

COMMISSION ON ACCREDITATION FOR CORRECTIONS
STANDARDS COMPLIANCE REACCREDITATION AUDIT

Arkansas Department of Correction
Tucker Unit (ARDOC)
Tucker, Arkansas

October 11-13, 2016

VISITING COMMITTEE MEMBERS

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A. Introduction

The audit of the Tucker Unit of the Arkansas Department of Correction (ADC) was conducted on October 11-13, 2016 by the following team: Doug Sproat, Chairperson; Harvey Fields Thomas, Member; and Bonnie O'Brien, Member. The audit was conducted using the manual Standards for Adult Correctional Institutions 4th Edition and the 2014 Standards Supplement.

B. Facility Demographics

Rated Capacity: 1,025

Actual Population: 1,017

Average Daily Population for the last 12 months: 1,009

Average Length of Stay: 3 years, 7 months, 24 days

Security/Custody Level: Maximum, Medium, Minimum

Age Range of Offenders: 20-71 years of age

Gender: Male

Full-Time Staff: 166

33 Administrative/ Support, 126 Security, 7 Program

C. Facility Description

The Tucker Unit is an extremely secure facility that houses inmates with custody levels of maximum, medium and minimum. The facility's rated capacity is 1,012 inmates.

The facility is located in Tucker, Arkansas which is approximately 40 miles south of Little Rock, Arkansas. The compound sits on extremely well-manicured acres within two 10 foot perimeter secure fences. The interior and the exterior fences have a strand of razor wire at the top. A microwave detection system further enhances the perimeter fences.

There are 16 buildings inside the secure fence and these buildings house the administrative offices, food service, medical/mental health, a gymnasium, an academic/vocational complex, a chapel, commissary, warehouse, administrative segregation, inmate residential living units, prison industries, a laundry and visitation. All these buildings have fire extinguishers strategically located throughout the buildings.

There are 12 buildings located outside the secure fence. These buildings house the waste water treatment plant, maintenance, the dog kennels, the horse barn, field security, and a very large framing operation.

The residential living units are dormitory style and double occupancy cells. The only single occupancy cells are in administration segregation. The double and single occupancy cells are wet and the dormitory units meet the requirements for toilets, wash basins and showers. The residential living units are all air-conditioned.

Based on the Unit's Mission Statement in its welcome book," The mission of the Arkansas Department of Correction and the Tucker Unit is:

- To protect society by providing incarceration as a deterrent to the commission of crime
- To ensure the safety and security on inmates, employees and visitors at the Tucker Unit
- To provide programs including drug treatment, self-improvement training, academic and vocational education to rehabilitate inmates

D. Pre-Audit Meeting

The team met on April 10, 2016, in Pine Bluff, Arkansas to discuss the information provided by the Association staff and the officials from the Arkansas Department of Correction and the Tucker Unit.

The chairperson divided standards into the following groups:

Standards #4001 – # 4167 to Doug Sproat, Chairperson

Standards #4168 - #4342 to Harvey Fields, Member

Standards #4343 - #4530 to Bonnie O'Brien, Member

E. The Audit Process

1. Transportation

The team was escorted to the facility by Sandra Kennedy, State Accreditation Manager, Arkansas Department of Correction..

2. Entrance Interview

The audit team proceeded to the administrative conference room, escorted by Warden David White where a briefing was held with the Warden and his administrative staff. The Warden was asked whether staff and inmates were aware of the audit and whether signs regarding the audit were posted. He responded that everyone had been made aware of the audit, and during the course of the audit, the team observed many prominently-displayed signs throughout the facility.

Warden White was asked whether any staff or residents had requested, either orally or in writing, to speak to the audit team. He advised the team that no one had requested to speak to the auditors

The Warden was asked whether there was anything the audit team needed to be aware of that had occurred or was occurring that could jeopardize the audit. He informed us that nothing of that nature had occurred or was occurring.

The Warden was also asked if there were any consent decrees, class action lawsuits, adverse judgments against the facility or monitoring reports. He stated that there were none in that regard.

The audit team was escorted to the chapel where the formal entry meeting was held. The team expressed the appreciation of the Association for the opportunity to be involved with the Tucker Unit in their reaccreditation process.

The following persons were in attendance:

James MacAlla – Armory/Key control
Sharon Carter – Unit ACA Specialist
Andi Moore – Visitation
Steve Ricketts – Major
Armanda Richardson – Human Resource Supervisor
Vicki Lokey – Admn. Ast. III (Wardens secretary)
David White – Warden
Lover Polk – Records Supervisor
Adam Vick – Utility
Alexandra Musgrove – Tool Control
Teresa Dockett – Records
Erika Ross – Records
Mary Mean – Classification
Hosea Washington – Education
David Taylor – ACI
Ramona Huff – Medical
Kim Hofman – Medical
Tim Faloon – Medical
Debra Barnes – Human Resource Asst.
Deidra Harris – Mail Room Supervisor
Laniki Cooksey – Mail Room Clerk
Derek E. Wilson – Lt. Dog Kennel
Jarrod Self – Major (Field)
Ashley Austin – Fire Safety
Paul Bolin – Lt. (Field)
Woodrow Hepler – Recreation
Jim Apel – CO II
David Knott – Lt.
Verna Perry - Vo-Tech
April Ingram – Hobby Craft
Hazel Sanders – Mental Health
Billy Ottinger – Regional Maintenance

Jennifer Norris – Capt. Kitchen
Elizabeth Franklin – Program Leader
Sandra Johnson – Inmate Property
Wanda Freeman – T. C.
Shereeka Vickers – T.C.
Kevin Cleveland – T.C.
Brian Cockrell – Sgt.
Ronald Chism – T.C.
Paula Savage – Program Leader
Michelle Gray – Deputy Warden

It was explained that the goal of the visiting team was to be as helpful and non-intrusive as possible during the conduct of the audit. It was emphasized that the goals of accreditation promoted the efficiency and effectiveness of correctional systems throughout the United States. The audit schedule was also discussed at this time.

3. Facility Tour

The team toured the facility from 8:45 a.m. to 12:30 p.m. The following persons accompanied the team on the tour:

David White – Warden
Sandra Kennedy – Agency Accreditation Manager
Linda Gibson – Agency Fire Safety Officer
Sharon Carter – Unit Accreditation Manager
Pearlie Johnson – Grievance Officer

4. Conditions of Confinement/Quality of Life

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

Security:

The Tucker Unit houses medium and minimum security offenders within a secure perimeter. A number of minimum security offenders have duties outside that perimeter for job assignments in landscaping, kennel and stable tasks, industries, and an extensive farm operation. An exit and entrance procedure for these offenders was observed and appears to be appropriate. The design and operation of the secure areas of the facility are appropriate for the population. Prior to entering the property, staff and visitors must pass through a gate house where an initial identification check is made and prohibited items may be confiscated. Once past the gate house one must pass through two secure gates under the direct observation of a tower officer.

There is a single vehicle sally port that accommodates both product deliveries and the arrival and departure of inmates. Vehicles and occupants are searched prior to being directed to the appropriate area. There are armed towers with the ability to observe all critical areas of the facility. There is a mobile, armed perimeter security officer on duty during periods of darkness or other situations of limited visibility. Perimeter lighting appears adequate.

Within the security area movement is controlled and well observed through the adequate placement of staff and an extensive video system. Monitors for the video system are available in the Control Centers for constant observation and may be viewed in authorized administrative and supervisory offices as well as the surveillance room. This area is used for the observation of stored video images if there is the need for investigation. Metal detectors are evident in inmate work areas. OC canisters and radios are available for a number of security staff.

All staff is required to achieve and maintain annual qualifications with assigned firearms. These were checked and were in place. Response team members have additional training. The armory is located outside the security area and was impressive in both its cleanliness and organization. The maintenance of equipment was well documented. Weapons for the towers and perimeter are exchanged and verified among the Officers assigned. Weapons and ammunition for transportation are stored at the Tower located at the vehicle sally port and were verified. Shakedowns and pat searches were conducted regularly during offender movement. They were done professionally. Staffing was appropriate. Most Correction Officers are assigned to shift work. There are three, eight hour shifts. Forced overtime is not often required as staffing seems adequate. Some Officers are assigned to special tasks such as security threat groups, community work crews, etc.

Offender interviews indicated they felt safe and they generally praised the professional behavior of staff. Offenders and documentation both verified regular tours by senior Officers and administrative staff. An official count was observed and met all standards. Random informal counts are conducted in work, program and housing areas.

Tool control was determined to be adequate. While the procedures seemed to keep items under control, improvement seems called for in maintaining accountability. All tools were accounted for; procedures were compliant although the team did make recommendations that might enhance security. There were three issues that arose that were discussed with facility administrators and supervisors. While the audit team did not feel they reached a level of non-compliance, it was felt that a review and some modification are in order.

1. Kitchen tool control: Doing a routine check of the slotted spoons in the kitchen it was determined that a number were issued to a single offender on a food line. An examination of the food line showed that while all spoons were in the area, the offender was not. This does not demonstrate strong accountability and allows for possible abuse.
2. OC canisters are issued to staff completing the qualification and refresher courses. Once issued, these canisters are under the control of the officers. They remain in the officer's possession, entering and leaving the facility in staff possession. There is no weighing of the canisters at any time. This process appears to be ripe for misuse/abuse. If OC is used and not reported, the facility would not be able to determine when or why that use took place. The audit team believes this puts the facility at a serious disadvantage should a complaint be lodged and an investigation initiated.
3. An initial inventory check of one type of ammunition in the armory revealed an inaccurate count. It was quickly addressed and the error discovered and rectified. The response to the discovery was rapid and professional. The team is certain that this was an anomaly and did not warrant anything beyond notification of the administration.

