SURVEY WITH ADDITIONAL INFO

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Lethal Injection Protocol Survey Responses

1. Composition of Execution Team Members

What are the selection criteria for the following execution team members?

Medical personnel: Medical personnel must be qualified under Ohio law to be able to administer and prepare intravenous drugs.

Custodial personnel: Custodial personnel are selected based on their institutional record. Each individual employee's file is checked for any disciplinary action, attendance issues, specialized training and/or experience in the department.

Supervisory personnel: Supervisory personnel are selected based on their leadership skills, knowledge of the execution process, and experience on the execution team. Currently the execution team has a Commander and an Assistant Commander.

Are the criteria in writing and/or in the procedure? No, the criteria are not currently in writing or in the written procedure.

What is the procedure used to recruit execution team members for:

Medical duties: When the need exists to fill a medical position, Central Office is contacted to do a state-wide search for qualified personnel. Current qualified team members also submit recommendations on behalf of individuals known to be qualified.

Custodial duties: As a custodial position becomes vacant, a notice for the position is posted at the time clock for interested employees to review. A notice for the position is also read at roll-call for three consecutive days for our correction officers and supervisors.

Supervisory duties: Not applicable.

Is the procedure in writing and/or in the execution procedure? No, this procedure is not currently in writing or in the execution procedure.

What is the procedure for selecting the execution team members?

Medical personnel: Medical personnel, first and foremost, must be qualified under Ohio law to be able to prepare and administer intravenous drugs, and/or be qualified to start an IV. Their file is checked for any discipline and attendance issues. If the decision is made to place them on the team, they are then brought to the institution during the next training session to meet with the Warden and other team members to ask and answer any questions as needed.

Custodial personnel: Once this is posted, the applications are turned in to the Team Commander. The applications are then screened for any discipline, attendance issues, and

Page 1 of 9

any additional specialized training. The applications are then reviewed by the Warden, the Deputy Warden of Operations and the Team Commander. These three individuals then take their selections to the team for input and the applicants are then voted on by all parties involved. The entire team's input in this process is vital. There are numerous confidentiality issues in the execution process and trust among team members is a strong factor in the selection process.

Supervisory personnel: The Team Commander and Assistant Commander are selected by the Warden, based on their leadership skills, knowledge of the procedures and experience on the team.

Is the procedure in writing and/or in the execution procedure? No, this procedure is not currently in writing or in the execution procedure.

What is the procedure for periodic review of execution team members?

Medical, Custodial, and Supervisory: After each and every execution, the team members go through a team debriefing. During this debriefing, the process is discussed and any issues are addressed. Each team member has this time to discuss their feelings and the effects, if any, the execution has had on them, as well as any procedural concerns that may have arisen. The state-wide Critical Incident Stress Team (C.I.S.T.) is on grounds at each execution and is available to anyone involved with the execution process.

Criteria for removal: The employee must have a good employment record as determined by the Warden including, but not limited to, a review of the employee's attendance record, disciplinary record, leave usage, and overall job performance.

Is the procedure in writing and/or in the execution procedure? No, this procedure is not currently in writing or in the execution procedure.

2) Training, Supervision, and Managerial oversight of the execution team members:

What types of training are provided to execution team members, such as:

Medical, Custodial, Supervisory and Managerial personnel: Policy states that the team trains a minimum of four times prior to a scheduled execution. The team trains for various contingencies.

Are there written lesson plans, training records, pre or post test, etc.? No, there currently are no written lesson plans, training record, pre- or post-tests, etc.

Identify any equipment or techniques used for training personnel: During the full rehearsals of an execution, we utilize all of the actual equipment, including a practice arm for intravenous infusion, IV lines, plastic syringes (pushing water in place of the drugs), and additional restraints for combative, non-compliant inmates.

Frequency of training: Thirty days prior to a scheduled execution, the team trains four consecutive weeks.

Page 2 of 9

Type of training provided on the drugs that are utilized: Currently, only the qualified medical team members have formal training on the preparation and the administration of the drugs.

What types of Supervision and Management oversight?

Are reviews, critiques, or audits conducted of each execution? Debriefings are conducted after each execution (see above) and other, more formalized reviews are conducted on an "as needed" basis.

