are not related to a symptom do not have this same timeliness requirement.

Initial Access and Timeliness Requirements Are Being Met

Audit work related to health services included an examination of the initial access and timeliness of health services at CCC. Inmates at CCC access health care in a process similar to MSP by submitting written HCRs to the facility's medical unit. Both MSP and CCC operate licensed infirmaries that provide an array of health services. According to department staff at MSP, the main difference between the medical unit at CCC and the medical unit at MSP is scale. Our examination of health services at CCC included a comparison of HCRs submitted in 2015 from a sample of 42 inmates at MSP with a sample of 42 inmates at CCC. The samples were selected so the inmates in each sample were comparable on custody level and basic level of medical need. We compared the samples on the number of HCRs submitted by the inmates and the time frames in which inmates' HCRs were being addressed. In 2015, inmates at CCC requested medication refills according to a different process than MSP, though a similar medication refill process has since been implemented at CCC. Since the process for medication refills was different between the facilities, we excluded HCRs related to medications from the analysis. After excluding HCRs related to medications, we

found a similar distribution of HCRs submitted in 2015 by inmates between the two facilities. Figure 8 shows the comparison:



As illustrated by the figure, the number of HCRs submitted in 2015 by inmates from the CCC sample was similar to the number of HCRs submitted by inmates from the MSP sample. This indicated to us the medical unit at CCC was not impeding initial access to health services by interfering in the HCR process. It did not appear that CCC staff was not allowing or dissuading inmates from submitting HCRs to the medical unit and that HCRs submitted to the medical unit were kept. The distribution of HCRs that were symptom- or not symptom-related was also similar between the CCC inmate sample and the MSP inmate sample.

In addition to comparing the number and distribution of HCRs between the MSP sample and the CCC sample, we also looked into the timeliness of the sick call process. As previously discussed, NCCHC standards require that an inmate who submits a

HCR expressing having a symptom must have his HCR logged, triaged, and be seen within a 48-hour time frame. To examine adherence to this timeliness requirement, we compared the date the inmate submitted the HCR, the date the HCR was received by each medical unit, and the date of the resulting visit with a health care professional. There were 145 symptom-related HCRs submitted by the 42 inmates in the CCC sample during 2015 and 113 HCRs of this nature in the MSP sample. Both facilities' medical units adhered to the symptom-related HCR process and the timeliness standard related to it. All HCRs from inmates in the CCC sample in which the inmate reported having a symptom had their HCRs picked up, triaged, and were seen by a health professional within 48 hours of submitting the request.

CONCLUSION

Audit work showed no evidence of impedance of initial access to health care at Crossroads Correctional Center when requested by inmates. The medical unit responds to symptom-related health care requests from inmates within the 48-hour time frame required by standards.

Timeliness Requirements for Referrals **Not Always Met at CCC**

When inmates are seen by a nurse within the medical unit, the nurse may refer the inmate to a higher-level health professional, such as the on-site provider or primary care physician. If necessary, the provider may then refer the inmate for off-site health services, such as a specialist. As part of our data analysis of HCRs from CCC and MSP, we recorded the number of days between the inmate being seen during the sick call process by a nurse and any subsequent visits with a higher-level health professional, whether on-site or off-site. The number of days between these encounters were:

- ◆ Between zero and 29 days with a median of six days for the CCC sample.
- ◆ Between one and 15 days with a median of five days for the MSP sample.

In assessing the timeliness of these follow-up visits, it is important to recognize there are some factors influencing the timeliness of visits with health care professionals that may not be controlled by the facility's medical unit. For example, inmates can be scheduled for a timely appointment, but refuse to attend when the appointment time comes. Another factor is whether the visit is with an on-site provider or with an off-site provider or specialist. The medical unit may not have the ability to influence the scheduling of inmates with off-site specialists.