There seemed to be excellent communications between all levels of staffing. During the tour it was evident that the presence of the Warden and all senior staff in all areas was commonplace and the interaction was professional and mutually respectful. This serves as a key model for all staff and the offender population. There was certainly no feeling of hostility or tension observed by the audit team.

Environmental Conditions:

The grounds and flower beds inside the secure perimeter fence were extremely well manicured, as were the grounds and flower beds outside the secure perimeter fence. The inmate population provides all the labor for the up keep of the grounds and are under staff supervision at all times.

The facility's maintenance department is responsible for monitoring environmental conditions at the facility. The maintenance department is also responsible for all preventive maintenance on all equipment and machinery on the compound. When preventive maintenance is beyond that which the facility's maintenance staff can perform the facility uses outside vendors.

Temperature ranges in the housing areas were comfortable and within the required temperature requirements. The housing units are all air-conditioned and have adequate working ventilation systems.

The Tucker Unit has ten emergency generators with a total combined KW of 930. The batteries and fluid levels of all the emergency generators are checked weekly, and monthly preventative maintenance is done by in-house staff. All emergency generators are load tested monthly by in-house maintenance staff.

The emergency generators are capable of carrying 88 per cent of the electrical load to avoid any interruption in the facility's daily operation. The facility's boiler work is by contract through Woodberry Beach Inc. of Little Rock and the system is inspected by contract through Hartford Stevens of Memphis, Tennessee.

The maintenance department is staffed by a director of maintenance, an assistant director of maintenance, and two maintenance technicians.

The maintenance department's preventive maintenance program for all machinery and equipment was in order and documented. Tools, chemicals, caustics, and fuels were inventoried, logged, and controlled for accountability purposes. The facility's maintenance department is very organized, efficient, and well run.

Sanitation:

The audit team was very impressed with the sanitation level throughout the entire facility. The facility has an outstanding detailed housekeeping plan in place and uses it as a standard for maintaining its sanitation level. It was obvious to the auditors that the inmates took pride in keeping the facility clean. The required sanitation inspections were documented and met standard requirements.

The inmates are responsible for all of the cleaning of the facility and it was obvious that the cleaning was continuous on all shifts. The cleanliness of the facility is the total result of continuous cleaning 24/7 by the inmate population. All the chemicals and cleaning supplies used for cleaning of the facility were controlled, well documented and under lock and key.

The facility contracts with Waste Management of Pine Bluff for solid waste removal. The facility also contracts with Delta Pest Control of Dumas for vermin and insect control. The Tucker Unit has its own deep well and waste water treatment system.

It was obvious to the auditors that the administration at the Tucker Unit sets a very high priority on sanitation. This was evident throughout the audit process as the auditors toured the facility and made revisits to different areas and departments.

Fire Safety:

Staff was well aware of the emergency fire evacuation plans and procedures.

Fire extinguishers were located in specific locations throughout the facility and all fire extinguishers were serviced and documented by contract through Fire Extinguishers Sales and Service of Pine Bluff.

Fire safety inspections and drills are conducted by standard requirements and documented. Fire safety egress routes were clearly posted and all exit signs were illuminated.

There are 13 fire hydrants located inside the secure perimeter fence and two located outside the secure perimeter fence. They are checked, flushed and pressure tested by maintenance. The Tucker and England Volunteer Fire Departments located minutes away from the compound is the first responder for fire related issues at the facility.

The Arkansas State Fire Marshal's office performs an annual fire safety inspection at the facility and an up-dated copy was on hand. The facility's fire safety system is inspected and certified annually by contract through Simplex Grinnell of Little Rock.

The auditors were extremely impressed with the facility's emergency plan and procedures with all the checks and balances in place to provide fire safety protection for staff and inmates alike. This has resulted in a safe work environment for staff and a safe environment for inmates, which adds positively to their quality of life.

Food Service:

The food service department is staffed by a food production manager, one food preparation manager, and three food preparation supervisors. There are also approximately 45 inmates classified to work in food service.

Food service provides three meals per day and works from a one week menu cycle approved by a registered dietician. Changes to the menu only occur when fresh produce is available. The calorie count for each day is approximately 3,000 calories. Food service served approximately 63,600 meals in the last month at a cost of \$3.27 per day for three meals. Inmates provide the majority of the labor and the food preparation in food service.

The audit team was very impressed with the efficiency and cleanliness of the food service department. The orderliness of the inmates while working under the supervision of the food service staff was also worth noting. The inmates obviously took pride in their work.

Temperatures for the freezers, chillers, dishwasher and dry storage met standard requirements. The preventive maintenance on the vent hood fire suppression system was in order.

The cleaning and the inspection of the vent hood fire suppression system is by contract through Simplex Grinnell of Little Rock. Preventive maintenance on the dishwasher is by contract through Hobart Inc. of Little Rock and the preventive maintenance on the ice machine was in order and completed by contract through Neely Macalister Inc. of Pine Bluff.

The sharps inventory was in order and under lock and key. The chemicals used for cleaning and for the dishwasher were controlled, inventoried and in order.

Religious diets are offered to meet religious dietary requirements. Special medical diets are also prepared when requested. Numerous inmates were interviewed and none complained about the quality or quantity of food provided at the facility. The audit team ate the noon meal on the first day of the audit and found it to be very tasty and filling.

Medical Care:

Medical services at the Tucker Unit are currently provided by contract vendor, Correct Care Solutions, with nursing coverage 24 hours a day. There is a doctor on-site part time and on call the remainder, a health services director, a registered nurse who is the director of nursing (DON), nine licensed practical nurses (LPN), two certified nursing assistants and one certified medical assistant on staff. There is no infirmary or on-site medical housing. There is one 23-hour observation room available for medical use only, or for mental health evaluative purposes. The nearest community hospital is Jefferson Hospital, which is located approximately 25 miles away.

A review of sharps, narcotics, medications, pill passes and all associated inventories and logs revealed a properly managed, well-documented process with no discrepancies noted. One of the LPNs is identified as the lab and infectious disease nurse. All inmates and staff are tested annually for TB. There are no active cases of TB at Tucker Unit, nor are there any negative pressure rooms.

Pills are passed four times daily through a dispensary window. Inmates who are in restrictive housing are seen daily by medical with medication dispensed at those visits.

Sick call requests are triaged and routinely seen within 24-48 hours. Referrals can be made directly to the health care provider. On-site specialty care is limited to Optometry and X-ray, both of which are provided by out-side vendors. X-rays are conducted via mobile equipment.

Steri-cycle provides the biohazard waste services. The biohazard materials are collected in secure containers in treatment rooms, temporarily stored in a secure area within the medical unit, and then transferred to the secure outside location for scheduled collection by Steri-cycle.

While no inmate who requires the use of oxygen is, or would be, housed at Tucker Unit, the medical department does stock a dozen tall tanks of oxygen for emergency use. As these are used, the DON has them replenished.

At this time, medical records are being maintained electronically. There is active paper files kept for each inmate, but there is no assurance that they are up-to-date as it was stated that not all staff print paper copies of the electronic entries as they are made.

Inmates must take the initiative to have their self-carry medications refilled by submitting the request about one week prior to the exhaustion of their active supply. Chronic care medications are automatically refilled for a six-month duration. Inmates are then re-evaluated and medications are re-ordered in accordance with their current condition and need. Expired or no-longer-needed narcotics are sent to the state health department for disposal. Non-narcotics (non-stock items) are returned to the pharmacy.

Due to the central location of the medical unit, there is no first aid kits maintained in the housing areas. Remote areas, such as the bus barn, patrol units, Vo-Tech, field patrol offices, etc., do maintain a properly supplied first aid kit. An emergency response cart is equipped with the facility's AED unit.

The dental unit at Tucker is a one-chair operation with a full-time dentist and assistant and a part-time hygienist. Dental sick call requests are triaged daily. Inmates are eligible for a cleaning one time per year. Dental services include fillings, routine extractions, and prosthesis. A review of the dental instruments, inventories and logs showed an excellent system of storage and control of all items.

Mental health services are provided by a psychiatrist, and social workers/counselors. Crisis evaluations are conducted, as are both group and individual counseling. Services can be generated by inmates submitting a request.

The Health Services Administrator participates on the Classification Committee weekly during which inmate activities and behaviors are discussed and assessed. Work and/or program assignments are determined with medical input.

Recreation:

The recreation is coordinated by a full staff member assisted by eight inmate gym and yard porters. The facility's recreation department provides a wide range of recreational, athletic and leisure time programs. The facility has a large gymnasium which is used on a regularly scheduled basis when weather prohibits outdoor recreation. The recreation schedule includes all security levels of the inmate population.

The recreation department has a very well-organized intramural program. The outdoor recreation areas includes a weight strength area, a volley- ball court, basketball courts, a softball field, horse shoe pits, a soccer field. The gymnasium is used for basketball, volleyball, and handball. Special holiday competitive sporting events are planned every year. Based on the inmate interviews by the auditors the inmate population really look forward these special holiday events.