Are reviews, critiques, or audits documented? Debriefings are documented in our incident command documentation. Formal after action reviews are documented by the Warden.

3) Consistent and reliable record keeping:

Identify any record keeping systems used to document:

Execution team membership selection criteria and selection procedure: Applications are kept on file by the Team Commander.

Execution team membership recruitment procedures: Roll-call announcements are kept on file in the Major's office.

The lethal injection protocol in relation to the administration of sodium thiopental (1st drug) and other drugs used: The execution timeline is maintained throughout the entire execution process, including when each syringe is initiated and completed. This timeline is filed in the Warden's office.

Execution logs: The execution timeline is filed in the Warden's office.

Medical observations: The qualified medical team personnel perform assessments assuring proper insertion of IV's and the continence of the injection site. The county coroner's examination (post execution) is logged on the execution timeline.

Heart rate and Electrocardiogram: Not applicable.

Quality control systems for all contemporaneous records of the execution: All records, including the execution timeline are filed indefinitely in the Warden's Office.

Lethal Injection Protocols:

What drugs are used? Thiopental sodium is the first drug, pancuronium bromide is the second drug, and potassium chloride is the third drug.

What is the amount (dosage) of each drug used? Two grams of thiopental sodium with 25mg/cc concentration for a total of 80cc which are placed in two syringes. 100mg of

January 2007

Page 3 of 9

pancuronium bromide with 2mg/ml concentration for a total of 50cc which is placed in two 25cc syringes. 100 milliequivalents of potassium chloride with 2meg/cc concentration for a total of 50cc. In between administering each of the drugs, a low pressure drip of saline is administered through the IV's for approximately one minute for the purpose of a flush.

How are the drugs administered and by whom? The drugs are administered manually through a series of five syringes by a qualified team member who is certified to administer drugs by Ohio law.

Who determines "anesthetic depth"? The Warden and Team Commander, who are present in the chamber throughout the process, will assess the inmates breathing, movements, consciousness, and both IV insertion sites. Once the process has been initiated, the Warden and the Team Commander receive a signal indicating that the thiopental sodium has been completed. The Warden and Team Commander ensure that the offender is unconscious and perform assessments of the IV insertion sites. Once the Warden is satisfied that the inmate is unconscious and the injection site remains continent, the signal is given to begin the second drug (pancuronium bromide). The team member administering the drugs also assesses the resistance of the drugs being pushed. This is also an indicator if the drugs are being administered properly.

Identify any/all equipment utilized: No medical electronic devises such as BIS monitors, heart monitors, blood pressure monitors, electrocardiograms (EKG), and pulse oximeters are used. As miscellaneous equipment, we use IV lines, heparin locks, safety syringes, plastic syringes, various sizes of needles, IV bags of saline, two small metal trays to place items on during the insertion of the shunts, and one multi-drawer storage box to secure equipment and medical supplies.

Identify potential experts:

The Ohio Department of Rehabilitation and Corrections has consulted with Dr. Mark Dershwitz, M.D., Ph.D. of Massachusetts, who has provided an affidavit in support of our litigation position; the litigation is pending and not resolved.

4) Other Questions

Is an anesthesiologist used to administer drugs or to supervise, monitor, or determine anesthetic depth? No, an anesthesiologist is not used to administer drugs or to supervise, monitor, or determine anesthetic depth.

Any problems you have encountered in the process? The team has had one issue with an execution where a previously viable vein "blew". There was difficulty finding another usable vein due to the inmate having had been an intravenous drug user. However, another usable vein was established and the execution was carried out.

Do you use a pre-execution sedative for the prisoner in the hours or days leading up to the execution to keep them calm? The inmate is offered a non-mind altering

January 2007

Page 4 of 9

medication, such as Visteril, as approved by a physician or psychiatrist. It is available to the inmate upon request and as needed.

Is the staff required to establish the IV in the vein in view of the witnesses (i.e., curtains drawn)? Yes. However, the witnesses observe this process through television monitors in the witness rooms from a live feed camera in the ceiling of the inmate's cell (see photo sheet # 8), where this process takes place. They observe an overhead view of the inmate lying on the bed during this process. Due to the camera angle, the identities of the team members involved are preserved.