One of the current contract requirements related to timeliness of health services is that the contractor shall provide “daily triage of complaints, with those inmates referred for primary care physician services being seen within five (5) calendar days of the referral.” In this context, primary care physician services generally refer to the on-site provider-level health care professional within the CCC medical unit. During audit work, department and contractor staff were generally unaware this was a current contract provision. Additionally, contractor staff from the CCC medical unit indicated this five-day time frame is not always met due to factors such as periods of high volumes of requests or health needs. Inmates are scheduled for primary care physician services within the CCC medical unit according to clinical indications. However, as discussed later on in this chapter, it is unclear if or how the department would become aware of such issues based on its current oversight of health services at CCC.

CONCLUSION

CCC does not always meet the contract requirement related to referral for primary care physician services within five days, generating concerns if inmates are able to access primary care physician services in a timely manner.

Additionally, in both the CCC and MSP inmate samples of HCRs we found similar, yet rare, instances of insufficient documentation. In the MSP sample, we found an instance where there was no evidence of a follow-up with a provider-level professional after referral by a nurse. In the CCC sample, we found instances where, while there was some evidence on the HCR form that a visit with a nurse took place, the appropriate nursing protocol documentation was missing. As these instances were rare, we did not consider this a systemic or widespread issue with following protocol at CCC. However, it is unclear how the department would become aware of such instances at CCC based on its current oversight of health services, which is discussed further in this chapter.

Monitoring of Health Services by the Department Is Limited

In addition to the ACA and NCCHC accreditation processes, the department has its own mechanisms to oversee health care provided at CCC. These primarily include the on-site contract monitor, the annual licensing process, the pre-authorization process for off-site services, and the medical grievance process. Audit work identified some limitations to the level of oversight provided in some of these mechanisms.

Oversight of Health Services by the Department's Contract Monitor Is Minimal

The department's on-site contract monitor visits the medical unit at CCC daily during walkthroughs of the facility. However, this visit includes minimal review and does not include verifying inmates receive basic medical care in terms of access and timeliness. Instead, audit work determined the monitoring activities conducted by the on-site contract monitor related to health services are more administrative in nature. For example, the contract monitor looks for elements like the types of providers on staff, the conditions of the waiting room, the security of the doors, the security of medical equipment, and the documentation of safe cell (padded cell) activity. There is no documentation of the daily monitoring activities related to health services completed by the contract monitor.

Our work determined on-site monitoring activities should include more than walkthroughs of the facility's medical unit. The Association of State Correctional Administrators (ASCA) manual for the Monitoring of Correctional Services Provided by Private Firms points out that monitoring methods based solely on unstructured walkthroughs by a contract monitor are ineffective.

While the contract monitor does compile a monthly contract monitoring report for the department, the monthly report does not address compliance with basic access and timeliness requirements from the contract related to health services. For example, the contract says the contractor shall provide "daily triage of complaints, with those inmates referred for primary care physician services being seen within five (5) calendar days of the referral." However, the contract monitor performs no monitoring activities examining adherence to this requirement. A section in this report relates to health services, but the information provided is limited. The health services section in the monthly contract monitor report typically includes:

- ◆ The number of various types of off-site services.
- ◆ The number of inmates in chronic care.
- ◆ The number of inmates on psychotropic medications.
- ◆ Medical contractor hours.
- ◆ The number of psychiatric evaluations.
- ◆ Status of staff vacancies within the medical unit.

Expectations for On-site Monitoring of Health Services Are Not Defined

The expectations for review of health services at CCC by the contract monitor should be clearly defined by the department in terms of the nature, frequency, and documentation of oversight activities. Oversight activities related to health services conducted by the contract monitor should address basic access and timeliness requirements from the contract. A recent report by the Office of the Inspector General within the U.S. Department of Justice noted on-site contract monitors can conduct oversight processes to verify inmates are provided basic medical care, even without medical expertise. For example, the contract monitor should verify the facility's medical unit is responsive to inmates' HCRs within the time frames outlined in the contract.

