

**COMMISSION ON ACCREDITATION FOR CORRECTIONS**  
**STANDARDS COMPLIANCE REACCREDITATION AUDIT**

Arkansas Department of Community Correction  
Southwest Arkansas Community Correction Center  
Texarkana, Arkansas

April 11 - 12, 2019

**VISITING COMMITTEE MEMBERS**

Robbin Bell Chairperson  
ACA Auditor

James Troisi  
ACA Auditor

## **A. Introduction**

The audit of the Arkansas Department of Community Correction, Southwest Arkansas Community Correction Center in Texarkana, Arkansas was conducted on April 11- 12, 2019, by the following team: Robbin Bell, Chairperson; James Troisi, Team Member.

## **B. Facility Demographics**

Rated Capacity: 475  
Actual Population: 476  
Average Daily Population for the last 12 months: 479  
Average Length of Stay: 9 months - 2 years  
Security/Custody Level: Minimum  
Age Range of Offenders: 18-69

Gender: Male  
Full-Time Staff: 121  
28 Administrative/Support, 28 Treatment, 65 Security

## **C. Facility Description and Program Description**

The Southwest Arkansas Community Correction Center (SWACCC) is a residential community center that is located in the state of Arkansas, Congressional District Four; Miller County; City of Texarkana. The facility is the former St. Michael's Hospital and is positioned in the city's downtown area.

The main facility consists of a seven-floor concrete building not including the basement and roof covering approximately one city block. The facility has 317,000 square feet of useable space and is handicapped accessible. SWACCC also shares building space with the Arkansas Probation and Parole Department. This location is on the corner back side of the building site. Additional city agencies that are located adjacent to SWACCC's perimeter or are directly across from the facility includes: The Literacy Council, the Red River Commission, the Arkansas Health and Education Center, the Miller County Health Department and the city Civic Center.

The first of seven floors contain the administrative offices and kitchen. Floors three through seven contain the living units. The second floor houses all programming areas. All housing rooms have access to natural light through windows in the rooms and retain private bathrooms with toilets, wash basins and showers. The medical department is large and is located at the end of the fifth-floor wing of the facility. The facility has a multi-use chapel, barber shop, a maintenance department, and a fully serviced kitchen area which meet all basic needs of the residents. The facility has an identified Special Management Housing unit (15 Cells) which houses new arrivals, residents who are in pre-disciplinary hearing confinement, residents who are serving disciplinary confinement as a result of conviction for misconduct, and residents who are awaiting returned transfer back to the Department of Correction.

No physical perimeter measures are needed at SWACCC as all residents are housed in the single secure building. The recreation yard is located across the street from the center, is fenced in and contains one row of razor wire and one single observation tower. Access to the recreation yard requires the closing off of the street while the unit residents are escorted in groups of ten to and from. The facility Sally Port is located on the west side of the main building. The Sally Port is covered with the capacity of two automobiles. The “Sally port entrance” consists of two secure doors and a small “Atrium”. Immediately inside the entrance” is a shakedown area. The Community Work Crew yard is located adjacent to the area and is also fenced.

The facility Modified Therapeutic Community program is used to create a positive peer culture and facilitate overall lifestyle changes. These lifestyle changes are demonstrated by residents remaining drug-free and demonstrating the ability to interact in society without further criminal activity, while taking responsibility for ongoing recovery and contributing to their communities.

The therapeutic community model is used entirely within the facility’s program, including residents having responsibility to correct the behavior of other residents and a heavy emphasis on twelve-step traditions. The use of positive peer pressure, confrontation and sanctions, and cognitive intervention is a process of identifying and correcting errors in thinking and behavior. Negative behavior is confronted at various levels, from simple verbal correction to a strong, structured encounter and or a ‘Learning Experience’ designed to help a resident change a specific behavior or general attitude. Special interest peer support groups, facilitated by residents under the guidance of staff, also add to the treatment process.

General population up to 223 participants is housed in the Long-Term Treatment Program for a period of nine months to two years. The Parole Violator Re-entry Program participants are generally confined for approximately six months.

Once their needs are identified, they are programmed into the appropriate classes: drug education, cognitive intervention, re-entry, GED, anger management and relapse prevention. Parole violators are also assigned jobs within the facility.

Substance abuse program positions provide services for substance abuse and co-occurring disorders. Services include outpatient substance abuse and mental health-related counseling, life and social skills, employment readiness, health education, and referral services. A comprehensive evidenced-based behavior health substance abuse curriculum known as “New Freedom” is utilized. A 60-bed capacity special needs program is operated independent of the other units.

Eligibility is determined by drug and alcohol history, and/or mental, medical or behavioral special needs. Their purpose is to reduce drug dependence and recidivism. Participation in any program is supervised by staff who have credentialed as Certified Clinical Supervisors, Licensed Alcohol and Drug Abuse Counselors, Advanced Alcohol Drug Abuse Counselors, Certified Co-occurring Disorder Professionals, Certified Tobacco Treatment Specialist, or Counselor-in-Training. Participation in treatment classes requires four to five hours daily, and for weekly contact between 25 to 28 hours per week. Treatment plans are closely monitored for effectiveness and adjustment.

**D. Pre-Audit Meeting**

The team met on April 10, 2019, in Texarkana, to discuss the information provided by the Association staff and the officials from Southwest Arkansas Community Correction Center. The chairperson divided standards into the following groups:

Standards #	4-1A-01 to #4-5A-16 to	Robbin Bell, Chairperson
Standards #	4-5A-17 to #4-7F-10 to	James Troisi, Team Member

**E. The Audit Process**

1. Transportation

The team was escorted to the facility by Debra Ruff, ACA Coordinator, Residential Services (ACC).

2. Entrance Interview

The audit team proceeded to the office of Tina Maxwell, Warden/Center Supervisor. The team expressed the appreciation of the Association for the opportunity to be involved with Southwest Arkansas Community Correction Center in the re-accreditation process.

The Warden/Center Supervisor escorted the team to the conference room where the formal entry meeting was conducted. The audit team members gave a brief introduction.

The following persons were in attendance:

Kevin Murphy,	Director
Jimmy Banks,	Deputy Director
Tina Maxwell,	Warden/Center Supervisor
Mai Vaughn,	Admin Specialist
Debbie Ruff,	ACA Coordinator/ Residential Services
Rachel Jones,	Corporal
Laura Figueroa,	Sergeant
Bobbie McDowell,	Lieutenant

Tina Hodge,	Staff on Duty/TCS
Yoshiko Neeley,	Treatment Coordinator
Brbar O'Guinn,	Food Prep Manager
Gregory Wicks,	Treatment Supervisor
James Franklin,	Staff on Duty/TCS
Roscoe Hanson,	Assistant Maintenance Supervisor
Lenora Philson,	Health Services Administrator, Wellpath
Rebekah Davis,	Regional Manager, Wellpath
Stephanie Davis,	Fiscal Support Specialist
John Sneed,	Major
Abigale Smith,	Institutional Human Resource Coordinator
Rhonda Bruce,	ACA Coordinator

It was explained that the goal of the visiting team was to be as helpful and nonintrusive as possible during the conduct of the audit. The chairperson further explained that the team would serve as the eyes and ears of the ACA organization. The chairperson emphasized the goals of accreditation toward the efficiency and effectiveness of correctional systems throughout the United States. The audit schedule and tour plan were also discussed at this time. The chairperson requested that the assigned escort/scribes provide the audit team members space during the process when interviewing inmates and/or staff to facilitate open interaction.

