

Chapter 2

Justice: Correctional Facilities

Overall Conclusions:

- Given shortcomings identified in key areas, improvements are needed to the Department of Justice's management of correctional facilities to better promote safety and security.

Management of Correctional Facilities

Conclusion:

- Many policies that promote safety and security not consistently followed
- No comprehensive risk assessment framework
- No performance management framework

Examples:

- Risk assessments limited to specific units at individual facilities
- No performance indicators
- 9 of 47 close confinement cases not properly approved
- 5 of 47 close confinement cases with no documentation of the reason for confinement
- Healthcare documentation not required for medical confinement
- Poor monitoring of offenders in close confinement
- Required rounds and searches of facilities not always completed
- Some offenders admitted to facility without documentation of medical history
- Security assessments not completed for some admissions

Recommendations:

- Compile a comprehensive risk assessment framework
- Set performance indicators
- Implement quality assurance process
- Ensure close confinement is approved and monitored
- Work with NSHA to improve medical confinement documentation
- Complete required rounds and searches
- Complete offender medical history and security assessments
- Review offender medical history prior to planned use of force and document offender injuries received when force is applied

Staff Training, Development, and Hiring

Conclusion:

- Staff training not fully completed in accordance with policies
- Hiring practices not consistently followed
- Performance evaluations not completed as required

Examples:

- 16 of 20 recently hired correctional officers (COs) did not complete all required training
- Understanding mental health course stopped in 2014; new course did not start until 2017
- 16 of 20 COs had expired training certifications
 - 3 COs with expired use of force training
 - 7 COs with expired Emergency 1st Aid
- Some correctional facility staff hired without all required background checks
- No consistent volunteer policy
- Only 11 of 20 COs had performance evaluations

Recommendations:

- Ensure COs complete all required training
- Complete all steps in the hiring process
- Complete CO performance evaluations
- Implement consistent volunteer policy

Recommendations at a Glance

Recommendation 2.1

The Department of Justice should compile all the elements of a comprehensive risk assessment framework for provincial correctional facilities, including how identified risks are to be managed.

Recommendation 2.2

The Department of Justice should develop and implement a performance management framework, including a quality assurance process, to assess the performance of provincial correctional facilities.

Recommendation 2.3

The Department of Justice should complete a review of all correctional facilities to identify staff who have not completed or recertified required training and ensure required training is completed.

Recommendation 2.4

The Department of Justice should complete annual performance evaluations for all correctional officers.

Recommendation 2.5

The Department of Justice should ensure hiring processes are consistently applied to all job competitions at correctional facilities and supporting documentation is maintained.

Recommendation 2.6

The Department of Justice should develop and implement a consistent volunteer policy that requires comprehensive screening of volunteers before they are permitted within provincial correctional facilities. The screening process should outline the required background checks and required frequency for updates.

Recommendation 2.7

The Department of Justice should ensure close confinement is properly approved, including explanation for confinement; all reviews are done as required by policy; and that access to recreation and showers is provided and documented.

Recommendation 2.8

The Department of Justice should work with the Nova Scotia Health Authority to ensure documentation to support confining offenders for medical reasons is maintained in correctional facility files.



Recommendation 2.9

The Department of Justice should ensure correctional officer duties, such as the completion of rounds and searches, are completed as required and adequate documentation is maintained to show they have occurred.

Recommendation 2.10

The Department of Justice should explore options with relevant parties within the larger justice system to ensure system-wide implications of intermittent sentences are understood and identify possible solutions for managing these offenders within correctional facilities.

Recommendation 2.11

The Department of Justice should ensure health admission forms and institutional security assessments are completed for all offenders every time they are admitted to a provincial correctional facility.

Recommendation 2.12

The Department of Justice should ensure offender medical history is reviewed prior to planned use of force incidents and that documentation to indicate if an offender received injuries when force was applied is maintained.

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2 Justice: Correctional Facilities

Background

- 2.1 The Department of Justice, through the Correctional Services division, is responsible for the administration and operation of community and custody-based programs and services for adult offenders. One of the core business areas for Correctional Services is the operation of correctional facilities with the goal of providing safe and secure custody of offenders.
- 2.2 Within an approximate budget of \$60 million, the Department operates four adult correctional facilities:
 - Central Nova Scotia Correctional Facility in Dartmouth
 - Northeast Nova Scotia Correctional Facility in New Glasgow
 - Cape Breton Correctional Facility in Sydney
 - Southwest Nova Scotia Correctional Facility in Yarmouth
- 2.3 Provincial correctional facilities have the capacity to hold 700 offenders and a staff of 575, of which about 400 are correctional officers. In 2016-17 there were about 500 offenders with an average daily cost of \$250 per offender.
- 2.4 Provincial correctional facilities house offenders serving sentences of less than two years and individuals on court ordered detention awaiting further court appearances (remand). As shown below, the majority of offenders in provincial correctional facilities are being held on remand. While the average provincial sentence is generally two to three months, individuals held on remand can be held in a facility for several years.

