#### DONALD L. LEACH & ASSOCIATES, LTD

July 27, 2025

Mr. Brendan Healey Deputy County Prosecutor Cuyahoga County Prosecutor's Office 1200 Ontario Street Cleveland, Ohio 44113

#### Brendan:

I am pleased to submit my report regarding the findings from my second site visit conducted on May 27, 2025 to May 29, 2025, as part of the implementation review of the *Clay v. Cuyahoga County Settlement Agreement*.

As a corrections expert agreed to by both parties, my primary objective was to conduct a comprehensive evaluation of the progress made in implementing the various points outlined in the settlement agreement, focusing on those aspects of the Agreement that were not in full compliance as noted on the first site visit report. This involved reviewing relevant documentation, interviewing key personnel, and performing on-site observations to ensure compliance and identify areas for further improvement.

The report enclosed herewith provides a detailed account of my findings, indicating that all areas of the Agreement had been successfully implemented.

I appreciate the cooperation and transparency demonstrated by all parties during the two site visit. I want to especially thank Corporal P. Foster for chaperoning me around the jail and patiently waiting while I conducted my inspections.

Please feel free to reach out to me should you have any questions or require further clarification on any aspects of the report. I am committed to assisting both the plaintiffs and the defense throughout this important process.

Thank you for the opportunity to contribute to this significant endeavor. I look forward to our continued collaboration. If I can be of further assistance please let me know.

Sincerely,

Donald L. Leach II

#### Findings: Access/Accommodation (New Findings underscored)

Install grab-bars in shows located in the general population areas of Jail 2. At a minimum, at least one shower on each floor of Jail 2 will be equipped with a grab bar.

Date Reviewed: 05/27/2025

Finding: Housing unit renovations were being undertaken. The photo below shows a renovated shower with grab bars in housing unit in Jail II, Pod9A. The renovation project will be a lengthy process as the housing unit cannot be used during the period of renovation. Inmates must be shuffled around between units to allow the targeted unit to be opened.

Compliance Level: Fully compliant

Modify at least one shower, located in the general population areas of Jail 2, to have a lip that permits wheelchair access into the shower area.

Date Reviewed: 11/05/2024

Finding: Housing unit renovations were being undertaken. The photo below shows a renovated shower with grab bars in housing unit in Jail II, Pod9A. The renovation project will be a lengthy process as the housing unit cannot be used during the period of renovation. Inmates must be shuffled around between units to allow the targeted unit to be opened.

Compliance Level: Fully Compliant

Employ a full-time disability coordinator dedicated to the CCCC.

Date Reviewed: 05/27/2025

Finding: Mr. Michael Dykes has been employed as the disability coordinator.

#### **Findings: Contract Monitor**

Employ or contract with a contract monitor to ensure the requirements under the medical contract, food contract, secures contract, are being performed. Contract monitor shall develop service level benchmarks which the vendor must achieve in the provision of services to the County.

Date Reviewed: 11/05/2024

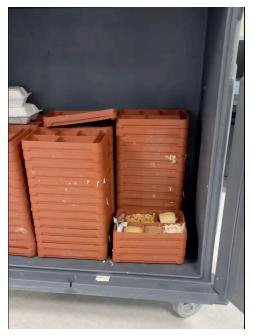
Finding: A full time contract monitor has been hired and was in her third week in the position. Ms. Julia Gron was tasked with overseeing the medical and food service contracts. As both contracts, and contractors, were in a state of flux at the time of the site visit, Ms. Gron was focused on issues with the RFP's and the process of selecting a vendor. At the time of the site visit, neither a food service nor a medical vendor had been selected.

#### Findings: Food Service (New Findings underscored)

Maintain a contract with a food service vendor addressing the concerns and recommendation so the Joint Expert. The food service contract shall also contain provisions to enable the County to seek remediation of any performance issues with the vendor.

Date Reviewed: 05/28/2025

Finding: The new food service vendor, Summit Correctional Services, has been contracted with and was fully operational at the time of the visit. Summit had initiated new methodologies for delivering appropriately hot and cold foods to the housing units utilizing insulated carts. A random review of trays collected after the meal shows the meals being consumed by the inmates.



Insulated trays transported via an insulated tray cart.





Food trays from two segregation units (G & H) almost fully consumed. Screenshot from video audit of consumed trays.

#### Findings: Grievance (New Findings underscored)

# Adopt an Inmate Grievance Procedure Policy that is substantially similar to the attached Exhibit G.

*Date Reviewed: 11/05/2024* 

Finding: The grievance procedure had been established as indicated in the policy, "Inmate Grievance Procedure," Number 0015 dated 10/23/2024.