The Department Conducts Limited Analysis of Health Services Data

One of the main mechanisms for monitoring health services in any health care facility is Continuous Quality Improvement (CQI). Put simply, CQI is an internal approach for evaluating current health care processes. Per NCCHC standards, a designated CQI group from the facility must meet on a regular basis and conduct both process studies and health outcome studies related to the medical unit's operations. The purpose of performing these CQI activities is to identify problematic health care areas and to provide recommendations for improvement. Both MSP's health care unit and CCC's health care unit engage in CQI activities. The contract for CCC requires the contractor to conduct CQI activities according to policy and specifies CQI information must be made available to the department upon request. While the department indicated it does request CQI information from CCC, there is little review of the obtained CQI information.

The department is responsible for monitoring the level and quality of health services provided to offenders in both department and contracted facilities, including CCC. The ASCA manual for the Monitoring of Correctional Services Provided by Private Firms states that, "One of the most effective techniques for determining how well a facility is being run is comparison of the private facility to a similar public facility." However, no comparisons of CCC health services with other correctional facilities are made by the department. A comparison of CCC health care services with a similar facility would allow the department to assess health services at CCC and identify potential issues.

Issues With Health Services Could Go Undetected by the Department

Because the oversight of health services at CCC by the department is limited, there is an increased risk that issues with the daily compliance with contract requirements and applicable standards related to health services could go undetected. For example, we identified HCRs in the CCC inmate sample where the appropriate documentation of nursing protocols was missing, and there were issues with timeliness of provider-level health services. Unless the department's annual licensing process happened to include reviewing those specific inmate files, instances like these would go unnoticed by the department. Additionally, the contract monitor's review of health services does not include verification of compliance with basic access and timeliness requirements, contributing to the inability of the department to detect potential issues with health services at CCC. The inability to detect issues with health care could result in CCC inmates not receiving care they need. Failure to provide inmates with essential health services could potentially lead to litigation. Nationwide, there have been numerous examples of inmates taking legal action related to actual or perceived issues with the provision of health services in prison. If the department increased its oversight of health services at CCC, potential issues with health services could be more easily identified and addressed.

RECOMMENDATION #2

We recommend the Department of Corrections enhance oversight of health care services at Crossroads Correctional Center by:

- A. *Defining and implementing the expectations for on-site oversight activities to include verification of compliance with basic access and timeliness requirements, and*
 - B. *Analyzing health services data from the facility and making comparisons with other public correctional facilities.*
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Chapter V – Food Service

Introduction

The contract for Crossroad Correctional Center (CCC) requires each inmate at the facility be offered three meals per day. Other contract requirements address nutritional content and caloric intake. The contractor for CCC subcontracts with a correctional food service provider for food service at the facility. This chapter details the audit work we conducted to determine whether food service at CCC meets the requirements of the contract and whether the Department of Corrections (department) sufficiently monitors food service. Our work found that while the food service at CCC meets requirements related to the edibility of the food and sanitation, improvements in oversight by the department are needed to ensure the food served to inmates meets nutritional requirements.

Food Service at Crossroads Correctional Center

CCC provides food service to inmates through a correctional food service subcontractor. Inmates may obtain meals from the facility's cafeteria during designated meal times. Meals are served based on a five-week menu cycle. Special and religious diet trays are provided to inmates with specific medical or religious requirements. Inmate workers and food contractor staff prepare each meal in the kitchen area for the general inmate population and for the offenders in special housing units. Meals are distributed from the kitchen serving line to individual inmates through a small slot between the kitchen and the cafeteria area to prevent kitchen workers from targeting individual inmates by tampering with meal trays. Inmates have up to 20 minutes to eat the meal, meal trays are returned, and the inmates then return to their housing units or other areas of the facility. Food service staff at the facility estimate they provide about 12,000 meals per week.