Percentage of Offenders by Custody Type					
	2012-13	2013-14	2014-15	2015-16	2016-17
Sentenced to provincial custody	32%	33%	31%	40%	38%
Held on Remand	63%	63%	65%	55%	57%
Other	4%	4%	4%	5%	5%

Source: Department of Justice (unaudited)

- 2.5 We did this audit because correctional facilities face a variety of risks that can impact the safety of both offenders and staff, as well as the security of the facilities. The Department tracks incidents that occur within provincial correctional facilities. See the table below for an overview of incidents during the audit period.

Summary of Monthly Incidents During Audit Period	
Type of Incident	Number of Incidents
Assaults	
Offender on offender (no hospitalization)	528
Offender on staff (no hospitalization)	75
Offender on offender (in-patient hospitalization needed)	11
Offender on staff (in-patient hospitalization needed)	0
Use of force	482
Fire requiring local fire services	3
Purposeful property damage	198
Wrongful release	2
Major drug seizure	4
Death in custody	2

Source: Department of Justice (unaudited)

Risk Assessment and Performance Management Frameworks



The Department does not have a comprehensive risk assessment framework

- 2.6 The Department of Justice does not have a comprehensive risk assessment framework for the provincial correctional system. While some risk assessments were completed during the audit period, they were limited to specific units within individual correctional facilities and were completed in response to events that occurred at the facilities.


- 2.7 A key goal of a comprehensive risk assessment process is to proactively identify and manage risks rather than just respond to incidents which have occurred. A risk assessment framework includes documenting the risks facilities face and the likelihood and consequences of them occurring, along with measures to reduce those risks to an acceptable level. Additionally, a good risk assessment framework includes periodic assessment of whether risks are being properly managed, including whether key controls are working.

- 2.8 Staff and offender safety and overall facility security are impacted by many changing factors. Risk factors may not be the same in all facilities. Risks include violence against offenders and staff, drugs coming into the facilities, and mistaken releases. It was evident during the audit that Department management understood the risks facing the correctional facilities and the measures in place to manage the risks. However, without a comprehensive risk assessment framework, it is harder for management to ensure all risks, including new and changing risks such as new methods of smuggling in drugs, have been identified and adequately managed.

Recommendation 2.1

The Department of Justice should compile all the elements of a comprehensive risk assessment framework for provincial correctional facilities, including how identified risks are to be managed.

Department of Justice Response: The Department of Justice agrees with this recommendation. Correctional Services will develop a provincial program framework that identifies current practices in place to address risk and to resolve, mitigate and communicate risks. Timing: October 30, 2018

 **The Department has not established performance indicators for correctional facilities**

- 2.9 Management indicated one of the main objectives for provincial correctional facilities is to keep offenders and staff safe and secure. However, the Department has not identified performance indicators to measure safety and security within the facilities, nor have they assessed the effectiveness of measures in place to manage risk. Performance indicators could consider assaults, staff sick time, or worker compensation claims.
- 2.10 An effective performance management framework includes regular assessment of performance against identified indicators and reporting results. Such a process would provide management with an overview of correctional facility performance, as well as opportunities to identify and address issues proactively before they become more significant. For example, increases in sick time may indicate additional job-related stress for correctional officers who may require training or a change in duties.
- 2.11 The Department records data on incidents such as assaults and drug seizures within correctional facilities, but this information is not analyzed to identify trends or weaknesses in current processes. This type of information can be used to develop performance indicators and assess performance.

 **The Department does not have a quality assurance process for corrections**

- 2.12 The Department of Justice does not have a quality assurance process to determine if correctional facilities are following Departmental policies. A quality assurance process is an effective part of a performance management framework to help management ensure staff perform required procedures and follow appropriate processes.
- 2.13 We found the Department completed a thorough investigation of five major incidents, such as offender deaths, wrongful releases, or serious assaults, that occurred during our audit period. While following appropriate procedures and processes, these investigations were in reaction to serious incidents. A

quality assurance process would help the Department be more proactive in identifying where procedures and processes are weak, possibly before major incidents occur.

- 2.14 Both assessing facilities against performance indicators and a quality assurance process can provide valuable information for management to identify new risks or changes to risks correctional facilities face. Management can also use the information to develop and monitor correctional facility risk assessments to ensure resources are directed to the areas of highest risk.

Recommendation 2.2

The Department of Justice should develop and implement a performance management framework, including a quality assurance process, to assess the performance of provincial correctional facilities.

Department of Justice Response: The Department of Justice agrees with this recommendation. An audit schedule will be developed by the Chief Superintendent and the Manager of Policy and Programs responsible for audits and investigations. Correctional Services will ensure the audits are conducted in accordance with the schedule and that a quality assurance process is in place.

The Manager of Policy and Programs will compile statistics and generate reports to identify deficiencies and improvements.

The Chief Superintendent will follow up with individual superintendents regarding any deficiencies.

Audits will be a standing item on the Superintendent Operational Meeting and Senior Management Team (SMT) agendas.