The team members then offered information about their respective professional backgrounds as well as experience with the standards and accreditation process. The attendees then introduced themselves and their particular functions.

### 3. Facility Tour

The team toured the entire facility from 8:30 a.m. to 10:30 a.m. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Tina Maxwell, Warden/ Center Supervisor  
 John Sneed, Major  
 Debbi Ruff, ACA Coordinator- Residential Services  
 Rhonda Bruce, ACA Coordinator  
 Abigale Smith, Human Resource Coordinator  
 Yoshiko Neeley, Treatment Coordinator  
 Gregory Wicks, Treatment Coordinator  
 Roscoe Hanson, Asst. Maintenance Supervisor  
 Bobbie McDowell, Lieutenant  
 Mai Vaughn, Administrative Specialist  
 Stephanie Davis, Fiscal Support Specialist  
 Vicky Walker, Captain

Notices of the ACA reaccreditation audit were posted conspicuously throughout the Center.

4. Conditions of Confinement/Quality of Life

During the tour, the team evaluated the conditions of confinement at the facility. The following narrative description of the relevant programmatic services and functional areas summarizes the findings regarding the quality of life.

**Security:**

SWACCC is a minimum-security facility consisting of a seven -story brick structure covering approximately one city block. The facility shares building space with the Arkansas Department of Corrections Parole and Probation Department which is located on the back area. The facility outdoor wall structure is free from debris, foliage or trees.

No physical perimeter measures are needed as all residents are housed in the single secure facility. The Recreation Yard is fenced with one coil razor wire and has a single observation tower. The Community Work Crew yard is also fenced. The facility Sally Port is located on the West side of the facility. The entrance consists of two secure doors and a small Atrium. Immediately inside the entrance is a search room. SWACCC 's transportation fleet consists of four vans, three buses, four trucks, and four cars.

The perimeter is monitored by security cameras from the control center located at the first-floor entrance. There are a total of 15 exterior cameras that monitor and record all movement around the perimeter, and 175 cameras on the inside of the facility. The cameras are analog, stationary and PTZ with a one-three-week retention timeframe. Upper level supervision has the capability to view activity on video cameras from their computers.

The entrance to the facility is locked and monitored by the correctional staff in the control area. All visitors are required to sign in and out of the facility. Personal security devices include a rescue knife, gloves, CPR shield and a radio. Formal counts are conducted 11 times during each 24-hour period. Informal counts are done based on need, such as emergency situations.

Keys, security equipment and tools are held in the Control Center and the lock shop in locked storage cabinets. There are 24-hour keys and shift officer keys. They are accounted for using a chit system. Shift keys are passed from shift to shift and are recorded in logs. Inventories are conducted daily, quarterly and annually.

Certified staff can be issued side arms as approved by the Center Supervisor. Identified staff is issued OC spray, handcuffs, waist and ankle chains and authorization for the restraint chair. Accountability logs are retained in the armory.

Residents and staff are subject to pat and wand searches, all resident housing and common grounds inside and outside are routinely searched.

Post orders were reviewed by the audit team and were found to be concise and in good order. Resident telephones were found to be available in each housing unit. All were checked and found to be in good working order.

Security staff include: one Major, five Lieutenants, seven Sergeants, five Correctional Officers, and one Administrative Assistant.

### **Environmental Conditions:**

SWACCC was found to be exceptionally clean and well cared for, both inside and out. Texarkana Water Utility is the responsible provider of the potable water supply. The facility noise levels were low, natural lighting was available in all housing units and community areas, and the “climate control” temperature was found to be at acceptable levels throughout the facility. SWACCC’s lighting and air inspection was conducted on 7/17/2018. Water pressure and temperatures were checked, as was the functioning of a random selection of bathroom and shower facilities; all were satisfactory.

Each dorm had individual showers, sinks and toilets for the one-to-four residents occupying said dorm. The facility has an ongoing preventive maintenance plan. In the event the facility loses power, two fully service emergency generators are in place. The facility generator systems are tested monthly with load testing annually.

### **Sanitation:**

SWACCC is well maintained and clean. Daily and weekly inspections are conducted by area staff. Housekeeping plans were reviewed throughout the facility and the audit team observed residents cleaning in all areas of the facility. Resident were found to be clean, beds were made, properly stored, and shoes properly placed. Housing unit furnishings were found to be cleaned and in good order.

All chemicals used through the facility are inventoried and dispensed from one Central Caustic supply room. The housing units utilize a locked caustic container that is issued and returned daily and is under the control of the housing unit staff. Cleaning supplies maintained in the housing units are limited. Inspections of the supplies were found to be organized, properly stored, and accurately inventoried. Safety Data Sheets and safety equipment goggles, aprons, and gloves were located in the Central Caustic supply room. Janitorial closets with sinks and cleaning supplies were found accessible to all housing units and activity areas.

Institutional grounds were well maintained with no evidence of dumping or improper material disposal. A contract is in place for monthly pest control and biohazard/waste services. The facility has an ongoing maintenance plan.

**Fire Safety:**

SWACCC is a non-smoking facility. The facility Fire/Safety Lieutenant maintains the overall responsibility in this area. The Fire/Safety Lieutenant maintains a certification in Fire Safety and is experienced and knowledgeable in fire safety protocols and procedures.

SWACCC's fire safety measures include 160 fire extinguishers, 37 pull stations, sprinklers basement, first floor dining and training room and various smoke detectors strategically located throughout the facility. The Enunciator panel is located in the control room. The facility contracts with local vendors to provide quarterly service on the fire extinguishers and hood suppression system.

Fire extinguishers were found to be fully charged, appropriately checked and readily available in all areas of the facility. Staff and residents were familiar with fire evacuation procedures and review of paperwork demonstrated fire drills were accomplished at appropriate intervals and the required weekly, monthly and annual inspections were accomplished.

The facility has established a routine program of weekly and monthly inspections by qualified departmental staff and safety personnel. The facility conforms to applicable federal, state and/or local fire safety codes. SWACCC's annual fire safety inspection was conducted on 2/27/2019. The Texarkana Fire Department is located 2 blocks from the facility with a response time frame of 2 minutes.

Flammables/hazardous materials were found properly inventoried and accounted for. The storage areas were clean, orderly and free of clutter. Safety Data Sheets and proper protective equipment are available and utilized by responsible staff and residents. Cleaning agents issued to housing units and other facility areas are properly diluted to levels for use by staff and residents. Eyewash stations were present at appropriate locations and found to be in good working order. First aid kits were strategically located throughout the facility. The AED was found properly maintained and is located in the medical department easily accessible to staff.

**Food Service:**

SWACCC's Food Service department operates under the supervision of one Food Service Supervisor, and four Food Service Production Managers. Approximately 50 residents are assigned to work in food service. All residents working in the food service area receive medical clearance prior to being assigned and are provided SERV Safe training.

SWACCC's provides three hot meals per day with a total meal cost of \$3.72 per inmate per day.



Approximately 630 meals are served daily with a caloric count of 2200 authorized by the dietitian. Food service operations consist of providing daily in-house meals for all SWACCC residents, sack lunches for residents on offsite Community Work Crews, food service production tray setup and delivery as well as cleaning the kitchen.