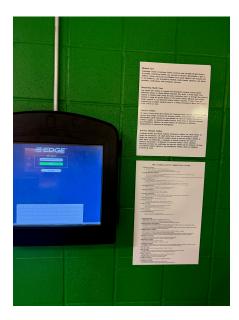
Compliance Level: Fully Compliant

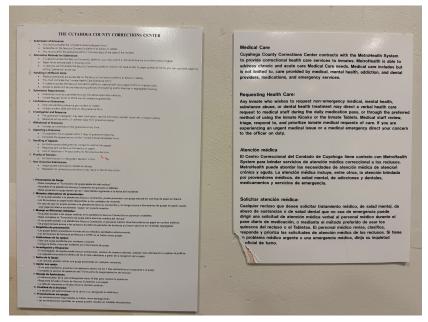
### Post signage regarding the grievance process in all housing units in English and Spanish and maintain signage throughout the CCCC.

Date Reviewed: 05/27/2025 and 05/28/2025

<u>Finding: I observed the required grievance process signage mounted in all the housing units.</u>

<u>The photographs below show the placement of the signage in various housing units.</u>









Include in the Securus system a method for Inmates to submit grievances concerning inter alia, food service, commissary, and access to medical care/services.

Date Reviewed: 11/05/2024

Finding: The Secures system has several grievance options on the kiosk, along with a language selection option as seen in the pictures below. I also have a video of the kiosk operation from which the pictures were generated.

Compliance Level: Fully Compliant

Distribute computerized tablets or similar devices to Inmates and develop policies concerning issuance of tablets, including to whom tablets may be issued and any circumstances that render an Inmate ineligible to receive and retain a tablet.

Date Reviewed: 11/05/2024

Finding: Inmates in those areas eligible for receiving tablets had them in their cells, as seen in the picture below. Inmates had access to file medical and information requests along with grievances. The tablets offered additional recreational value by providing access to music, hence the headphones attached to the tablet in the photo.

Compliance Level: Fully Compliant

Employ a full-time person to manage the grievance process and coordinate access to counsel, as well as law library access, and legal visits.

Date Reviewed: 11/06/2024

Finding: A full-time grievance coordinator, Mr. Deleonte Brown, has been hired. Mr. Brown's first day on the job was the same day as the first day of my site visit. Mr. Brown lacked the essential tools he is going to need to accomplish his job as the grievance coordinator, primarily a networked computer, but also a printer and scanner.

Further there were no actual revised manual grievance forms, so Mr. Brown will have to have them printed and distributed to the housing units. Currently there are no manual grievance forms located on the housing units I audited. Inmates can only file grievances using the Securus kiosks.

Compliance Level: Fully Compliant

Advise Corrections Staff of the content of the policies identified in attached Exhibit G and enforce compliance with these policies.

Date Reviewed: 05/28/2025

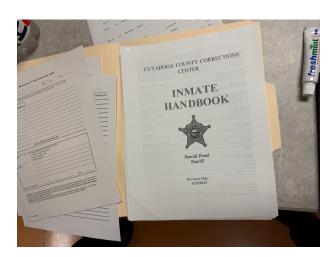
Finding: A review of the training files for a group of randomly selected officers (see attached listings) indicates that the officers are being provided with the requisite training in the inmate grievance procedures.

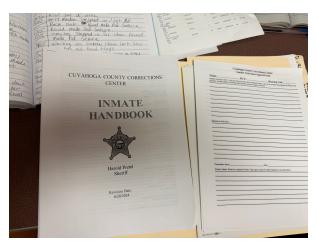
#### Findings: Handbook (New Findings underscored)

#### The County shall adopt an Inmate Handbook that is substantially similar to Exhibit N.

<u> Date Reviewed: 05/28/2025</u>

Finding: In addition to the Inmate Handbook being available on the housing unit kiosks, a review of every housing unit found a paper-based copy of the inmate handbook located at the officer's workstation. Each housing unit I audited had a revised copy of the Inmate Handbook along with paper-based grievance forms. The pictures below illustrate the inmates' access to the paper-based copy of the Inmate Handbook and grievance form.





#### Findings: Legal Counsel (New Findings underscored)

Adopt separate visitation policies. The first policy should be a Public Visitation Policy that is substantially similar to Exhibit L.

