Dear Governor Holcomb, the Honorable Speaker, President Pro Tem, and Commissioners Carter and Robertson:

Pursuant to IC 4-13-1.2-10, it is my great pleasure to submit to you the 2016 Annual Report of the Department of Corrections Ombudsman.

Included in this report you will find a breakdown of the number and types of complaints received by the Bureau in the calendar year 2016. Key characteristics of these complaints include:

- The overall number of complaints increased 19% over the year 2015.
- Medical complaints remained the largest category of complaints and comprised 42% of all complaints received for the year and 69% of substantiated complaints.
- Medical complaints increased by 37% since the previous year.
- Complaints from Adult Male Medium Security facilities comprised 76% of all complaints received by the Bureau.
- Complaints from New Castle Correctional Facility increased 45% with 66% of these complaint being medical complaints.

The Bureau continued receiving electronic complaints successfully after its implementation in 2014. As a matter of fact, electronic complaints comprised 59% of the total number of complaints received by the Bureau and 90% of all substantiated complaints.

Included below are three Department-wide considerations for the Department of Corrections. These were developed based upon an analysis of the complaints that the Bureau has received throughout the year as well as issues observed in resolving these complaints. We believe that through implementing these considerations the IDOC will rise to the next level. These considerations are as follows:

1. **How can the IDOC further improve upon use of its current technology available to it?** This includes implementing effective use of tools such as OCMS as a communication tool across the Department.

2. **How can the IDOC improve training of a highly litigious and commonly performed action of strip searching?** This would include annual hands-on training for ALL custody staff.

3. **How can the Department further battle its trafficking problems in new and innovative ways?** Possibilities include implementing semi-annual lockdowns at each facility to “sweep” housing units with the help of the State Police and canines. Additionally, making front entrances covered with personnel of the Office of Investigations and Intelligence or State Police.

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

With Much Appreciation,
Charlene A. Burkett
DOC Ombudsman Bureau Director
A synopsis of the activity in 2016 of the IDOC Ombudsman Bureau

Charlene A. Burkett, Director
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Attachment 3 - Spreadsheet of all 2016 Complaints

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2016 Activity Summary

In the calendar year 2016 the Bureau received a total of 1632 complaints which represents a 19% increase over the 1377 complaints received by the Bureau in the calendar year 2015. The Bureau also had an additional 1719 contacts\(^1\) during the calendar year 2016. Of the 1632 complaints received by the Bureau, 63% or 1020 of these were investigated. In comparison, in 2015 the Bureau investigated 838 complaints, which represents a 22% increase in investigated complaints. Of these 1020 investigated complaints, 26% or 250 complaints were substantiated or found to be true and further action needed to be taken on the matter by the Department. Another 8% or 60 of the investigated complaints were assists\(^2\).

The Bureau continues to receive the bulk of its complaints electronically from offenders through the use of JPay kiosks at the facilities. As a matter of fact, the Bureau received 59% of its complaints through the kiosks. This is slightly higher than that of the 54% in 2015.

Medical complaints, once again, dominated the Bureau’s time. Of the 1632 complaints received in 2016, 684 or 42% were medical complaints. This number represents an increase from 509 or 37% in 2015. The largest category of investigated complaints were medical complaints as well. In fact, medical complaints comprised 600 of the 1020 investigated complaints which represents 59% of the investigated complaints. Not surprisingly, medical complaints numbered 172 or 69% of the substantiated complaints.

In 2016, the Bureau continued to receive the majority of its complaints from male medium security level facilities. An astounding 76% of the complaints received by the Bureau were from male medium security level facilities. New Castle Correctional Facility remained the facility from which the Bureau received the most complaints with 26% of all complaints received by the Bureau being from New Castle. While the overall percentage of complaints received has not increased much beyond the 22% in 2015, the same is not true of the overall percentage increase of complaints. New Castle experienced a 45% increase in its complaints. Medical complaints comprised 66% of these.

