

# Office of the Auditor General

## Performance Audit Report

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### **Ionia Correctional Facility**

Michigan Department of Corrections

March 2025

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State of Michigan Auditor General  
Doug A. Ringler, CPA, CIA

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The auditor general shall conduct post audits of financial transactions and accounts of the state and of all branches, departments, offices, boards, commissions, agencies, authorities and institutions of the state established by this constitution or by law, and performance post audits thereof.

The auditor general may make investigations pertinent to the conduct of audits.

*Article IV, Section 53 of the Michigan Constitution*

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Office of the Auditor General

## Report Summary

### *Performance Audit*

### *Ionia Correctional Facility*

### *Michigan Department of Corrections*

**Report Number:**

**471-0233-23**

**Released:**

**March 2025**

The Ionia Correctional Facility is located in Ionia, Michigan. The Facility opened in 1987 and houses level II and level V adult male prisoners in seven housing units. Two housing units are designated for level II prisoners and have 280 beds in a cubical/dorm setting. The remaining five housing units are designated for level V prisoners and have a capacity for 426 prisoners in total. The Facility was appropriated \$37 million from the General Fund for fiscal year 2024 and employed approximately 290 personnel, including 174 corrections officers, to oversee approximately 640 prisoners as of January 2025.

Audit Objective			Conclusion
Objective: To assess the Facility's compliance with selected policies and procedures related to safety and security.			Partially complied
Findings Related to This Audit Objective	Material Condition	Reportable Condition	Agency Preliminary Response
Corrections officers likely falsified cell search logbooks 38% of the time and did not complete over 20% of required daily cell searches we reviewed. Also, 31% of the cell searches we observed on surveillance video footage were completed in less than one minute, bringing into question the thoroughness of the searches ( <a href="#">Finding 1</a> ).	X		Agrees
Our surveillance video review showed nearly 30% of the time prisoners were not subjected to cell sense metal detectors or were not searched when flagged by the detector ( <a href="#">Finding 2</a> ).	X		Agrees
In 19% of level V housing unit security rounds we reviewed, corrections officers did not open one or more closed cell windows to verify a prisoner's presence and well-being ( <a href="#">Finding 3</a> ).	X		Agrees

<b>Findings Related to This Audit Objective (Continued)</b>	<b>Material Condition</b>	<b>Reportable Condition</b>	<b>Agency Preliminary Response</b>
Our surveillance video review showed 64% of the time items in our sample were not fully searched when entering the Facility through the sallyport. In addition, 55% of vehicles and 24% of individuals we observed passing through the sallyport were not fully searched ( <u>Finding 4</u> ).	X		Agrees
The Facility's front gate surveillance video footage we reviewed showed 27% of items entering the Facility and 12% of officers exiting the arsenal were not fully searched at the front gate ( <u>Finding 5</u> ).	X		Agrees
For the shifts we selected, corrections officers did not perform the minimum number of required prisoner searches per shift 14% of the time ( <u>Finding 6</u> ).		X	Agrees
In our review, weekly inspections of sealed arsenal cabinets and daily arsenal inspections were not performed 68% (on average) and 18% of the time, respectively ( <u>Finding 7</u> ).		X	Agrees
<b>Observations Related to This Audit Objective</b>	<b>Material Condition</b>	<b>Reportable Condition</b>	<b>Agency Preliminary Response</b>
An evaluation of Statewide Michigan Department of Corrections policy regarding use of metal detectors in correctional facilities could enhance corrections officers' ability to detect potentially dangerous objects ( <u>Observation 1</u> ).	Not applicable for observations.		

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**Doug A. Ringler, CPA, CIA**  
Auditor General

March 27, 2025

Heidi E. Washington, Director  
Michigan Department of Corrections  
Grandview Plaza Building  
Lansing, Michigan

Director Washington:

This is our performance audit report on the Ionia Correctional Facility, Michigan Department of Corrections.

Your agency provided preliminary responses to the recommendations at the end of our fieldwork. The *Michigan Compiled Laws* and administrative procedures require an audited agency to develop a plan to comply with the recommendations and to submit it to the State Budget Office upon completion of an audit. Within 30 days of receipt, the Office of Internal Audit Services, State Budget Office, is required to review the plan and either accept the plan as final or contact the agency to take additional steps to finalize the plan.

We appreciate the courtesy and cooperation extended to us during this audit.

Sincerely,

Doug Ringler  
Auditor General



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# AUDIT OBJECTIVES, CONCLUSIONS, FINDINGS, AND OBSERVATIONS

## COMPLIANCE WITH SELECTED SAFETY AND SECURITY POLICIES AND PROCEDURES

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### BACKGROUND

The Ionia Correctional Facility has 2 housing units (general population\*) for level II\* prisoners and 5 housing units (2 general population, 2 START\*, and 1 administrative segregation) for level V\* prisoners. The Facility housed approximately 640 prisoners and had approximately 290 personnel as of January 2025.

The Facility operates under the Michigan Department of Corrections' (MDOC's) policy directives and operating procedures and the Facility's operating procedures designed to have a positive impact on the safety and security of Facility prisoners and staff. The policies and procedures address numerous aspects of the Facility's operations, such as prisoner and cell searches\*, tool control, prisoner counts\*, and gate manifests\*, among others.

Although compliance with these policies and procedures contributes to a safe and secure prison, the nature of the prison population and environment is unpredictable and inherently dangerous. Therefore, compliance will not eliminate safety and security risks.

### AUDIT OBJECTIVE

To assess the Facility's compliance with selected policies and procedures related to safety and security.

### CONCLUSION

Partially complied.

### FACTORS IMPACTING CONCLUSION

- All firearms, including pistols, shotguns, and rifles, were properly accounted for within the arsenal.
- All electronic perimeter checks observed on surveillance video footage were performed in accordance with policy and all sampled required perimeter checks were properly documented.
- Nearly all (98%) required daily employee searches selected for review were documented as completed.
- All formal prisoner counts observed on surveillance video were performed in accordance with policy and 96% of sampled formal prisoner counts were properly documented.