Date Reviewed: 11/04/2024

Finding: The CCCC has the accepted policy, "Visitation-Public," Number 0033A effective 10/24/2024 that is similar to Exhibit L.

Compliance Level: Fully Compliant

### The second policy should be an Attorney Visitation Policy that is substantially similar to Exhibit M.

Date Reviewed: 11/04/2024

Finding: The CCCC has the accepted policy, "Visitation-Public," Number 0033A effective 10/24/2024 that is similar to Exhibit M.

Compliance Level: Fully Compliant

Update the County Sheriff's Department materials and notices (attorney information flyer and information on the County Sheriff's website) published by the sheriff's office to include information about video visitation and any other policy changes to attorney visitations.

Date Reviewed: 11/06/2024

Finding: The Cuyahoga County Sheriff's Office has appropriate information on the agency website regarding visitation by the public and attorneys. Additional information regarding accessing video visitation, including costs, is also listed on the site. See https://cuyahogacounty.gov/sheriff/corrections-jail/registration-visitation.

Compliance Level: Fully Compliant

### Advise Corrections Staff of the content of the policies identified in Attached exhibits L through M and enforce compliance with these policies.

Date Reviewed: 05/28/2025

Finding: A review of the training files for a group of randomly selected officers (see attached listings) indicates that the officers are being provided with the requisite training on the policies related to inmate discipline, recreation, religious programming, visitation for both the general public and attorneys.

#### Findings: Medical Care (New Findings underscored)

Display signage in English and Spanish concerning health care access in the following areas of the CCCC:

#### (1) intake/booking area,

Date Reviewed: 11/06/2024

Finding: Appropriate signage was in the booking area. Additionally, I observed a Spanish language speaking registered nurse providing intake screening services to an arrestee.

Compliance Level: Fully Compliant

#### (2) the medical dispensary,

Date Reviewed: 05/27/2025

Finding: Appropriate signage was in the medical area.

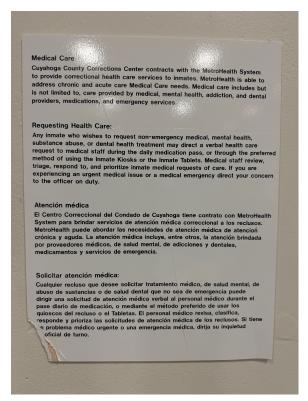
Compliance Level: Fully Compliant

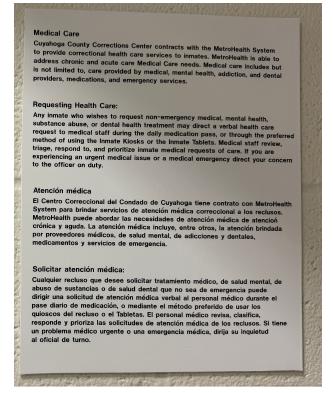
#### (3) every housing unit.

Date Reviewed: 11/06/2024

Date Reviewed: 05/28/2025

<u>Finding: Appropriate signage was posted in all the housing unit. Two sample photos are below.</u>





# Engage a qualified medical professional to audit, monitor, and report on services provided by MetroHealth or another medical provider.

Date Reviewed: 11/06/2024

Finding:As stated previously, Ms. Julia Gron has been hired to monitor the medical services contract. In addition to Ms. Grono, Dr. Donald Kern, MD, has been contracted with to provide the medical expertise monitoring and auditing of the medical services contract. Dr. Kern is a widely recognized correctional medical physician with extensive experience in supervising and monitoring contracted medical services in the correctional environment.

#### Findings: Mental Health (New Findings underscored)

#### Adopt a Reception Policy substantially similar to Exhibit E.

*Date Reviewed: 11/06/2024* 

Finding: The CCCC has the accepted policy, "Reception," Number 0023 effective 10/23/2024

that is similar to Exhibit E.

Compliance Level: Fully Compliant

#### Dedicate a trained, core group of officers to the mental health housing areas.

Date Reviewed: 05/28/2025

<u>Finding: Mental health housing unit training has been provided as indicated by a review of the officers listing assigned to those units (see attached Special Housing Training List-Psych).</u>

Compliance Level: Fully Compliant

# Construct a private examination and interview room in the intake area so that inmates can receive a medical assessment in private.

Date Reviewed: 11/06/2024

Finding: There was a dedicated space in the intake area for the initial intake assessment of all arrestees. At the time of the site visit, I observed a registered nurse conducting the medical intake of arrestees. Additionally, she was a Spanish speaker.

