

**REPORT ON THE
INSPECTION OF**

FRANKLIN MEDICAL CENTER

INSPECTION DATE: OCT. 31, 2025



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INTRODUCTION

In the state's 2025-27 biennial budget bill, the 136th General Assembly created the Office of Correctional Facility Inspection Services (CFIS) within the Ohio Attorney General's Office. Established by Ohio Revised Code Section 109.39, CFIS – effective Sept. 30, 2025 – became the primary entity responsible for inspecting Ohio's state correctional institutions, privately operated correctional institutions and youth services facilities. Before that date, the Correctional Institution Inspection Committee (CIIC), a joint committee of the General Assembly, was responsible for inspecting Ohio's correctional institutions and youth facilities. The General Assembly abolished the CIIC and re-constituted it as CFIS in the budget bill.

CFIS's duties are set forth in R.C. 109.39(A), which provides:

“There is, as a section within the office of the attorney general, an office of correctional facility inspection services. The office shall establish and maintain a continuing program of inspection of each state correctional institution used for the custody, control, training, and rehabilitation of persons convicted of crime and of each private correctional facility; any local correctional institution used for the same purposes; and any youth services facility. Each inspection shall include an evaluation of the inmate grievance procedure, compliance with meal requirements, at least one review of rehabilitative or educational programs, and any other compliance area the office determines is appropriate. Not later than the last day of January of each year, the office shall submit a report of its findings from the previous calendar year to the general assembly in accordance with section 101.68 of the Revised Code.”

CFIS is not required to provide a correctional institution or youth facility with advance notice of an inspection, pursuant to R.C. 109.39(A). In addition to its mandatory inspection duties, CFIS may assist the attorney general and correctional facility leadership in developing and evaluating programs to improve the condition or operations of the facilities it is required to inspect. R.C. 109.39(B).

Besides the CFIS inspections, each Ohio Department of Rehabilitation and Correction (DRC) facility undergoes an annual inspection and accreditation by the American Correctional Association (ACA) and an internal management audit (IMA). Although CFIS staff may review and refer to the ACA and IMA findings, CFIS inspections are separate and independent.

To institute the continuing program of inspection required by Ohio law, CFIS, shortly after its formation, began conducting an initial inspection of the DRC and Department of Youth Services (DYS) facilities that had not been inspected by CIIC in 2025. The initial inspections were designed, in part, to help CFIS familiarize itself with each facility, the warden and the staff. Further, each initial inspection allows CFIS to determine what additional data might be needed for future inspections and what inspection methodology is appropriate. This report details the initial inspection of Franklin Medical Center (FMC).

GENERAL OVERVIEW

On Oct. 31, 2025, CFIS completed its initial inspection of FMC. Warden Malcolm Heard was notified the day before that CFIS would be arriving at 9 a.m. the following day. The CFIS team consisted of Dr. James Wesson, chief of inspections, and Deborah Drummond, lead inspector.

FMC, located in Columbus, has three medical units that provide inpatient services to incarcerated adult patients who need intensive skilled medical and nursing care. Two of the units house patients with short-term needs. The third unit provides specialized care for those with significant long-term medical needs and/or significant physical disabilities. FMC's maximum capacity is 272 incarcerated persons (IPs). As of the inspection date, the facility housed 248.

FMC's most recent IMA was done on March 12-13, 2025. The annual audit is conducted by an independent auditor, who reviews a facility's compliance with ACA's 5th Edition Standards and the 2025 Ohio Standards and Observations, in preparation for the next ACA audit. All institutional work, industry and vocational/educational programs are also audited.

The 2025 IMA found FMC in compliance with all 64 of the applicable mandatory ACA standards and 505 of the 509 applicable non-mandatory ACA standards. FMC was found in compliance with 63 of the 76 applicable Ohio standards. Franklin Medical Center will be scheduled for an ACA re-accreditation audit in 2027. The table below illustrates FMC's rate of compliance with ACA and Ohio standards over the past three years.