Contract requirements, along with department policies and administrative rules, govern various aspects of food service in the facility, such as sanitation and nutritional content. The contract sets certain requirements such as providing inmates three meals per day, two of which must be hot meals, at regular meal times. It specifies there should be no more than 14 hours between the evening meal and breakfast. The contract also sets minimums for daily calories and protein and requires food quantities at the facility to conform to standards set by the National Academy of Sciences. Department policy also requires meals at the facility to be planned in advance to be nutritionally adequate, palatable, and appropriately proportioned.

Unannounced Visits to Crossroads Correctional Center

Part of audit work included five unannounced visits to CCC over the course of several months in 2016. During these visits we looked for evidence of issues with food service including the cleanliness of the kitchen area, the proper storage of useable food products, and the edibility of the food being served. In the course of each visit we observed the kitchen area, checked food items in each of the food storage areas, took temperatures of menu items being served, and ate the meal being served to the inmates. During our visits, the kitchen area was clean and organized and we observed no sanitation issues. In the storage areas, the food items we checked appeared to be recently packaged or received and designated for use within reasonable time frames, such as expiration dates. The temperatures of the menu items being served also met serving temperature requirements. For example, serving temperatures for hot food items must be 140 degrees or higher and for cold food items must be 40 degrees or lower. Additionally, every meal eaten by audit staff was palatable and appeared to have sufficient portioning. Figure 9 shows examples of typical meal trays served at CCC, which we consumed during our unannounced visits.

Figure 9

Two of the Meals Sampled During Unannounced Visits to CCC

Lunch – Regular Tray



*Chicken and Dumplings
Pasta
Carrots
Bread (2 slices) & margarine
JELL-O
Beverage Container*

Lunch – Special Diet Tray (Vegetarian)



*Pasta
Carrots
Canned Peaches
Bread (2 slices) & margarine
Sliced Cheese
Beverage Container*

Source: Compiled by the Legislative Audit Division.

CONCLUSION

The food at Crossroads Correctional Center is served within expiration dates, is palatable for consumption, and is served to inmates under sanitary conditions.

Unclear Expectations for On-site Monitoring of Food Service

While audit work determined the meals provided to inmates at CCC are edible, we identified aspects of the monitoring of food service by the department that should be improved. The contractor and food service subcontractor have methods for monitoring food service, such as a meal monitoring form on which food temperatures and portions are assessed. The department has its own monitoring mechanisms related to food service. The most direct monitoring of food service by the department is done by the department's on-site contract monitor. The contract monitor visits the food service area on a regular basis and tastes a meal about once per month. However, little documentation is maintained and the department's expectations for the extent of review of the food by the contract monitor are not clearly defined. For example, there are no expectations on the frequency of taste testing meals or other activities related to food service.

The contract monitor summarizes chronic issues with food service in a monthly contract monitoring report. This report primarily describes the assessment of the meal taste tested, the number of menu substitutions during the month, and general observations from unannounced visits to the food service area. State law also requires an annual inspection by the department, which is completed during the department's annual licensing of the facility. This process sometimes includes department food service staff, such as the food service manager from Montana State Prison, as part of the licensing team. However, it is unclear how frequently department food service staff are expected to be part of the licensing process. The facility is also subject to county health inspections.

Food Nutritional Content Not Reviewed Regularly by the Department Dietitian

In addition to unclear expectations for the monitoring of food service at CCC, the department's dietitian does not review the menu for nutritional content on a regular basis. Department policy requires a qualified nutritionist to review and document on an annual basis that the menu at CCC meets basic nutrition standards. The food

service subcontractor has its own dietitian who reviews its menu for nutritional content. The department relies on this review by the food service contractor's dietitian as meeting the department's policy on review of nutritional content. The food service contractor's dietitian reviews the menu for nutritional value more frequently than annually. However, this review is minimal, as little detail on the nutritional breakdown of the food is provided. While we do not question the credentials of the food service contractor's dietitian, the department should not rely on the food service contractor's review and should conduct its own independent review of the nutritional content of the food.