Compliance Level: Fully Compliant

#### Adopt a Suicide Prevention Policy similar to Exhibit F

Date Reviewed: 11/06/2024

Finding: The CCCC has the accepted policy, "Suicide Prevention Response," Number 0026 effective 03/25/2024 that is similar to Exhibit F.

Compliance Level: Fully Compliant

# Work with Metro or other medical provider to revise medical policy J-E-05 to clarify that Inmates identified as a suicide risk by staff, or self-report suicidal ideations, must be seen immediately once such inmates are referred.

*Date Reviewed: 11/06/2024* 

Finding: Inmates identified as suicide risks will be seen immediately is specified in the revised policy, "Suicide Prevention Response," Number 0026, page 2:

4. Inmates found to be actively suicidal, who have suicidal ideations, or who have a history of a recent suicide attempt(s) within the past thirty (30) days will be seen immediately by a qualified Mental Health Professional.

a. If a Qualified Mental Health Professional is not immediately available, the inmate will be kept under constant one-on-one supervision until seen by the Qualified Mental Health Professional.

Further delineation of custody staff response if contain in the policy under Section D. "Response" on pages 4-6

Compliance Level: Fully Compliant

# Advise Corrections Staff of the content of the policies identified in attached Exhibits E through F and enforce compliance with these policies.

Date Reviewed: 05/27/2025

Finding: A review of the training files for a group of randomly selected officers (see attached listings) indicates that the officers are being provided with the requisite training in the inmate grievance procedures.

Compliance Level: Fully Compliant

#### Train Corrections Staff on red flags and risk factors for suicidal inmates.

Date Reviewed: 11/06/2024

Finding: The policy on "Suicide Prevention Response," Number 0026, has been promulgated.

The training has been provided to staff regarding the use of "red flags" or "risk factors."

Compliance Level: Fully Compliant

# Either employ or contract for the services of at least one full time recreation specialist or therapy aide.

Date Reviewed: 05/26/2025

Finding: Ms. Regina Samuels has been hired for the recreation specialist position. I had the opportunity to speak with her regarding her ideas and concepts for developing recreational programming. She has already begun reaching out to other correctional institutions in order to obtain ideas, suggestions and potential issues with implementing various recreational programs.

#### **Findings: Restrictive Housing (New Findings underscored)**

# Adopt a Disciplinary Segregation Policy that is substantially similar to the specimen policy attached as Exhibit H.

Date Reviewed: 11/06/2024

Finding: The CCCC has the accepted policy, "Disciplinary Segregation Guideline," Number 0065 effective 03/25/2024 that is similar to Exhibit H.

Compliance Level: Fully Compliant

### Adopt an Inmate Discipline Policy that is substantially similar to the specimen policy attached as Exhibit I.

Date Reviewed: 11/06/2024

Finding: The CCCC has the accepted policy, "Inmate Discipline," Number 0011 effective 10/25/2024 that is similar to Exhibit I.

Compliance Level: Fully Compliant

Require the Warden or one of the Assistant Wardens to inspect the restrictive housing units on a weekly basis to determine whether the housing unit is operating in compliance with CCCC policies and state standard. Warden or Assistant Warden should document this inspection, and indicate what, if any corrective measures need to be taken.

Date Reviewed: 05/26/2025

<u>Finding: Attached is a copy of the Restricted Housing Unit Weekly Inspection report for the month of March 2025, conducted by the Warden and each of the Assistant Wardens.</u>

Compliance Level: Fully Compliant

### Within the existing mental health unit, make separate provisions for inmates with severe mental illnesses.

Date Reviewed: 11/05/2024

Finding: I reviewed the conditions of Jail I, Housing Unit 10A2 being used to house severely mentally ill inmates. The conditions of the individual cells were acceptable and sanitary. As can be seen in the pictures below, the housing unit is maintained in an orderly and sanitary manner. Restrictions related to the inmate in a particular cell are notated on the door to the cell along with the inmate's name.

Adopt a step-down approach for transitioning inmates in restrictive housing to a less restrictive housing setting.

Date Reviewed: 05/28/2025

Finding: The CCCC has implemented the policy "Restrictive Housing Unit Step-Down Management Program." A review of the training files for a group of randomly selected officers (see attached listings) indicates that the officers are being provided with the requisite training in the step down program.

Compliance Level: Fully Compliant

Advise Corrections Staff of the content of the policies identified in attached Exhibits H through I and enforce compliance with these policies.

Date Reviewed: 05/28/2025

Finding: A review of the training files for a group of randomly selected officers (see attached listings) indicates that the officers are being provided with the requisite training in the step down program..