Special Housing Unit meals are transported to the south end of the facility to the unit on insulated trays in portable carts. Temperature checks are conducted prior to departure from the food service area and again upon arrival into the housing unit. All other residents come to the central dining hall which seats 160.

SWACCC's food service department was clean and organized. The dining area space is also shared as a multi-purpose area for facility. Food safety inspections are conducted weekly. Refrigerators, freezers and the dishwasher temperatures were all in compliance with ACA Standards. The temperatures in the dry storage areas were in compliance and all items were stored on shelves or raised platforms. There is a rotation system to ensure all food items are used by their expiration date and all containers of food were dated and labeled.

There are excellent internal controls in food safety and sanitation, preparation and presentation of food and resource management. The tour through the food service areas revealed all areas were maintained and sanitation levels were high. The kitchen maintained excellent control of tools, equipment and hazardous material; every inventory was perfect. Residents were observed wearing proper uniforms, safety shoes, serving gloves, and hairnets. Restroom facilities for both residents and staff workers were in close proximity to all workstations. An outside vendor conducts hood suppression system inspections every six months.

SWACCC follows the Arkansas Department of Community Corrections master menu system. A certified dietitian reviews and approves the master menu system, which is serviced on a six-month, four-week rotating cycle. Special diets are provided upon request and administrative approval.

### **Medical Care:**

Medical care for residents are provided by Wellpath. Medical staffing consists of one Health Services Provider, one Mental Health Professional, one Dentist, one Dental Assistant, eight LPN's, and three PRN's. There is 24-hour nursing, mental health, dental and medical physician's coverage on call seven days a week. Emergencies requiring more extensive treatment are transported to the Diagnostic Hospital or Wadley Hospital.

The medical area consists of three exam rooms, with a waiting room that provides seating for 25 patients. The medical area also consists of a shower/tub area, only used in emergency instances, and a medical observation room servicing needs requiring less than 23 hours coverage.

Medical educational pamphlets and other related material are available for resident and staff viewing. The facility pharmacy shares space with the “pill distribution” room. There are five first aid kits strategically located throughout the facility. Medical staff are responsible for the proper inventory of the first aid kits. The AED is located in the medical “pill room”. Housekeeping in the medical area was exceptional. The area was clean, well-lit and equipped. Medical sharps, tools, and equipment were found to be properly labeled, inventoried, and accounted for.

Upon residents arriving at SWACCC, medical staff provide orientation and screening. Sick call is scheduled on a daily basis. For sick call, residents submit sick call request form, and place form in medical box. A nurse retrieves sick call form and triage sick call requests. Sick call request forms are processed within a 24 - 72-hour time frame or in urgent matters immediate attention is provided. Medical staff conduct rounds in the Specialized Housing units on a daily basis. A co-pay of \$3.00 is assessed for resident “initiated” requests. The dispensing of medications was observed and spot checks of sharps and meds. There were no discrepancies or concerns noted.

The coordination of special services includes both in-house and off-site providers. There are four pill calls per day. SWACCC maintains a limited number of “K.O.P.” and “O.T.C.” medication. At the time of this audit, there were 20 residents using psychotropic meds. Follow-ups on residents are conducted and closely monitored. Dental services are provided three times per week. Offsite treatment are scheduled on a monthly basis. Weekly radiology services are provided by the contracting agency “One Mobile”. Diamond Pharmacy services SWACCC daily. Pharmacy inspections are routinely conducted. The most recent pharmacy inspection conducted was February 2019.

Mental health services are varied throughout the week. Emergency services are provided 24 hours per day 365 days per year. Psychiatrist and Social work services are provided on a weekly basis. Psychologist services are provided twice weekly. SWACCC’s suicide protocol were found concise, organized, and in place.

The facility has a well-organized Infectious Disease Plan in place. All medical staff receives Infection Control Training annually. All SWACCC staff and residents receive TB tests annually. Bio-hazardous waste material removal is contracted through an outside vendor on a monthly basis.

Quality Assurance Team audits are conducted on a monthly basis. Goals and objectives are reviewed and addressed as directed.

## **Recreation**

SWACCC offers a variety of indoor and outdoor recreational activities for the resident population. The facility offers outdoor holiday picnics as well as baseball, basketball and volleyball games.

When residents are not recreating in their rooms, the day rooms provide board games such as chess, checkers, dominoes and cards. Additional inside recreation opportunities are ping-pong, pool tables, video games and air hockey. The residents are also provided the opportunity to participate in talent shows, art contests, and fitness challenges.

### **Religious Programming**

SWACCC's religious programming is under the supervision of one full time Chaplain. The Chaplain services the facility religious activities as the Volunteer Coordinator with the assistance of 180 volunteers. Volunteer clergy and community churches assist the Chaplain in providing monthly and weekly religious services, religious education, and pastoral care. The Chaplain provides religious literature and resource material to residents housed at SWACCC upon request. Requests for religious diets are evaluated and approved by the Chaplain. Requests for pastoral care are conducted in the Specialized Housing Unit at a minimal of two to three times per week or more often as needed.

Religious programming is offered seven days a week. The Chaplain/Volunteer Coordinator is responsible for the training and screening of all volunteers.

Religious denominations represented at SWACCC include Jehovah Witness, Baptist, Muslim, Protestant, Non-Denominational, Catholic, and Methodist services. The facility MTC program also provides AMD morning devotional and PMD afternoon devotional services to all residents.

### **Offender Work Programs:**

SWACCC's residents are required to work with the exception of those who for security, educational, or medical reasons are unable to do so. Some residents arrive with technical and vocational skills that make them employable in routine operations. Hands on experience assists them in learning marketable skills transferable to the community.

Routine resident work assignments at SWACCC include the usual jobs found in a residential setting such as housekeeping, barbershop, maintenance, food service, laundry, clerks, tutors, and library aides. There are no paid residential work assignments or programs.

SWACCC's residential work assignments are also incorporated in the Modified Therapeutic Community program. As residents advance through treatment phases, they are assigned to appropriate therapeutic jobs and progress through positions which help them develop skills useful in appropriately resolving personal problems and making lifestyle changes. Advanced positions carry increased responsibilities and residents are eligible for greater privileges.

SWACCC's has a large community work crew program. Residents assigned to these work crew programs provide janitorial, maintenance, and landscaping services to various local area agencies, such as the county road departments, local recreational parks, state fairgrounds, Arkansas Adult Parole/Probation Department, ARDOT Miller Co, and the Texarkana Arkansas Street Department.

### **Academic and Vocational Education:**

Educational testing is provided to each resident upon entering into the Center. Verification is made to determine GED or high school diploma. The educational classes are self-paced and range from nonreader level to high school level. Post-secondary education is supplemented by the Free Application for Federal Student Aid and ACT registration packets are provided upon request. At the time of this audit, SWACCC has 113 residents enrolled in GED, and 23 residents enrolled in the Literacy program. For the 2018/2019 academic school year, 22 residents have successfully completed this program, thus far.

SWACCC's "W.A.G.E." six-week class assist residents with the enhancement of educational functional level in reading, math, and language while improving communication and financial literacy, computer skills, and work-based preparedness for either workplace entry. Residents receive a Job Readiness and Beacon Typing certification at the successful completion of this class.

SWACCC's college classes are sponsored by Shorter College, a private faith based, two-year Liberal Arts college. This "in-house" college provides residents the opportunity to obtain an associate's level of degree. The school's open enrollment policy makes this opportunity accessible to residents having earned a high school diploma or GED completion from an accredited agency. Classes offered are Speech, Introduction to Sociology, Principles of Entrepreneurship, Creative Writing, Music Appreciation, Principles of Marketing and English Composition I.