The facility's leisure time activities include chess, checkers, dominoes and reading. The inmate population gets a minimum of one hour per day in a seven day week of large muscle exercise each day and one hour of leisure time recreation each seven day week. Recreation is available to the inmate population 24/7.

The inmate population gets all the leisure and competitive recreation and exercise that they can handle, a fact which leaves little room for idle time and consequently reduces the pressures leading to assaultive behavior.

Religious Programming:

The facility has a very strong religious program led by a full-time chaplain. The chaplains play a major role in the inmates' adjustment to life within the prison system.

The chaplain also provides religious orientation to the new inmates at intake and coordinates the volunteer program at the facility. The audit team was very impressed with the chaplains' genuine concern for the welfare of the entire inmate population.

The chaplain also has the responsibility of arranging and scheduling worship services for religious groups that provide volunteer services at the facility. The facility has approximately 27 active volunteers. These volunteers provide approximately 400 hours per month of volunteer services and activities for the inmate population. Volunteer services occur seven days a week.

These religious volunteers must pass annual background checks and must complete their initial training before they are allowed to work with the inmates. This orientation training is provided by the facility's training staff.

Offender Work Programs:

The facility's inmates are responsible for all the cleaning of their residential living units. This cleaning is done daily under staff supervision on every shift. The inmate population is responsible for the cleaning of all other areas of the facility.

This certainly speaks volumes as to why the facility is so clean and the grounds and flower beds are so well maintained.

The administration should be commended for instilling in the inmate population the need to take ownership in keeping their units and grounds neat and clean.

At the time of this audit 97 per cent of the inmate population had job assignments. This certainly speaks volumes as to why the grounds and buildings are so neat and clean. These work assignments also reduces idleness which breeds problems for the inmate population.

Academic and Vocational Education:

The academic school is staffed a principle and four academic teachers. Of the five academic staff three have master's degrees and two have bachelor's degrees. The academic instruction centers on GED preparation and ABE (adult basic education).

During the past twelve months 95 inmates attempted the GED test and 36 were successful. This is a passing rate of 37.9, which is not bad at all since there are only 60 inmates in school in the morning and 50 in the afternoon.

The academic school operates on a nine month school term and the academic staff teaches on a nine month contract. The Tucker Unit School has four classes/levels: adult basic education (level 1), intermediate (level 2), pre-GED (level3), and GED (level 4).

The vocational component at the Tucker Unit is under the Riverside Vocational Training Center. There are four areas of instruction they are horticulture, computer aided drafting, welding and building and grounds maintenance. All the academic and vocational teachers are state licensed and certified.

Social Services:

The facility has a very good social service program in place which is based on the unit management concept. To provide for more effective management of inmates and staff a modified unit management concept was implemented.

This system encourages staff/inmate interactions, communication and allows staff to take a more active role in the in the coordination of inmate services, Classification Programs and in security functions.

The unit management system at the Tucker Unit is staffed by two unit managers, four case managers and twelve correctional counselors. The inmate population has unimpeded access to the management staff 24/7.

On June 3, 2013 the lives of fourteen individuals at the Trucker Unit were changed forever. It was on this date that PAWS in prison came to the Unit. .

It wasn't only the men involved who had a life changing experience; it was the animals that came to the Unit as well.

The men and the dogs have a lot in common, most prominent is the fact that both have been locked up in some form working to be better men and dogs somewhere in the near future.

Visitation:

The inmates are allowed visitation with family and/or friends who are on their approved visitation list. The facility allows four visitors per visit.

Visitation is Saturday and Sunday for contact visitation classes 1A, 1B, and 1C, A-L from 12:00 p.m. to 4:00 p.m. Saturday and M-Z, Sunday from 12:00 p.m. to 4:00 p.m. Classes II, III and IV: visit every other weekend. A-L visit every 1st and 3rd Saturday, M-Z 2nd and 4th Sunday from 12:00 p.m. to 4:00 p.m.

Punitive Isolation

Approved by Deputy Warden and then set up by visitation clerk. Non- contact visits are scheduled for two hour sessions on weekdays.

The visitation area has ample room for inmate families to visit comfortably. It is spacious with restroom facilities and vending machines for inmate families' use.

Special visits are allowed with prior approval from the warden. The administration feels that visitation is a vital part of the inmate's adjustment to the facility and encourages families to participate as much as possible

Library Service

The educational and law libraries are located in the academic school. The libraries are open daily for inmate use in the mornings and in the evenings. The inmates are allowed to checkout a least two books a day for leisure reading. The facility's libraries participate in an interlibrary loan program with the local library system.

The inmates have access to hard volumes as well as Westlaw in the law library. The law library insures that the inmate population has unimpeded access to the courts, counsel, and public officials. The facility utilizes trained inmate law clerks to help other inmates with their research in the law library.

Laundry:

The Tucker Unit laundry is staffed by a laundry supervisor and an assistant supervisor and 40 inmate workers. The laundry is open Monday through Saturday from 4:00 a.m. to 4:00 p.m.

Equipment in the laundry consists of five large commercial washers and four large commercial dryers. The laundry also has a pressing and a sewing operation. Inmates assigned these tasks mend and press inmate clothing for special occasions.

There is no shortage of clean clothing, sheets or towels for the inmate population at the facility. There should be no reason an inmate should not have a clean set of clothing every day. The facility also has an ample inventory of inmate clothing, sheets and towels for emergency purposes.

F. Examination of Records

Following the facility tour, the team proceeded to the administrative conference room to review the accreditation files and evaluate compliance levels of the policies and procedures. The facility's accreditation files were extremely auditor friendly and were electronic.

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

1. Litigation

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

2. Significant Incidents/Outcome Measures

SIGNIFICANT INCIDENT SUMMARY

A review of the Significant Incident Summary indicated two natural deaths and one death by suicide in the past 12 months. Although there were many reported assaults, there were no identified sexual assaults. The majority of reported assaults have occurred during the months of May through September, 2016 when the heat of the day is the highest and longest. The number of forced moves activity coincides with the assault number and time period, as do the medical referrals as a result of injuries sustained. The numbers appear to be within an expected range for a facility of this custody and security level with shared housing and common spaces. The majority of substantiated grievances were related to living conditions, with recreational concerns following.

HEALTH CARE OUTCOME MEASURES

The Health Care Outcomes support an active, constructive infectious disease management program. All medical staff license/certifications indicate as current, with TB testing up-to-date. There were a total of 12 inmate grievances regarding health care services, which is minimal in comparison to other facilities of this size with this population. One medication error was identified with appropriate action taken. The quality assistance program identified, and corrected, this one noted problem during the past 12 month period. There were no high-risk events or adverse outcomes noted.

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>
Security	Steven Ricketts, Building Major Jerrod Self, Field Major
Fire Safety	Linda Gibson, Fire Safety Coordinator, ADC
Food Service	Captain Norris, Food Service Manager Captain Smarjesse, Food Service Manager
Medical	Tim Faloon, Health Care Administrator Hazel Sanders, Mental Health
Maintenance	John Gross, Assistant Maintenance Supervisor
Religious Programing	William Pearson, Chaplain
Armory	James Macalla, Armory/Key Control
Administration	David White, Warden Michelle Gray, Deputy Warden Sharon Carter, Accreditation Manager Vickie Lokey, Warden Secretary
Recreation	Woodrow Hepler, Recreation Supervisor

4. Shifts

The Tucker Unit deploys its correctional officers on two 12-hour shifts. The shifts are 6:00 a.m. to 6:00 p.m., 6:00 p.m. to 6:00 a.m.

a. Day Shift 6:00 a.m. – 6:00 p.m.

The team was present at the facility during the day shift from 8:00 a.m. – 6:00 p.m. Shift change was very orderly and extremely organized. The audit team observed shift change and briefing. During the briefing the shift supervisor covered all unusual incidents from the previous shift.

The officers were advised to review post orders and fire safety procedures. The auditors were very impressed with the shift change and briefing. The entire shift was well groomed and very professional.

b. Evening Shift 6:00 p.m. – 6:00 a.m.

The team was present at the facility during the evening shift from 5:15 a.m. to 6:00 a.m. The audit team observed interaction between staff and inmates and there seem to be respect for each other on the part of staff as well as inmates.

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

The team reviewed the status of standards previously found non-compliant for which a waiver was not granted and found the following:

There were no non-mandatory non-compliant standards during the previous audit cycle.

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 or spoke to 54 inmates during the audit process. They were very positive about the staff and all felt staff cared about their welfare. They felt safe and stated staff was always available when they needed them.

The inmates appreciated the available programs that could help them upon their release. The number of inmate work assignments was viewed in a very positive manner by all the inmates the auditors interviewed.

They all understood the grievance process and how to access medical services. They did not fear for their safety and had no complaints about food service or medical services.

2. Staff Interviews

The audit team interviewed or spoke to 50 staff. They were all proud of their facility and understood policy, procedure and post orders. Most felt that they had the support of the administration while performing their daily responsibilities. They were also happy to have a job during these tough times.

It was very obvious to the auditors that the staff understood their role in the facility's overall operation and it was evident that they had bought into the facility's program. This was observed during the initial tour of the facility and during revisits to different departments and areas and during staff interviews.