#### Findings: Religion (New Findings underscored)

# Adopt and Amend Recreation and Programs Policy that is substantially similar to the specimen policy attached as Exhibit J.

Date Reviewed: 11/06/2024

Finding: The CCCC has the accepted policy, "Recreation/Programs" Number 0010 effective 03/25/2024 that is similar to Exhibit J.

Compliance Level: Fully Compliant

### Adopt a Religious Program Ramadan Policy that is substantially similar to the specimen policy attached as Exhibit K.

Date Reviewed: 11/06/2024

Finding: The CCCC has the accepted policy, "Religious Programming: Ramadan" Number 0053 effective 10/25/2024 that is similar to Exhibit J.

Compliance Level: Fully Compliant

### Provide space and equipment adequate for conducting and administering religious programs on an equivalent basis for all faiths.

Date Reviewed: 11/06/2024

Finding: Inmates were provided upon request religious items such as kufi, headscarves and prayer rugs. Ms. Julia Gron maintained a supply of sufis and headscarves in her office. Below is picture of a prayer rug in an inmate's cell. There were no restrictions on the inmate's ability to practice their religious beliefs in their individual cells. I did not observe a centralized location for the conduct of religious services.

Compliance Level: Fully Compliant

#### Employ, contract with, or engage the services of an Imam on at least a part-time basis.

Date Reviewed: 05/26/2025

Finding: By the second site visit, an employment offer had been made to an Imam; however, he had not yet been actively involved in the role. This task presents inherent challenges for various reasons. Despite the complexities involved, it is apparent that CCCC has diligently pursued the engagement of an Imam for the position.

Compliance Level: Fully Compliant

# Advise Corrections Staff of the content of the policies identified in attached exhibits J through K and enforce compliance with these policies.

Date Reviewed: 05/28/2025

Finding: A review of the training files for a group of randomly selected officers (see attached listings) indicates that the officers are being provided with the requisite training in the policies on recreation and religious programming.

#### Findings: Staffing/Training (New Findings underscored)

Develop a plan to civilianize positions within the CCC to limit the number of corrections officers doing non-correctional functions.

Date Reviewed: 05/27/2025

Finding: In response to the directive to develop a plan to civilianize positions within the CCCC to reduce the number of corrections officers performing non-correctional duties, a comprehensive plan has been formulated. However, significant challenges have been encountered in the recruitment and hiring process to fill the civilianized positions as per the plan. Despite these obstacles, ongoing efforts are being made to implement the requirement and transition towards a more efficient and specialized workforce structure within the CCCC.

Compliance Level: Fully Compliant

Develop a staffing plan utilizing National Institute of Corrections Staffing Analysis Workbook.

Date Reviewed: 05/28/2025

<u>Finding: A staffing analysis was conducted by Practical Solutions for Public Safety, Inc., (see attached report) and a draft report issued on 05/13/2025.</u>

Compliance Level: Fully Compliant

Permanently assign a facilities management team to the CCCC to respond to maintenance emergencies (plumbing or electrical) identified by the Sheriff, Jail Administrator, Warden, or Associate Wardens.

Date Reviewed: 11/06/2024

Finding: Associate Warden Shemo Damara and Lieutenant James Toney were the primary points of contact for facilities management and maintenance. An item of particular note was Lieutenant Toney overseeing issues with the tray wash machine in the kitchen. Due to the need for critical new components, which were on back order from the manufacture, the tray wash machine had been down for a number of weeks. This necessitated the use of the Styrofoam trays throughout the facility as handwashing of the trays would not have met Health Department code for the cleansing of the trays.

Compliance Level: Fully Compliant

Implement a plan to perform weekly supervisor/management inspections of housing units to ensure Inmates are receiving personal hygiene items, bedding, and clothing consistent with the CCCC's policies or applicable State of Ohio Standards. Inspections shall be conducted by either the Warden, associate Wardens, or Lieutenants. As part of these inspections, the supervisor/management staff person shall note deficiencies

in the appropriate logbook and provide directives to the pod officers, Corporals, or Sergeants to correct any deficiencies.