The policy will be updated to reflect the process. Timing: June 15, 2018

Staff Training and Development

- 2.15 Training is essential for the safety of staff and offenders at correctional facilities, but we found many staff have not completed required courses. The Department of Justice has a training plan that identifies the required training for correctional officers. Some courses must be completed prior to working in the facility, while others must be completed within the first year of employment. Certain training must also be recertified at regular intervals to ensure it remains up-to-date. Head office is responsible for scheduling and tracking training to ensure correctional officers across the province complete the required training and their certifications are current. We expected correctional officers to have completed all required training at the proper times, but found this was not the case.

➔ New hires not receiving the required training

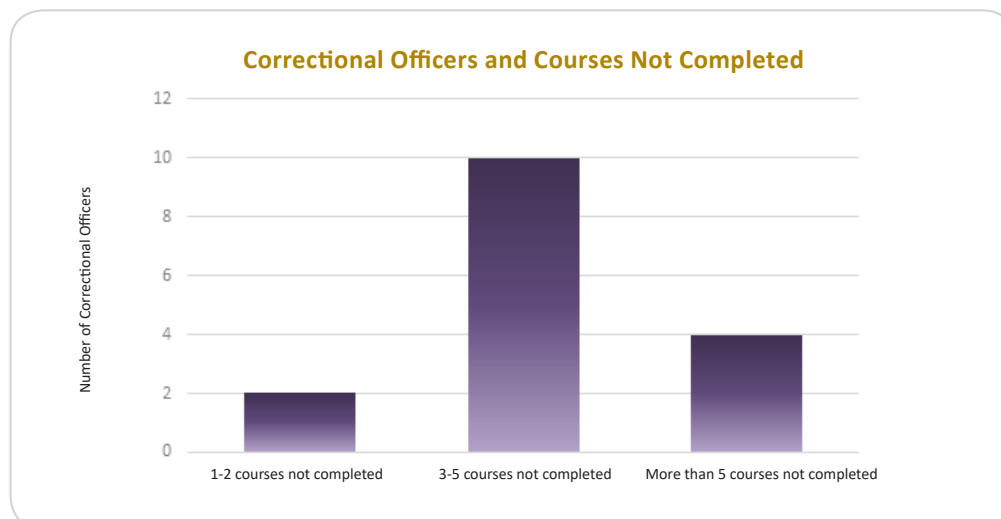
2.16 Newly hired correctional officers did not receive the required training. Only 4 of the 20 records we selected for correctional officers hired between 2013 and 2017 showed the officers had completed all required training. Examples of training not completed include:

- Understanding and Responding to Mental Illness, or equivalent (15 of 20 staff)
- Recognition of Emotionally Disturbed Persons (13 of 20 staff)
- Applied Suicide Interventional Skills Training (9 of 20 staff)

2.17 The Understanding and Responding to Mental Illness course was stopped in 2014 and a replacement course was not ready until February 2017. Department management noted its goal is to deliver this training to all correctional officers by 2020. They indicated that as of November 2017, approximately half of all correctional officers had completed the new course. Taking another two years to train all correctional officers by 2020 does not seem reasonable. We encourage the Department to place a priority on this training and ensure it is provided to all correctional officers as soon as possible.

2.18 Each of the above examples are courses covering aspects of mental health. Working within correctional facilities can be very stressful and ensuring all staff have the necessary mental health training to help manage the inherent stress is important. In addition, many offenders in the facilities also have mental health issues, making this training for staff even more important.

2.19 Many of the recently hired correctional officers had not completed several of the required courses. The following chart outlines the number of courses not completed.



- 2.20 One correctional officer had not completed 10 of the 15 courses we examined. While management indicated this individual only worked part-time, there is nothing in the policy excusing a part-time employee from taking the required courses. If a correctional officer is working in a facility, even on a part-time basis, all required training should be completed, given that the risks remain the same.
- 2.21 We found similar gaps in staff training for other correctional facility staff, such as social workers and kitchen staff. While training requirements for these positions are not as extensive as for correctional officers, the Department requires the completion of some training upon hire. We found 10 of the 11 non-correctional officer staff hired during the audit period had not completed all required training.
- 2.22 One of the required courses for non-correctional officers teaches verbal and physical skills to use in a conflict situation and is to be completed within six months of hire. We found that 8 of the 11 individuals had not completed this course; the other three had not completed it within the six-month period.
- 2.23 In July 2017, the Province introduced a fraud policy, including mandatory online training to be completed by all government employees. Department management indicated they do not track whether corrections employees have completed the training.



Correctional officer training out of date

- 2.24 Recertification training for some correctional officers is not timely. Certain training courses must be repeated at regular intervals to ensure training remains current. Correctional officers identified this as an area of concern. For a sample of 20 correctional officers, we tested seven courses that had to be retaken on a regular basis. Sixteen of the officers had at least one course for which training was expired.
- 2.25 Specific examples of expired correctional officer training are noted below. Each course must be retaken every three years.
- Three officers had expired use of force training; overdue by approximately one to four years.
 - Seven officers had expired emergency first aid training; overdue by as long as six years.
 - Eleven officers had expired fire equipment and evacuation training; overdue by up to seven years.
- 2.26 If training is not completed or recertified at the proper times it creates risks to the safety of both staff and offenders and the security of the facility.

**Recommendation 2.3**

The Department of Justice should complete a review of all correctional facilities to identify staff who have not completed or recertified required training and ensure required training is completed.