*\* See glossary at end of report for definition.*

- The Facility did not achieve compliance in 7 of the 11 selected operational areas reviewed as noted in the material conditions\* related to cell searches, cell sense metal detectors\*, security rounds\*, sallyport\* gate activity, and front gate and arsenal entrances (Findings 1 through 5) and the reportable conditions\* related to prisoner searches and arsenal inspections (Findings 6 and 7).

\* See glossary at end of report for definition.

## FINDING 1

**Significant improvements needed in the performance of cell searches, including thoroughness of the searches.**

The Facility did not perform, thoroughly perform, or accurately document all required searches of prisoner cells or bunk areas intended to detect and confiscate contraband\*. Compounding the severity of this situation, corrections officers logged searches as completed; however, our review of surveillance video showed the searches were not always conducted.

Facility operating procedure 04.04.110A requires each first and second shift corrections officer assigned to a housing unit conduct thorough and complete searches of at least two randomly selected prisoner cells or bunk areas per shift. The procedure also requires the search to be documented in a logbook and to include the name of the employee conducting the search, the date and shift of the search, the area searched, and the prisoner's name and number whose cell was searched.

To evaluate the Facility's compliance with prisoner cell search requirements, we randomly selected 8 days between May 15, 2023 and June 30, 2023. We further randomly and judgmentally selected a Facility housing unit from the Facility's 7 housing units and randomly and judgmentally selected one or more shifts, resulting in the selection of 60 required cell searches. For the 60 searches, we observed the corresponding surveillance video footage and noted:

22% of required daily cell searches reviewed were not completed.

- a. About 20% of the time, corrections officers did not document performance of the minimum number of required cell or bunk area searches. Only 47 searches were documented as completed, falling 22% short.

The Facility stated the searches were not always completed because of staff needing additional training.

- b. Corrections officers logged 47 searches as completed, yet the surveillance video evidence we reviewed showed no officer(s) entered the cell or bunk area in 18 (38%) of these instances.

The Facility cell searches documented but not completed occurred because of staff needing additional training.

- c. Our surveillance video review for 29 completed cell or bunk area searches disclosed officers conducted searches in an average of 2 minutes and 10 seconds, raising concerns about their thoroughness.

\* See glossary at end of report for definition.

The following table summarizes our surveillance video review results:

Cell or Bunk Area Search Length of Time for 29 Cell Searches Observed on Surveillance Video

31% of cell searches were completed in less than one minute.

Length of Cell or Bunk Area Search Time	Count (Percent)	Cumulative Count (Percent)
30 seconds or less	5 (17%)	5 ( 17%)
31 seconds to less than 1 minute	4 (14%)	9 ( 31%)
1 minute to less than 3 minutes	11 (38%)	20 ( 69%)
3 minutes to less than 5 minutes	7 (24%)	27 ( 93%)
5 minutes to less than 10 minutes	2 ( 7%)	29 (100%)
Total	29	

Average length of time 2 minutes and 10 seconds

MDOC policy directives and Facility operating procedures do not establish a minimum cell search time and do not define a "thorough and complete" search. However, MDOC's training curriculum teaches new corrections officers to be systematic, thorough, and curious when conducting searches by examination of shelves and/or cabinets and all articles on or in them, clothing, shoes, blankets, sheets, books, letters, magazines, packages, light sockets, toilets, faucets, crossbars of the cell, heaters, ventilation grills, any bored holes in furniture, and the entire floor of the cell, among others.

Facility operating procedure 04.04.110B requires level V housing sergeants to monitor one cell search daily. Facility operating procedure 04.04.110C requires level II housing managers to monitor the search of one bunk area weekly to ensure searches are being conducted properly. However, the operating procedures do not specify the nature or documentation requirements for this monitoring.

The Facility stated searches completed in less than one minute were the result of cells potentially containing a small amount of property or being vacant.

- d. Approximately 11% of the 47 documented cell or bunk area searches contained documentation inaccuracies. For example, a corrections officer logged a cell number as searched; however, based on our surveillance video review, a different cell was searched at the time logged by the officer.

Other documentation inaccuracies included:

- A different corrections officer conducted the search than was documented.
- The search was conducted during a different shift than was documented.

The Facility stated documentation inaccuracies occurred because of clerical errors and staff needing additional training.

We consider this finding to be a material condition because of the:

- Significant exception rates.
- Falsification of cell search logbook documentation, which represents a violation of MDOC Employee Handbook work rules.
- Likelihood a 2 minute 10 second average cell or bunk area search does not meet the spirit of the search requirement intended to detect contraband and help prevent violence and escape.
- Potential negative impact on safe operation of the Facility.

## RECOMMENDATIONS

We recommend the Facility perform and accurately document all required cell and bunk area searches.

We also recommend the Facility improve the thoroughness of cell and bunk area searches.

## AGENCY PRELIMINARY RESPONSE

MDOC provided us with the following response:

*The Department agrees and will comply.*

*We agree with the findings above regarding cell searches. Exceptions noted were mainly caused by clerical errors and staff needing additional training.*

*The searches that were done in less than one minute were the result of several factors: Some of the cells in question were empty/vacant, or the search was done in a segregation or START cell that may contain very little property to search. All of Unit 1 is considered segregation, detention, administrative segregation, and temporary segregation. Units 2 and 3 are designated as START and house seriously mentally ill prisoners who also have reduced property. Of the 29 cell searches that averaged 2 minutes and 10 seconds, 16 (55%) of those were either empty, some type of segregation cell, or were START cells.*

*Regarding documented cell or bunk area searches marked as completed but not performed, Requests for investigation (RFI) were done for these exceptions and staff were issued corrective action or disciplined as appropriate. Staff were also given additional training.*

*To ensure cell searches are being done as required by policy, Post Orders now require ICF\* Sergeants to conduct daily checks to ensure all cell searches have been completed and logged in the spiral shakedown log. Prison Counselors also review cell searches daily and follow-up with staff on any deficiencies. Finally, there was additional training done for custody staff on thorough cell searches.*

*ICF Operating Procedure 04.04.110B "Housing Unit Searches and Inspections" has been updated as of October 2024 to reflect these updated procedures. These changes should mitigate this issue in the future.*

*\* See glossary at end of report for definition.*

## FINDING 2

### **Improvements needed in the use of cell sense metal detectors.**

Nearly 30% of the time prisoners were not subjected to metal detectors or were not searched when flagged by the detector.