Date Reviewed: 05/28/2025

<u>Finding: The Lieutenants were making routine rounds into the housing units when they were</u>
<u>not engaged in managing other inmate management issues within their facility of assignment.</u>

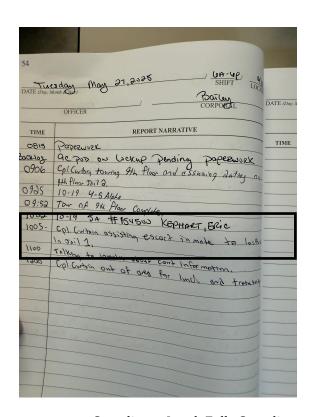
Compliance Level: Fully Compliant

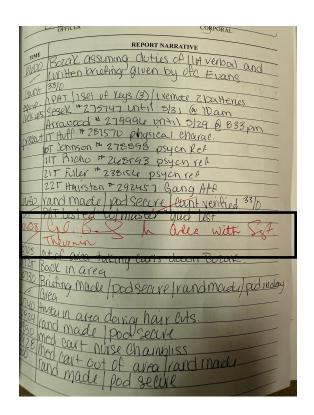
Require Corporals to make two rounds per shift of the floor to which they are assigned.

Date Reviewed: 05/27/2025

Finding: I reviewed housing logs to verify that corporals making the rounds, which they were.

Additionally, I observed multiple times corporals making the required checks and noting such rounds in the housing unit logbook as seen in the sample pictures below.





Compliance Level: Fully Compliant

Require Sergeants to make at least one round per shift of the area to which they are assigned.

Date Reviewed: 11/06/2024

Finding: As seen in the picture, a Sergeant is making a round in Jail I, Housing Unit 102A with Officer Rodriguez.

Compliance Level: Fully Compliant

#### Require Lieutenants to make daily rounds of the area to which they are assigned.

Date Reviewed: 07/25/2025

<u>Finding: I reviewed a random sample of logs indicating the Lieutenants are making the rounds.</u> Additionally, I observed the Lieutenants managing several situations and interacting with the correctional officers.

Compliance Level: Fully Compliant

### Require Associate Wardens or the Warden to visit Inmate living areas at least once per week.

Date Reviewed: 05/28/2025

Finding: Since the last site visit, all of the Associate Wardens and the Warden have been conducting weekly inspections of the housing units and documenting those inspections on a weekly report.

Compliance Level: Fully Compliant

### Utilize a training database to record and track all training provided to corrections officers.

Date Reviewed: 05/28/2025

Finding: The CCCC has successfully met the settlement requirements for this aspect, as evidenced by the attached training records showcasing the implementation of a database to monitor staff training. Upon requesting a comprehensive listing of all current correctional officers from the training unit (see attached), a random selection of officers was made for whom detailed training records for 2024 and 2025 were obtained. The training unit promptly provided the requested data, which was instrumental in verifying compliance with the diverse training mandates outlined in the settlement agreement.

#### Findings: Use of Force (New Findings underscored)

#### Adopt a Response to Resistance Policy that is substantially similar to Exhibit A.

*Date Reviewed: 11/06/2024* 

Finding: The CCCC has the accepted policy, "Response to Resistance" Number 0002 effective 03/25/2024 that is similar to Exhibit A.

Compliance Level: Fully Compliant

#### Adopt a Planned Use of Force Policy that is substantially similar to Exhibit B.

Date Reviewed: 11/06/2024

Finding: The CCCC has the accepted policy, "Planned Use of Force" Number 0024 effective 03/25/2024 that is similar to Exhibit B.

Compliance Level: Fully Compliant

#### Adopt a Chemical Agents Policy that is substantially similar to Exhibit C.

Date Reviewed: 11/06/2024

Finding: The CCCC has the accepted policy, "Chemical Agents" Number 0028 effective 03/25/2024 that is similar to Exhibit C.

Compliance Level: Fully Compliant

#### Adopt a Restraint Chair Policy that is substantially similar to Exhibit D.

*Date Reviewed: 11/06/2024* 

Finding: The CCCC has the accepted policy, "Use of Restraints Number 0002 effective 03/25/2024 that is similar to Exhibit D.

Compliance Level: Fully Compliant

# Advise Corrections Staff of the content of the policies identified in attached Exhibits A through D and enforce compliance.

Date Reviewed: 05/28/2025

Finding: A review of the training files for a group of randomly selected officers (see attached listings) indicates that the officers are being provided with the requisite training in response to resistance; planned use of force; chemical agents; and, restraints.

Compliance Level: Fully Compliant.

# Update training curricula and provide training on the policies contained in the attached Exhibits A through D.

Date Reviewed: 05/28/2025

Finding: A review of the training files for a group of randomly selected officers (see attached listings) indicates that the officers are being provided with the requisite training in response to resistance; planned use of force; chemical agents; and, restraints.