SWACCC also provides two state certified vocational training programs: The High-Pressure Boiler Operator program and a 6-week Welding program. Upon completion of the Boiler program residents receive their state certification from the state of Arkansas. Additional vocational programs offered at SWACCC include: Custodial Maintenance, and the Serf Save Food Handler programs.

### **Social Services:**

Upon entry into SWACCC, an individualized plan is developed to assist residents with the oversight of their sentences, classifications, housing assignments, and other needs. In addition, a number of staff from various departments utilizes a number of treatment modalities to facilitate the provisions of the programs. Such programs and services include:

The Long-Term General Population Treatment Program houses up to 269 residents who have a length of stay consisting of nine months to two years. The goal of this program is to create a positive peer culture and facilitate overall lifestyle changes. These changes are achieved through the structured environment of the therapeutic community, including having explicit rules, the use of positive peer pressure, confrontation, sanctions, cognitive intervention a process of identifying and correcting errors in thinking and thus, behavior and the 12-step approach. The Modified Therapeutic Community program has three basic phases that are progress driven. As soon as the resident enters into the program, an extensive assessment is completed, and the resident is placed in the Phase System.

The Special Needs Unit offers a program that provides long term substance abuse treatment to residents for the purpose of reducing drug dependency and reducing recidivism. The eligibility criteria for the Special Needs Program are Drug and Alcohol history and special needs such as mental, medical or behavioral. The Special Needs Unit is located on the third floor and has a 60-bed capacity to house residents.

The Short-Term Program offers Drug Court judges the option to place a Drug Court offender in an ACC Center for a 30 to 90-day intensive residential program provided by skilled, certified treatment specialists. Treatment for this program includes individual and group therapy, 12-Step Alcoholics Anonymous and Narcotics Anonymous, process/static group, pre-release, life skills group, cognitive intervention, parenting, peer support, mental health referrals, relapse prevention and anger management.

The Supervision Sanction Program is an intensive residential program for parole and probation violators. The program extends from 90 or 180 days followed by aftercare under community supervision.

Residents participate in four to five hours of treatment classes per day for a total of 25-28 hours of treatment per week. Staff works closely with each resident to make sure that the resident has a plan to address individual needs strengthening the treatment process.

All SWACCC Treatment staff members providing services to the residents are credentialed as Certified Clinical Supervisors, Licensed Alcohol and Drug Abuse Counselors, Advanced Alcohol Drug Abuse Counselors, Certified Co-Occurring Disorder Professionals, Certified Tobacco Treatment Specialist, and counselor in Training. This treatment team consist of 28 staff members, one Treatment Supervisor, three Treatment Coordinators, two Staff on Duty, one Administrative Assistant, five SAPL's, and 17 Advisors. SWACCC Re-entry team consists of one Program Coordinator, and one Administrative Assistant.

**Visitation :**

SWACCC provides visitation time per week. Visitation is permitted on Saturdays and Sunday in the facility basement area. Hours of visitation is from 8:00 a.m. to 2:30 p.m. Attorney and Special Visits are provided upon prior request and approval. All visitors must receive prior approval and must show valid photo identification prior to signing in. All visitors must be processed through a metal detector. There are vending machines and lockers available for visitors use.

All visitation activities are closely monitored by eight security cameras strategically located throughout visitation area. Correctional staff are also stationed to provide additional security monitoring. Special accommodations which consists of a child's play area are also included in this area.

SWACCC provides "Video Visitation". Video messaging services are also provided in this program. Video "kiosk stations" are strategically located in assigned areas in the housing units. Residents interviewed provided favorable comments regarding this new visitation process.

**Library Services:**

SWACCC library services are supervised under the direction of the facility the Records Officer Supervisor. Library hours are Monday thru Friday from 7:30 a.m. to 4:00 p.m. There is one general library clerk and three law library clerks that assist with library services. These clerks also serve as area porters. The general library provides ample reading opportunity for the residents at SWACCC. Books are acquired by community donation and must be approved as proper reading material. Residents are able to check out books when the library is open. SWACCC does not participate in the Inter Library Loan program.

Legal research is available to all residents in the law library. Research requests are submitted and processed by departmental staff. While assistance for preparation of legal documents is available, no legal advice is offered. There are four computers located in the law library accessible for residents participating in the "Good Grid" program. Residents utilize these computers to create resumes and look for resources upon their release.

Law library services are provided to residents housed in the Special Management Housing unit upon request.

**Laundry:**

SWACCC laundry services consist of four commercial washers, four small washers and Five large commercial dryers.

There is an adjoining smaller laundry room which provides laundry services for residents that have medical communicable issues.

Residents providing laundering services have been trained to take precautions to control or prevent the spread of infectious disease.

The laundry services provide clothing and towel exchange daily. Laundry hours are scheduled seven days a week from 5 a.m. to 1 p.m. with additional hours as needed. Linens and blankets are exchanged weekly. There is a sufficient stock of clothing and linen to supply the resident population. Chemicals used in laundry are dispensed automatically from a secured dispensary system. Lint traps in the dryers were clean. Cleaning supplies are inventoried properly labeled and stored in a secure storage unit.

There is one security Sergeant that oversees SWACCC laundry services. There are 12 residents assigned to work in this area.

## **F. Examination of Records**

Following the facility tour, the team proceeded to the conference room to review the accreditation files and evaluate compliance levels of the policies and procedures.

The facility has no notices of non-compliance with local, state, or federal laws or regulations.

### **1. Litigation**

Over the last three years, the facility had no consent decrees, class action lawsuits or adverse judgments.

### **2. Significant Incidents/Outcome Measures**

The Significant Incident Summary and Healthcare Outcome Measures were reviewed with the Healthcare Administrative Team.

Overall, the Significant Incident Summary represented no concerns regarding activities or management at SWACCC.

During this audit period there were no reported incidents of staff/ resident's deaths nor suicides. There were zero incidents of resident assaults during this reporting period. There was only one incident of a staff assault during this audit period which occurred on the first date of the audit. Incident surrounded a resident refusing to comply with staff's orders. Following the refusal, as a response the resident chose to assault punch staff. An "initial" review of incident alluded to the resident wanting to "find a way" to be moved to an alternate floor. An investigation is currently underway. There were no significant staff/resident injuries during this incident.

During this audit period there was a total of four reported resident walkaways and one reported facility fire. The status of the walkways at the date of this audit is unknown. The location of the fire was in the Parole and Probation Department which is not in the authority nor responsibility of SWACCC.

A review of the Outcome Measures finds no significant incidents in both nature and frequency. There were zero incidents of any emergencies with the facility, and three incidents of unauthorized absences in the past 12 months. There was a total of 30 grievances filed in the past 12 months, five of which were regarding healthcare. There was a total of three resident lawsuits filed in the past 12 months of which all three were dismissed in court. There was a total of 468 rule violations in the past 12 months, of which zero number of disciplinary decisions were appealed in favor of resident. There was a total of 1,589 substance abuse tests administered in the past 12 months of which one resulted in a positive finding. There were no weapons found in the facility in the past 12 months. There were two incidents of controlled substance found in the facility in the past 12 months.