The Facility did not always ensure prisoners were subjected to cell sense metal detectors in compliance with procedures. Undetected metal objects could jeopardize the safety and security of staff, prisoners, and members of the public.

Facility operating procedures and/or post orders require custody staff to ensure prisoners use metal detectors prior to entering and/or exiting certain prison areas such as the prison's school and housing units. A cell sense metal detector is an upright, portable, stand-alone detector used inside the secure perimeter for screening prisoners.

We randomly selected 1 of 3 metal detectors with corresponding surveillance video footage for each of 14 randomly sampled days between July 4, 2023 and July 27, 2023. We randomly sampled the first or second shift for each of these days, resulting in 1,259 prisoners observed entering and exiting the cell sense metal detectors.

Nearly 30% of the time prisoners were not subjected to the metal detectors or corrections officers did not perform a pat-down search\* of the prisoners when flagged by the metal detector. Specifically, we noted:

- 203 prisoners appeared to avoid the metal detector's detection range, such as by walking closely alongside the opposite wall, and officers did not require the prisoners to pass back through within a closer range.
- 77 prisoners used the metal detector as required; however, it was turned off.
- 60 prisoners were exiting locations requiring use of the metal detector; however, there was no metal detector in the location.
- 27 prisoners were flagged by the metal detector; however, officers did not perform a pat-down search of the prisoners. Instead, they allowed the prisoners to proceed.

In addition, about 24% of the time, corrections officers allowed prisoners to place personal property items aside or hold items above the metal detector to prevent the detector from flagging the item and officers did not subsequently search the items.

The Facility stated prisoners were not always subjected to cell sense metal detectors due to staff needing additional training.

We consider this finding to be a material condition because of the significant exception rates and potential negative impact on the safe operation of the Facility.

\* See glossary at end of report for definition.



## RECOMMENDATION

We recommend the Facility ensure prisoners are subjected to cell sense metal detectors in compliance with procedures.

## AGENCY PRELIMINARY RESPONSE

MDOC provided us with the following response:

*The Department agrees and will comply.*

*Policy Directive 04.04.110 "Search and Arrest in Correctional Facilities" paragraph T outlines the types of searches that shall be used by Department staff to detect contraband within a facility or attempting to be brought into a facility. Our metal detectors are only one of the approved searches, along with pat-down searches, clothed-body searches, strip searches, body cavity searches, body fluids/samples for alcohol and substance abuse testing, use of dogs that have been trained to detect controlled substances and contraband, searches of rooms, bunks, cells, vehicles and property, use of electronic phone detection equipment, and the search of yards and perimeters. Each officer with direct prisoner contact is required to conduct thorough pat-down searches of at least 5 randomly selected prisoners per shift (except for 3<sup>rd</sup> shift and exigent circumstances) and they also must search 4 randomly selected prisoner areas of control if they are assigned to a housing unit. 3rd shift housing unit officers search housing unit common areas. Metal detectors are one of the tools we use to control contraband, but not the only means to detect potentially dangerous objects.*

*Regarding the exceptions where prisoners did not clear the metal detector or did not perform a patdown search when flagged, many were a result of custody staff needing additional training.*

*To ensure prisoners are properly clearing the metal detectors, ICF operating procedure 04.04.110A Search of Prisoners (Exempt), has been updated to include all Unit 3 B-Upper, Unit 4 and Unit 5 Level V prisoners must clear the cell sense metal detector when exiting their cell. All items brought out of cell with the prisoner are to be thoroughly inspected by staff while the prisoner is clearing the cell sense metal detector. Any prisoner who is unable to successfully clear the metal detector will be subject to a pat-down search or strip search.*

*ICF Post Orders 25 & 26 for Housing Units 3 (B Upper), 4 and 5, have been updated to require all prisoners exiting their cells to clear the Cell Sense metal detector. It also requires that all items brought out of cell with a prisoner must be thoroughly inspected by staff while the prisoner is clearing the metal detector. Staff working in the unit must sign the post orders acknowledging these changes. Facility Operating Procedures and Post Orders are now current with Department Policy Directives. These changes should mitigate these issues in the future.*

*There is a Peer Security Audit Team made up of the Assistant Deputy Director and several Wardens that looks at security systems such as metal detectors. This issue will be elevated to them for discussion and direction moving forward.*

### FINDING 3

#### **Improvements needed in the performance of security rounds.**

Corrections officers did not open one or more cell door windows in 19% of security rounds reviewed.

Facility staff did not visually inspect all occupied cells during its required security rounds.

MDOC policy directive 04.04.100 requires housing unit staff to perform security rounds at various locations and intervals to check the well-being of prisoners and visually inspect all areas of the designated assignment, including viewing inside each cell and all common areas. Also, Facility operating procedure 04.04.101 requires staff conducting a security round to verify the physical presence of the prisoner and verify the prisoner is alive using a visual check for physical indication of life, including observation of body movement or breathing.

The Facility houses both level II and level V (highest) security prisoners and, accordingly, the physical layout of the housing units differ between the two security groups. Level II prisoners are typically housed in bunk-style units, allowing for an easier line of sight during security rounds, whereas level V prisoners are housed individually in locked cells. The level V cell doors are solid with a small covered window that can be opened and closed, allowing Facility staff to look inside the cell.

We randomly selected 5 days from May 15, 2023 through June 12, 2023 and randomly selected a housing unit and wing from the Facility's 7 housing units, resulting in 197 documented level II and V security rounds for review. We noted all selected security rounds were completed in the level II housing units reviewed; however, 24 (19%) of 125 selected level V housing unit security rounds were deficient as follows:

- In 10 (8%) instances during 1 shift, the corrections officer(s) walked the length of the unit hallway to perform the security round; however, they did not open any closed cell door windows.
- In 14 (11%) instances during 4 shifts, the corrections officer(s) failed to open 1 to 8 closed cell door windows, averaging 4 unopened cell door windows per security round.

The Facility stated security rounds were not fully completed because of staff needing additional training.

We consider this finding to be a material condition because of the significant exception rate and the potential risk and threats to prisoners' well-being which could go undetected.

### RECOMMENDATION

We recommend the Facility fully complete security rounds, including a visual inspection of all occupied cells.