\(^1\) Contacts are defined in the IDOC Ombudsman Bureau Policies and Procedures as “refers to correspondence and phone calls that the Bureau receive that do not meet the requirements of a complaint.”

\(^2\) An assist is defined in the IDOC Ombudsman Bureau Policies and Procedures as “a complaint that requires further action by the DOC, but the offender has not necessarily attempted to resolve with the DOC prior to contacting the Bureau.”
II. Program Overview

About the Bureau

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

Our Process

The Bureau requires offenders to attempt to resolve matters through the IDOC first, before filing a complaint with the Bureau. This assumes offenders are receiving access to the applicable process (tort claim process, grievance process, etc.) and that process is functioning as it should under policy. Thus, if offenders are having trouble with a process, the Bureau also addresses these issues. When an offender contacts the Bureau with a general question that does not meet the criteria of a complaint, these are counted merely as contacts. These have greatly increased since the inception of JPay due to the high amount of offenders who contact the Bureau through JPay, but do not meet the criteria of a complaint. The Bureau thought it was important to count these in some way because it has so many of these, thus these are termed as Contacts.

After a complaint is filed with the Bureau, the Bureau decides whether further investigation is required into the matter. If, however, the Bureau determines that no further investigation is necessary, then the complaint is disposed of in one of four ways: offenders are referred back to the IDOC, no violation is determined, no jurisdiction over the matter is determined, or more information is required to be submitted to the Bureau.

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

After the investigation is complete, the Bureau then issues a response back to the complainant indicating whether the matter was investigated and any findings that can be included, keeping security in mind. Additionally, the Bureau issues a monthly report, including any findings pertaining to the matter. This report is posted on the Bureau’s website and submitted to the Governor’s Office for review.

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3 See Attachment 2 for a flow chart of this process
If the Bureau substantiates a complaint, this means the Bureau has found the complaint is true and some IDOC action is necessary to remediate the matter. Assists occur in the same manner, however, the key difference between a substantiated complaint and an assist is whether the offender has attempted to resolve the issue within the IDOC before contacting the Bureau. If an offender has not attempted to resolve the matter within the IDOC, then this is an Assist, whereas substantiated complaints occur after the IDOC has already been alerted of the issue.

Administration

The Bureau currently consists of its current Director, Charlene Burkett and an Assistant, Amanda Bennett. Director Burkett was originally appointed in 2005 by Governor Daniels and reappointed by Governor Pence in 2013. Ms. Bennett joined the Bureau in April 2012.

Appropriations

The current budget appropriation for the Bureau is $152,128 with a spendable amount of $147,564. The entire Budget is used with employee salaries and benefits and equipment and supplies. The budget has failed to allot for necessary travel expenditures to facilities to investigate complaints. Notably, the Bureau’s budget continues to fall short failing to cover even employee’s salaries and benefits or necessary operating expenses.

I. 2016 Activity Overview

Outreach and Training

The Bureau has been very much limited in continuing these efforts due to the budget not covering travel expenses. The Director did make necessary visits to facilities when needed to inspect a condition at a facility, to speak to an offender or discuss an investigation with a facility.
II. Complaints

The Year in Review

In the year 2016, the Bureau received a total of 1632 complaints and made an additional 1719 contacts. Of the 1632 complaints received 1020 were investigated. Of the 1020 of investigated complaints, which represents 63% of the total number of received complaints, 250 complaints or 26% of the investigated complaints were substantiated. Another 8% of the investigated complaints were Assists. See Figure 1 below.

