

REPORT ON THE
REINSPECTION OF

INDIAN RIVER JUVENILE CORRECTIONAL INSTITUTION

REINSPECTION DATE: APRIL 30, 2026



DAVE YOST

OHIO ATTORNEY GENERAL



Indian River Juvenile Correctional Facility Reinspection

Reinspection Date: April 30, 2026

Acronym: IRJCF
Address: 2775 Indian River Rd. S.W. Massillon, Ohio 44646
Warden/Superintendent: Chris Freeman (acting Superintendent)
CFIS Team Members Present: Drummond / B. Forrest

OVERVIEW OF CFIS INSPECTION

On April 30, 2026, the Office of Correctional Facility Inspection Services (CFIS) conducted a reinspection of the Indian River Juvenile Correctional Facility (IRJCF) to review areas of concern noted in its initial inspection on February 13, 2026, and March 2, 2026. Upon arrival, CFIS representatives were welcomed by IRJCF staff and escorted to the superintendent's conference room, where an opening session was held with Chris Freeman, acting superintendent; David Robinson, facility resource administrator; and Kelly Melvin-Campbell, deputy of programming. Mr. Freeman provided a summary of the progress IRJCF has made since the initial inspection. He stated that IRJCF has reduced the population — currently 108 youth — to stabilize the facility climate and improve staff retention. Mr. Freeman noted that since the reduction, acts of violence have decreased across all categories, including youth-on-staff assaults, youth-on-youth assaults, and youth-on-youth fights. Additionally, he stated that transitional separation hours have decreased by 28%.

Mr. Freeman stated that IRJCF has also created a modified movement unit (Unit C) for youth deemed the most disruptive. The unit is designed to provide increased programming and is staffed by an operations manager and/or staff members equipped with pepper spray. During the inspection, the unit housed six youths, who were in their second week of an 18-day stay in the unit. There are no TVs on the unit; youth participate in programming throughout the day and are provided with books to read during non-programming hours. Following introductions and the briefing from Mr. Freeman, the reinspection commenced.

In accordance with Ohio Revised Code Section 109.39, CFIS is required to inspect food services, the grievance process, and either an educational or rehabilitative program. Additionally, R.C. 109.39 authorizes CFIS to review any other areas deemed necessary. During the reinspection at IRJCF, the CFIS team examined the previous areas of non-compliance by examining the administrative duty officer (ADO) reports, assessing the food service area, and visiting several areas and units throughout the facility. While overall there was improvement, IRJCF continues to show deficiencies with the ADO reports.

SCOPE OF REINSPECTION

The reinspection focused on the following areas identified from the previous inspection:

- Food service area
- ADO reports
- Unit cleanliness

FOOD SERVICE AREA INSPECTION (160-FSM-06)

The food service department was inspected to ensure compliance with the Ohio Department of Youth Services (DYS) policy 160-FSM-06, Food Service Safety, Sanitation and Inspections.

Executive staff/supervisors conducting unannounced rounds: Yes No N/A

A. SANITATION

Dining room(s) meet DYS policy for cleanliness: Yes No N/A

Serving line(s) meet DYS policy: Yes No N/A

Dish room area meets DYS policy for cleanliness: Yes No N/A

Dish washer water temperature meets DYS policy: Yes No N/A

Handwashing stations in working order: Yes No N/A

Handwashing stations operate at an appropriate temperature: Yes No N/A

Eye washing stations operate appropriately: Yes No N/A

B. FOOD SERVING & STORAGE COMPLIANCE

Appropriate food menus posted: Yes No N/A

Food and storage area(s) temperatures comply with DYS policy: Yes No N/A

Food service workers wearing hairnets, gloves, etc.: Yes No N/A

Serving utensils appear to be in good working order: Yes No N/A

Freezer temperatures in compliance with DYS policy: Yes No N/A

C. CHEMICAL & TOOL CONTROL

Tools properly stored/signed out/accounted for: Yes No N/A

Tools properly etched with an identifier: Yes No N/A

Chemicals properly stored and inventoried: Yes No N/A

Relevant Previous Inspection Notes: During the initial inspection it was noted that four tools were missing in the kitchen tool room, and there was no chit on the assigned peg to indicate who had the tool. A food service worker admitted that he forgot to place chits when removing the tools but corrected the issue.