**AGENCY  
PRELIMINARY  
RESPONSE**

MDOC provided us with the following response:

*The Department agrees and will comply.*

*Although corrections officers hit the buttons with the round reader devices as required by policy, they did not always open closed cell window covers during these rounds as expected. These exceptions were caused by staff that needed additional training.*

*To ensure rounds are being done as required by policy, Post Orders have been updated to clarify that officers must open the cell window cover if closed and use a flashlight in hours of darkness. Security monitoring exercises are also being completed weekly to ensure officer rounds are meeting policy requirements, including that cell window covers are being opened. The facility also initiated training for custody staff that was monitored and verified by supervisors and had staff sign the updated Post Orders. These changes should help mitigate this issue in the future.*

## FINDING 4

### **Controls over sallyport gate activity need improvement.**

Items entering the Facility, such as a pallet of boxes, were not fully searched 64% of the time.

The Facility did not always follow gate security procedures or properly document activity at the sallyport, increasing the risk critical or dangerous items could enter the prison.

The sallyport is a pedestrian and vehicle traffic gate which helps control the movement of individuals and items going into and out of the Facility, helps prevent theft of State property, and provides a record system for all packages, supplies, and materials brought into or out of the Facility.

We randomly and judgmentally selected 6 days between May 15, 2023 and June 11, 2023 and reviewed select surveillance video footage and corresponding sallyport logbook documentation. We noted:

- a. The Facility did not always perform required searches at the sallyport. Our surveillance video review noted the Facility did not fully search:

- (1) Items entering the Facility in 37 (64%) of 58 instances reviewed. For example, in one instance, a forklift with a pallet of boxes entered the gate; however, none of the boxes were opened and searched.

Facility operating procedure 04.04.100F requires staff to search all items being sent into or out of the Facility and open all packages, boxes, and containers to verify and determine contents.

- (2) Vehicles entering or exiting the Facility in 29 (55%) of 53 instances reviewed. The incomplete searches involved staff not requiring occupants to exit the vehicle, staff not viewing the entirety of the vehicle, and/or staff not using a mirror to look under the vehicle.

Facility operating procedure 04.04.100E requires staff to ensure all vehicles are thoroughly searched prior to entering the Facility and reinspected before leaving.

- (3) Individuals entering in 41 (24%) of 168 instances reviewed. The incomplete searches involved staff not performing pat-down searches and not having individuals empty their pockets.

MDOC policy directive 04.01.110 requires staff to search all individuals entering the Facility. Facility operating procedure 04.04.100F requires staff to ensure individuals pass through a metal detector or be subject to a pat-down or clothed-body search\*,

\* See glossary at end of report for definition.

as applicable. MDOC policy directive 04.04.110 states all items shall be removed from pockets during a pat-down search.

The Facility informed us searches were not always completed because of staff needing additional training. The Facility also informed us searches of large State-owned vehicle shipments are conducted inside at the loading dock.

- b. Corrections officers did not inspect identification for 69 (23%) of 297 individuals entering or exiting the sallyport, in accordance with MDOC policy directive 04.04.100.

The Facility informed us identification was not always inspected because of staff needing additional training.

- c. Items were allowed to pass through the sallyport without a gate manifest in 17 (29%) of the 58 instances observed on surveillance video footage. Examples of items entering without a gate manifest included toolboxes, a storage tub, and a standing fan. In addition, 10 of these 17 items were also not fully searched and are included in subpart a.(1) of this finding.

Facility operating procedure 04.04.100 requires items going in and out to be accompanied by a gate manifest.

The Facility informed us items did not always have an accompanying gate manifest because of staff needing additional training.

- d. The Facility did not include 118 (64%) of 184 instances of foot or vehicle traffic entering or exiting the sallyport in its logbook. For example, gate officers did not record instances of maintenance or warehouse staff or vehicles, such as gators and forklifts, entering or exiting the sallyport.

MDOC policy directive 04.01.110 requires staff to ensure all individuals register into and out of the Facility and Facility operating procedure 04.04.100E requires staff to ensure all vehicles entering the Facility are properly documented in the sallyport logbook.

The Facility informed us foot and vehicle traffic were not always recorded in the sallyport logbook because of staff misinterpretation of policy.

We consider this finding to be a material condition because of the significant exception rates and potential negative impact on safe operation of the Facility.

## RECOMMENDATION

We recommend the Facility comply with gate security procedures and documentation requirements for the sallyport.

## AGENCY PRELIMINARY RESPONSE

MDOC provided us with the following response:

*The Department agrees and will comply.*

*Exceptions noted regarding the search of items entering the sallyport were caused by staff needing further training regarding the process of searching of hand-held or smaller packages, and by the fact custody staff perform searches of larger vehicles/shipments once inside facility at the loading dock. These are State vehicles with sealed and sometimes palatized items that are very time consuming to open and that would tie up the sallyport for long periods of time. Vehicles are still searched in the sallyport to ensure there are no humans or obvious contraband inside. Package scanners will be implemented in the future to allow comprehensive searches of items that enter the sallyport.*

*Exceptions found concerning vehicle searches were caused by staff needing additional training. The Facility purchased a new mirror with an attached flashlight that is also on wheels and trained staff how to use it. The Department is also researching various models of cameras that can be used under the vehicles in the future. The facility now has different custody staff working in the sallyport that have been trained on proper search procedures.*

*Regarding individual searches and identification checks, staff have been retrained to ensure that they are conducting proper search procedures and inspecting identification for all individuals entering or exiting the Facility. Supervisors are monitoring this in person and on video to ensure compliance.*

*Exceptions noted for items not having a gate manifest are also a training issue. Maintenance staff have an administrative manifest attached to their toolbox; however, this administrative manifest would not cover non-regular items like tubs or fans, which were let through without a separate manifest due to staff misunderstanding what the administrative manifest allows. Staff has been retrained, and maintenance staff's permanent manifests have also been updated.*

*Exceptions found regarding logging traffic entering or exiting the facility were caused by staff misunderstanding policy. The past practice has been not to log facility maintenance or warehouse vehicles, such as Gators and forklifts. They just logged outside trucks and semis, such as the garbage truck. A sign-in and sign-out sheet has also been added to the sallyport. Sallyport staff were also retrained.*

*To ensure sallyport security procedures and documentation requirements are being done as required by policy, there is a weekly Security Monitoring Exercise (SME) where shift command*

*observes video of sallyport gate activity. Supervisors also conduct daily rounds in the sallyport to ensure custody staff are following post orders. ICF Operating Procedure 04.04.100E "Sallyport – Processing Pedestrian and Vehicle Traffic" has been updated as of October 2024 to reflect these updated procedures. Finally, sallyport training has been added to the ICF yearly training plan. These changes should mitigate this issue in the future.*

## FINDING 5

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### Controls over front gate and arsenal entrances need improvement.