There were 4 incidents of staff found to have acted in violation of the facility policy and terminated in the past 12 months. There were 71 staff administered substance abuse tests conducted in the past 12 months of which one resulted in a positive test outcome.

There were zero number of complaints from the community within the past 12 months. There was a total of 32,906 hours of community service work delivered by SWACCC residents in the past 12 months. There were a Total of 7,181 hours of volunteer service delivered by members of the community in the past 12 months.

3. Departmental Visits

Team members revisited the following departments to review conditions relating to departmental policy and operations:

<u>Department Visited</u>	<u>Person(s) Contacted</u>
Food Service Barbara O’Guinn, Multi-Purpose Room Tina Maxwell, 1st /2nd Floor Housing	Food Production Mgr. Warden/Center Supervisor
4th Floor Housing, Sherhonda Washington, 5th Floor Medical Lenora Philson, Rebekah Davis,	Housing Officer Health Service Administrator- Regional Manager/Wellpath
5th Floor Housing Mark Gorman, 6th Floor Housing Garrett Gardner, 7th Floor Housing Noah Cecil,	Officer/Bobbie McDowell, Lieut Officer/Bobbie McDowell, Lieut Officer
Basement Roscoe Hanson, Commissary Helen Orr, Inside Recreation Bobbie McDowell,	Asst Maintenance Supervisor Commissary Manager Lieutenant



Visitation Area	
Supply Room	Laura Figueroa, Sergeant
Records Office Carlia Keener,	Records Supervisor
Law Library Tina Maxwell,	Warden/Center Supervisor
Chapel Bradley Warbritton,	Religious Service Volunteer
Recreation Yard	
Intake/Special Housing Unit James William,	Officer
Treatment Area Yoshiko Neeley,	Treatment Coordinator
Mailroom/Control Center Makeena Welch,	Officer/Rob Ewing, Admin Asst
Community Work Crew	
CWC Building	

4. Shifts

a. Day Shift 7:00 a.m.-3:00 p.m.

The team was present at the facility during the first day of the audit from 8:00 a.m. to 7:30 p.m. and on the second day of the audit from 7:00 a.m. to 11:00 a.m. During this timeframe the audit team conducted the initial audit tour, reviewed the accreditation files, conducted both the staff and inmate interviews, and conducted the audit closeout session. During this time period the audit team observed residents in their academic classrooms, medication lines, and during food service operations. During these hours, the audit team observed resident workers cleaning in various areas throughout the facility.

During the first day of the audit, the team sampled a resident meal. The meal was tasty, the appearance was good, warm, and the tray content met all nutritional requirements.

b. Evening Shift 3:00 p.m.-11:00 p.m.

The audit team was present at the facility the first day of the audit from 3:00 p.m. to 7:30 p.m. During this period, the audit team revisited a number of previously toured areas. The audit team observed residents during scheduled recreational periods and during mealtimes. Also, during this time, the audit team conducted staff and resident interviews. Staff were found to be professional and knowledgeable of their job duties.

During the evening of the first day of the audit there was a reported staff assault. Incident surrounded resident refusing to comply with staff's order. Following the refusal, as a response, the resident chose to assault staff. The incident resulted in no significant staff or resident injuries. An "initial" review of incident alluded to resident wanting to "find a way" to be moved to an alternate floor.

SWACCC staff addressed incident promptly and in a professional manner with no further disruptions. Investigation into incident is currently underway.

c. Night Shift 11:00 p.m.-6:00 a.m.

The audit team was present at the facility on the second day of the audit from 6:30 a.m. to 7:00 a.m. During this time frame, the audit team observed pre-shift/shift change, and early morning security and medical staff operations. The audit team found perimeter security measures to be complaint and in order. Staff interviewed were found to be alert, attentive and versed in their assigned responsibilities. The audit team continued conducting staff and resident interviews.

5. Status of Previously Non-compliant Standards/Plans of Action

There were no previously non-compliant standards.

## **G Interviews**

During the course of the audit, team members met with both staff and offenders to verify observations and/or to clarify questions concerning facility operations.

1. Offender Interviews

The audit team interviewed 22 inmates with no major concerns noted. The inmates had no negative comments about food service or the quality of the food. Inmates interviewed stated that they feel safe at this facility. Inmates stated that they do have regular access to supervisory staff, and in instances during times of crisis, they are able to discuss and address concerns confidentially. Inmates stated that medical issues are taken care of in a timely manner. Inmates interviewed stated they do participate in routine fire drills and voiced positive comments regarding programming provided.

2. Staff Interviews

The audit team interviewed 63 staff during the course of this audit. All staff members were friendly and knowledgeable of their job duties. Staff acknowledged receiving 40 hours of annual training and were versed in fire safety and suicide prevention protocols. Most staff stated they are provided the opportunity to work towards advancement. Staff state that they receive adequate training to perform their required duties. State expressed their respect and confident in the leadership of the administrative staff at SWACCC and state they have access to supervisory staff on a regular basis.

## H. Exit Discussion

The exit interview was held at 11:00 a.m. in the conference room with the Center Supervisor, Tina Maxwell, and 35 staff in attendance.

The following persons were also in attendance:

Kevin Murphy,	ACC Chief Deputy Director
James Banks,	Deputy Director-Residential Services
Rebekah Davis,	Regional Manager-Wellpath
Debra Ruff,	ACA Coordinator-ACC/Residential Services
Marilyn Darley,	AADC/CS
Gabriel Black,	Advisor
Kelly O' Neill,	Advisor
Valerie Curley,	Advisor
Meghan Baker,	Advisor
Many Kelly,	Advisor
Byron Woods,	Advisor
Breanna Bailey,	Advisor
Stacy Prel,	Advisor
Natasha Charles,	Advisor

The chairperson explained the procedures that would follow the audit. The team discussed the compliance levels of the mandatory and non-mandatory standards and reviewed the audit team findings with the group.

The chairperson expressed appreciation for the cooperation of everyone concerned and congratulated the facility staff for the progress made and encouraged them to continue to strive toward even further professionalism within the correctional field.

AMERICAN CORRECTIONAL ASSOCIATION  
AND THE  
COMMISSION ON ACCREDITATION FOR CORRECTIONS

COMPLIANCE

<b>Manual Type</b>	Adult Community Residential 4th Edition	
<b>Supplement</b>	2016 Standards Supplement	
<b>Facility/Program</b>	Southwest Arkansas Community Correction Center	
<b>Audit Dates</b>	April 11-12, 2019	
<b>Auditor(s)</b>	Robbin Bell, Chairperson, James Troisi, Team Member	
	<b>MANDATORY</b>	<b>NON-MANDATORY</b>
Number of Standards in Manual	32	218
Number Not Applicable	0	15
Number Applicable	32	203
Number Non-Compliance	0	0
Number in Compliance	32	203
Percentage (%) of Compliance	100%	100%
<ul style="list-style-type: none"> <li>• Number of Standards minus Number of Not Applicable equals Number Applicable</li> <li>• Number Applicable minus Number Non-Compliance equals Number Compliance</li> <li>• Number Compliance divided by Number Applicable equals Percentage of Compliance</li> </ul>		

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Community Correction  
Southwest Arkansas Community Correction Center  
Texarkana, Arkansas

April 11-12, 2019

Visiting Committee Findings

Non-Mandatory Standards

Non-Applicable

**Standard #4-ACRS-1A-14**

MALE AND FEMALE OFFENDERS DO NOT OCCUPY THE SAME SLEEPING ROOM.