5) Physical plant and infrastructure

Construction

Is the space where lethal injections are conducted dedicated or shared space? It is a dedicated area.

Was the space built specifically for lethal injections or is it retrofitted space? It is a retrofitted space. In the late 1960's the original construction for this facility had specifically designed and engineered area of this prison to be Ohio's new Death House. This part of the building was designed for the sole purpose of carrying out court ordered executions by means of electrocution. On November 21, 2001 Governor Bob Taft signed legislation making lethal injection the only form of execution in the State of Ohio. Because of this new law, a few modifications had to be made to enable this new process, primarily removing the The equipment room saw heavy electric chair and relocating the injection table. transformers, high voltage wiring, and other necessary switchgear removed. A new stainless steel table was added to accommodate space for the IV lines and syringes needed for this new process. A few other minor changes that have taken place over the years to accommodate the new method of capital punishment for Ohio include a divider wall in the large witness room along with upgrading the lighting system and installation of one-way mirrored glass.

How is the execution space constructed? Is it "hard" construction, such as concrete or commercial type, such as gypsum board on metal studs? Physical construction materials for this area are 12" poured concrete wall foundations. The floor consists of a Pan-Core poured concrete floor with ceramic quarry tile on a grout bed. The walls are 8" wire enforced concrete block with 4" glazed brick with ties for the exterior finish. The roof is a flex core jointed roof with a built-up design for the external weather seal and has an internal drop ceiling for cosmetics and is able to house various recessed lightings while providing good acoustical properties. Other alterations for this area have been installed: one-way, laminated safety glass is installed in the steel chamber door and provides anonymity for people in the equipment room while conducting an execution. The two large witness-viewing rooms are separated from the chamber by laminated safety glass framed in steel storefront type enclosures that are secured to concrete block walls.

Schematic Design

January 2007

Page 5 of 9

If available, will you please provide a schematic level floor plan of the area used to conduct lethal injections in your state? Attached.

Infrastructure

Is specialized communication equipment required during the execution process? Specialized communication equipment is not required to conduct an execution process; however, the facility uses secure handheld radios, stationed at different areas to maintain a proper timeline of scheduled procedures/events. Dedicated phones lines, and cellular phones are also available for designated officials and the media.

Does the lethal injection process require additional infrastructure, such as fiber optics or Category V wiring? Yes, Cat #5 wiring is used for data transmissions to computers at various locations to update key staff on current events. Coaxial cable is also used to transmit video to the witness rooms via LCD flat screen monitors. Coaxial cable is run to the auxiliary viewing area, which is used for multiple victim witnesses to view the process (on an as needed basis).

Are dedicated power circuits required, or used? How are they used? No special electrical circuits other than original construction wiring are necessary to perform an execution. The facility has two sources of power (normal & critical) that that are used to maintain power to the facility. The death house uses both types of power sources. As a rule, the most import items are fed with the critical power because of an onsite generator. The power is automatically restored within 11 seconds in the event of a total power failure. Identified areas of the death house that are on critical power are: the inmate's holding cell outlet, computer equipment, death chamber and control room track lighting.

Is specialized medical or other equipment required to carry out the lethal injection? No.

What specialized support is required for the operation of medical equipment used during the execution? (i.e., design or construction) IV line holders were designed to secure the tubes from the bed to the control room area. The injection table has a slight forward tilt to aid the medical personnel in viewing the offender and monitoring the process from the control room.

6) Allocation of space

Condemned Inmate Holding Area:

Is there an execution holding or observation cell for the condemned inmate in the immediate area of the execution room? The holding cell is approximately 24' from the chamber door. A 16' hallway with secured doors at each end separates these two areas.

Is the holding area within the security perimeter of the institution? Yes.

Does the inmate spend more than 24 hours in the cell? The inmate is transported from another institution to the Death House at approximately 10:00am the day prior to the

Page 6 of 9

scheduled execution. The execution procedure begins the following day at approximately 10:00am. However, if there is a legal issue that would delay the procedure, the inmate's stay would exceed 24 hours.

Is there adjacent space for staff to observe the inmate? Yes, inmate observations are constantly maintained at the front of the holding cell, which is part of a 160 sq. ft. hallway (see photo sheet # 6).