A practical measure of the staff's approval of the facility's program approach is by the number of years of service of staff members. The audit team was very impressed with the very large number of staff that had double digit years of employment experience with either the Tucker Unit or other Arkansas Department of Correction facilities. This is certainly a plus for the facility and obviously adds to staff cohesiveness.

H. Exit Discussion

The exit interview was held at 12:00 p.m. with Warden White and 42 staff in attendance.

The following persons were also in attendance:

Robert Leggett – ADC Construction/Maintenance
Richard Meeks – ADC Construction/Maintenance
Chris Ashcraft – ADC Construction/Maintenance
M.D. (Dale) Reed – ADC Chief Deputy Director
Dexter Payne – ADC Deputy Director
Tina Hamilton – ACA Specialist Wrightsville Unit
Tammy Robertson – ACA Specialist Pine Bluff Complex
Mary Allen – ACA Specialist Cummins Unit
Wendy Kelly – Director (ADC)
Richard Cooper – Admn. Asst. Industry
Robert Carter – Administrator
Steven Smith – Instructor
Tonya Robins – IPO
Katrina Barrow – Lt. EPC
Linda Gibson – Fire Safety Coordinator
Jim DePriest – Deputy Director
Katherine Stone – Industry Supervisor (Delta Unit)

Takelia McDaniel – ACA Specialist (Max Unit)
Anthony Locario – IT Service
Angelika Smarjesse – Food Prep. Manager (Cummins)
Paul Vanlandingham – Lt. Max Unit

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 their individual findings with the group.

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

COMMISSION ON ACCREDITATION FOR CORRECTIONS

AND THE

AMERICAN CORRECTIONAL ASSOCIATION

COMPLIANCE TALLY

Manual Type	Adult Correctional Institutions, 4 th Edition
Supplement	2014 Standards Supplement
Facility/Program	Tucker Unit, Tucker Arkansas Arkansas Department of Correction
Audit Dates	October 11-13, 2016
Auditor(s)	Doug Sproat, Chairperson; Harvey B. Fields, Member; Bonnie B. O'Brien, Member

	MANDATORY	NON-MANDATORY
Number of Standards in Manual	60	465
Number Not Applicable	5	35
Number Applicable	55	430
Number Non-Compliance	0	0
Number in Compliance	55	430
Percentage (%) of Compliance	100%	100%

- Number of Standards *minus* Number of Not Applicable *equals* Number Applicable
- Number Applicable *minus* Number Non-Compliance *equals* Number Compliance
- Number Compliance *divided by* Number Applicable *equals* Percentage of Compliance

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Correction
Tucker Unit (ARDOC)
Tucker, Arkansas

October 11-13, 2016

Visiting Committee Findings

Mandatory Standards

Not Applicable

Standard #4-4306

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT ADJUDICATED DELINQUENT OFFENDERS AND YOUTHS CHARGED WITH OFFENSES THAT WOULD NOT BE CRIMES IF COMMITTED BY ADULTS DO NOT RESIDE IN THE INSTITUTION.

FINDINGS:

The Tucker Unit houses adult male offenders only.

Standard #4-4353

IF FEMALE OFFENDERS ARE HOUSED, ACCESS TO PREGNANCY MANAGEMENT IS SPECIFIC AS IT RELATES TO THE FOLLOWING:

- PREGNANCY TESTING
- ROUTINE PRENATAL CARE
- HIGH-RISK PRENATAL CARE
- MANAGEMENT OF THE CHEMICALLY ADDICTED PREGNANT INMATE
- POSTPARTUM FOLLOW-UP
- UNLESS MANDATED BY STATE LAW, BIRTH CERTIFICATES/REGISTRY DOES NOT LIST A CORRECTIONAL FACILITY AS THE PLACE OF BIRTH

FINDINGS:

The Tucker Unit houses adult male offenders only.

Standard #4-4362

INTAKE MEDICAL SCREENING FOR OFFENDER TRANSFERS, EXCLUDING INTRA-SYSTEM, COMMENCES UPON THE OFFENDER'S ARRIVAL AT THE FACILITY AND IS PERFORMED BY HEALTH-TRAINED OR QUALIFIED HEALTH CARE PERSONNEL. ALL FINDINGS ARE RECORDED ON A SCREENING FORM APPROVED BY THE HEALTH AUTHORITY. THE SCREENING INCLUDES AT LEAST THE FOLLOWING:

INQUIRY INTO:

- ANY PAST HISTORY OF SERIOUS INFECTIOUS OR COMMUNICABLE ILLNESS, AND ANY TREATMENT OR SYMPTOMS (FOR EXAMPLE, A CHRONIC COUGH, HEMOPTYSIS, LETHARGY, WEAKNESS, WEIGHT LOSS, LOSS OF APPETITE, FEVER, NIGHT SWEATS THAT ARE SUGGESTIVE OF SUCH ILLNESS), AND MEDICATIONS
- CURRENT ILLNESS AND HEALTH PROBLEMS, INCLUDING COMMUNICABLE DISEASES
- DENTAL PROBLEMS
- USE OF ALCOHOL AND OTHER DRUGS, INCLUDING TYPE(S) OF DRUGS USED, MODE OF USE, AMOUNTS USED, FREQUENCY USED, DATE OR TIME OF LAST USE, AND HISTORY OF ANY PROBLEMS THAT MAY HAVE OCCURRED AFTER CEASING USE (FOR EXAMPLE, CONVULSIONS)
- THE POSSIBILITY OF PREGNANCY AND HISTORY OF PROBLEMS (FEMALE ONLY); AND OTHER HEALTH PROBLEMS DESIGNATED BY THE RESPONSIBLE PHYSICIAN

OBSERVATION OF THE FOLLOWING:

- BEHAVIOR, INCLUDING STATE OF CONSCIOUSNESS, MENTAL STATUS, APPEARANCE, CONDUCT, TREMOR, AND SWEATING
- BODY DEFORMITIES, EASE OF MOVEMENT, AND SO FORTH
- CONDITION OF THE SKIN, INCLUDING TRAUMA MARKINGS, BRUISES, LESIONS, JAUNDICE, RASHES, AND INFESTATIONS, RECENT TATTOOS, AND NEEDLE MARKS OR OTHER INDICATIONS OF DRUG ABUSE

MEDICAL DISPOSITION OF THE OFFENDER:

- GENERAL POPULATION
- GENERAL POPULATION WITH PROMPT REFERRAL TO APPROPRIATE HEALTH CARE SERVICE
- REFERRAL TO APPROPRIATE HEALTH CARE SERVICE FOR EMERGENCY TREATMENT

OFFENDERS, WHO ARE UNCONSCIOUS, SEMICONSCIOUS, BLEEDING, OR OTHERWISE OBVIOUSLY IN NEED OF IMMEDIATE MEDICAL ATTENTION, ARE REFERRED. WHEN THEY ARE REFERRED TO AN EMERGENCY DEPARTMENT, THEIR ADMISSION OR RETURN TO THE FACILITY IS PREDICATED ON WRITTEN MEDICAL CLEARANCE. WHEN SCREENING IS CONDUCTED BY TRAINED CUSTODY STAFF, PROCEDURES WILL REQUIRE A SUBSEQUENT REVIEW OF POSITIVE FINDINGS BY THE LICENSED HEALTH CARE STAFF. WRITTEN PROCEDURES AND SCREENING PROTOCOLS ARE ESTABLISHED BY THE RESPONSIBLE PHYSICIAN IN COOPERATION WITH THE FACILITY MANAGER. INMATES CONFINED WITHIN A CORRECTIONAL COMPLEX WITH CONSOLIDATED MEDICAL SERVICES DO NOT REQUIRE HEALTH SCREENING FOR INTRA-SYSTEM TRANSFERS.

FINDINGS:

The Tucker Unit receives only intra-system transfers.

Standard #4-4365

A COMPREHENSIVE HEALTH APPRAISAL FOR EACH OFFENDER, EXCLUDING INTRASYSTEM TRANSFERS, IS COMPLETED AS DEFINED BELOW AFTER ARRIVAL AT THE FACILITY. IF THERE IS DOCUMENTED EVIDENCE OF A HEALTH APPRAISAL WITHIN THE PREVIOUS NINETY DAYS, A NEW HEALTH APPRAISAL IS NOT REQUIRED, EXCEPT AS DETERMINED BY THE DESIGNATED HEALTH AUTHORITY. HEALTH APPRAISAL INCLUDES THE FOLLOWING:

WITHIN FOURTEEN DAYS AFTER ARRIVAL AT THE FACILITY:

- REVIEW OF THE EARLIER RECEIVING SCREEN
- COLLECTION OF ADDITIONAL DATA TO COMPLETE THE MEDICAL, DENTAL, MENTAL HEALTH, AND IMMUNIZATION HISTORIES
- LABORATORY OR DIAGNOSTIC TESTS TO DETECT COMMUNICABLE DISEASE, INCLUDING VENEREAL DISEASE AND TUBERCULOSIS
- RECORD OF HEIGHT, WEIGHT, PULSE, BLOOD PRESSURE, AND TEMPERATURE
- OTHER TESTS AND EXAMINATIONS AS APPROPRIATE

WITHIN FOURTEEN DAYS AFTER ARRIVAL FOR INMATES WITH IDENTIFIED SIGNIFICANT HEALTH CARE PROBLEMS:

- MEDICAL EXAMINATION, INCLUDING REVIEW OF MENTAL AND DENTAL STATUS (FOR THOSE INMATES WITH SIGNIFICANT HEALTH PROBLEMS DISCOVERED ON EARLIER SCREENING SUCH AS CARDIAC PROBLEMS, DIABETES, COMMUNICABLE DISEASES, AND SO FORTH)
- REVIEW OF THE RESULTS OF THE MEDICAL EXAMINATION, TESTS, AND IDENTIFICATION OF PROBLEMS BY A HEALTH CARE PRACTITIONER OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, IF SUCH IS AUTHORIZED IN THE MEDICAL PRACTICE ACT
- INITIATION OF THERAPY, WHEN APPROPRIATE
- DEVELOPMENT AND IMPLEMENTATION OF TREATMENT PLAN, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION

WITHIN 30 DAYS AFTER ARRIVAL FOR INMATES WITHOUT SIGNIFICANT HEALTH CARE PROBLEMS:

- MEDICAL EXAMINATION, INCLUDING REVIEW OF MENTAL AND DENTAL STATUS (FOR THOSE INMATES WITHOUT SIGNIFICANT HEALTH CARE CONCERNS IDENTIFIED DURING EARLIER SCREENING-NO IDENTIFIED ACUTE OR CHRONIC DISEASE, NO IDENTIFIED COMMUNICABLE DISEASES, AND SO FORTH)
- REVIEW OF THE RESULTS OF THE MEDICAL EXAMINATION, TESTS, AND IDENTIFICATION OF PROBLEMS BY A HEALTH CARE PRACTITIONER OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, IF SUCH IS AUTHORIZED IN THE MEDICAL PRACTICE ACT
- INITIATION OF THERAPY, WHEN APPROPRIATE
- DEVELOPMENT AND IMPLEMENTATION OF A TREATMENT PLAN, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION

INTERPRETATION JANUARY 2004. THE CRITERION FOR TESTING FOR VENEREAL DISEASES IS AT THE DISCRETION OF THE AGENCY'S/FACILITY'S HEALTH AUTHORITY.

FINDINGS:

The Tucker Unit receives only intra-system transfers.

Standard #4-4371

ALL INTERSYSTEM OFFENDER TRANSFERS WILL UNDERGO A MENTAL HEALTH APPRAISAL BY A QUALIFIED MENTAL HEALTH PROFESSIONAL WITHIN FOURTEEN DAYS OF ADMISSION TO A FACILITY. IF THERE IS DOCUMENTED EVIDENCE OF A MENTAL HEALTH APPRAISAL WITHIN THE PREVIOUS NINETY DAYS, A NEW MENTAL HEALTH APPRAISAL IS NOT REQUIRED, EXCEPT AS DETERMINED BY THE DESIGNATED MENTAL HEALTH AUTHORITY. MENTAL HEALTH APPRAISALS INCLUDE, BUT ARE NOT LIMITED TO:

- REVIEW OF AVAILABLE HISTORICAL RECORDS OF INPATIENT AND OUTPATIENT PSYCHIATRIC TREATMENT
- REVIEW OF HISTORY OF TREATMENT WITH PSYCHOTROPIC MEDICATION
- REVIEW OF HISTORY OF PSYCHOTHERAPY, PSYCHO-EDUCATIONAL GROUPS AND CLASSES OR SUPPORT GROUPS
- REVIEW OF HISTORY OF DRUG AND ALCOHOL TREATMENT
- REVIEW OF EDUCATION HISTORY
- REVIEW OF HISTORY OF SEXUAL ABUSE-VICTIMIZATION AND PREDATORY BEHAVIOR
- ASSESSMENT OF CURRENT MENTAL STATUS AND CONDITION
- ASSESSMENT OF CURRENT SUICIDAL POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT INCREASE SUICIDE POTENTIAL
- ASSESSMENT OF VIOLENCE POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT INCREASE VIOLENCE POTENTIAL
- ASSESSMENT OF DRUG AND ALCOHOL ABUSE AND/OR ADDICTION
- USE OF ADDITIONAL ASSESSMENT TOOLS, AS INDICATED
- REFERRAL TO TREATMENT, AS INDICATED
- DEVELOPMENT AND IMPLEMENTATION OF A TREATMENT PLAN, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION

FINDINGS:

The Tucker Unit does not accept inter-system transfers.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Correction
Tucker Unit (ARDOC)
Tucker, Arkansas

October 11-13, 2016

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

Standard #4-4125

(RENOVATION, NEW CONSTRUCTION ONLY AFTER JANUARY 1, 1990). THE PHYSICAL PLANT DESIGN FACILITATES PERSONAL CONTACT AND INTERACTION BETWEEN STAFF AND INMATES.

FINDINGS:

The Tucker Unit is not new construction, nor have there been any renovations or additions.

Standard #4-4128

(NEW CONSTRUCTION ONLY AFTER JANUARY 1, 1990). SINGLE-CELL LIVING UNITS SHALL NOT EXCEED 80 INMATES.

FINDINGS:

The Tucker Unit is not new construction.

Standard #4-4137-1

(NEW CONSTRUCTION AFTER JUNE 2014). INMATES HAVE ACCESS TO TOILETS AND HAND-WASHING FACILITIES 24-HOURS PER DAY AND ARE ABLE TO USE TOILET FACILITIES WITHOUT STAFF ASSISTANCE WHEN THEY ARE CONFINED IN THEIR CELLS/SLEEPING AREAS. TOILETS ARE PROVIDED AT A MINIMUM RATIO OF 1 FOR EVERY 12 INMATES IN MALE FACILITIES AND 1 FOR EVERY 8 INMATES IN FEMALE FACILITIES.URINALSMAY BE SUBSTITUTED FOR UP TO ONE-HALF OF THE TOILETS IN MALE FACILITIES. ALL HOUSING UNITS WITH 3 OR MORE INMATES HAVE A MINIMUM OF 2 TOILETS. THESE RATIOS APPLY UNLESS ANY APPLICABLE BUILDING OR HEALTH CODES REQUIRE ADDITIONAL FIXTURES.

FINDINGS:

The Tucker Unit is not new construction.

Standard #4-4138-1

(NEW CONSTRUCTION AFTER JUNE 2014). INMATES HAVE ACCESS TO OPERABLE WASHBASINS WITH HOT AND COLD RUNNING WATER IN THE HOUSING UNITS AT A MINIMUM RATIO OF 1 BASIN FOR EVERY 12 OCCUPANTS.THESE RATIOS APPLY UNLESS ANY APPLICABLE BUILDING OR HEALTH CODES REQUIRE ADDITIONAL FIXTURES.

FINDINGS:

The Tucker Unit is not new construction.

Standard #4-4139-1

(NEW CONSTRUCTION AFTER JUNE 2014). INMATES HAVE ACCESS TO OPERABLE SHOWERS WITH TEMPERATURE-CONTROLLED HOT AND COLD RUNNING WATER, AT A MINIMUM RATIO OF ONE SHOWER FOR EVERY TWELVE INMATES, UNLESS APPLICABLE CODES REQUIRE ADDITIONAL FIXTURES. WATER FOR SHOWERS IS THERMOSTATICALLY CONTROLLED TO TEMPERATURES RANGING FROM 100 DEGREES FAHRENHEIT TO 120 DEGREES FAHRENHEIT TO ENSURE THE SAFETY OF INMATES AND PROMOTE HYGIENIC PRACTICES.

FINDINGS:

The Tucker Unit is not new construction.

Standard #4-4147-1

(RENOVATION, NEW CONSTRUCTION AFTER JUNE 1, 2008). ALL INMATE ROOMS/CELLS PROVIDE INMATES WITH ACCESS TO NATURAL LIGHT BY MEANS OF AT LEAST THREE-SQUARE FEET OF TRANSPARENT GLAZING, PLUS TWO ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER INMATE IN ROOMS/CELLS WITH THREE OR MORE INMATES.

FINDINGS:

The Tucker Unit is not new construction, nor have there been any renovations or additions.

Standard #4-4147-2

(NEW CONSTRUCTION OR RENOVATION AFTER JUNE 1, 2014). EACH DORMITORY PROVIDES INMATES WITH ACCESS TO NATURAL LIGHT BY MEANS OF AT LEAST 12 SQUARE FEET, PLUS TWO ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER INMATE IN THE DORMITORY.

FINDINGS:

The Tucker Unit is not new construction, nor have there been any renovations or additions.

Standard #4-4149

(NEW CONSTRUCTION ONLY AFTER JANUARY 1, 1990). EACH DAYROOM PROVIDES INMATES WITH ACCESS TO NATURAL LIGHT BY MEANS OF AT LEAST 12 SQUARE FEET OF TRANSPARENT GLAZING IN THE DAYROOM, PLUS TWO ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER INMATE WHOSE ROOM/CELL IS DEPENDENT ON ACCESS TO NATURAL LIGHT THROUGH THE DAYROOM.

FINDINGS:

The Tucker Unit is not new construction.