The department has its own dietitian who reviews the nutritional content of the meals produced at Montana State Prison (MSP). Upon request by department staff, the department's dietitian will review the menu at CCC. This review is more thorough than the review by the food service subcontractor and includes a comparison of the nutritional breakdown of the food at CCC with the food at MSP. However, the reviews of the CCC menu by the department's dietitian are not conducted on a regular basis. The most recent review of the CCC menu by a department dietitian took place in September 2015. Prior to that, the most recent review was in 2011. The September 2015 review by the department dietitian found that, "Many basic nutritional characteristics of the CCC menu did satisfy American Correctional Association (ACA) standard, but some did not." Several areas of needed improvement to the nutritional content of the CCC menu were identified. The department dietitian's review indicated the following issues with the CCC menu:

- ◆ Some meals included a high ratio of carbohydrate-based foods.
- ◆ The amount of dietary fiber offered was not adequate for most adult males.
- ◆ The menu was low in vitamin D and potassium, but high in sodium.

Issues With Nutritional Content Could Go Undetected by the Department

The quantity and quality of food service is a pressure point for inmates in correctional facilities, in some cases to the point of causing security issues. In our survey of former CCC inmates, food service was rated poorly with 68 percent of the respondents responding negatively to the question about the edibility of the food. Additionally, a large portion of the comments we received on the survey related to perceived issues with the food at CCC. Private correctional facilities frequently save money through providing food service at lower costs. For example, food service is provided to inmates at CCC at around \$1.35 per inmate per meal, which is cheaper than the approximate \$2.15 it costs per inmate per meal at MSP. Since food service is provided to inmates at lower costs at CCC, it highlights the need for the department to monitor food

services at CCC and ensure that CCC is not providing substandard food to inmates as a means of curbing overall costs for inmates in its custody.

The department dietitian's review in 2015 identified issues with the nutritional content of the CCC menu. Due to limited documentation, it is unclear what, if anything, was done by the department as result of this review and what corrective action took place. The department relies on the contractor and the food service subcontractor to review the menu for sufficient nutritional value. Reviews of the food service by a department dietitian are not conducted regularly and the implementation of improvements identified in these reviews are not clearly enforced. This increases the risk that issues with the food service at CCC could go undetected by the department, particularly in the nutritional content of the food, which can contribute to the poor health of inmates and an increase in health care needs.

RECOMMENDATION #3

We recommend the Department of Corrections strengthen its oversight of food service provided at Crossroads Correctional Center by:

- A. *Defining the expectations for on-site contract monitoring activities and the documentation of those activities,*
 - B. *Requiring regular reviews of the menu by a qualified independent dietitian, and*
 - C. *Defining, enforcing, and documenting the corrective action process for when deficiencies with food service are identified.*
-

Chapter VI – Inmate Housing Unit Temperature

Introduction

One prison condition area in which further audit work was warranted based on the results of our survey of former inmates was housing unit temperature. Based on the comments we received from survey respondents, most of the concerns from former Crossroads Correctional Center (CCC) inmates related to the temperatures in the facility during the winter. Correctional facilities have varying ways in which heating and air conditioning are provided to inmates and varying ways in which temperatures within the facility are monitored. We conducted audit work to determine whether temperatures are maintained at CCC according to the contract and whether the Department of Corrections has sufficient oversight in this area. We determined that housing unit temperatures at CCC are maintained according to contract requirements and the department adequately monitors housing unit temperatures within the facility.