Department of Justice Response: The Department of Justice agrees with this recommendation. A list of all staff who require training will be compiled and staff will be put on a priority listing for training sessions. Additional training schedules will be arranged.

The training matrix will be updated to accurately reflect current certification and re-certification standards to align Correctional Services standards with best practice standards. Timing: March 31, 2019

**Performance evaluations of correctional officers not completed**

2.27 Annual performance evaluations were not completed for all correctional officers. Some correctional officers we interviewed said they have never received a performance evaluation. We found that only 11 of 20 correctional officers selected had performance evaluations completed during the audit period.

2.28 Under Government policies all government employees are to have an annual performance evaluation. Management within the Department and facilities also indicated correctional officers should have performance evaluations. Regular performance evaluations help with staff development, identifying both strengths and areas for improvement. Performance issues that are not identified and addressed may impact safety and security within correctional facilities.

Recommendation 2.4

The Department of Justice should complete annual performance evaluations for all correctional officers.

Department of Justice Response: The Department of Justice agrees with this recommendation. In consultation with Human Resources, Correctional Services will develop a plan to ensure employee performance evaluations are completed annually. A tracking schedule will be implemented, and a process will be put into place to ensure completion. Timing: September 30, 2018



Hiring Process



Correctional facility staff hired without proper screening

- 2.29 We selected a sample of 20 correctional officers hired between 2013 and 2017 and found steps in the hiring process had not been completed for 15 officers. We found similar issues with hiring for non-correctional officer positions.
- 2.30 The hiring process for correctional officers includes an interview, written test, physical fitness test, and background checks which include criminal record, child abuse registry, vulnerable sector, and reference checks, along with a pre-employment questionnaire. For the 20 correctional officers selected we found several steps in the hiring process had not been completed. Examples include:
- Written tests were not completed for five officers
 - Reference checks were not done for one officer; only two of three required checks were completed for nine officers
 - One or more of either the vulnerable sector, child abuse registry, or criminal record check was missing for 13 officers
- 2.31 The hiring process for non-correctional officer positions, such as social workers and kitchen staff, is less extensive, but still includes reference, criminal record, vulnerable sector, and child abuse registry checks. Starting in October 2016 the pre-employment questionnaire is also required for all non-correctional officer positions. Prior to this, it was only done for certain positions. Of the 11 hires during the audit period, 6 were missing some of the requirements. Most concerning was one individual who had no reference, criminal record, vulnerable sector, or child abuse registry check; nor did they have a pre-employment questionnaire completed.
- 2.32 The required hiring processes for correctional and non-correctional officers should be consistently applied to all applicants. Not following the required process increases the risk that unsuitable candidates could be hired and they could jeopardize the security of the facility.

Recommendation 2.5

The Department of Justice should ensure hiring processes are consistently applied to all job competitions at correctional facilities and supporting documentation is maintained.

Department of Justice Response: The Department of Justice agrees with this recommendation. A vacant Secretary 3 position will be filled and assigned the responsibility to ensure all supporting documentation is collected and maintained. Success Factors will be utilized to manage all competition documentation. The

Correctional Services website will be updated to reflect current requirements, including reference checks.

There will be a directive communicated from the Executive Director requiring new recruited employees to submit security back ground checks, i.e., Vulnerable Sector Checks before being given access to secure areas of the correctional facility or interacting with the inmate population. Timing: June 30, 2018



Inconsistent approach to screening and monitoring volunteers

2.33 The Department of Justice did not have consistent policies for screening and approving volunteers in correctional facilities. For volunteers affiliated with an organization, such as Alcoholics Anonymous, the organization is only required to provide a proposal outlining the organization's program and the criminal record and child abuse registry checks for its volunteers. Volunteers not affiliated with organizations must go through a process that includes criminal record checks, an interview, reference checks, and completion of an orientation process.

2.34 Although the Department has policies for accepting volunteers, each correctional facility follows its own screening process. All facilities require volunteers to provide a criminal record check. Some have additional requirements such as having a sponsor from within the facility, attendance at a security awareness session, or review of a volunteer handbook. In a sample of 20 volunteers, we found 2 with no criminal record checks. Volunteers play a role in delivering services to offenders and should be properly screened to protect the safety of staff and offenders, and the security of the facility.

2.35 There were also inconsistencies for updating volunteers' criminal record checks. Some facilities require criminal record checks to be updated every two to three years, while others do not require updates. If criminal record checks are not updated periodically, volunteers previously approved to be in the facility who no longer meet the requirements may not be identified.

Recommendation 2.6

The Department of Justice should develop and implement a consistent volunteer policy that requires comprehensive screening of volunteers before they are permitted within provincial correctional facilities. The screening process should outline the required background checks and required frequency for updates.

Department of Justice Response: The Department of Justice agrees with this recommendation. Correctional facilities will be required to forward any documentation currently used for the screening of volunteers.