![2016 Complaint Totals](image)

**Figure 1**

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As Figure 2, below, depicts, the Bureau received 1632 complaints in 2016, which is a 19% increase over 2015 and the most complaints ever received by the Bureau in a calendar year. The Bureau investigated 1020 complaints, which represents a 22% increase over 2015 and is the most ever investigated by the Bureau as well. Furthermore, the Bureau substantiated 250 complaints this past year, which is a 52% increase overall compared to the 2015 amount and represents a significant increase over previous years. The total number of assists also increased since 2015. While the total number of complaints received increased, the number of contacts decreased near the same percentage as the increase in received complaints. This indicates that we had more interactions that qualified as complaints this year rather than merely just contacts. See Figure 2 below.

![Figure 2](image-url)
The Bureau continued receiving complaints primarily electronically via JPay throughout 2016. Figure 3 below depicts the percentages of complaints received, investigated, and substantiated that were received electronically. Overwhelmingly, the Bureau received most of its complaints electronically, even more so than in 2015. In 2016, 90% of the Bureau’s substantiated complaints were received electronically, which is a 13% increase over 2015. See Figure 3 below.

![Figure 3: Complaint Sources in 2016 Compared to 2015]

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As in years past, the Bureau has tracked the number of “not investigated” complaints, since these comprise 38% of the total number of received complaints. Of these not investigated cases, 337 or 61% were considered no violation, 178 or 32% were sent back to the IDOC process, 17 or 3% requested more info, and 24 or 4% lacked jurisdiction. These figures were consistent with the 2015 figures. See Figure 4 below.

Figure 4
Complaint Characteristics

The Bureau received, investigated, and substantiated a significant amount more of medical complaints than any other type of complaint in 2016. Overall, the Bureau received 34% more medical complaints this year than 2015, investigated 27% more, and substantiated 58% more than in 2015. **Ombudsman Perspective:** The Bureau accounts for this increase due to ongoing problems throughout the year with the medical vendor, Corizon. One facility, in particular, accounted for almost half of the received medical complaints. For a comparison to the previous year, please see Figure 5 below.

![Medical Care Complaints for 2015-2016](chart)

**Figure 5**

This space is left intentionally blank.

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4 See Attachment 3 for a complete listing of all complaint categories.
Figure 6 below depicts the facilities with the highest numbers overall of complaints received, investigated, and substantiated. The facilities with the highest number of complaints continue to be, as in years past, the Male Medium Security Level Facilities. While Male Medium Level Facilities represent 55% of the IDOC population, complaints from these facilities account for 76% of the complaints filed with the Bureau. **Ombudsman Perspective:** The overall number of complaints received from Male Medium Security has actually only increased to 76% of the total number of complaints received by the Bureau for the year 2016, when in 2015 these complaints represented 75% of the complaints received for the year. While New Castle Correctional Facility has remained the facility from which we receive the most complaints, the other male level two facilities from which we receive the most complaints has changed since 2015. In 2015 the Bureau received the second and third most complaints from Putnamville and Plainfield. In 2016, the facilities with second and third most complaints received were Westville and Miami. See Figure 6 below.
As noted above, the facilities whom the Bureau received the most complaints from in 2016 changed from being Putnamville and Plainfield. Figure 7 below notes the drop in complaints at each of these facilities. **Ombudsman Perspective:** While one can only speculate as to the reasons for this drop in complaints at each facility, when looking at each facility from an administration standpoint, however, each facility had gone through administration changes during the same timeframe, which we noted in the 2015 numbers. Perhaps, now we are seeing the effect of the administration stabilizing with this drop in complaints.

![Facilities with Highest Number of Complaints in 2015 Compared to 2016](image)

**Figure 7**

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The Bureau received the most medical complaints overall from New Castle Correctional Facility. Westville and Miami were ranked numbers one and two overall in the amount of received medical complaints. Not only were these the top facilities with the highest number of medical complaints when comparing the numbers to the other Medium Security facilities, but also these three facilities were the top overall amongst all of the facilities in the Department. **Ombudsman Perspective:** Despite New Castle, Westville, and Miami having similar average daily populations, New Castle more than doubled the number of medical complaints of any other facility.