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The Facility did not always follow gate security procedures or properly document activity at the front gate and arsenal entrances.

The front gate area is the first-line security barrier for the Facility. Staff assigned to this area must ensure all individuals are properly authorized to pass through the gates and ensure only qualified staff retrieve weapons from the arsenal, which is adjacent to the front gate.

Facility operating procedure 04.04.110E requires:

- All persons who enter the arsenal receive a clothed-body search and pass the metal detector.
- All employees who leave the bubble, which is accessed through the arsenal area, to pass the metal detector.
- Staff inspect all packages entering or exiting the gate areas.
- Staff inspect the identification for all individuals entering or exiting the Facility.
- The Facility maintain an employee checklist roster for non-custody staff to check in and out.

We randomly and judgmentally selected 12 days between May 15, 2023 and July 31, 2023 and reviewed select surveillance video footage and corresponding employee checklist rosters. We noted:

- a. The Facility did not always perform required searches at the front gate and arsenal entrances. Our surveillance video review noted the Facility did not fully search:
  - (1) Items entering the Facility in 13 (27%) of 48 instances reviewed. In one instance, several boxes coming from the mailroom were not opened and viewed.
  - (2) Corrections officers exiting the arsenal area in 8 (12%) of 69 instances reviewed. The officers did not pass a metal detector or receive a pat-down or clothed-body search.
- b. Corrections officers did not inspect identification for 45 (10%) of 461 employees and vendors entering and 14 (3%) of 466 exiting the Facility.
- c. The Facility did not ensure non-custody staff, such as administrative, food service, or health services staff, signed in or out on the front gate employee checklist roster for 32 (13%) of 256 instances reviewed. In case of emergencies, the rosters, along with employee time card

Items and individuals were not always fully searched at the front gate and arsenal entrances.



reports, are reviewed to determine if staff are inside the secure perimeter.

The Facility informed us the required searches were not always performed, identification was not always inspected, and documentation requirements were not always met because of staff needing additional training.

We consider this finding to be a material condition because of the significant exception rates and potential negative impact on safe operation of the Facility.

## **RECOMMENDATION**

We recommend the Facility comply with gate security procedures and documentation requirements for the front gate and arsenal entrances.

## **AGENCY PRELIMINARY RESPONSE**

MDOC provided us with the following response:

*The Department agrees and will comply.*

*In the instances noted where officers exiting the arsenal area did not pass the metal detector and/or receive a pat-down or closed body search, staff leaving this area should at least pass through the metal detector, even if they haven't been in the arsenal. Staff have been retrained to ensure everyone leaving this area does so. To better differentiate which staff are entering and exiting the arsenal in the future, a caged wall is being built to separate the bubble/annex from the arsenal and an additional camera is being installed in that area.*

*The exceptions regarding items not being searched properly were caused by staff needing additional training. The property room officer and gate officers were given the direction that all boxes should be opened in the gate and inspected. Shift command is auditing this monthly to ensure it is happening and Post Orders have been updated.*

*Staff have also been retrained to ensure that they are inspecting identification for all individuals entering or exiting the Facility. Supervisors are monitoring this in person and on video by conducting a monthly Security Monitoring Exercise (SME) to ensure compliance.*

*Exceptions found regarding the sign in/out checklist roster are also a training issue for all staff traversing the gates. An email reminder was sent out to the entire facility instructing them to properly sign in and out of the facility when they enter or exit the front gate, and this topic is being covered in monthly staff meetings.*

*To ensure front gate and arsenal security procedures and documentation requirements are being followed as required by policy, there are weekly SMEs conducted where shift command*

*observes video of that area. Staff that work the front gate have also been retrained. Monthly audits will also be done by the shift command ensuring staff are signing in and out of the facility as required. ICF Operating Procedure 04.04.100F "Gate Security and Gate Manifests" has been updated as of November 2024 to reflect these updated procedures. These changes should mitigate this issue in the future.*

## FINDING 6

### **Improvement needed in the completion of prisoner searches.**

For five shifts reviewed, 80 prisoner searches were required; however, corrections officers did not perform 11 (14%).

The Facility did not perform all required prisoner searches intended to detect and confiscate contraband.

Facility operating procedure 04.04.110A requires each first and second shift corrections officer assigned to a housing unit conduct a thorough pat-down or clothed-body search of at least five randomly selected prisoners per shift. A pat-down search is a brief manual and visual inspection of body surfaces, whereas a clothed-body search is a thorough manual and visual inspection of all body surfaces, hair, clothing, wigs, briefcases, prosthesis, and similar items including a visual inspection of the mouth, ears, and nasal cavity. The procedure also requires prisoner searches to be documented in a logbook and to include the name of the employee conducting the search, date and shift of the search, the prisoner's name, and prisoner number.

We randomly selected 4 days and randomly and judgmentally selected 5 shifts between May 25, 2023 and June 28, 2023 and determined 80 total prisoner searches were required based on officer staffing for the selected shifts. We reviewed logbook documentation and the corresponding surveillance video footage to confirm the required prisoner searches were performed.

We noted corrections officers did not perform 11 (14%) of the 80 required searches.

The Facility informed us in these instances, staff did not complete and/or log their prisoner searches due to a training issue on changes to the system used to log the searches.

## RECOMMENDATION

We recommend the Facility perform all required prisoner searches.