A consistent process of documentation will be identified for all correctional facilities. The policy will be revised and communicated. Timing: June 15, 2018

Management of Correctional Facilities

Use of close confinement not always approved

- 2.36 In 9 of the 47 cases we examined, offenders were placed or held in close confinement longer than allowed without the approval required under Department policy. Close confinement, also known as segregation, is when offenders are held separately from other offenders for disciplinary or other administrative reasons. Offenders may be held in specifically designated cells away from other offenders or confined to their cell in their living unit.
- 2.37 Administrative close confinement is used at the discretion of facility management for the protection of offenders and staff, or for the security of the facility. Offenders may also ask to be placed in administrative close confinement. A captain within the correctional facility must approve administrative confinement. We found seven cases which had no captain approval for the administrative confinement of an offender.
- 2.38 Disciplinary close confinement is used when an offender breaks the rules of a facility. When an offender is alleged to have broken facility rules, a provincial adjudicator from outside the correctional facility is to review the facts of the incident, determine if rules were broken and, if so, set the length of confinement. This is intended to add independence to the process since correctional officers involved with the offender when the rules were broken are not involved in determining the punishment. We reviewed 20 cases of disciplinary close confinement and in each case the provincial adjudicator set the period of confinement for the offender.
- 2.39 For 5 of the 20 cases, disciplinary close confinement was extended beyond the initial limit of 10 days (15 days prior to April 2016). In two cases, Department senior management approval for the extension was not documented. In both cases, the file showed the offender continued to break facility rules while being confined; they either disobeyed direct orders, threatened others, or damaged facility property. While the reasons for extending the period of confinement were consistent with Department policy, approval from senior management is required to ensure offenders are not confined for longer than necessary.
- 2.40 The facilities also did not have documentation explaining why confinement was needed or continued for 5 of the 47 cases we examined. As well, the reasons for administrative close confinement were not consistently documented. The Department's policy identifies a specific form on which to document reasons for administrative close confinement, but it was not always used. Explanations for confinement were often documented in other areas of the file that were sometimes more difficult to locate.

➤ Healthcare documentation not required for medical close confinement

- 2.41 Administrative close confinement includes instances when an offender is confined for medical reasons. In provincial correctional facilities, healthcare services are provided by the Nova Scotia Health Authority. Management indicated the decision to confine an offender for medical reasons can be made by healthcare staff working within the facility. However, Department policy does not require documentation from healthcare staff confirming confinement is needed for medical reasons or when confinement can end.
- 2.42 Some of the medical confinement cases we examined had documentation from healthcare staff of the need for confinement, but not all case files did. If healthcare staff make the decision to confine an offender for medical reasons, correctional facility staff should obtain documentation to confirm the need for confinement. Without proper documentation, medical reasons could be inappropriately used to justify extended periods of confinement for offenders.

➤ Offenders in close confinement not consistently monitored

- 2.43 For almost half of the files examined (22 of 47), staff did not review the status of offenders in close confinement at the correct frequency. Department policy requires staff to review of an offender within 24 hours of the offender being placed in close confinement, and at least once every five days after the initial review. Reviews should indicate if close confinement should continue.
- 2.44 Reviews were not completed for half of the 22 cases. For the remaining 11 cases, staff did not complete the initial review within 24 hours of the offender being placed in confinement or subsequent reviews every five days. Many of the completed reviews did not indicate if the offender should remain confined; this is a requirement under the Correctional Services regulations.
- 2.45 Regular reviews provide an opportunity to assess whether an offender's behavior has improved enough to end confinement. They also help correctional officers to assess an offender's overall mental and physical condition. Without the reviews, an offender may be confined for longer than necessary or correctional officers may not recognize changes in an offender's condition that need to be addressed.
- 2.46 For most close confinement cases tested (35 of 47), the facilities either had no documentation to show that the offender was offered time for showers and recreation or it indicated it was offered on some days but not others. Offenders are to be offered at least 30 minutes a day of outdoor recreation time and access to showers at least every second day. Access to recreation and showers is important to the physical and mental well-being of offenders in close confinement. Not providing these could place increased stress on offenders and impact their health and safety.

Recommendation 2.7

The Department of Justice should ensure close confinement is properly approved, including explanation for confinement; all reviews are done as required by policy; and that access to recreation and showers is provided and documented.

Department of Justice Response: The Department of Justice agrees with this recommendation. The policy will be revised to address the concerns noted. Correctional Services has engaged the Ombudsman to complete regular reviews and audits of the process.

Correctional Services will continue to complete quarterly snapshots and use the information from these to identify and address any instances of non-compliance with policy.

Correctional Services will conduct an audit of the 24hr and 5-day reviews and make recommendations regarding practices to be implemented to ensure the reviews are being completed in accordance with required time frames.

Correctional Services will revise policy to reflect any additional change in practice to assist in improving compliance. Timing: June 30, 2018

Recommendation 2.8

The Department of Justice should work with the Nova Scotia Health Authority to ensure documentation to support confining offenders for medical reasons is maintained in correctional facility files.

Department of Justice Response: The Department of Justice agrees with this recommendation. Management will reinforce with superintendents the need to request medical documentation “blue sheets” for inmates in close confinement for medical reasons.