![Medical Complaints for Adult Male Medium Security Facilities in 2016](image)

**Figure 8**

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In 2016, the facility from whom the Bureau received the most complaints was New Castle Correctional Facility. Complaints received from New Castle increased 45% from 2015. Westville also experienced a significant increase in the overall number of received complaints for the year 2016 with a 43% increase. **Ombudsman Perspective:** In large part, this increase at New Castle can be contributed to medical complaints. Medical complaints at New Castle comprise of 66% of their total number of complaints received for the year, which, represents a 122% increase from 2015.

![Facilities with the Largest Increase in Complaints Received for 2016](image)

**Figure 9**

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For a complete listing of all facilities in 2016, see Figures 10-12 below.

Figure 10 below illustrates that of the Male Minimum facilities and work release centers.

**Ombudsman Perspective:** Overall, the complaints at these facilities have dropped slightly since 2015. For comparison sake, these facilities compromise 9% of the IDOC population and 2% of the complaints that we received in 2016.

![Total Complaints for Adult Male Minimum & Work Release Facilities 2015-2016](image_url)

**Figure 10**

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Figure 11 below depicts the number of complaints received, investigated and substantiated in calendar year 2016 by the Bureau from Male Maximum facilities. **Ombudsman Perspective:** Notably, the Bureau receives almost twice as many more complaints from Pendleton Correctional Facility than any of the other maximum security facilities. It is consistent, however, that the maximum security population represents 24% of the IDOC and the Bureau received 17% of its complaints from this population.

![Total Complaints for Adult Male Maximum Facilities for 2015-2016](image)

**Figure 11**

This space is left intentionally blank.
Figure 12 below addresses the complaint totals for the female facilities, respectively. **Ombudsman Perspective:** Complaints from the female facilities account for 5% of the complaints received by the Bureau despite the females comprising 9% of the IDOC population. Notably, complaints from Rockville Correctional Facility doubled from the number in 2015. Interestingly enough, in 2014 the facility’s number was even with 2016.

**Total Complaints for Adult Female Facilities for 2015-2016**

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<td>14</td>
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</tbody>
</table>

- Received
- Investigated
- Substantiated

![Bar Chart]

**Figure 12**

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Substantiated Complaints

The Bureau substantiated 250 complaints in 2016, which is 53% more than in 2015.\(^5\) Since over 69% of the substantiated complaints were medical, the Bureau worked extensively on these medical issues to help bring the issues causing these complaints to light. New Castle medical complaints far outnumbered any other type of substantiated complaint consisting of 65% of all substantiated complaints.

The Bureau spent the majority of its time throughout the year triaging these complaints ensuring medication passes were occurring, offenders were getting their medication and being seen when they needed to be. The Bureau continually worked with staff to improve medical procedures at the facility. Nearly every major medical process at the facility was strained at one point or another during the calendar year 2016. Some of these processes included the medication ordering process, the non-formulary request process, and the off-site referral process. Specifically, medication errors were heavily addressed by the Bureau. The Bureau continued to work with medical staff at the facility and in Central Office to rectify the issues. We sent each specific case in which we received over to the facility to address. We also followed up on these issues with Central Office who kept the Bureau abreast of the operational difficulties and plans to improve these. The issues were amassed between the absence of capable staff at the facility and the ending of the healthcare contract. The Bureau was anticipating improvement upon a new contract being put in place and new staff taking over at the facility.

III. 2016 Wrap-Up

Looking Forward

The Bureau will continue to receive and investigate complaints and make recommendations regarding the complaints it receives. The Bureau will also continue to strive to be responsive to each offender who contacts the Bureau. Furthermore, the Bureau will continue to keep the offender population aware of the Bureau and how to use the Bureau effectively.