FINDINGS

SWACCC is an all-male facility.

**Standard #4-ACRS-2A-05**

WHEN BOTH MALES AND FEMALES ARE HOUSED IN THE FACILITY, AT LEAST ONE MALE AND ONE FEMALE STAFF MEMBER ARE ON DUTY AT ALL TIMES.

FINDINGS:

SWACCC is an all-male facility.

**Standard #4-ACRS-2A-06**

IF EMPLOYEE'S CONTRACTS ARE GOVERNED BY CIVIL SERVICE OR UNIONS, PROCEDURES PROVIDE FOR PROVISIONAL APPOINTMENTS TO ENSURE THAT SHORT-TERM PERSONNEL, BOTH FULL-TIME AND PART-TIME, CAN BE AVAILABLE DURING EMERGENCIES.

FINDINGS:

SWACCC employees do not have employment contracts which are governed by civil service or unions.

**Standard #4-ACRS-2A-13**

THE ELECTRONIC MONITORING PROGRAM HAS A SYSTEM OF ACCOUNTING FOR AN OFFENDER AT ALL TIMES, INCLUDING VERIFICATION OF ACTIVITIES, REPORTING OF TARDINESS AND/OR ABSENCE FROM REQUIRED SERVICES OR ACTIVITIES, AS WELL AS OTHER PROGRAM VIOLATIONS.

FINDINGS:

SWACCC do not use nor conduct electronic monitoring.

**Standard #4-ACRS-2A-14**

ACCESS TO COMPUTER EQUIPMENT IS LIMITED TO AUTHORIZED PERSONNEL WITH SECURITY CODES. ADEQUATE POWER AND COMMUNICATION BACKUP SYSTEMS PROVIDE CONTINUOUS, UNINTERRUPTED OPERATIONS.

FINDINGS:

SWACCC do not use nor conduct electronic monitoring.

**Standard #4-ACRS-2A-15**

ANY INTERRUPTION IN SERVICE IS DOCUMENTED AND REPORTED TO THE AUTHORITY HAVING JURISDICTION.

FINDINGS:

SWACCC do not use nor conduct electronic monitoring.

**Standard #4-ACRS-2A-16**

A DETAILED WRITTEN OFFENDER SCHEDULE IS DEVELOPED AND SIGNED BY A STAFF MEMBER AND THE OFFENDER.

FINDINGS:

SWACCC do not use nor conduct electronic monitoring.

**Standard #4-ACRS-2A-17**

PROVISIONS ARE MADE FOR THOSE WHO ARE UNABLE TO PAY PROGRAM COSTS.

FINDINGS:

SWACCC do not use nor conduct electronic monitoring.

**Standard #4-ACRS-4C-13**

IF MEDICATIONS ARE DISTRIBUTED BY FACILITY STAFF, RECORDS ARE MAINTAINED AND AUDITED MONTHLY, AND INCLUDE THE DATE, TIME AND NAME OF THE RESIDENT RECEIVING THE MEDICATION, AND THE NAME OF THE STAFF DISTRIBUTING IT.

FINDINGS:

SWACCC staff do not distribute medication. Contracted medical staff Wellpath are responsible for the distribution of medication.

**Standard #4-ACRS-4C-14**

IF FEMALE OFFENDERS ARE HOUSED, ACCESS TO REGNANCY MANAGEMENT SERVICES IS MADE AVAILABLE.

FINDINGS:

SWACCC do not house female offenders.

**Standard #4-ACRS-4C-14-1**

WHERE NURSING INFANTS ARE ALLOWED TO REMAIN WITH THEIR MOTHERS, PROVISIONS ARE MADE FOR A NURSERY, STAFFED BY QUALIFIED PERSONS, WHERE THE INFANTS ARE PLACED WHEN THEY ARE NOT IN THE CARE OF THEIR MOTHERS.

FINDINGS:

SWACCC is an all-male facility.

**Standard #4-ACRS-5A-26**

THE FACILITY'S LOCATION FACILITATES ACCESS TO AND THE USE OF COMMUNITY-BASED SERVICES, RESOURCES, AND PUBLIC TRANSPORTATION. NEW CONSTRUCTION ONLY

FINDINGS:

SWACCC is not a newly constructed facility.

**Standard #4-ACRS-7A-02**

A SOLE PROPRIETOR OPERATING A FACILITY IS ABLE TO DOCUMENT THAT NECESSARY LEGAL MEASURES HAVE BEEN TAKEN TO PROVIDE CONTINUITY OF SERVICE IN THE EVENT OF BANKRUPTCY, INCAPACITATION, RETIREMENT, OR DEATH

FINDINGS:

SWACCC is not a sole proprietorship.

**Standard #4-ACRS-7A-03**

THE AGENCY SATISFIES PERIODIC FILING REQUIREMENTS NECESSARY TO MAINTAIN ITS LEGAL AUTHORITY TO CONTINUE OPERATIONS.(PRIVATE AGENCIES ONLY).

FINDINGS:

SWACCC is not a private agency.



**Standard #4-ACRS-7A-04**

AT A MINIMUM, THE BYLAWS FOR THE GOVERNING AUTHORITY OF THE AGENCY INCLUDE:

- MEMBERSHIP TYPES, QUALIFICATIONS, COMMUNITY REPRESENTATION, RIGHTS, DUTIES
- SIZE OF GOVERNING BODY
- METHOD OF SELECTION
- TERMS OF OFFICE
- DUTIES AND RESPONSIBILITIES OF OFFICERS
- TIMES AUTHORITY WILL MEET
- COMMITTEES
- PARLIAMENTARY PROCEDURES
- RECORDING OF MINUTES
- METHOD OF AMENDING THE BYLAWS
- CONFLICT OF INTEREST PROVISIONS
- QUORUM

FINDINGS:

SWACCC is not a private agency.

**Significant Incident Summary**

This report is required for all **residential** accreditation programs.

This summary is required to be provided to the Chair of your visiting team upon their arrival for an accreditation audit and included in the facility's Annual Report. The information contained on this form will also be summarized in the narrative portion of the visiting committee report and will be incorporated into the final report. Please type the data. If you have questions on how to complete the form, please contact your Accreditation Specialist.

This report is for Adult Correctional Institutions, Adult Local Detention Facilities, Core Jail Facilities, Boot Camps, Therapeutic Communities, Juvenile Correctional Facilities, Juvenile Detention Facilities, Adult Community Residential Services, and Small Juvenile Detention Facilities.

Facility Name: Southwest Arkansas Community Corrections

Reporting Period: May 2018-April 2019

Incident Type	Months	May-2018	June-2018	Jul-2018	Aug-2018	Sep-2018	Oct-2018	Nov-2018	Dec-2018	Jan-2019	Feb-2019	Mar-2019	Apr-2019	Total for Reporting Period
	→													
Escapes 18-0463-SW 05/16/18 18-1063-SW 11/05/18		1	0	0	0	0	0	1	0	0	0	0	0	2
Disturbances*		0	0	0	0	0	0	0	0	0	0	0	0	0
Sexual Violence		0	0	0	0	0	0	0	0	0	0	0	0	0
Homicide*	Offender Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Staff Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Other Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
Assaults	Offender/Offender	0	0	0	0	0	0	0	0	0	0	0	0	0
	Offender/Staff	0	0	0	0	0	0	0	0	0	0	0	0	0
Suicide		0	0	0	0	0	0	0	0	0	0	0	0	0
Non-Compliance with a Mandatory Standard*		0	0	0	0	0	0	0	0	0	0	0	0	0
Fire*		0	0	0	0	0	0	0	0	0	0	0	0	0
Natural Disaster*		0	0	0	0	0	0	0	0	0	0	0	0	0
Unnatural Death		0	0	0	0	0	0	0	0	0	0	0	0	0
Other*		0	0	0	0	0	0	0	0	0	0	0	0	0

\*May require reporting to ACA using the Critical Incident Report as soon as possible within the context of the incident itself.