Policy will be updated to include the need for superintendents to request “blue sheet” documentation to support placement of inmates in close confinement as requested by health care. Timing: June 30, 2018

**Close confinement policy changed to provide more oversight**

2.47 In May 2017, the Department of Justice made changes to their close confinement policies to provide more oversight over the use of close confinement and the treatment of offenders while confined. During our work, there were no time limits placed on how long offenders could be confined for administrative reasons, which increases the risk that offenders may be confined for longer than necessary.

2.48 Effective May 2017, the Department changed its close confinement policy so an offender can only be placed in administrative close confinement for a



maximum of 10 days. If confinement is needed for longer than 10 days, senior management can approve confinement for additional periods of up to 30 days. The facility must be able to justify why further confinement is necessary. The change in the policy also granted more privileges, such as phone calls and personal visits, to confined offenders.

- 2.49 Since these changes happened after our audit period they were not considered in our testing procedures. The policy changes reduce the risk of offenders being unnecessarily placed in administrative close confinement for extended periods of time, while also helping reduce the isolation of offenders confined for disciplinary reasons.

Facilities not consistently using the electronic rounds system

- 2.50 Correctional officers did not complete rounds using the electronic rounds system. Department policy requires correctional officers to walk through facilities to observe offenders to deter unwanted behavior. The frequency can vary depending on the area of the facility. For offender living units it generally ranges from every 30 minutes to once an hour.
- 2.51 Each facility has an electronic system for recording rounds. As correctional officers move throughout the facility they use a device to check in by touching a sensor at various checkpoints. The sensor captures which correctional officer checked in and the time of the check in. Each day a report is generated outlining rounds that were not completed. Facility management is to review this report and provide explanations for missed or incomplete rounds.
- 2.52 We identified many missed and incomplete rounds in the reports from the electronic system. We were told there were times the electronic system was not used and rounds were completed and documented in log books; we were unable to find sufficient evidence to consistently support this. The strength of the electronic rounds system is that it captures the time of the check in. A log book does not provide the same level of evidence. The electronic system provides better and more timely information to management to determine if rounds are completed as required. It should be used consistently.

Correctional facilities are not consistently searched

- 2.53 Correctional facilities are not adequately searched. Department policy requires staff to regularly conduct searches to find contraband such as drugs and weapons. We reviewed a sample of search records from each correctional facility and identified several instances of searches not completed as required.
- 2.54 We found instances in which searches of offender living units, as well as the admissions, laundry, kitchen, and perimeter areas of the facilities, were not completed according to Department policy. These are either high traffic

areas or accessible by offenders which makes regular searches in these areas important for preventing the flow of contraband.

Recommendation 2.9

The Department of Justice should ensure correctional officer duties, such as the completion of rounds and searches, are completed as required and adequate documentation is maintained to show they have occurred.

Department of Justice Response: The Department of Justice agrees with this recommendation. Correctional Services will ensure rounds and searches are completed and documented as required.

Management has worked with the vendor regarding the use of guard tour, the electronic rounds system, and any technical issues that may be resulting in rounds not being properly recorded. As a result, Correctional Services has installed upgraded software that has improved system stability.

Body Scanners have been purchased and will be installed to enhance security and safety of staff and inmates.

Relevant policy will be reinforced with superintendents.

Regular audits will be done to address any deficiencies and will be included as part of the facility audit schedule. An audit matrix will be developed. Timing: September 30, 2018

**Intermittent sentences create significant challenges for correctional facilities**

- 2.55 Judges often impose intermittent sentences to allow offenders to serve their time over a period of intervals, usually weekends. Intermittent offenders are housed separately from other offenders. They pose a higher risk for smuggling contraband such as drugs because they regularly enter and leave facilities. Management told us that offenders serving intermittent sentences may also face pressure from other offenders to smuggle drugs on their behalf.
- 2.56 Intermittent offenders report to the facility themselves unlike regularly sentenced offenders who are normally brought to the facility by police or sheriff services. We were told it is not unusual for some intermittent offenders to arrive under the influence of drugs or alcohol. Approximately 19 percent of offenders at the Central Nova Scotia Correctional Facility are serving intermittent sentences. Staff told us there could be close to 50 offenders reporting to the facility on some Fridays. When admitting that many offenders, correctional officers indicated they face pressure to get offenders processed as quickly as possible. This increases the risk that staff do not fully follow procedures.



- 2.57 Staff at some facilities indicated they need to provide space each weekend to accommodate intermittent offenders. This makes it harder to keep incompatible offenders separate and can be more challenging for smaller facilities.
- 2.58 A 2015 analysis by the Department of Justice noted intermittent sentences are more prevalent in Nova Scotia where approximately 16 percent of offenders were serving intermittent sentences. In larger provinces such as Alberta, British Columbia, and Ontario intermittent sentences ranged from 2 to 8 percent of the offender population. We did not audit this information.
- 2.59 The analysis also indicated intermittent sentences were given to relatively higher risk offenders. Of the 70 offenders serving intermittent sentences at the time of the analysis
- 77 percent had more than 10 prior convictions,
 - 26 percent had been incarcerated more than five times previously, and
 - 86 percent had been involved in internal incidents during prior periods of incarceration.
- 2.60 Although we did not audit the results of the Department's 2015 analysis, the inherent risk around intermittent sentences, along with the higher risk offenders receiving these sentences, appears to present a significant safety and security concern for correctional facilities. Throughout the audit Department staff, both at head office and at all four facilities, commonly cited that managing offenders serving intermittent sentences is one of the biggest challenges facing provincial correctional facilities.