## AGENCY PRELIMINARY RESPONSE

MDOC provided us with the following response:

*The Department agrees and will comply.*

*The prisoner searches/shakedowns that were missed were caused by staff not completing and/or logging their prisoner patdowns for the selected shift on May 25, 2023.*

*To ensure prisoner searches are being done as required by policy, ICF has instituted daily checks of the prisoner search logbooks. The Resident Unit Managers, Sergeants, and Shift Commanders are responsible for checking the search books each day and initiating corrective action when deficiencies are found. Administration also checks the search books when completing rounds and reviews monthly reports for compliance and any corrective action taken. Also, Post Orders were also updated to clarify officer patdowns and what is considered limited movement. Operating procedure 04.04.110A "Search of Prisoners" has also been updated to define the exigent circumstances where five patdowns per shift are not required. These changes should help mitigate this issue in the future.*

## FINDING 7

### Completion of weekly and daily arsenal inspections needs improvement.

The Facility did not perform all required weekly and daily inspections of equipment stored in the arsenal. The arsenal is maintained for the safe storage of chemical agents, ammunition, firearms, and other security equipment used by Facility employees.

MDOC policy directive 04.04.100 requires facilities to inspect equipment stored in the arsenal at least once during each shift or conduct a weekly visual inspection if the cabinets are sealed and the seals are inspected each shift. Facility operating procedure 04.04.100I further requires its arsenal equipment to be inventoried weekly, including breaking all the seals on all cabinets and doing a complete inventory of the cabinet contents.

We randomly sampled 5 months from October 2021 through June 2023 and randomly and judgmentally selected 4 of 12 arsenal cabinets, resulting in 100 required weekly inspections. We also randomly sampled 59 days from October 1, 2012 through June 30, 2023 resulting in 177 required daily shift inspections. Our review of the arsenal logbook documentation noted the Facility did not:

- a. Perform required weekly inspections of sealed cabinets in the arsenal about two-thirds of the time.

We reviewed 25 weeks in the arsenal seal logbook for four selected sealed cabinets to determine if the cabinet seals were broken each week for the required weekly inspection and noted:

	<b>Sealed Arsenal Cabinets Weekly Inspection Review Results</b>			
	Cabinet 1 Chemical Agents	Cabinet 2 Ammunition	Cabinet 3 Ammunition	Cabinet 4 Firearms
Required number of inspections for 25 weeks selected for review	25	25	25	25
Number of weeks the cabinet seal was broken for inspection	8	12	9	3
Number (percentage) of weekly inspections not performed	17 (68%)	13 (52%)	16 (64%)	22 (88%)
Average percentage	68%			

- b. Perform daily inspections for 31 (18%) of 177 shifts reviewed.

The Facility required the individual completing the daily inspection each shift to record an entry in the arsenal logbook and list all arsenal equipment storage areas inspected. The storage areas included sealed

cabinets, the riot rack, and electronic control devices (ECDs). We noted:

- 16 shifts could not support the riot rack was inspected.
- 12 shifts could not support sealed cabinets were inspected, of which 6 shifts are also reported in the bullet above.
- 10 shifts could not support ECDs were inspected, of which 1 shift is also reported in both bullets above.

Facility operating procedure 04.04.100 requires a shift commander or an inspector to make an entry in the arsenal logbook once per week confirming proper inventories were conducted in the arsenal; however, we noted the logbook did not contain this entry for 23 (92%) of the 25 weeks reviewed.

The Facility stated the weekly and daily arsenal inspections were not always logged due to having a newer arsenal sergeant, the sergeant position not being manned daily, and the sergeant position responsibilities included working on shift in areas other than the arsenal.

## RECOMMENDATION

We recommend the Facility perform all required weekly and daily inspections of equipment stored in the arsenal.

## AGENCY PRELIMINARY RESPONSE

MDOC provided us with the following response:

*The Department agrees and will comply.*

*The daily and weekly arsenal inspections were not always logged for several reasons: in some instances, it was due to having a newer arsenal sergeant, and the fact that the arsenal sergeant position wasn't manned daily. This sergeant position was required to work on shift in areas other than the arsenal. The arsenal was sealed when not in use and the seals were documented, so this did not cause a security breach. Also, when shift commanders performed their weekly reviews, they were not always signing the logbook as required by the facility arsenal Operating Procedure 04.04.100I.*

*Due to the exceptions noted, ICF has updated their arsenal Operating Procedure 04.04.100I and staff that work in the arsenal were required to complete additional training on the updated arsenal operating procedures. There is also a full-time arsenal Sergeant to ensure all daily and weekly inspections are meeting policy requirements.*

*In addition, the Assistant Deputy Warden is completing the monthly arsenal inspections and auditing the daily and weekly inspections. All these changes should mitigate this issue moving forward.*

## OBSERVATION 1

**An evaluation of MDOC's metal detector policy should be considered.**

Metal detectors are approved screening devices employed by MDOC correctional facilities to help prohibit the introduction and/or ongoing presence of contraband. The Facility had a total of nine metal detectors at the time of our review. Four were walk-through metal detectors, with one located at the front gate and three located inside the Facility's secure perimeter. The five remaining were cell sense metal detectors used inside the secure perimeter for screening prisoners.

During our on-site testing, we carried metal objects through all four walk-through metal detectors without detection, including an approximately 6-inch needle nose tweezer, 7-inch pair of scissors, 3-inch seam cutter, and 4-inch seam ripper (see supplemental information for photograph). We also tested three selected cell sense metal detectors and noted all metal objects were detected. We gathered these metal items commonly used by prisoners within the Facility's garment factory, walked each individual object through the metal detectors, and summarized the results in the following table:

**Results of OAG Walk-Through Metal Detector Testing Performed on July 27, 2023**

	Metal Detector Type and Location						
	Walk-Through				Cell Sense		
	Location 1	Location 2	Location 3	Location 4	Location 5	Location 6	Location 7
Needle Nose Tweezers	X	X	X	✓	✓	✓	✓
Scissors	X	✓	X	✓	✓	✓	✓
Seam Cutter	X	✓	X	✓	✓	✓	✓
Seam Ripper	X	X	X	X	✓	✓	✓

Our review of MDOC policy, on-site observations, and discussions with Facility staff noted clarification of Statewide MDOC policy may be necessary regarding:

- Metal detector sensitivity settings. The walk-through detectors we observed have sensitivity modes that can be adjusted based on the intended use of the device. MDOC policy directives are silent on the sensitivity setting requirements or guidelines.

After the detectors failed to consistently detect our four objects, we observed Facility staff change the Location 4 detector to a more sensitive mode, at which time the seam ripper was detected.