\(^5\) For a complete listing of all substantiated complaints in 2016, see the monthly reports posted on the IDOC website. [www.idoc.in.gov/2318.htm](http://www.idoc.in.gov/2318.htm)
Department – wide Considerations

1. How can we better utilize available technology and solve the case of the missing paperwork?

The Department already has technological resources available that could be used more effectively. Further utilization of these resources will only help make the job of staff easier, aid all staff in doing business more effectively, and improve communication.

OCMS (Offender Case Management System) is one such tool that currently severely underutilized. OCMS is currently used to note when counselors do the required 30-day meetings with offenders. While we often find that this is not being done, OCMS is a valuable communication tool which could be utilized to a much greater extent than just being used for case notes by counselors. Any interaction with staff that an offender has could be noted in OCMS. While perhaps it may take a few minutes to input the information into the system, in the long run, these few minutes can save staff much more time. For instance, if every time a tort claim or classification appeal were filed a note was made in OCMS on the date received, going forward anyone with OCMS access could see the progress and whether the claim/appeal had been received. When the response is sent, this could also be noted in OCMS, so when the offender claims that the response is not received (we receive many complaints such as this) this can easily be looked up in OCMS by a caseworker. We spend so much time duplicating work. If we just spend a few minutes logging the work that we do, it could potentially save others much time and effort.

Currently, items such as tort claims and classification appeals are not logged anywhere that can be seen without contacting the specific facility involved, but it is not just the specific facility that often needs this information. By further utilizing a tool that we have available we could better communicate with each other which will save the phone calls or emails from being sent having to ask questions of whether a specific facility has received paperwork regarding a tort claim or whether Central Office had received paperwork regarding a tort claim.

Another useful utilization of OCMS would be to make notes regarding the transferring of property or money. All too often while offenders are being transferred property or money on their trust fund account does not follow them to the new facility. The Bureau often attempts to assist in tracking down the offender’s property or money. If this information were included in OCMS, then the facility that receives the offender would know exactly what to look for when an offender is transferred. Also, if an issue does arise and an offender takes the issue to his counselor, then the counselor could just refer to the transfer note to know whether the money or property had been transferred and when.

Utilizing the resources available and putting this information in a communal spot makes this information available to others throughout the Department who may need access to this information. By more effectively using this resource already available we can improve how we do business.
2. How can we improve upon the training provided over a highly litigious issue?

One of the things that the Department gets the most complaints about and is often sued over is the proper conducting strip searches. While this may be a lesser talked about duty, it is one that is necessary to perform and to perform well.

While staff is currently required to complete a form during Annual In-Service training, this does not nearly provide the necessary training to be able to successfully perform strip searches. This annual training should be hands – on and all correctional staff should be given this training annually.

3. How can we battle the trafficking problem in the Department in new and innovative ways?

The trafficking problem in the Department remains a constant issue. Attacking this issue in new and innovative ways could hopefully help squelch the persistent issue. Currently, the DOC uses very limited outside resources. One thing is certain, if we continue to practice the same way, we will get similar results. What does the Department have to lose by possibly trying something different? The Department could possibly benefit from making staff at the entrance that performs searches trained State Police who work directly for the State Police and not the Department. Another possibility, would be to make these officers part of the Office of Investigations and Intelligence within the Department. This would separate the front area staff from the rest of the staff.

The staff at the entrances of the facility have a huge responsibility. Ultimately, they are the gatekeepers and responsible for everything that comes through the doors of the prisons and into the prison walls. This is not to be taken lightly. Through the Department making changes in the structure of this staff, it puts appropriate emphasis on the importance of this job.

Another possible method to use to battle the constant trafficking problem is to randomly lockdown each facility every six months (or twice randomly throughout the year) to thoroughly search each facility. The use of State Police drug detecting dogs could be used to assist in performing and expediting searches. This could allow for searches to be conducted within a few days so as not to extend the lockdowns unreasonably. Outside personnel, including the State Police, could also assist with the searches.