IMA Audit Scores	2025	2024	2023
ACA Mandatory	100%	100%	98%
ACA Non-mandatory	100%	100%	100%
Ohio Standards	90%	95.5%	92%

AREAS INSPECTED BY CFIS

Pursuant to R.C. 109.39, CFIS must inspect the grievance process, food services, and an educational or a rehabilitative program. In addition, R.C. 109.39 empowers CFIS to inspect any other area that it deems appropriate. While at FMC, CFIS also inspected:

- Living areas
- Recreation area
- Library/Law library
- Visitation area
- Specialized housing

Before arriving for the inspection, CFIS inspectors asked FMC to provide for the inspectors' review copies of the previous seven days of administrative duty officer (ADO) reports and the 15 most recent grievances. Upon arrival at the facility, the team was greeted by the institutional inspector. After introductions in the warden's conference room, the inspection, led by FMC executive staff members, began.

MANDATED AREAS OF INSPECTION

Grievance process

DRC's grievance process, governed by Ohio Administrative Code Section 5120-9-31, consists of three steps. It begins with an IP filing an informal complaint resolution (ICR) with the supervisor of the area in which the IP has a concern. The IP has 14 calendar days to file an ICR from the date of the incident. The inspector of institution services (IIS) has 14 days to respond and has an option to file an extension. If the complaint is not resolved or the IP is dissatisfied with the inspector's decision, the IP can file a grievance with the IIS within 14 days of the ICR response. Or, in cases in which an IP believes that the warden or the IIS was personally and knowingly involved in a violation of a law, rule or policy – or condoned such a violation – the IP can file a grievance directly to the chief inspector.

The institutional inspector investigates a grievance to determine whether any DRC policy, rule or procedural guideline was violated – and either denies or grants the grievance. If the IP is not satisfied with the decision, the IP can appeal the IIS' decision to the chief Inspector. The Office of the Chief Inspector, housed within DRC's central office, makes the final determination for every grievance that is appealed from the facility level. R.C. 5120.06.

Every IP is issued a tablet computer with access to ViaPath, the system through which IPs electronically file a grievance. Paper grievance forms are also available for those who prefer a manual process. The grievance process is designed to address IP complaints regarding any aspect of institutional life, whether the issue relates to the application of policies or procedures, the conditions of confinement, or the actions of institutional staff.

During the inspection, CFIS focused on ensuring that FMC is systematically logging and tracking grievances in ViaPath, the staff is issuing timely responses, and the grievance response is within policy guidelines. CFIS also looked for any sign of retaliation against any IP who filed a grievance, checked to ensure that the appeals process is accessible, looked for any trends with grievances, and viewed grievance responses to ensure that they appropriately cited the correct policy.

Due to the nature of the facility, FMC receives a relatively low number of grievances. Thus, CFIS expanded its review to include grievances and ICRs from April 2025 to Oct. 31, 2025. Of the ICRs reviewed, one lacked a policy citation within the response. The IIS was already aware of the ICR in question; he informed CFIS that he had addressed the issue with staff members and the warden. As of the inspection date, FMC had two sustained grievances in 2025. FMC's grievance process appeared to run efficiently and in accordance with DRC policy. FMC appeared to have procedures in place to identify and remedy any deficiencies in responding to ICRs or grievances.

Food services

The food-services area was inspected to ensure compliance with DRC Policy 60-FSM-02, Food Service Operations, and DRC 60-FSM-06, Safety and Health Protection for Staff and Incarcerated Individuals Assigned to Food Service.¹

¹ All DRC policies referenced herein are available at: <https://drc.ohio.gov/about/resource/policies-and-procedures/3-policies-and-procedures>.

Meal sampling

During the inspection, the CFIS team sampled a lunch of smoked turkey sausage, scalloped potatoes, cabbage and carrots, white bread, mustard and cinnamon cake. The portion sampled met policy standards for taste, appearance and temperature. Temperatures for all items served and sampled were within acceptable guidelines, according to DRC Policy 60-FSM-02 Food Service Operations (hot foods at or above 140 degrees, cold foods at or below 40 degrees).