- Periodic testing of metal detectors. MDOC policy directive 04.04.100 requires all walk-through detectors to be calibrated monthly, consistent with manufacturer recommendations. However, MDOC policy is silent on selection of an appropriate test piece for use in the monthly calibration tests.

Our review of a metal detector user manual for an MDOC approved metal detector manufacturer noted two types of "test pieces" could be used for calibration, with one simulating a small firearm and the other simulating a small knife or box cutter. The manufacturer's guidance states if the provided operational test piece(s) do not meet a specific security requirement, then a different test piece should be considered similar in size, shape, and material composition to the smallest forbidden object.

We believe an evaluation of Statewide MDOC policy regarding use of metal detectors in correctional facilities could enhance corrections officers' ability to detect potentially dangerous objects, thereby improving the safety and security of staff, prisoners, and members of the public.



## SUPPLEMENTAL INFORMATION

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UNAUDITED

### IONIA CORRECTIONAL FACILITY Michigan Department of Corrections

Photograph of Metal Objects Tested at the Facility's  
Walk-Through Metal Detectors by Auditors on July 27, 2023



Source: Photograph was taken by OAG staff. The OAG gathered these metal objects from the Facility's garment factory.

## AGENCY DESCRIPTION

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MDOC's mission\* is to create a safer Michigan through effective offender management and supervision while holding offenders accountable and promoting their success. MDOC's Correctional Facilities Administration is responsible for the operation of all MDOC's correctional facilities.

The Ionia Correctional Facility is located in Ionia, Michigan and opened in 1987. The Facility houses level II and level V adult male prisoners in seven housing units. Two housing units (general population) are designated for level II prisoners with 280 beds in a cubical/dorm setting. The remaining five housing units (two general population, two START, and one administrative segregation) are designated for level V prisoners and have a total capacity for 426 prisoners. All housing units are located within the Facility's secure perimeter, which includes security measures such as 12-foot double chain-link fences, razor-ribbon wire, gun towers, and a stun fence, among others.

The Facility provides academic programs; treatment services, such as counseling and substance abuse services; leisure time activities; and the Leader Dogs for the Blind Program. Prisoners are provided on-site routine medical, vision, and dental care, while serious emergency problems are treated at Sparrow Ionia Hospital and MDOC's Duane L. Waters Health Center in Jackson.

The Facility was appropriated \$37 million for operations in fiscal year 2024 and employed approximately 290 personnel, including 174 corrections officers to oversee approximately 640 prisoners as of January 2025.

*\* See glossary at end of report for definition.*

## AUDIT SCOPE, METHODOLOGY, AND OTHER INFORMATION

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### AUDIT SCOPE

To examine the records and processes related to selected safety and security policies and procedures at the Facility. We conducted this performance audit\* in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

As part of the audit, we considered the five components of internal control (control environment, risk assessment, control activities, information and communication, and monitoring activities) relative to the audit objectives and determined all components were significant.

### PERIOD

Our audit procedures, which included a preliminary survey, audit fieldwork, report preparation, analysis of agency responses, and quality assurance, generally covered October 1, 2021 through July 31, 2023.

### METHODOLOGY

We conducted a preliminary survey to gain an understanding of the Facility's processes and operations in order to establish our audit objective, scope, and methodology. During our preliminary survey, we:

- Interviewed Facility management and staff regarding their functions and responsibilities.
- Examined the Facility's records and reviewed applicable laws, policies, and procedures.
- Observed various activities and operations.

### OBJECTIVE

To assess the Facility's compliance with selected policies and procedures related to safety and security.

To accomplish this objective, we reviewed policies and procedures, examined records, viewed Facility surveillance video footage, and assessed compliance with policies and procedures related to safety and security at the Facility, including:

- Arsenal
- Gate manifests and gate access
- Prisoner counts
- Tool control
- Prisoner and cell searches
- Electronic perimeter checks
- Employee searches
- Visitor searches
- Firearm certifications
- Security rounds
- Cell sense metal detectors

\* See glossary at end of report for definition.

For these areas, our testing methodologies are either reflected in the related findings (Findings 1 through 7) or included below. We:

- Performed an inventory of all the Facility's rifles, shotguns, and handguns and randomly selected 5 of 23 other security items to ensure they were properly accounted for in the arsenal on August 24, 2023.
- Randomly sampled 23 corrections officers from a population of 227 officers requiring firearm certifications for their position as of August 15, 2023 to verify the officers held all required firearm certifications throughout the audit period, as applicable.
- Evaluated Facility compliance with electronic perimeter check requirements. To accomplish this, we:
  - Randomly sampled 33 days between August 1, 2022 and July 31, 2023 and randomly selected 1 or more of the 3 daily shifts during the selected days to determine if required perimeter checks were properly documented.
  - Randomly sampled 9 days between July 3, 2023 and July 31, 2023 and randomly selected 1 of the 3 daily shifts during the selected days to verify perimeter checks were performed per surveillance video in accordance with policy and were properly documented.
- Randomly sampled 59 days between September 1, 2022 and July 31, 2023 and randomly selected 1 or more of the 3 daily shifts during the selected days to determine if the resulting 885 required daily employee searches were completed and properly documented.
- Evaluated Facility compliance with formal prisoner count requirements. To accomplish this, we:
  - Randomly sampled 25 days between July 1, 2022 and June 12, 2023 and randomly sampled 1 of the Facility's 7 housing units to determine if the resulting 150 required prisoner counts were properly documented.
  - Randomly sampled 5 days between May 15, 2023 and June 12, 2023 and randomly sampled 1 of the Facility's 7 housing units to verify all required prisoner counts were performed according to surveillance video and were properly documented.

- Evaluated Facility compliance with prisoner visitor requirements. To accomplish this, we:
  - Randomly sampled 31 of 479 weekdays and randomly subsampled 1 of 2 shifts from October 1, 2021 through July 31, 2023. We randomly subsampled 31 of 147 total visitors listed on the visitor tracking system report for the sampled days to verify a visitor pass was issued.
  - Randomly and judgmentally selected 4 days between the periods May 15, 2023 through June 11, 2023 and July 5, 2023 through July 31, 2023 and randomly and judgmentally selected a shift resulting in 54 prisoner visitors entering and exiting the front gate area to verify all visitor searches were performed per surveillance video in accordance with policy.
- Evaluated Facility compliance with tool inspection requirements. We randomly sampled 40 of 669 days from October 1, 2021 through July 31, 2023, and further randomly selected a tool area from a population of 72 tool areas within the Facility, resulting in 34 unique month and tool areas to verify required daily and monthly tool inspections were completed and properly documented.