Acknowledgements

The Bureau is greatly appreciative of the cooperation and support that it receives from both the IDOC administration and the Holcomb Administration. Throughout the IDOC we experience professionalism and cooperation from staff that we realize is vital in the work that we do. We appreciate the timely responses, the guidance, and knowledge gained through working with such experienced personnel. It has been a truly remarkable experience. I am deeply humbled to serve the great people of our State.
DOC OMBUDSMAN BUREAU 2016 POLICIES & PROCEDURES

I. Definitions

The Ombudsman Bureau Policy references the following terms, defined here:

A. Assist – A complaint that requires further action by the DOC, but the offender has not necessarily attempted to resolve with the DOC prior to contacting the Bureau.

B. Assistant – A person serving the role classified as AA3 for the State of Indiana who is charged with assisting in performing the duties of the Ombudsman Bureau.

C. Bureau – Refers to the Department of Correction Ombudsman Bureau established in IC 4-13-1.2-3.

D. Complaint – Refers to a piece of mail, e-mail, or phone call received from offenders, family members, friends, or other agencies that concerns the DOC and contains an issue the Bureau can address.

E. Contact – Refers to correspondence that the Bureau receives that does not meet the requirements of a complaint stated herein.

F. Complainant – A person who submits a complaint to the DOC Ombudsman Bureau.

G. DOC – Refers to the Indiana Department of Correction.

H. Director – The person charged with fulfilling the duties under IC 4-13-1.2-7 and appointed under 4-13-1.2-4.

I. Family Member – A person who is related to a person who is incarcerated in a DOC facility in the State of Indiana.

J. Follow-up Complaint – A complaint that has previously been logged into the Access Database by the Bureau.

K. Investigation – An in depth examination of a complaint.

L. J-Pay – The electronic kiosk used by offenders that allows them to send e-mails. The Bureau allows the offenders to send e-mails to the Bureau through this system.

M. New Complaint – A complaint received by the Bureau that has not previously been logged or reviewed by the Bureau.
Attachment 1

N. Substantiated Complaint – A complaint that is found to be true and requires the DOC to take some action on the matter.

II. Mission Statement

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

III. Purpose and general principle

A. Purpose: It is the purpose of the Ombudsman Bureau to develop policies and procedures that promote the expeditious resolution to complaints received from persons incarcerated in the DOC, their family members and other interested parties. These specifically-designed procedures and policies provide for the consistent implementation of complaint resolution activities and promote the enforcement of DOC policies and procedures, the health and safety of offenders, and state law.

B. General Principle: These policies and procedures establish procedural guidelines for consistent handling and resolution of complaints submitted for resolution to the Ombudsman Bureau. The following procedures should apply in the handling of each complaint submitted to the Bureau.

IV. Intake Procedures

The Bureau receives complaints by mail, e-mail, telephone and JPay.

A. The Bureau requires offenders to attempt to resolve matters within the DOC before contacting the Bureau and should provide proof of having done so when contacting the Bureau.

B. The Bureau will only accept complaints addressed specifically to the Bureau.

C. The Bureau will only accept as complaints matters concerning whether the Department of Correction:

1. Violated a specific law, rule or department written policy; or
2. Endangered the health or safety of a person.
Attachment 1

D. The Bureau requires offenders to use the Ombudsman Complaint Form, if at all possible.

E. The Bureau requires offenders to send all relevant paperwork with their complaints, if at all possible.

F. The Director reserves the right to refuse complaints which contain subject matter not under the jurisdiction of the Bureau or adequate information is not provided.

G. If the Bureau has already addressed a matter, further correspondence regarding the matter will be noted and filed.

V. Determining Appropriate Action

A. As soon as possible after receipt of a piece of correspondence, a determination will be made whether the correspondence should be given a complaint number or entered into the contact log.

B. When counted as a complaint, the Assistant determines whether a complaint needs:

   1. Further review, in which case it is given to the Director.
   2. Further investigation, in which case it may be given to the Director.