The cooler floors required thorough cleaning, and remnants of food from several days earlier were observed near the wall. CFIS staff additionally noted that boxes and storage risers had been placed directly against the wall, contrary to ServSafe requirements which mandate a clearance of several inches. The food service director assured immediate remediation of these deficiencies. Within the cooler, a bucket was positioned atop a skid of milk to capture intermittent drips from a pipe, which was covered in electrical tape. Mr. Kenneth Black, the then-superintendent, confirmed that the maintenance department would promptly address this issue.

Reinspection Notes: During the reinspection, CFIS staff conducted a thorough review of the food service department to verify corrective actions and ensure compliance with established standards.

The maintenance team successfully resolved the issue with the leaking pipe above the milk skid. No visible leaks or buckets were observed during the reinspection. The floors in the cooler were clean and clear of debris, demonstrating attention to sanitation and maintenance. Staff repositioned risers and shelves several inches away from the cooler walls. This arrangement now strictly adheres to ServSafe requirements, enhancing both safety and compliance. In addition to updated storage practices, all food and storage area temperatures, including freezer readings, are monitored daily.

The food service tool room logbook was properly completed and reflected the proper use of chits on the tool board. Chits were present for all tools not in the tool room, and the food service supervisor had created chits specifically for the department. These improvements strengthen accountability and safety in tool management. All issues in the food service department were resolved.

CFIS staff did not observe any violations of DYS policy 160-FSM-06, Food Service Safety, Sanitation, and Inspections, during the reinspection.

Administrative Duty Officer (ADO) Reports (150-FAM-01)

Relevant Previous Inspection Notes: On March 2, 2026, the CFIS team reviewed the ADO reports for the month of February. The ADO report (form DYS2480) is completed daily by the designated executive staff tasked with completing inspection rounds according to DYS policy 150-FAM-01, Facility Administrative Rounds and Communication. The designated rounds cover food service, visitation, housing units, the recreation area, and any other areas designated by the superintendent.

The ADO is responsible for monitoring adherence to facility schedules during rounds. Any exceptions or deviations must be documented in the ADO report and reported to the relevant department head. Each week, the ADO evaluates a facility meal, noting menu changes, sanitation concerns, or poor evaluations, and promptly reports these findings to the food service manager and superintendent. The ADO uses the ADO report to record rounds, issues, and follow-up, submitting it to the superintendent by the next business day. Upon completion of the ADO rounds, a report documenting the rounds is provided to the superintendent's office for review and signature. The superintendent ensures timely report receipt, verifies all required areas were visited, and oversees referrals and follow-up for any concerns. Reports are maintained as per retention requirements, and issues raised become topics for executive staff and department head meetings.

The report includes the date and time of the rounds, areas visited, observations, concerns and recommendations. Staff completing the rounds must sign the record of staff visit and note the time in and time out of the area. CFIS reviewed the ADO reports for February and noted multiple concerns.

Several ADO reports showed that rounds were marked as complete through video review, indicating that the ADO did not conduct required physical rounds that day. Without making a physical round the phones on the units were not checked to ensure that they were properly working, the cleanliness of the unit could not be observed, and the ADO would not be able to verbally/physically communicate with youth and/or staff.

There were several other days where the ADO did not complete all reports for the assigned area. Further, most reports did not show that a meal was sampled. IRJCF leadership stated that all executive staff will be retrained by the end of March on the expectations of ADO rounds. CFIS will seek documentation verifying that Indian River staff did in fact receive training and will re-review the ADO reports to ensure completion of the rounds and the corresponding reports.

Reinspection Notes: The reinspection focused on concerns identified in the previous inspection, specifically incomplete documentation, lack of physical rounds, insufficient meal sampling, and inconsistent verification practices. On March 31, 2026, IRJCF executive staff received updated training as it relates to ADO rounds and ADO documentation from their leadership. However, a comprehensive review of the April 2026 ADO reports and staff assignments revealed significant deficiencies in the execution and documentation of ADO responsibilities still exist.

