

# ***Behind The Walls***

## ***Prison Chess Tournament***

**October 27, 2024, London, Ohio**

**Free Entry!**

**Advance entry required no later than Oct 12<sup>th</sup>!**

*It's Back! After a 9-year hiatus, the chess program at London Correctional is back up and running. Residents are ready to test their skills against the outside world and earn an official rating... in their world, this means a lot! Players must be at least age 18.*

**Site:** London Correctional Institution, 1580 State Route 56 SW, London OH 43140. Just a few miles south of I-70.

**1 Open Section.** 4 rounds G/20, d5. Quick rated, no byes, current US Chess membership required. Pairing system at TD's discretion depending on number of entries and maximizing inmate games vs rated opponents. Sets provided, **please bring clocks.**

**Entry Fee:** Free! No prizes.

**Schedule:** Check in at main entrance 10:30 am, photo id required. Finish approximately 5pm. Snacks provided, no outside food allowed.

**Registration:** Submit entry details below and required visitor paperwork **ASAP**, absolute deadline **Saturday 10/12**. Email to [grant@neilley.com](mailto:grant@neilley.com) or fax to 614-418-1776.

### **Important Notes:**

- Institution does not allow smoking.
- Must wear **long** pants (no shorts; ladies, no skirts), shirts/tops with no "controversial" graphics (e.g. political, religious, racist, violent, etc.), closed toe shoes with backs (e.g. no crocs, sandals, flip flops), no bare midriffs.
- Suggest not wearing blue (jeans are ok)
- Do NOT bring: food, paper, score books/sheets, sets, cell phones, smart watches or other electronic devices (except clocks); medical devices allowed with advance notice to organizer.
- DO bring clocks
- Questions/more info, contact Grant Neilley [grant@neilley.com](mailto:grant@neilley.com) (preferred) or 614-314-1102.

## **Entry Details**

Player's Name:

US Chess id Number:

Expiration:

Rating:



Definition of Nexus - An employee, volunteer or contractor who has any contact and/or relationship with an incarcerated person who:

- Is currently Incarcerated under the supervision of the Department of Rehabilitation and Correction
- Is currently on parole under the supervision of the Department of Rehabilitation and Correction
- Was recently released from a DRC facility (within the last 5 years)
- Was recently released from parole under DRC Supervision (within the last 5 years)

A Nexus would include but not be limited to the following examples:

- If you have been on an offender's visit list
- If you have ever placed money on an incarcerated person's/supervisee's books
- If you have ever communicated with an incarcerated person/supervisee on electronic messaging.
- If you have ever made phone calls to or received phone calls from an incarcerated person/supervisee.

I understand if my relationship status changes or I transfer to a different work location, I am immediately required to complete a new nexus form and submit it to my Managing Officer/APA Regional Administrator for approval.

Name \_\_\_\_\_ OAKS Number: \_\_\_\_\_ Employee Type: \_\_\_\_\_

Job Title \_\_\_\_\_ Your Current Work Location: \_\_\_\_\_

**I  NO NEXUS** COMPLETE ONLY ONE SECTION BELOW (I, II OR III)

I state that, to the best of my knowledge, I have no nexus connection, affiliation, or relationship to any incarcerated person/supervisee currently under the supervision of the Ohio Department of Rehabilitation and Correction or any other criminal justice agency. I understand that should I become aware of such a relationship I am required to notify my Managing Officer/APA Regional Administrator the next business day.

**II  NEXUS - REQUESTING NO CONTACT** (Select one of the 2 options below and explain below)

I do have a nexus I am required to report, but I do not wish to correspond, visit, send funds/packages or communicate with them while they are incarcerated or on under community supervision.

Incarcerated Person/Supervisee Name: \_\_\_\_\_

Incarcerated Person/Supervisee Number: \_\_\_\_\_

I do not anticipate professional conflict if the individual remains in the same prison/APA region.

I anticipate a professional conflict if the individual remains in the same prison/APA region

Please Note: In some cases, incarcerated individuals with certain medical, mental health, classification, security, supervision or other needs will require the incarcerated individual to be kept in a certain prison/region. In situations where incarcerated individuals cannot be moved for these reasons, requests to not work in the same facility/region with the incarcerated individual cannot be accommodated.

Please explain your relationship with this individual:

**III  NEXUS - REQUESTING CONTACT**

I have a nexus with the individual listed below who is currently incarcerated in the ODRC facility, or is under the supervision of the APA or another criminal justice agency, and I wish to maintain contact with them.

Incarcerated Person/Supervisee Name: \_\_\_\_\_

Incarcerated Person/Supervisee Number: \_\_\_\_\_

Please describe your relationship and the purpose and extent of the contact:

Staff

Print Name:	Signature:	Date:
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Managing Officer Action:  Transfer  Approve Professional Contact Only - No Transfer  Approve Contact  Disapprove Contact

Print Name:	Signature:	Date:
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# Volunteer/Contractor/Intern Emergency Information

Name:		Last 4 digits of Drivers License #:	
Current Residence:			City:
State:	Zip:	Birth Date:	E-mail Address:
Home Phone (Including Area Code):		Cell Phone (Including Area Code):	

\* In the event of an emergency where driving directions are needed to your home, the address listed above will be used to run "driving directions" using a mapping service through the internet.