Standard #4-4151

(RENOVATION, NEW CONSTRUCTION ONLY AFTER JANUARY 1, 1990). CIRCULATION IS AT LEAST 15 CUBIC FEET OF OUTSIDE OR RECIRCULATED FILTERED AIR PER MINUTE PER OCCUPANT FOR CELLS/ROOMS, OFFICER STATIONS, AND DINING AREAS, AS DOCUMENTED BY A QUALIFIED TECHNICIAN AND SHOULD BE CHECKED NOT LESS THAN ONCE PER ACCREDITATION CYCLE INTERPRETATION AUGUST 2002. THE WORDS "ACCREDITATION CYCLE" ARE INTERPRETED AS WITHIN THE PAST THREE YEARS.

FINDINGS:

The Tucker Unit is not new construction, nor have there been any renovations.

Standard #4-4190-1

WRITTEN POLICY, PROCEDURE AND PRACTICE, IN GENERAL, PROHIBIT THE USE OF RESTRAINTS ON FEMALE OFFENDERS DURING ACTIVE LABOR AND THE DELIVERY OF A CHILD. ANY DEVIATION FROM THE PROHIBITION REQUIRES APPROVAL BY, AND GUIDANCE ON, METHODOLOGY FROM THE MEDICAL AUTHORITY AND IS BASED ON DOCUMENTED SERIOUS SECURITY RISKS. THE MEDICAL AUTHORITY PROVIDES GUIDANCE ON THE USE OF RESTRAINTS ON PREGNANT OFFENDERS PRIOR TO ACTIVE LABOR AND DELIVERY.

FINDINGS:

The Tucker Unit does not house female offenders.

Standard #4-4253

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR A REVIEW OF THE STATUS OF INMATES IN ADMINISTRATIVE SEGREGATION AND PROTECTIVE CUSTODY BY THE CLASSIFICATION COMMITTEE OR OTHER AUTHORIZED STAFF GROUP EVERY SEVEN DAYS FOR THE FIRST TWO MONTHS AND AT LEAST EVERY 30 DAYS THEREAFTER.

FINDINGS:

The Tucker Unit does not accept administrative segregation and protective custody inmates. If there is a need to place any inmates in administrative segregation or protective custody, they are transferred to another unit in the system.

Standard #4-4254

WRITTEN POLICY, PROCEDURE, AND PRACTICE SPECIFY THE REVIEW PROCESS USED TO RELEASE AN INMATE FROM ADMINISTRATIVE SEGREGATION AND PROTECTIVE CUSTODY.

FINDINGS:

The Tucker Unit does not accept administrative segregation and protective custody inmates. If there is a need to place any inmates in administrative segregation or protective custody, they are transferred to another unit in the system.

Standard #4-4278

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT MALE AND FEMALE INMATES HOUSED IN THE SAME INSTITUTION HAVE SEPARATE SLEEPING QUARTERS BUT EQUAL ACCESS TO ALL AVAILABLE SERVICES AND PROGRAMS. NEITHER SEX IS DENIED OPPORTUNITIES SOLELY ON THE BASIS OF THEIR SMALLER NUMBER IN THE POPULATION.

FINDINGS:

The Tucker Unit does not house female offenders.

Standard #4-4285

WRITTEN POLICIES AND PROCEDURES GOVERN THE ADMISSION OF INMATES NEW TO THE SYSTEM. THESE PROCEDURES INCLUDE AT A MINIMUM THE FOLLOWING:

- DETERMINATION THAT THE INMATE IS LEGALLY COMMITTED TO THE INSTITUTION
- THOROUGH SEARCHING OF THE INDIVIDUAL AND POSSESSIONS
- DISPOSING OF PERSONAL PROPERTY
- SHOWER AND HAIR CARE, IF NECESSARY
- ISSUE OF CLEAN, LAUNDERED CLOTHING AS NEEDED
- PHOTOGRAPHING AND FINGERPRINTING, INCLUDING NOTATION OF IDENTIFYING MARKS OR OTHER UNUSUAL PHYSICAL CHARACTERISTICS
- MEDICAL, DENTAL, AND MENTAL HEALTH SCREENING
- ASSIGNING TO HOUSING UNIT
- RECORDING BASIC PERSONAL DATA AND INFORMATION TO BE USED FOR MAIL AND VISITING LIST
- EXPLAINING MAIL AND VISITING PROCEDURES
- ASSISTING INMATES IN NOTIFYING THEIR NEXT OF KIN AND FAMILIES OF ADMISSION

- ASSIGNING OF REGISTERED NUMBER TO THE INMATE
- GIVING WRITTEN ORIENTATION MATERIALS TO THE INMATE
- DOCUMENTING ANY RECEPTION AND ORIENTATION PROCEDURE COMPLETED AT A CENTRAL RECEPTION FACILITY

FINDINGS:

The Tucker Unit is not a reception center.

Standard #4-4286

WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE THE PREPARATION OF A SUMMARY ADMISSION REPORT FOR ALL NEW ADMISSIONS. THE REPORT INCLUDES AT A MINIMUM THE FOLLOWING INFORMATION:

- LEGAL ASPECTS OF THE CASE
- SUMMARY OF CRIMINAL HISTORY, IF ANY
- SOCIAL HISTORY
- MEDICAL, DENTAL, AND MENTAL HEALTH HISTORY
- OCCUPATIONAL EXPERIENCE AND INTERESTS
- EDUCATIONAL STATUS AND INTERESTS
- VOCATIONAL PROGRAMMING
- RECREATIONAL PREFERENCE AND NEEDS ASSESSMENT
- PSYCHOLOGICAL EVALUATION
- STAFF RECOMMENDATIONS
- PRE-INSTITUTIONAL ASSESSMENT INFORMATION

FINDINGS:

The Tucker Unit is not a reception center.

Standard #4-4287

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR A RECEPTION PROGRAM FOR NEW INMATES UPON ADMISSION TO THE CORRECTIONAL SYSTEM. EXCEPT IN UNUSUAL CIRCUMSTANCES, INITIAL RECEPTION AND ORIENTATION OF INMATES IS COMPLETED WITHIN 30 CALENDAR DAYS AFTER ADMISSION.

FINDINGS:

The Tucker Unit is not a reception center.

Standard #4-4288

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT NEW INMATES RECEIVE WRITTEN ORIENTATION MATERIALS AND/OR TRANSLATIONS IN THEIR OWN LANGUAGE. THESE MATERIALS MAY ALSO BE PROVIDED ELECTRONICALLY, BUT INMATES IN SEGREGATION MUST BE PROVIDED THE INFORMATION IN A WRITTEN FORMAT SO THAT THEIR ACCESS TO THE INFORMATION IS NOT IMPEDED BY THEIR CUSTODY STATUS. WHEN A LITERACY PROBLEM EXISTS, A STAFF MEMBER ASSISTS THE INMATE IN UNDERSTANDING THE MATERIAL. COMPLETION OF ORIENTATION IS DOCUMENTED BY A STATEMENT SIGNED AND DATED BY THE INMATE.

FINDINGS:

The Tucker Unit is not a reception center.

Standard #4-4307

IF YOUTHFUL OFFENDERS ARE HOUSED IN THE FACILITY, WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT THEY ARE HOUSED IN A SPECIALIZED UNIT FOR YOUTHFUL OFFENDERS EXCEPT WHEN:

- A VIOLENT, PREDATORY YOUTHFUL OFFENDER POSES AN UNDUE RISK OF HARM TO OTHERS WITHIN THE SPECIALIZED UNIT; AND/OR
- A QUALIFIED MEDICAL OR MENTAL-HEALTH SPECIALIST DOCUMENTS THAT THE YOUTHFUL OFFENDER WOULD BENEFIT FROM PLACEMENT OUTSIDE THE UNIT

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR THE PREPARATION OF A WRITTEN STATEMENT OF THE SPECIFIC REASONS FOR HOUSING A YOUTHFUL OFFENDER OUTSIDE THE SPECIALIZED UNIT AND A CASE-MANAGEMENT PLAN SPECIFYING WHAT BEHAVIORS NEED TO BE MODIFIED AND HOW THE YOUTHFUL OFFENDER MAY RETURN TO THE UNIT. THE STATEMENT OF REASONS AND CASE-MANAGEMENT PLAN MUST BE APPROVED BY THE WARDEN OR HIS OR HER DESIGNEE. CASES ARE REVIEWED AT LEAST QUARTERLY BY THE CASE MANAGER, THE WARDEN OR HIS OR HER DESIGNEE, AND THE YOUTHFUL OFFENDER TO DETERMINE WHETHER A YOUTHFUL OFFENDER SHOULD BE RETURNED TO THE SPECIALIZED UNIT.

FINDINGS:

The Tucker Unit does not house youthful offenders.

Standard #4-4308

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR THE DIRECT SUPERVISION OF YOUTHFUL OFFENDERS HOUSED IN THE SPECIALIZED UNIT TO ENSURE SAFETY AND SECURITY.

FINDINGS:

The Tucker Unit does not house youthful offenders.

Standard #4-4309

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR CLASSIFICATION PLANS FOR YOUTHFUL OFFENDERS THAT DETERMINE LEVEL OF RISK AND PROGRAM NEEDS DEVELOPMENTALLY APPROPRIATE FOR ADOLESCENTS. CLASSIFICATION PLANS SHALL INCLUDE CONSIDERATION OF PHYSICAL, MENTAL, SOCIAL, AND EDUCATIONAL MATURITY OF THE YOUTHFUL OFFENDER.