Recommendation 2.10

The Department of Justice should explore options with relevant parties within the larger justice system to ensure system-wide implications of intermittent sentences are understood and identify possible solutions for managing these offenders within correctional facilities.

Department of Justice Response: The Department of Justice agrees with this recommendation. Correctional Services has implemented a mitigation strategy through the facilitation of the conditional release program and electronic supervision monitoring to address capacity issues.

A due diligence consultation will be completed with Legal Services and the Judiciary to ensure program integrity.

The Auditor General's recommendation to "explore options with relevant parties within the larger justice system to ensure system-wide implications of intermittent sentences are understood" will be communicated to the Criminal Justice

Transformation Group, representing justice system partners.

Correctional Services will continue to manage intermittent sentences within correctional facilities with separate admission processes and separate housing.

Body Scanners have been purchased and will be installed to enhance security and safety of staff and inmates. Timing: October 2018



Offender medical information and security assessment not always completed upon admission

- 2.61 Staff did not complete required steps in the offender admission process which could impact the safety of offenders and staff and the security of the facility. When offenders are admitted to correctional facilities, staff complete a health admission form on which they document any health issues the offender may have, while also noting any recently consumed drugs or alcohol. Staff must also complete an institutional security assessment. The assessment involves considering factors about an offender such as age, previous crimes, and types of crimes committed to enable staff to assign a level of risk to the offender while in custody. The process is meant to help staff determine where to place the offender within a facility. It also provides information for correctional officers when interacting with the offender.
- 2.62 We examined 40 offender admissions during the audit period, half of which were for intermittent sentences. For nine of the offenders, staff did not complete the required health form. It is important for staff to collect this information as correctional officers may need to more closely monitor an offender with drug use prior to admission. Healthcare staff may also need to monitor medical conditions.
- 2.63 We also noted that staff sometimes only completed the health admission form on the first time an intermittent offender was admitted. When the offender returned on subsequent dates staff did not complete or update the form. Details of the offender's medical status or recent drug and alcohol use may have changed during this time away from the facility. Without this knowledge, staff may not have the most current information in the event of an emergency.
- 2.64 Beginning in November 2015, partway through our audit period, the Department began requiring an institutional security assessment. We expected to see assessments completed for 27 of the 40 admissions we tested. We found they were not done for 10 admissions, 9 of which were for intermittent offenders.

Recommendation 2.11

The Department of Justice should ensure health admission forms and institutional security assessments are completed for all offenders every time they are admitted to a provincial correctional facility.

Department of Justice Response: Department of Justice agrees with this recommendation.

Policy is being enforced to ensure a copy of the Admission Health Information Form is retained by the superintendent to alert correctional staff when an inmates's health may be endangered in an emergency.

*This will be included in the facility audit schedule. An audit matrix will be developed.
Timing: June 30, 2018*

**Missing documentation of offender injuries and review of medical history for use of force**

- 2.65 Correctional officers are permitted to use force against offenders to protect themselves, or other offenders; to get an offender to comply with orders; or to protect correctional facility property. We reviewed 20 cases in which force was used against an offender and found in all cases the use of force was appropriate and consistent with what is allowed in the Department's policies. However, we found instances in which documentation was not consistent with policy requirements.
- 2.66 Documentation for 8 of the 20 cases we reviewed was not adequate to determine if an offender was injured when force was applied. Department policy requires this to be noted for every use of force incident. While the force used in several of the cases was minor, staff should have documented if injuries occurred. It helps promote the safety of the offender and protects the Department from allegations that force was excessive and injuries were not properly treated.
- 2.67 We also identified two instances in which staff did not review an offender's medical history prior to using force. The need for force can happen spontaneously, while at other times it can be planned. For example, if an offender refuses to leave their cell, correctional officers plan for how to best remove the offender. Staff are required to review an offender's medical history prior to any planned use of force incident. There were 9 planned use of force incidents in the 20 we examined, 2 in which staff did not review the offender's medical history prior to the incident. One was particularly concerning as staff were issued Tasers to use if needed. While a Taser was not used in that incident, failing to review medical history presents unnecessary risk to the safety of offenders.

Recommendation 2.12

The Department of Justice should ensure offender medical history is reviewed prior to planned use of force incidents and that documentation to indicate if an offender received injuries when force was applied is maintained.

Department of Justice Response: Department of Justice agrees with this recommendation.

The appropriate Policy and Procedure has been updated to reflect the process of recording the assessment by health care in the Subject Behaviour Officer Response Report.

The relevant Accident and Injury Report policy and procedure has been reviewed and updated to ensure there is no confusion or discrepancy in direction between the two policies.