Observations

The food-services area was clean and orderly, and the winter menu was posted. Incarcerated food-services workers were appropriately dressed in protective clothing (hair and beard nets, rubber gloves). Uniforms were neat and appeared to be clean. FMC offers the IN2Work program, designed to teach skills and provide certifications needed for careers in culinary arts. Participants were actively engaged in meal preparation.

The kitchen tool room was inspected, and all tools were accounted for. Tools not present were replaced with a chit, which is an object placed on the peg where the tool should be. A tool control log was being used to indicate the individual to whom the tool was assigned, serving as a safety check. There were no broken tools in the area. Coolers and freezers were in proper working order, and storage areas were cleaned and organized.

The dish room was clean. Dish-cleaning water temperatures complied with DRC 60-FSM-02. Overall sanitation was appropriate, as proper disinfectants were being utilized to clean the area. CFIS verified completion of sanitation and hygiene training for the food-services staff and IP staff to ensure compliance with 60-FSM-06. Safe Serv Certification was also verified. The CFIS team spoke to multiple IPs in the food-services area; none reported any concerns that would constitute a violation of DRC policy.

Educational or rehabilitative program

DRC, through the Ohio Central School System (OCSS), offers educational programs designed to meet the needs of incarcerated people. The programs include adult education courses, vocational training and technical training, all of which incorporate technology in the programming. Collectively, the programs are designed to enhance the incarcerated population's employability upon release. On the date of the inspection, FMC's academic and career programs included:

- Education:
 - Adult basic education
 - General educational development (GED)
 - Pre-GED
 - Special education
 - Certificate and degree programs through Sinclair University
 - Otterbein University writing and ethics classes
- Apprenticeships:
 - Animal trainer
 - Cook
 - Health-care sanitation tech
 - Heating, ventilation and air conditioning (HVAC)
 - Materials coordinator

- Nurse assistant
- Recovery operator
- Tailor

Upon review, FMC's educational and career programs appeared to meet the needs of IPs and to allow IPs to continue their education while receiving medical treatment. The facility's vocational training aligns with current job market demands. FMC offers significant post-secondary educational opportunities to IPs. Instructors have sufficient qualifications, and the educational materials and technology are current. Enrollment and attendance were being tracked and monitored by staff. In general, FMC's education area was clean, and the IPs were engaged. The area appeared to have the appropriate safety protocols in place. Staff members highlighted their collaborative efforts to prepare IPs for reintegration into the community. There were no deficiencies noted in any educational area.

NON-MANDATED AREAS OF INSPECTION

Living areas

CFIS toured all three of FMC's living areas, which were clean and staffed by engaged professionals. The Oncology Department showcased a bell for chemo patients to ring after completing their last treatment; incarcerated patients were also given a certificate of completion and a small celebratory cake.

Recreation area

FMC's recreation area stood out. The supervisor was knowledgeable and had adapted a variety of exercise programs and treatment plans to meet specific needs of patients. Activities offered included chair yoga, Wii exercising, one-on-one workouts, arts and crafts, music and holistic referrals. No violations of DRC 77-REC-01, Recreation and Leisure Time Activities, were observed or reported.

Library /Law library

FMC has a large library, including a law library. The newly remodeled area was clean and organized. IPs had access to LexisNexis on their tablets. No violations of DRC 58-LIB-01, Comprehensive Library Services, were observed or reported.

Visitation area

The visitation area was clean and bright, with adequate seating and a children's area. The vending machines were stocked with items for visitors to purchase. Visitation hours were plentiful, staggered between male and female IPs. Bedside visitation was also available for all IPs. No violations of DRC 76-VIS-01, Incarcerated Person (IP) Visitation, were observed or reported.