VI. Response Procedures

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

A. More Information Required

   1. When new correspondence is received by the Bureau with insufficient information, then the letter of response instructs the complainant to send the Bureau additional information.

B. No Violation Letters

   1. If all information is reviewed and the Bureau determines that no violation of DOC policy or procedure has occurred, the Bureau shall respond with a letter expressing that no violation has been found in the matter and no investigation is necessary.
C. No Jurisdiction Letters

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

D. Use the DOC process Letters

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

E. Report of Investigation

1. As required by IC 4-13-1.2-5(b), the Bureau should submit a letter to an offender once an investigation or inquiry has been completed or it has been determined that an investigation is not needed.
   a. In the case in which an investigation has been performed, the letter should indicate the outcome of the investigation or inquiry.
   b. In the case in which the decision has been reached that an investigation or inquiry is not necessary, the letter should state the reason an investigation was found to be unnecessary.

F. Summary of Findings

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

VII. Procedures Upon Investigation

A. The Bureau may conduct an investigation into a matter when an offender has completed the appropriate DOC process or when an offender may not have completed this process, but the matter involves a health or safety matter.

B. Investigations shall be completed in a timely manner.
Attachment 1

C. Once it is determined that a complaint requires an investigation, one or more of the following people may need to be contacted:

1. Facility contact
2. Final review authority
3. Grievance Officer
4. Superintendent
5. Offender
6. Offender’s family
7. Policy Manager
8. Classification
9. Assistant Superintendent
10. Central Office personnel
11. Medical personnel
12. Other personnel

D. Once the appropriate contact has been made, it may be necessary to visit the facility in order to address the issue.

E. It may also be necessary to hold a meeting at the facility with the offender and the relevant DOC personnel.

F. Once the relevant people have communicated, one of three determinations may be made: that the complaint is true and needs DOC action; that it is not true; or that the DOC has already addressed the issue, as described in section I.

G. A recommendation, as described below in Section VIII, is made when a complaint is substantiated.

H. Reports of investigation are written as described above in section VI part E.

I. After completion of these Procedures Upon Investigation stated above a complaint is considered resolved by the Bureau and is closed.

VIII. Making Recommendations

A. As an investigation ensues, the Director may find it appropriate to make a recommendation as to action necessary when a complaint is substantiated.

B. Recommendations should be made to the personnel who directly oversee the issue or facility contact person, but the Director may notify other facility/Central Office personnel.
C. All recommendations and complaints must be reported to the DOC Commissioner monthly.
# Complaint Summary Report - All Facilities

**From:** 1/1/2016  **To:** 12/31/2016

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**Facility Key**

- **BTC** - Branchville Correctional Facility
- **CIF** - Correctional Industrial Facility
- **COL** - Chain O'Lakes Correctional Facility
- **County** - County Jails
- **HYC** - Henryville Correctional Facility
- **IREF** - Indianapolis Re-Entry Educational Facility
- **ISF** - Putnamville Correctional Facility
- **ISP** - Indiana State Prison
- **ISR** - Pendleton Correctional Facility
- **IWP** - Indiana Women's Prison
- **IYC** - Plainfield Correctional Facility
- **JCU** - Edinburgh Correctional Facility
- **LH** - Liberty Hall
- **MCF** - Miami Correctional Facility
- **MCU** - Madison Correctional Facility
- **NCF** - New Castle Correctional Facility
- **PJCF** - Pendleton Juvenile Correctional Facility
- **RDC** - Reception Diagnostic Center
- **RTC** - Rockville Correctional Facility
- **SBWR** - South Bend Community Re-Entry Center
- **STP** - Heritage Trail Correctional Facility
- **WCC** - Westville Correctional Facility
- **WVCF** - Wabash Valley Correctional Facility
- **XMR** - Marion Co. (Duvall Residential Center)
## Received, Investigated, Substantiated, Assisted

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