A review of medical information prior to planned use of force has been completed, superintendents have been directed to reinforce this policy and procedure with their managers. Timing: Complete

**Offender complaints and correctional officer safety concerns properly addressed**

- 2.68 Each correctional facility has a process for responding to offender complaints. We reviewed 20 complaints from offenders during the audit period and found each was addressed in a reasonable and timely manner.
- 2.69 We also reviewed 21 instances in which staff identified safety concerns within a facility. In each case facility management assessed the concern and took appropriate steps to address the issues identified.



Additional Comments from the Department of Justice

Correctional Services plays a crucial role in keeping our communities safe. Safe, secure and modern justice facilities, along with well-trained staff, are among our highest priorities. Our job is to keep people safe and to make sure that our courts and legal system run smoothly. We have a responsibility to protect inmates and accused people in our custody. We must ensure their welfare is a priority while doing what we can to successfully reintegrate them back into society. The department will continue to take steps to improve staff training, recruitment and improve overall safety in our facilities. Correctional Services has been focused on proactive measures over the past year, as evidenced by the our recently established audit schedule and focus on accountability at the Correctional Facility level. Many of the recommendations have already been accomplished or are in progress.



Appendix I

Reasonable Assurance Engagement Description and Conclusions

In May 2018, we completed an independent assurance report for the Department of Justice. The purpose of this performance audit was to determine whether the Department of Justice is identifying risks within provincial adult correctional facilities and taking steps to mitigate these risks in order to promote the safety of offenders and staff and the security of the facilities.

It is our role to independently express a conclusion about whether the management of provincial correctional facilities complies in all significant respects with the applicable criteria. Management at the Department of Justice have acknowledged their responsibility for the management of provincial correctional facilities.

This audit was performed to a reasonable level of assurance in accordance with the Canadian Standard for Assurance Engagements (CSAE) 3001—Direct Engagements set out by the Chartered Professional Accountants of Canada; and Sections 18 and 21 of the Auditor General Act.

We apply the Canadian Standard on Quality Control 1 and, accordingly, maintain a comprehensive system of quality control, including documented policies and procedures regarding compliance with ethical requirements, professional standards, and applicable legal and regulatory requirements.

In conducting the audit work, we have complied with the independence and other ethical requirements of the Code of Professional Conduct of Chartered Professional Accountants of Nova Scotia, as well as those outlined in Nova Scotia's Code of Conduct for public servants.

The objectives and criteria used in the audit are below:

Objective:

To determine if the Department of Justice has a framework in place to identify, mitigate, and monitor risks related to safety and security at provincial adult correctional facilities.

Criteria:

1. The Department of Justice should have safety and security risk assessments for provincial adult correctional facilities, including steps required to mitigate risks.
2. The Department of Justice should implement the safety and security risk mitigation measures outlined in risk assessment documents for provincial adult correctional facilities.
3. The Department of Justice should regularly review and update safety and security risk assessments for provincial adult correctional facilities.
4. The Department of Justice should regularly assess the effectiveness of measures in place to mitigate safety and security risks within provincial adult correctional facilities.

**Objective:**

To determine if the Department of Justice is managing correctional facilities in a manner consistent with risk assessments to promote the safety and security of offenders, along with the safety of staff and visitors.

Criteria:

1. The Department of Justice should have risk assessments that outline risks related to offender safety and security and the safety of staff and visitors, including steps required to mitigate risks.
2. The Department of Justice should implement the mitigation measures outlined in risk assessments for offender safety and security and the safety of staff and visitors within provincial adult correctional facilities.
3. The Department of Justice should regularly review and update risk assessments for offender safety and security and the safety of staff and visitors within provincial adult correctional facilities.
4. The Department of Justice should regularly assess the effectiveness of measures in place to mitigate risks to offender safety and security and the safety of staff and visitors within provincial adult correctional facilities.
5. The Department of Justice should use safety and security risk assessments to establish goals, objectives, and performance expectations for offender safety and security and the safety of staff and visitors within provincial adult correctional facilities and report against these on a regular basis.

Generally accepted criteria consistent with the objectives of the audit did not exist. Audit criteria were developed specifically for this engagement. Criteria were accepted as appropriate by senior management at the Department of Justice.

Our audit approach consisted of interviews with management and staff at the Department of Justice, and the four provincial correctional facilities, observations, and file review. We examined relevant processes, plans, reports, and other documentation. We examined supporting documentation as applicable. Our audit period covered April 1, 2015 to February 28, 2017. We examined documentation outside of that period as necessary.

We obtained sufficient and appropriate audit evidence on which to base our conclusions on May 10, 2018, in Halifax, Nova Scotia.

Based on the reasonable assurance procedures performed and the evidence obtained, we have formed the following conclusions:

Given shortcomings identified in key areas, improvements are needed to the Department of Justice's management of correctional facilities to better promote safety and security.

The Department does not have a documented framework in place to identify, mitigate, and monitor safety and security risks at provincial adult correctional facilities.

The Department is also lacking performance indicators to measure safety and security within facilities and assess the effectiveness of measures in place to manage risks.



While the Department has numerous policies to promote safety and security at correctional facilities, we found several instances of policies not being followed and this can have a direct impact on the safety of offenders, staff, and visitors, along with the security of facilities.