Specialized housing

CFIS inspected the Cadre Unit, which consists of Level 1 (the lowest security level) IPs who perform housekeeping duties at FMC. Like other levels of FMC units, the Cadre Unit offers recreation, recovery services, mental-health services and programming. The staff was professional. No sanitation issues were observed or reported, with toilets and sinks in working order. The unit was appropriately staffed with two officers, a sergeant, a case manager and a unit manager.

MISCELLANEOUS INSPECTION MATTERS

Prison Rape Elimination Act (PREA)

Congress passed the Prison Rape Elimination Act (PREA) in 2003 to provide for the analysis of the incidence and effects of prison rape in federal, state and local institutions. PREA also provides information, resources, recommendations and funding to protect incarcerated people from prison sexual assaults and rapes. PREA applies to all DRC institutions, including privately operated and juvenile correctional facilities.

The Ohio State Highway Patrol (OSP), the law enforcement agency responsible for investigating criminal offenses inside correctional institutions, tracks sexual assaults using the PREA incident system.

CFIS reviewed FMC's PREA reports from that system and found no substantiated cases. PREA signs were appropriately posted throughout the facility (e.g., housing units, recreation area, library, visitation area, education area, front entrance and medical area). Contact information for a local rape-crisis center was posted within FMC.

Staff recruiting and retention

On the day of the inspection, FMC has a vacancy rate of less than 10%. Retention rates appeared to be good.

Naloxone (Narcan) going-home kits

FMC offered Narcan kits to IPs on the day of their release. Each kit contained two doses of naloxone and 10 fentanyl testing strips. The kits are stored in Harm Reduction Vending Machines, which are placed in a discrete area. FMC complied with DRC 10-SAF-20, Naloxone Safety and Health Procedures.

Administrative duty officer (ADO) reports

CFIS reviewed the ADO (50-PAM-02) reports provided by FMC staff, all from the week before the facility inspection. An ADO report is completed daily by the executive staff member designated to complete inspection rounds. The rounds cover food services, visitation, housing, recreation and any other area identified by the warden. Upon completion of the rounds, the ADO provides the warden's office a summary of his/her findings. ADO reports include the date and time of the rounds, areas visited, observations, concerns and recommendations. The FMC reports reviewed by CFIS had been completed promptly, in accordance with policy. No violations of 50-PAM-02 were observed or reported.

Security/Facilities

Units were appropriately staffed by two correctional officers, a case manager, a sergeant and a unit manager. Restrooms were clean, with all showers, sinks and toilets in good working condition. Units contained essential items, including a washer and dryer, ice machines, water fountains and microwaves. All were in good working order. Cleaning products and supplies were secured appropriately. Dayrooms had televisions and appropriate recreational games and activities. According to the employee sign-in log (DRC-6011), executive staff members were conducting rounds according to policy. Although the facility was clean, a sink in a hallway appeared to have been in disrepair for some time. FMC staff stated that a work order requesting the sink's repair or replacement had been submitted.

Appropriate informational memos were posted throughout the facility (e.g., library, law library and recreation hours; programmatic information). Fire evacuations plans were posted in highly visible areas. PREA information was posted at the building's front entrance; in the housing units; and in the food-services, educational/vocational, medical, recreation, and visitation areas. Also posted were unit staff pictures.

Notably, FMC has in place procedures for working with IPs who may struggle due to their ailments. For example, although all IPs in the facility have ViaPath tablets, other IPs are permitted to act as scribes for patients who are unable to access or use tablets due to an ailment. In addition, human-services associates — known as range walkers — are available to assist IP patients with commissary, kites, and other essential functions. None of the IPs interviewed during the inspection raised a concern that would constitute a violation of DRC policy. No security issues were observed or reported.

CONCLUSION

FMC staff members were professional, polite and transparent about the facility's protocols and procedures. The staff exhibited pride in the institution and took responsibility for its operations. FMC was clean and orderly. CFIS did not observe any issues with conditions of confinement or compliance with DRC policies and procedures.



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