How Housing Unit Temperatures Are Maintained and Monitored

The cost of heating CCC is factored into the per diem the department pays the contractor. CCC uses rooftop units to regulate and circulate air as part of the facility's heating, ventilating, and air conditioning processes. Each housing unit has a thermostat with a sensor that maintenance staff use to monitor temperature. When inmates experience uncomfortable temperatures within their housing unit, they can verbally notify floor staff who then notify maintenance staff. If inmates are still experiencing discomfort, they can request an extra blanket, or submit a written grievance to the facility's maintenance department. CCC staff indicated that, before issuing an extra blanket to inmates, several factors are considered. The temperature in the inmate's cell may be taken before an extra blanket is issued to verify the need for one. Inmates who could pose a serious safety threat to themselves or others with an extra blanket may be denied one. For example, inmates can use extra blankets to harm themselves, block the plumbing in their cells, or cover up windows to prevent observation by CCC staff. Contractor staff indicated they will likely issue an extra blanket to elderly or infirm inmates and inmates who reside in corner cells, as those cells tend to be colder. Contractor maintenance staff stated they try to maintain average temperatures of no less than 69 degrees in the winter and no more than 74 degrees in the summer in the inmate housing units. Staff indicated they may take the temperature in an inmate's cell before making adjustments to temperatures within the housing units.

While contractor staff have their own means for addressing concerns about housing unit temperature, the department's most direct oversight of temperature is through observations by the on-site contract monitor. The contract monitor works full-time within the facility and makes professional judgments about the temperature as walkthroughs within the facility are conducted. While the contract monitor does not measure temperatures as part of a regular routine, temperatures are checked within the housing unit or a cell upon the receipt of a specific complaint. The temperatures within the housing units are not logged by the contract monitor or by contractor maintenance staff.

Unannounced Visits to the Facility

As part of audit work, we conducted five unannounced visits to CCC over the course of several months. During each visit, we used an infrared thermometer to take the temperature in three randomly selected cells from each of the two main state inmate housing units and within one cell within the Restricted Housing Unit (the segregation unit). The temperatures we observed during our unannounced visits, along with outside temperatures, are shown below in Table 1.

Table 1
Cell Temperatures Observed During Unannounced Visits to CCC

Unannounced Visit	Daily Average Outside Temperature	Outside Daily High	Outside Daily Low	Housing Unit	Cell 1	Cell 2	Cell 3
1	43	59	27	D Wing	70	71	70
				E Wing	63	67	67
				Restricted Housing	71	*	*
2	46	65	27	D Wing	67	65	63
				E Wing	69	67	68
				Restricted Housing	70	*	*
3	49	64	35	D Wing	69	72	69
				E Wing	72	75	71
				Restricted Housing	72	72	*
4	51	65	37	D Wing	75	73	74
				E Wing	69	69	71
				Restricted Housing	73	*	*
5	71	85	58	D Wing	70	70	71
				E Wing	67	66	69
				Restricted Housing	72	*	*

Source: Compiled by the Legislative Audit Division.

* Only one or two cells in Restricted Housing could be entered by audit staff during some unannounced visits due to the inmate occupancy level within the unit.

A few cells had temperatures outside the range of temperatures contractor maintenance staff try to maintain, below 69 degrees. However, temperatures did not feel uncomfortable as we walked throughout the various parts of the facility and inmates generally did not express discomfort with the temperatures within their cells while we were there.

Best Practices Related to Housing Unit Temperature Are Vague

Achieving thermal comfort is a complex task. According to the National Institute of Corrections (NIC), “thermal comfort is a combination of temperature, humidity, activity levels, metabolic rate, clothing, season, etc.” One of the primary sources for correctional standards, the American Correctional Association (ACA), has switched from providing acceptable summer and winter comfort zones to stating, “Temperature and humidity are mechanically raised or lowered to acceptable comfort levels.” Another ACA standard, however, may partly explain why inmates perceive issues with temperature. ACA standards and federal building codes require the inflow of a certain percentage of fresh air in the housing units to prevent issues with mold and stagnant air. Depending on the temperature of the outside air, this movement of air may cause building temperatures to potentially feel cooler or warmer than they actually are.