The Facility generally retained surveillance video footage for approximately 30 days. Our surveillance video reviews are reflective of rolling 30-day windows based on when sample items were selected. Because of the timing of sample selection, reviews may cover different time periods or cover a window greater than 30 days.

Our random samples were selected to eliminate bias and enable us to project the results to the population. Our judgmental samples were selected to ensure representativeness or based on risk and the results could not be projected into the respective populations.

## **CONCLUSIONS**

We base our conclusions on our audit efforts and any resulting material conditions or reportable conditions.

When selecting activities or programs for audit, we direct our efforts based on risk and opportunities to improve State government operations. Consequently, we prepare our performance audit reports on an exception basis.

## **AGENCY RESPONSES**

Our audit report contains 7 findings and 8 corresponding recommendations. MDOC's preliminary response indicates it agrees with all of the recommendations.

The agency preliminary response following each recommendation in our report was taken from the agency's written comments and oral discussion at the end of our fieldwork. Section 18.1462 of the *Michigan Compiled Laws* and the State of Michigan Financial Management Guide (Part VII, Chapter 3, Section 100) require an audited agency to develop a plan to comply with the recommendations and to submit it to the State Budget Office upon completion of an audit. Within 30 days of receipt, the Office of Internal Audit Services, State Budget Office, is required to review the plan and either accept the plan as final or contact the agency to take additional steps to finalize the plan.

## **SUPPLEMENTAL INFORMATION**

Our audit report includes a photograph of metal objects presented as supplemental information. Our audit was not directed toward expressing a conclusion on the supplemental information.

## GLOSSARY OF ABBREVIATIONS AND TERMS

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<b>cell search</b>	The act of going through a prisoner's cell and belongings looking for contraband.
<b>cell sense metal detector</b>	An upright, portable, stand-alone detector used inside the secure perimeter for screening prisoners. Despite the use of the term "cell," they are not used <i>inside</i> a prison cell.
<b>clothed-body search</b>	A thorough manual and visual inspection of all body surfaces, hair, clothing, wigs, briefcases, prostheses, and similar items and visual inspection of the mouth, ears, and nasal cavity. The only clothing items which may be required to be removed are outerwear (e.g., coats, jackets, and hats), shoes, and socks; however, all items shall be removed from pockets.
<b>contraband</b>	Property not allowed on facility grounds or in visiting rooms by State law, rule, or MDOC policy. For prisoners, this includes any property they are not specifically authorized to possess, authorized property in excessive amounts, or authorized property which has been altered without permission.
<b>ECD</b>	electronic control device.
<b>gate manifest</b>	A record used to control materials and supplies entering and leaving a facility through the front gates and sallyport.
<b>general population</b>	The group of prisoners who are not given any other type of designation.
<b>ICF</b>	MDOC's abbreviation for the Ionia Correctional Facility.
<b>level II</b>	A security classification assigned to a facility or a prisoner. The facilities are transitional prisons where prisoners who show good institutional adjustment and have a low security risk go to complete programs and prepare for eventual release. Long-term or prisoners sentenced to life terms may also qualify for level II facilities if their security and management risks are low.
<b>level V</b>	A security classification assigned to a facility or a prisoner. The facilities have a high level of institutional security for prisoners who have a high security and management risk. Often, these prisoners show little or no institutional adjustment and are a high or very high assault risk. They may have attempted escapes during their supervision in State or local correctional facilities.

<b>material condition</b>	A matter, in the auditor's judgment, which is more severe than a reportable condition and could impair the ability of management to operate a program in an effective and efficient manner and/or could adversely affect the judgment of an interested person concerning the effectiveness and efficiency of the program. Our assessment of materiality is in relation to the respective audit objective.
<b>MDOC</b>	Michigan Department of Corrections.
<b>mission</b>	The main purpose of a program or an entity or the reason the program or the entity was established.
<b>observation</b>	A commentary highlighting certain details or events which may be of interest to users of the report. An observation may not include all of the attributes (condition, effect, criteria, cause, and recommendation) presented in an audit finding.
<b>pat-down search</b>	A brief manual and visual inspection of body surfaces, clothing, briefcases, and similar items. The only clothing items which may be required to be removed are outerwear (e.g., coats, jackets, and hats) and shoes; however, all items shall be removed from pockets.
<b>performance audit</b>	An audit which provides findings or conclusions based on an evaluation of sufficient, appropriate evidence against criteria. Performance audits provide objective analysis to assist management and those charged with governance and oversight in using the information to improve program performance and operations, reduce costs, facilitate decision-making by parties with responsibility to oversee or initiate corrective action, and contribute to public accountability.
<b>prisoner count</b>	A count of the total prisoner population of a facility, including those prisoners on off-site details. Staff shall verify each counted prisoner's physical presence with a visual sighting.
<b>reportable condition</b>	A matter, in the auditor's judgment, less severe than a material condition and falls within any of the following categories: a deficiency in internal control; noncompliance with provisions of laws, regulations, contracts, or grant agreements; opportunities to improve programs and operations; or fraud.
<b>sallyport</b>	A controlled, secure gate by which vehicles can enter the facility grounds through the perimeter fencing.



<b>security round</b>	A visual inspection, conducted on an irregular schedule, of all areas of a staff member's designated assignment, including inside each cell and all common areas.
<b>SME</b>	security monitoring exercise.
<b>START</b>	The program for prisoners who are diagnosed with a serious mental illness and as an alternative to segregation. However, prisoners without a serious mental illness may be referred to and placed in the program. These prisoners are housed in one of the Facility's two units designated for the START program. The START Program's mission is to provide a secure general population alternative to administrative segregation while providing programming and other structured and unstructured out of cell activities based upon the prisoner's positive adjustment, with the goal of providing tools which would help eliminate or reduce assaultive behavior and eventual reintegration into traditional general population.







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