FINDINGS:

The Tucker Unit does not house youthful offenders.

Standard #4-4310

WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE THAT ADEQUATE PROGRAM SPACE BE PROVIDED TO MEET THE PHYSICAL, SOCIAL, AND EMOTIONAL NEEDS OF YOUTHFUL OFFENDER AND ALLOWS FOR THEIR PERSONAL INTERACTIONS AND GROUP-ORIENTED ACTIVITIES.

FINDINGS:

The Tucker Unit does not house youthful offenders.

Standard #4-4311

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT YOUTHFUL OFFENDERS IN THE SPECIALIZED UNIT FOR YOUTHFUL OFFENDERS HAVE NO MORE THAN INCIDENTAL SIGHT OR SOUND CONTACT WITH ADULT OFFENDERS FROM OUTSIDE THE UNIT IN LIVING, PROGRAM, DINING, OR OTHER COMMON AREAS OF THE FACILITY. ANY OTHER SIGHT OR SOUND CONTACT IS MINIMIZED, BRIEF, AND IN CONFORMANCE WITH APPLICABLE LEGAL REQUIREMENTS.

FINDINGS:

The Tucker Unit does not house youthful offenders.

Standard #4-4312

WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE THAT PROGRAM PERSONNEL WHO WORK WITH YOUTHFUL OFFENDERS FROM THE SPECIALIZED UNIT BE TRAINED IN THE DEVELOPMENTAL, SAFETY, AND OTHER SPECIFIC NEEDS OF YOUTHFUL OFFENDERS. WRITTEN JOB DESCRIPTIONS AND QUALIFICATIONS REQUIRE TRAINING FOR STAFF SPECIFICALLY ASSIGNED TO THE UNIT OR STAFF THAT IS RESPONSIBLE FOR PROGRAMMING OF YOUTHFUL OFFENDERS IN THE SPECIALIZED UNIT BEFORE BEING ASSIGNED TO WORK WITH YOUTHFUL OFFENDERS. THE TRAINING SHOULD INCLUDE BUT NOT BE LIMITED TO THE FOLLOWING AREAS:

- ADOLESCENT DEVELOPMENT
- EDUCATIONAL PROGRAMMING
- CULTURAL AWARENESS
- CRISIS PREVENTION AND INTERVENTION
- LEGAL ISSUES
- HOUSING AND PHYSICAL PLANT
- POLICIES AND PROCEDURES
- THE MANAGEMENT OF, AND PROGRAMMING FOR, SEX OFFENDERS
- SUBSTANCE-ABUSE SERVICES
- COGNITIVE-BEHAVIORAL INTERVENTIONS, INCLUDING ANGER MANAGEMENT, SOCIAL-SKILLS TRAINING, PROBLEM SOLVING, AND RESISTING PEER PRESSURE
- SUICIDE PREVENTION
- NUTRITION
- MENTAL-HEALTH ISSUES
- GENDER-SPECIFIC ISSUES
- CASE-MANAGEMENT PLANNING AND IMPLEMENTATION

FINDINGS:

The Tucker Unit does not house youthful offenders.

Standard #4-4353-1

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:

The Tucker Unit houses adult male offenders only.

Standard #4-4383

WHEN INSTITUTIONS DO NOT HAVE QUALIFIED HEALTH CARE STAFF, HEALTH-TRAINED PERSONNEL COORDINATE THE HEALTH DELIVERY SERVICES IN THE INSTITUTION UNDER THE JOINT SUPERVISION OF THE RESPONSIBLE HEALTH AUTHORITY AND WARDEN OR SUPERINTENDENT.

FINDINGS:

The Tucker Unit has full-time qualified health care personnel.

Standard #4-4391

IF VOLUNTEERS ARE USED IN THE DELIVERY OF HEALTH CARE, THERE IS A DOCUMENTED SYSTEM FOR SELECTION, TRAINING, STAFF SUPERVISION, FACILITY ORIENTATION, AND DEFINITION OF TASKS, RESPONSIBILITIES AND AUTHORITY THAT IS APPROVED BY THE HEALTH AUTHORITY. VOLUNTEERS MAY ONLY PERFORM DUTIES CONSISTENT WITH THEIR CREDENTIALS AND TRAINING. VOLUNTEERS AGREE IN WRITING TO ABIDE BY ALL FACILITY POLICIES, INCLUDING THOSE RELATING TO THE SECURITY AND CONFIDENTIALITY OF INFORMATION.

FINDINGS:

The Tucker Unit does not use volunteers in the delivery of health care services.

Standard #4-4392

ANY STUDENTS, INTERNS, OR RESIDENTS DELIVERING HEALTH CARE IN THE FACILITY, AS PART OF A FORMAL TRAINING PROGRAM, WORK UNDER STAFF SUPERVISION, COMMENSURATE WITH THEIR LEVEL OF TRAINING. THERE IS A WRITTEN AGREEMENT BETWEEN FACILITY AND TRAINING OR EDUCATIONAL FACILITY THAT COVERS SCOPE OF WORK, LENGTH OF AGREEMENT, AND ANY LEGAL OR LIABILITY ISSUES. STUDENTS OR INTERNS AGREE IN WRITING TO ABIDE BY ALL FACILITY POLICIES, INCLUDING THOSE RELATING TO THE SECURITY AND CONFIDENTIALITY OF INFORMATION.

FINDINGS:

The Tucker Unit does not use students, interns, or inmates in the delivery of health care services.

Standard #4-4393

UNLESS PROHIBITED BY STATE LAW, OFFENDERS (UNDER STAFF SUPERVISION) MAY PERFORM FAMILIAL DUTIES COMMENSURATE WITH THEIR LEVEL OF TRAINING. THESE DUTIES MAY INCLUDE:

- PEER SUPPORT AND EDUCATION
- HOSPICE ACTIVITIES
- ASSIST IMPAIRED OFFENDERS ON A ONE-ON-ONE BASIS WITH ACTIVITIES OF DAILY LIVING
- SUICIDE COMPANION OR BUDDY IF QUALIFIED AND TRAINED THROUGH A FORMAL PROGRAM THAT IS PART OF SUICIDE PREVENTION PLAN
- HANDLING DENTAL INSTRUMENTS FOR THE PURPOSE OF SANITIZING AND CLEANING, WHEN DIRECTLY SUPERVISED AND IN COMPLIANCE WITH APPLICABLE TOOL CONTROL POLICIES, WHILE IN A DENTAL ASSISTANTS TRAINING PROGRAM CERTIFIED BY THE STATE DEPARTMENT OF EDUCATION OR OTHER COMPARABLE APPROPRIATE AUTHORITY

OFFENDERS ARE NOT TO BE USED FOR THE FOLLOWING DUTIES:

- PERFORMING DIRECT PATIENT CARE SERVICES
- SCHEDULING HEALTH CARE APPOINTMENTS
- DETERMINING ACCESS OF OTHER OFFENDERS TO HEALTH CARE SERVICES
- HANDLING OR HAVING ACCESS TO SURGICAL INSTRUMENTS, SYRINGES, NEEDLES, MEDICATIONS, OR HEALTH RECORDS
- OPERATING DIAGNOSTIC OR THERAPEUTIC EQUIPMENT EXCEPT UNDER DIRECT SUPERVISION (BY SPECIALLY TRAINED STAFF) IN A VOCATIONAL TRAINING PROGRAM

FINDINGS:

The Tucker Unit does not use offenders for familial duties.

Standard #4-4417

THERE ARE SUFFICIENT BATHING FACILITIES IN THE MEDICAL HOUSING UNIT AND INFIRMARY AREA TO ALLOW OFFENDERS HOUSED THERE TO BATHE DAILY.

FINDINGS:

The Tucker Unit does not have an infirmary.

Standard #4-4418

OFFENDERS HAVE ACCESS TO OPERABLE WASHBASINS WITH HOT AND COLD RUNNING WATER IN THE MEDICAL HOUSING UNIT OR INFIRMARY AREA AT A MINIMUM RATIO OF ONE BASIN FOR EVERY 12 OCCUPANTS, UNLESS STATE OR LOCAL BUILDING/HEALTH CODES SPECIFY A DIFFERENT RATIO.

FINDINGS:

The Tucker Unit does not have an infirmary.

Standard #4-4419

OFFENDERS HAVE ACCESS TO TOILETS AND HAND-WASHING FACILITIES 24 HOURS PER DAY AND ARE ABLE TO USE TOILET FACILITIES WITHOUT STAFF ASSISTANCE WHEN THEY ARE CONFINED IN THE MEDICAL HOUSING UNIT OR IN THE INFIRMARY AREA. TOILETS ARE PROVIDED AT A MINIMUM RATIO OF ONE FOR EVERY 12 OFFENDERS IN MALE FACILITIES AND ONE FOR EVERY 8 OFFENDERS IN FEMALE FACILITIES. URINALS MAY BE SUBSTITUTED FOR UP TO ONE-HALF OF THE TOILETS IN MALE FACILITIES. ALL HOUSING UNITS WITH THREE OR MORE OFFENDERS HAVE A MINIMUM OF TWO TOILETS. THESE RATIOS APPLY UNLESS STATE OR LOCAL BUILDING OR HEALTH CODES SPECIFY A DIFFERENT RATIO.