While the ACA does not provide acceptable temperature ranges, the American Society of Heating, Refrigerating, and Air-Conditioning Engineers (ASHRAE) provides minimum requirements and tools for determining acceptable thermal indoor environments. However, these standards are not mandatory unless they have been adopted as part of a jurisdiction’s building code or environment climate codes. ASHRAE acknowledges the subjectivity of thermal comfort and the complexity of establishing comfort zones that please all occupants at the same time.

Additionally, the best practices related to the monitoring of temperature within correctional facilities are vague. The Association of State Correctional Administrators (ASCA) manual on the Monitoring of Correctional Services Provided by Private Firms notes that, because contract monitoring is an expensive resource, not all contract areas have equal weight and priority. According to ASCA, unlike areas such as health services, staffing, and food service, facility temperature and other environmental conditions is not a high priority contract monitoring area.

CONCLUSION

The contractor maintains comfortable housing unit temperatures for inmates within Crossroads Correctional Center and the oversight of housing unit temperatures by the Department of Corrections is sufficient.

DEPARTMENT OF
CORRECTIONS

DEPARTMENT RESPONSE



Montana Department of Corrections

Director's Office

Steve Bullock, Governor
Mike Batista, Director

November 23, 2016

Mr. Angus Maciver
Legislative Audit Division
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LEGISLATIVE AUDIT DIV.

RE: Department of Corrections Response to Legislative Audit Report

Dear Mr. Maciver:

Thank you for the opportunity to respond to the CCC compliance oversight performance audit report for the Department of Corrections. We have reviewed the recommendations contained in the report and our responses are as follows:

RECOMMENDATION #1:

We recommend the Department of Corrections improve oversight of Crossroads Correctional Center security staffing by defining the expectations for on-site oversight activities including the type, frequency, extent, and documentation necessary to verify mandatory security staffing levels are being met.

Response:

Concur.

The Department has good oversight in this area, as evidenced by the violations our audits have found in the past, and the associated fines subsequently imposed under the contract.

As a result of these past violations, the department previously set up reviews of:

- shift rosters
- biometric payroll logs of employees checking in and out of the facility
- biometric key check-outs
- video reviews of staff
- facility walkthroughs that occur almost daily

The department will develop a comprehensive post order for the on-site contract monitor to increase the number of shift rosters examined and actual comparisons to verified shifts. These steps will be well documented and included in the monitor's monthly reports to the Bureau Chief.

RECOMMENDATION #2:

We recommend the Department of Corrections enhance oversight of health care services at Crossroads Correctional Center by:

- A. Defining and implementing the expectations for on-site oversight activities to include verification of compliance with basic access and timeliness requirements, and
- B. Analyzing health services data from the facility and making comparisons with other public correctional facilities.

Response:

Concur.

The Department will build a more comprehensive reporting and compliance check for medical access and timeliness requirements in the on-site monitor's checklists and post orders. These will be reported to the Bureau Chief monthly. Clinical Services Division staff will work more closely with CCC's medical staff to review Continuous Quality Improvement reports and compare with Montana State Prison on a quarterly basis.

RECOMMENDATION #3:

We recommend the Department of Corrections strengthen its oversight of food service provided at Crossroads Correctional Center by:

- A. Defining the expectations for on-site contract monitoring activities and the documentation of those activities,
- B. Requiring regular reviews of the menu by a qualified independent dietitian, and
- C. Defining, enforcing, and documenting the corrective action process for when deficiencies with food service are identified.

Response:

Concur.

The Department's on-site monitor is already trained in "Serve Safe" and other food service protocols, so we will clarify in post orders and reporting procedures exactly what is to be reported and how often. In the past, the facility's dietician reviewed the menu annually and the Department's dietician reviewed the menu only when the menu cycle was substantially changed. While this procedure met ACA standards, moving forward, we will train our dietician to ACA standards and review CCC's menu on an annual basis. Any corrective actions will become part of the facility's annual licensure.

Sincerely,



MIKE BATISTA
Director

MB:sj