Key findings show that multiple ADO reports indicate the DYS Prison Rape Elimination Act (PREA) tip line was not checked. According to DYS policy 179-YSA-01, the ADO is responsible for verifying the proper operation of the tip line. The ADO must ensure that all housing unit telephones and the PREA tip line are working so youth can report sexual abuse or harassment. During each round, the ADO should call the facility tip line to confirm it is operational, record the prompt heard, and document any issues related to telephone operation or tip line accessibility. Additionally, information about the tip line must be posted throughout the facility with clear instructions for youth, and the ADO should confirm that all required postings are accessible.

Despite these detailed procedures, the reviewed reports revealed gaps in compliance. The reports made no mention of properly testing the telephones or the PREA tip line, and the required notations were missing from the comment section. If required information, such as tip line verification or prompt documentation, is missing from ADO reports, the facility supervisor must follow up with the ADO to ensure compliance with DYS policy 150-FAM-01.

The absence of proper verification and documentation in the reports suggests a significant lapse in facility oversight, potentially compromising youth safety and policy adherence. In addition, third shift rounds were not conducted in the areas where youth sleep.

IRCJF staff indicated that meal sampling and temperature checks are not performed daily. However, policy 150-FAM-01 requires weekly meal sampling by the ADO, with immediate reporting of menu substitutions, significant sanitation concerns, or poor meal evaluations to the food service manager and inclusion in the ADO report. Review of ADO reports revealed inconsistent documentation of meal sampling and temperature checks, with some reports lacking verification that meals were sampled or evaluated as required. To ensure compliance, staff should be reminded of weekly meal sampling requirements, and ADO reports should consistently include verification of meal sampling and temperature checks.

While a general cross-reference check with visitor sign-in books confirmed ADOs signed reports and completed rounds, there were four weekend days of ADO reports that were not present in the documentation provided to CFIS. The provided calendar indicated these rounds were purportedly "completed prior to the assigned day." Given that ADO rounds are to be completed every day, this constitutes a failure to perform the ADO rounds on those days.

Several reports documented critical issues – including non-functional youth phones, security breaches (missing padlocks/broken windows), and medical concerns (youth tooth pain) – yet contained no evidence of follow-up actions or resolutions. Pages were missing from two reports. Furthermore, the superintendent signed off on the reports which had missing pages. In these same reports, the superintendent did not complete notations within two critical compliance sections indicating whether the report was received in a timely manner and reflecting assignment of follow-up tasks.

Facility Cleanliness

Previous Inspection Notes: During the inspection on February 13, 2026, CFIS staff toured and inspected seven of the eight living units. All units consisted of a dayroom with two youth phones, a group room, and individual rooms for the youth. There were three restrooms and two showers on the unit.

Upon arriving at the upper-level hallway, it was noted that the area appeared messy, with several trash bags and other trash left on the floor. The area was cleaned prior to the inspection being completed. Units I, N and S did not have PREA signs on the walls. CFIS was informed that the units had been recently painted, and the signs had not been rehung. Signs were rehung by the time CFIS exited the facility.

Reinspection Notes: During the reinspection CFIS staff toured several areas of the facility and three living units including the modified movement unit (Unit C). All areas were clean and free of trash and debris. All units had PREA signs posted. While on Unit C, it was noted that all six youths were seated and engaged in programming. The unit was staffed with a youth specialist, programming staff, and an operations manager.

CONCLUSION

During the reinspection of the food service department, inspectors confirmed that corrective actions were thoroughly implemented. All coolers were cleaned and sanitized, and daily temperature logs were updated and verified. Food storage containers were clearly labeled and organized according to standard operating procedures, ensuring compliance and accessibility. Furthermore, previous issues with leaking pipes have been resolved, with no leaks or temporary containment measures (e.g., buckets) observed on-site.

The reinspection of ADO reports indicates that the facility continues to struggle with executing and documenting core responsibilities. Specific deficiencies include incomplete documentation, a lack of physical rounds on the noted four weekend days, and inconsistent verification practices. DYS leadership indicated they are actively collaborating with executive staff to improve the quality of these reports and clarify staff expectations. CFIS will continue to monitor areas of concern at IRJCF.

The reinspection of the facility revealed that IRJCF has improved on the overall cleanliness of the facility, specifically the common areas where trash bags and debris were noted in the previous inspection.

CFIS will conduct a reinspection of ADO reports at IRJCF within the next two months to verify that recent corrective actions have been properly implemented and that compliance standards are being met.



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