FINDINGS:

The Tucker Unit does not have an infirmary.

Standard #4-4436

WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE THAT COMPREHENSIVE COUNSELING AND ASSISTANCE ARE PROVIDED TO PREGNANT INMATES IN KEEPING WITH THEIR EXPRESSED DESIRES IN PLANNING FOR THEIR UNBORN CHILDREN.

FINDINGS:

The Tucker Unit houses adult male offenders only.

Standard #4-4461-1

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT, CONSISTENT WITH THE LAWS AND LEGAL PRACTICES WITHIN THE JURISDICTION, RESTITUTION IS COLLECTED AND ULTIMATELY MADE AVAILABLE TO THE VICTIMS OF CRIME AND/OR THEIR SURVIVORS. WHERE SUPPORTED BY STATUTE, AND FEASIBLE, VICTIM AWARENESS CLASSES ARE OFFERED TO HELP OFFENDERS UNDERSTAND THE IMPACT OF THEIR CRIMES ON THE VICTIMS, THEIR COMMUNITIES, AND THEIR OWN FAMILIES.

FINDINGS:

The Tucker Unit doesn't collect restitution for victims of crime.

Standard #4-4462

PRIVATE INDUSTRIES ON THE INSTITUTION GROUNDS EMPLOYING INMATES IN POSITIONS NORMALLY FILLED BY PRIVATE CITIZENS PAY INMATES THE PREVAILING WAGE RATE FOR THE POSITION OCCUPIED.

FINDINGS:

The Tucker Unit does not operate any private industries on the facility grounds.

Standard #4-4463

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES EMPLOYED IN THE COMMUNITY BY PUBLIC OR PRIVATE ORGANIZATIONS IN POSITIONS NORMALLY OCCUPIED BY PRIVATE CITIZENS ARE COMPENSATED AT THE PREVAILING WAGE RATE FOR THE POSITION OCCUPIED. INMATES RECEIVING SUCH COMPENSATION REIMBURSE THE JURISDICTION FOR A REASONABLE SHARE OF ITS COST IN MAINTAINING THEM.

FINDINGS:

The Tucker Unit does not operate any private industries on the facility grounds.

Significant Incident Summary

This summary is required to be provided to the chair of your audit team upon their arrival. 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. It should contain data for the last 12 months; indicate those months in the boxes provided. Please type the data. If you have questions on how to complete the form, please contact your regional manager.

Facility: Tucker Unit

Year: 2015 - 2016

Incidents		Months											
		Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.
Assault: Offenders/ Offenders*	Indicate types (sexual**, physical, etc.)	3P	0	5P	0	3P	3P	5P	9P, 1V	2V, 2P	2V,1 2P	10P, 4S, 2V	3S, 1V, 14P
	# With Weapon	0	0	0	0	1	0	0	1	1	2	1	1
	# Without Weapon	3	0	5	0	2	3	5	9	3	12	15	17
Assault: Offender/ Staff	Indicate types (sexual**, physical, etc.)	0	0	2P	2P	0	4P	0	6V, 7P	5V, 2P	9P,9 V	13V, 1P	7V, 13P
	# With Weapon	0	0	0	0	0	0	0	0	0	4	0	2
	# Without Weapon	0	0	2	2	0	4	0	13	7	14	14	18
Number of Forced Moves Used***	(Cell extraction or other forced relocation of offenders)	0	0	0	0	1	0	0	4	1	5	2	4
Disturbances*** *		0	0	0	0	0	0	0	1	0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0	1	0	0	2	1	5	2	2
Number of Times Special Reaction Team Used		0	0	0	0	1	0	0	1	0	1	0	0
Four/Five Point Restraints	Number	0	0	0	2	1	1	1	2	2	1	3	1
	Indicate type (chair, bed, board, etc.)	0	0	0	0	0	0	0	0	0	0	0	0
Offender Medical Referrals as a Result of Injuries Sustained	#'s should reflect incidents on this form, not rec or other source												
Escapes	# Attempted	0	0	0	2	1	1	1	2	2	1	3	1
	# Actual	0	0	0	0	0	0	0	0	0	0	0	0
Substantiated Grievances (resolved in favor of offender)	Reason (medical, food, religious, etc.)	0	0	0	0	0	0	0	0	0	0	0	0
	Number	0	0	0	0	0	0	0	0	0	0	0	0

Reason (violent, illness, suicide, natural) * A - Accident * I - Illness * N - Natural	Reason (violent, illness, suicide, natural)	1 Libra ry 2 Prope rty	1 Relig ion 3 Rec	1 Rec. 4 Livin g Cond.	2 Libra ry 3 Rec.		3 Prope rty 1 Rec.	-	1 Relig ion 2 rec. 1 food servic e	1 Food Servi ce 1 verba l abuse 1 Livin g Cond.	5 Livin g Cond itions	1 Radio /Tele phon e/Mo vie 2 Food Servi ce/Fo od	1 Livin g Cond itions 1 Ment al Healt h
	Number	0	0	0	0	0	1	0	0	0	1	1	0

*Any physical contact that involves two or more offenders

**Oral, anal or vaginal copulation involving at least two parties

***Routine transportation of offenders is not considered "forced"

****Any incident that involves four or more offenders. Includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents



TUCKER AR #295 – 01 OCT 15 to 30 SEP 16

Health Care Outcomes				
Standard	Outcome Measure	Numerator/Denominator	Value	Calculated O.M.
1A	(1)	Number of offenders diagnosed with a MRSA infection within the past twelve (12) months.	1	
	divided by	The average daily population.	1,005	0.00
	(2)	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months.	0	
	divided by	Average daily population.	1,005	0
	(3)	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months.	3	
	divided by	Number of offenders administered tests for TB infection in the past twelve (12) months as part of periodic or clinically-based testing, but not intake screening.	1,005	0.003
	(4)	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months.	9	
	divided by	Number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	23	0.39
	(5)	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time.	122	
	divided by	Total offender population at that time.	1,005	0.121
	(6)	Number of offenders diagnosed with HIV infection at a given point in time.	11	
	divided by	Total offender population at that time.	1,005	0.011
	(7)	Number of offenders with HIV infection who are being treated with highly active antiretroviral treatment (HAART) at a given point in time.	11	
	divided by	Total number of offenders diagnosed with HIV infection at that time.	13	0.85

	(8)	Number of selected offenders with HIV infection at a given point in time who have been on antiretroviral therapy for at least six months with a viral load of less than 50 cps/ml.	N/A	
	divided by	Total number of treated offenders with HIV infection that were reviewed.	N/A	N/A
	(9)	Number of offenders diagnosed with an Axis I disorder (excluding sole diagnosis of substance abuse) at a given point in time.	N/A	
	divided by	Total offender population at that time.	N/A	N/A
	(10)	Number of offender admissions to off-site hospitals in the past twelve (12) months.	38	
	divided by	Average daily population.	1,011	0.038
	(11)	Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months.	84	
	divided by	Average daily population in the past twelve (12) months.	1,011	0.083
	(12)	Number of offender specialty consults completed during the past twelve (12) months.	843	
	divided by	837	1,011	0.834
	(13)	Number of selected hypertensive offenders at a given point in time with a B/P reading > 140 mmHg/ >90 mm Hg.	N/A	
	divided by	Total number of offenders with hypertension who were reviewed.	N/A	N/A
	(14)	Number of selected diabetic offenders at a given point in time who are under treatment for at least six months with a hemoglobin A1C level measuring greater than 9 percent.	N/A	
	divided by	Total number of diabetic offenders who were reviewed.	N/A	N/A
	(15)	The number of completed dental treatment plans within the past twelve (12) months.	N/A	
	divided by	the average daily population during the reporting period.	N/A	N/A
2A	(1)	Number of health care <i>staff</i> with lapsed licensure or certification during a twelve (12) month period.	0	
	divided by	Number of licensed or certified staff during a twelve (12) month period.	16	0

	(2)	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job.	1	
	divided by	Number of new health care staff during the twelve (12) month period.	1	1
	(3)	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months.	1	
	divided by	Number of employees.	19	0.053
	(4)	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past twelve (12) months	0	
	divided by	Number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.	16	0
3A	(1)	Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months.	12	
	divided by	Number of evaluated offender grievances related to health care services in the past twelve (12) months.	764	0.016
	(2)	Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period.	0	
	divided by	Number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.	0	0
	(3)	Number of adjudicated offender lawsuits related to the delivery of health care found in favor of the offender in the past twelve (12) months.	0	
	divided by	Number of offender adjudicated lawsuits related to healthcare delivery in the past twelve (12) months.	0	0
4A	(1)	Number of problems identified by quality assurance program that were corrected during a twelve (12) month period.	1	
	divided by	Number of problems identified by quality assurance program during a twelve (12) month period.	1	1

	(2)	Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.	0	
	(3)	Number of offender suicide attempts in the past twelve (12) months.	1	
	divided by	Average daily population.	1,011	0.001
	(4)	Number of offender suicides in the past twelve (12) months.	1	
	divided by	Average daily population.	1,011	0.001
	(5)	Number of unexpected natural deaths in the past twelve (12) months.	0	
	divided by	Total number of deaths in the same reporting period.	1	0
	(6)	Number of serious medication errors in the past twelve (12) months.	1	
5A	None			
6A	None			
7A	None			
7B	None			
7C	None			