## Outcome Measure Worksheet

May 2018 thru April 2019

Standard	Outcome Measure	Numerator/Denominator	Value	Calculated O.M
<b>1A</b>	(1)	Number of worker compensation claims filed for injuries that resulted from the physical environment in the past 12 months.	3	
	divided by	Average number of Full-Time Equivalent staff positions during the past 12 months.	121	0.025
	(2)	Number of illnesses requiring medical attention as a result of the physical environment of the facility in the past 12 months.	0	
	divided by	Average Daily Offender Population for the past 12 months.	457	0.000
	(3)	Number of physical injuries or emotional trauma requiring treatment as a result of the physical environment of the facility in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(4)	Number of sanitation or health code violations identified by external agencies in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
<b>1B</b>	(1)	Number of accidents resulting in property damage in the past 12 months.	2	19-0087-SW 01-23-19 \$2,500.00 19-0232-SW 03-11-19 \$350.00
	divided by	total number of miles driven in the past 12 months unless otherwise noted.	64,367	0.000
	(2)	Number of accidents resulting in injuries requiring medical treatment for any party in the past 12 months.	0	
	divided by	Total number of miles driven in the past 12 months unless otherwise noted.	64,367	0.000
	(3)	Amount (\$) of damage from vehicle accidents in the past 12 months.	\$ 2,850.00	19-0087-SW 01-23-19 \$2,500.00 19-0232-SW 03-11-19 \$350.00
divided by	Total number of miles driven in the past 12 months unless otherwise noted.	64,367	0.044	

<b>1C</b>	(1)	Number of emergencies, caused by forces external to the facility, that result in property damage in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(2)	Number of injuries, caused by forces external to the facility, requiring medical attention that results from emergencies in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(3)	Number of times that normal facility operations were suspended due to emergencies caused by forces external to the facility in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(4)	Number of hours that facility operations were suspended due to emergencies caused by forces external to the facility in the past 12 months.	0	
	divided by	Number of emergencies caused by forces external to the facility.	0	0.000
	(5)	Number of emergencies that were not caused by forces external to the facility that resulted in property damage in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(6)	Number of injuries requiring medical attention that result from emergencies that were not caused by forces external to the facility in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(7)	Number of times that normal facility operations were suspended due to emergencies that were not caused by forces external to the facility in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(8)	Number of hours that facility operations were suspended due to emergencies that were not caused by forces external to the facility in the past 12 months.	0	
	divided by	Number of emergencies.	0	0.000

	(9)	Number of injuries requiring medical treatment resulting from fires in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(10)	Number of fires that resulted in property damage in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(11)	Amount (\$) of property damage from fire in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(12)	Number of code violations cited in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(13)	Number of incidents involving toxic or caustic materials in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(14)	Number of incidents of inventory discrepancies during the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
<b>2A</b>	(1)	Number of incidents in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(2)	Number of physical injuries or emotional trauma requiring treatment as a result of the incidents in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(3)	Number of unauthorized offender absences from the facility in the past 12 months.	3	18-0463-SW 5-16-18 (1 resident) 18-1063-SW 11-5-18 (2 residents)
	divided by	Average Daily Offender Population for the Past 12 months.	457	0.007
	(4)	Number of times facility did not report offender absence to the responsible jurisdiction within the established time.	0	

	divided by	Number of unauthorized offender absences.	3	0.000
	(5)	Number of instances of unauthorized access to the facility in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
<b>2B</b>	(1)	Number of instances in which force was used in the past 12 months.	18	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.039
	(2)	Number of times that staff use of force was found to have been inappropriate in the past 12 months.	0	
	divided by	number of instances in which force was used.	18	0.000
	(3)	Number of offender grievances filed alleging inappropriate use of force in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(4)	Number of grievances alleging inappropriate use of force decided in favor of offender in the past 12 months.	0	
	divided by	number of grievances alleging inappropriate use of force filed.	0	0.000
	(5)	Number of injuries requiring medical treatment resulting from staff use of force in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
<b>2C</b>	(1)	Number of incidents involving contraband in the past 12 months.	65	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.142
	(2)	Number of weapons found in the facility in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.002
	(3)	Number of controlled substances found in the facility in the past 12 months.	2	18-0648-SW (Jul) 18-0942-SW (Sep)
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.004
<b>2D</b>	(1)	Number of incidents involving keys in the past 12 months.	0	

	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(2)	Number of incidents involving tools in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
<b>3A</b>	(1)	Number of rule violations in the past 12 Months.	497	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	1.088
	(2)	Number of offenders terminated from the facility due to rule violations in the past 12 months.	1	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.002
<b>4A</b>	(1)	Number of documented offender illnesses attributed food service operations in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(2)	Number of offender grievances about food service decided in favor of the offender the past 12 months.	0	
	divided by	Number of offender grievances about food service in the past 12 months.	7	0.000
	(3)	Number of violations cited by independent authorities for food service sanitation in the past 12 months.	0	
<b>4B</b>	(1)	Offender grievances regarding offender access to personal hygiene decided in favor of the offender in the past 12 months.	0	
	divided by	Number of offender grievances about access to personal hygiene in the past 12 months.	0	0.000
<b>4C</b>	(1)	Number of suicide attempts in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(2)	Number of offender suicides in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(3)	Number of offender grievances regarding access to health care in the past 12 months.	5	

	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.011
	(4)	Number of offender health care access complaints that are found to have merit in the past 12 months.	0	
	divided by	Number of offender grievances regarding access to health care in the past 12 months.	5	0.000
	(5)	Number of court suits filed against the facility challenging access to health care in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(6)	Number of health care access court cases decided against the facility in the past 12 months.	0	
	divided by	Number of court suits filed against the facility challenging access to health care in the past 12 months.	0	0.000
<b>5A</b>	(1)	Number of offenders who are employed upon release in the past 12 months.	336	
	divided by	Number of offenders released in the past 12 months.	762	0.441
	(2)	Number of offenders who move into permanent housing upon release in the past 12 months.	633	
	divided by	Number of offenders released in the 12 months.	762	0.831
	(3)	Number of offender substance abuse tests for which the results were positive in the past 12 months.	1	19-0248-SW 3-24-19
	divided by	Number of tests administered in the past 12 months.	1,589	0.001
	(4)	Total number of offenders who successfully completed the program in the past 12 months.	558	
	divided by	Number of offenders who left the program in the past 12 months.	26	21.462
	(5)	Number of offenders who showed improvement as measured by the objective assessment instrument prior to release in the past 12 months.	456	
	divided by	Number of offenders released in the past 12 months.	762	0.598
	(6)	Number of offenders who were arrested while in residence in the past 12 months.	0	