Is there space for a spiritual advisor or attorney consultation? Yes. This can occur at both the holding cell front (see photo sheet # 6) and the dedicated visiting area (see photo sheet of dedicated visiting area).

Approximately how much space is dedicated to the inmate holding area? 100 sq ft.

Inmate Preparation Area, if any

Is there a specified area in which the inmate is physically prepared for the execution prior to the venapuncture? Yes, the Holding Cell.

How much area is provided? The holding cell is a 10' X 10' room.

Execution Area

Is the execution area separate from the witness viewing area? A separate entrance is used for the witnesses to enter the viewing area. The viewing area is separated from the chamber by laminated safety glass that is enclosed in a steel frame and secured to concrete.

Is the room/location in which the I.V. is inserted separate from the execution area? Yes.

What is the approximate gross square footage of the execution area? Approximately 272 sq. ft.

Witness Area

What is the approximate overall amount of space provided for all witnesses? The family witness room contains 80 sq. ft. The victims witness room contains 80 sq. ft. The auxiliary viewing room contains 960 sq.ft. The total square footage of floor space for witnesses is 1120 square feet. NOTE: The auxiliary viewing area has only been utilized for two executions and is not normally utilized.

What is the total maximum number of witnesses allowed to observe the execution? Three witnesses for the inmate, three witnesses for each victim, and three designated members of the media.

Are there specific areas for different types of witnesses to observe the execution? Yes.

January 2007

Page 7 of 9

Are the witnesses separated by some physical barrier during their observance of the execution? For example, is the victim's family kept separate from official witnesses, media, or the inmate's family? Yes.

If so, how much area is allocated to each type of witness? 80 sq. ft. per for family and 80 sq. ft. for victims (excluding 960 sq ft of auxiliary space).

Medical Staff Area

Is there space dedicated for medical staff? Yes

Is the space visible to the witnesses? Only the exterior (which is protected by a one-way mirror).

How is the medical staff space location critical to the lethal injection process? It provides direct observation of the offender, as well as the IV lines during the process.

How much space is provided? 80 square feet. How many staff occupies that space? Six (Two medical personnel, the Director, Assistant Director and Regional Director, team member communicating with the command post).

Is there unique building design characteristics required to accomplish the medical staff's mission? One-way mirrored glass, port opening (for IV lines to enter the chamber), stainless steel table for syringe preparation and delivery. NOTE: this room contains the controls for lights, monitors, PA system, and CC TV monitors.

Equipment and Chemicals

What specialized medical equipment is required to conduct the execution? None.

Approximately how much floor space is required to accommodate the equipment? N/A

Is there other non-expendable equipment used or stored nearby? Yes, restraints, backboard, gurney are stored in the storage room nearby (see photo sheet # 10).

Where are the execution chemicals and drug stored? They are ordered in advance; secured in the institution pharmacy and delivered to the equipment the morning of the execution. There is a locked cabinet where the prepared drugs are stored until the execution begins. NOTE: drugs are prepared by certified personnel and witnessed by a certified staff member and the team commander.

Custody and Other Staff Area

Is there a space designated for emergency response custody or other staff in or near the execution room? Yes. The hallway between the holding cell and the death chamber (see photo sheet # 9).

Page 8 of 9

How much space is provided for them? A 24' X 6' hallway is adjacent to the death chamber (see photo sheet #9); additional team members stage in this area for emergency response.

Are there other areas of your execution facility not listed? If so, what are they and how much space is required for each function? Yes. Contact visiting area (see photographs and overhead view). Auxiliary viewing area (see photographs and overhead view)

Are there other concerns not raised in this questionnaire that you are able to share with us? No.



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ENTRANCE TO DEATH HOUSE Photo Sheet #1





FAMILY WITNESS ROOM Photo Sheet #3





VICTIM WITNESS ROOM Photo sheet #4







STAFF RESTROOM Photo Sheet #5







HALLWAY Photo Sheet # 6



INMATE SHOWER Photo Sheet # 7

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HOLDING CELL Photo Sheet # 8



HALLWAY Photo Sheet # 9



STORAGE ROOM Photo Sheet # 10



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EQUIPMENT ROOM Photo Sheet # 11











AUXILIARY VIEWING AREA







DEDICATED VISITING AREA