### List 3 Persons To Notify In The Event Of An Emergency:

1. Print Name:		Relationship:	
Primary Contact Number:		Alternate Number:	
Address:	City:	State:	Zip:

2. Print Name:		Relationship:	
Phone Number: (     )		Address:	
City:	State:	Zip:	

3. Print Name:		Relationship:	
Phone Number: (     )		Address:	
City:	State:	Zip:	

Do You Wear a Medical Tag: <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Please Explain:
Name of Family Doctor:	Doctor's Phone Number: (     )

Model of Car 1:	Plate #:
Model of Car 2:	Plate #:

If any information on this form changes, a new form must be completed and returned to the Volunteer Coordinator.



Employee Signature:	Date:
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**SIGNATURE  
REQUIRED ON  
THIS PAGE**

**Department of Rehabilitation and Correction  
Prison Rape Elimination Act  
Contractor/Volunteer/Intern Training Acknowledgement Form**

I, \_\_\_\_\_ acknowledge that I have received and  
(Please Print Name)  
understand the training on my responsibilities under the Ohio Department of Rehabilitation and  
Correction’s Prison Rape Elimination Act Policies (79-ISA-01, 02, 03, 04, 05) to include the  
following:

1. The Department’s zero-tolerance for sexual abuse
2. The Department’s zero-tolerance for sexual harassment
3. How to report sexual abuse and sexual harassment
4. Sexual abuse and sexual harassment prevention
5. Sexual abuse and sexual harassment detection
6. How to respond to sexual abuse and sexual harassment
7. The legal prohibition on any sexual activity with inmates
8. The identifiers of possible sexual assault victims
9. Sexual assault prevention strategies

**Applicant  
Signature**

Signature of Contractor/Volunteer/Intern:	Date:
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Staff Witness Signature:	
Staff Witness Printed Name:	Job Title:
Institution/Agency:	Date:

## **Proper Dress**

When you come into a correctional site, your attire should be considered “business casual.” How you present yourself will have a direct impact on how the offenders and members of the staff respond to you.

### *Suggested Clothing:*

- Men should wear dress slacks and a shirt.
- Women may wear dresses (below the knee) or dress slacks with a blouse.

### *Prohibited Clothing:*

Shorts, short skirts, sleeveless shirts, low cut tops and revealing clothing.

1. All attire worn upon entry into the facility must be worn throughout the duration of the visit, with the exception of appropriate outerwear such as a coat and gloves.
2. Appropriate undergarments must be worn (i.e., bra, slip, and underwear).
3. No additional clothing is permitted to be carried into the facility.
4. Inappropriate attire includes, but is not limited to:
  - a. See-through clothing of any kind.
  - b. Tops or dresses that expose the midriff or have open backs or open sides (such as any sleeveless clothing like halter tops, tube tops, cropped tops, tank tops, and muscle shirts).
  - c. Low-cut clothing cut in a manner that exposes the chest.
  - d. Any clothing that inappropriately exposes undergarments.
  - e. Skirts, dresses, shorts, skorts, or culottes with the hem or slit above the mid-knee.
  - f. Wrap-around skirts/dresses or break-away type pants.
  - g. Clothing with any gang related markings.
  - h. Clothing with obscene and/or offensive pictures, slogans, language and/or gestures.
  - i. Form-fitted clothing made from Spandex or Lycra or other similar knit material such as leotards, unitards, bicycle shorts, jeggings, tight jeans, or tight pants.
  - j. Clothing with inappropriate holes/rips, including shoulder cut-outs.

5. No more than one wristwatch or pocket watch will be permitted.
6. Smart watches and Fitbits will not be permitted.
7. Purses, handbags, backpacks, or similar items are not permitted.
8. All visitors are subject to clear the metal detector. The following items often prevent clearance of the metal detector:
  - a. Hairpins
  - b. Bras with metal underwires
  - c. Certain boots and shoes
  - d. Clothing with multiple zippers

Please review the departments Dress Code Policy 31-SEM-06.

### **Operations Management Concept (Institutions)**

The DRC unveiled the concept of Unit Management 20 years ago. This concept of management would provide better control and supervision of offenders by increasing the number of staff who has direct contact with offenders on a daily basis.

*Unit Managers* are responsible for the overall operation and security of the unit and the supervision of the unit staff.

*Case Managers* replaced licensed social workers. The case manager's responsibilities include: job assignments; parole plans, security reviews; processing visiting applications; and developing written treatment plans for each offender in their unit.

*Correctional Counselors* have the security rank of sergeant. Their duties involve hearing minor rule infractions, maintaining security and sanitation.

*Unit Administrative Professional* assists the unit staff with processing and maintaining offender files.

As a team, the unit staff play an important role in addressing the needs of offenders. They assist with family emergencies and basic personal needs such as hygiene and clothing.

### **The Institutional Chaplains and Religious Volunteers**

DRC has a strong history of innovation and pursuing excellence in religious programs. Religious volunteers have a major influence in bringing hope and spiritual insight for offenders.