	divided by	Daily Offender Population for the Past 12 Months.	457	0.000
<b>6A</b>	(1)	Total number of offender grievances in the past 12 months, regarding: (a) access to court; (b) mail or correspondence; (c) sexual harassment; (d) discipline; (e) discrimination; (f) protection from harm.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(2)	Number of offender grievance (see a through e above) decided in favor of offenders in the past 12 months.	0	
	divided by	Total number of grievances filed in the past 12 months.	30	0.000
	(3)	Total number of offender court suits alleging violation of offender rights filed against the facility in the past 12 months.	3	All 3 lawsuits were dismissed
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.007
	(4)	Number of offender court suits alleging violation of offender rights decided in favor of offenders in the past 12 months.	0	
	divided by	Total number of offender suits filed in the past 12 months.	3	0.000
<b>6B</b>	(1)	Number of offender grievances regarding discrimination in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(2)	Number of offender grievances regarding discrimination resolved in favor of offenders in the past 12 months.	0	
	divided by	Total number of offender grievances filed regarding discrimination in the past 12 months.	0	0.000
	(3)	Number of grievances resolved in favor of offenders in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(4)	Number of grievances resolved in favor of offenders in the past 12 months.	0	
	divided by	Total number of grievances filed in the past 12 months.	30	0.000
<b>6C</b>	(1)	Number of disciplinary incidents resolved informally in the past 12 months.	0	

	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(2)	Number of formal offender disciplinary decisions that were are appealed in the past 12 months.	0	
	divided by	Total number of disciplinary decisions made in the past 12 months.	468	0.000
	(3)	Number of appealed disciplinary decisions decided in favor of the offender in the past 12 months.	0	
	divided by	Total number of disciplinary decisions made in the past 12 months.	468	0.000
	(4)	Number grievances filed by offenders challenging disciplinary procedures in the past 12 months.	1	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.002
	(5)	Number of disciplinary-related grievances resolved in favor of the offender in the past 12 months.	0	
	divided by	Total number of disciplinary-related grievances filed in the past 12 months.	1	0.000
	(6)	Number of court suits filed against the facility regarding discipline in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(7)	Number of court cases regarding discipline decided against the facility in the past 12 months.	0	
	divided by	Total number of court decisions regarding discipline decided in the past 12 months.	0	0.000
	(8)	Number of rule violations in the past 12 months.	468	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	1.024
	(9)	Number of offenders terminated from the facility due to rule violations in the past 12 months.	1	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.002
<b>6D</b>	(1)	Number of offenders released in the past 12 months who made regular payments toward their restitution obligations.	0	

	divided by	Number of offenders who had restitution obligations in the past 12 months.	268	0.000
	(2)	Number of offenders who satisfy their court cost/fines obligations in the past 12 months.	0	
	divided by	Number of offenders who had court cost/fine obligations in the past 12 months.	579	0.000
	(3)	Total amount of restitution paid by offenders in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(4)	Total number of hours of community service donated by offenders in the past 12 months.	32,906	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	72.004
	(5)	Total number of offenders who participated in restitution in the past 12 months	0	
	divided by	Total number of offenders housed in the past 12 months	1670	0.000
	(6)	Total number of offenders who participated in community service work in the past 12 months.	856	
	divided by	Total number of offenders housed in the past 12 months.	1670	00.513
	(7)	Total number of offenders who participated in victim awareness programs in the past 12 months.	0	
	divided by	Total number of offenders housed in the past 12 months.	1670	0.000
	(8)	Total amount of restitution paid by offenders in the past 12 months.	0	
	divided by	Total number of offenders housed in the past 12 months.	1670	0.000
	(9)	Total number of hours delivered by offenders who participated in community service work in the past 12 months.	32,906	
	divided by	Total number of offenders housed in the past 12 months.	1670	19.704
7A		None		
7B	(1)	Total number of years of staff members' education as of the end of the last calendar year.	1472	
	divided by	Number of staff at the end of the last calendar year.	110	13.382

	(2)	Number of staff who left employment for any reason in the past 12 months.	42	
	divided by	Number of full-time equivalent staff positions in the past 12 months.	121	0.347
	(3)	Total number of credit hours in course relevant to their facility responsibilities earned by staff participating in higher education in the past 12 months.	0	
	divided by	Number of full-time equivalent staff positions in the past 12 months.	121	0.000
	(4)	Number of professional development events attended by staff in the past 12 months.	57	
	divided by	Number of full-time equivalent staff positions in the past 12 months.	121	0.471
<b>7C</b>	(1)	Number of incidents in which staff were found to have acted in violation of facility policy in the past 12 months.	4	
	divided by	Number of full-time equivalent staff positions in the past 12 months.	121	0.033
	(2)	Number of staff terminated for conduct violations in the past 12 months.	4	
	divided by	Number of full-time equivalent staff positions in the past 12 months.	121	0.033
	(3)	Number of offender grievances attributed to improper staff conduct which were upheld in the past 12 months.	0	
	divided by	Number of offenders grievances alleging improper staff conduct filed in the past 12 months.	11	0.000
	(4)	Number of offender grievances attributed to improper staff conduct which were upheld in the past 12 months.	0	
	divided by	Average Daily Population for the past 12 months.	457	0.000
	(5)	Where staff are tested, the number of staff substance abuse tests failed in the past 12 months.	1	
	divided by	Number of staff substance abuse tests administered in the past 12 months.	71	0.014
<b>7D</b>	(1)	Net amount of budget shortfalls or surplus at the end of the last fiscal year (budget less expenditures.)	0	
	divided by	Budget for the past 12 months.	\$126,198,213	0.000

	(2)	Number of material audit findings by an independent financial auditor at the conclusion of the last audit.	0	
	(3)	Number of grievances filed by offenders regarding their records or property in the past 12 months.	2	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.004
	(4)	Number of offender grievances (records/property) decided in favor of offenders in the past 12 months.	0	
	divided by	Total number of offender grievances (records/property) in the past 12 months.	2	0.000
	(5)	Number of objectives achieved in the past 12 months.	9	
	divided by	Number of objectives for the past 12 months.	9	1.000
	(6)	Number of program changes made in the past 12 months.	2	
	divided by	Number of program changes recommended in the past 12 months.	2	1.000
<b>7E</b>	(1)	Number of grievances filed by staff in the past 12 months.	0	
	divided by	Number of full-time equivalent staff positions in the past 12 months.	121	0.000
	(2)	Number of staff grievances decided in favor of staff in the past 12 months.	0	
	divided by	Total number of staff grievances in the past 12 months.	0	0.000
	(3)	Total number of years of staff members' experience in the field as of the end of the last calendar year.	1023	
	divided by	Number of staffs at the end of the last calendar year. (e.g. Average number of years' experience)	110	9.300
	(4)	Number of staff termination or demotion hearings in which the facility decision was upheld in the past 12 months.	0	
	divided by	Number of staff termination or demotion hearings requested in the past 12 months.	0	0.000
<b>7F</b>	(1)	Total number of hours of volunteer service delivered by members of the community in the past 12 months.	7,181	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	15.713

	(2)	Total number of individual community members who provided voluntary service in the past 12 months.	181	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.396
	(3)	Total number of complaints filed by media regarding access to information in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(4)	Total number of positive statements made by media regarding the facility in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(5)	Total number of complaints from the community in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	457	0.000
	(6)	Total number of hours of community service work delivered by offenders in the past 12 months.	32,906	
	divided by	Daily Offender Population for the Past 12 Months.	457	72,004