

COMMISSION ON ACCREDITATION FOR CORRECTIONS
STANDARDS COMPLIANCE REACCREDITATION AUDIT

Arkansas Department of Corrections
Pine Bluff Complex
Pine Bluff, Arkansas

March 5-7, 2019

VISITING COMMITTEE MEMBERS

Danny Hartline, Chairperson
ACA Auditor

James McClelland
ACA Auditor

Janine Farr
ACA Auditor

A. Introduction

The audit of the Pine Bluff Complex located in Pine Bluff, Arkansas was conducted on March 5th-7th, 2019, by the following team: Danny Hartline, Chairperson; James McClelland, Member; and Janine Farr, Member.

B. Facility Demographics

Rated Capacity:	Randall Williams: 553 Ester: 579 Pine Bluff: 487
Actual Population:	Randall Williams: 552 Ester: 577 Pine Bluff: 470
Average Daily Population for the last 12 months:	Randall Williams: 552 Ester: 571 Pine Bluff: 482
Average Length of Stay:	Randall Williams: 2 years, 5 months, 14 days Ester: 3 years, 11 months, 14 days Pine Bluff: 4 years, 8 months, 15 days
Security/Custody Level:	Randall Williams: Medium Ester: Min / Maximum Pine Bluff: Min / Max
Age Range of Offenders: Years	Randall Williams: 16 -75 Ester: 19 -75 Years Pine Bluff: 19 -84 Years
Gender:	Randall Williams: Male Ester: Male Pine Bluff: Male
Full-Time Staff:	Randall Williams 129 (19) Administrative/Support (99) Security (11) Other Ester 164 (19) Administration/Support (121) Security (24) Other

Pine Bluff 142
(21) Administrative/Support
(113) Security (8) Other

C. Facility Description

The Pine Bluff Complex is composed of three separate facilities referred to as Units. The first Unit you will arrive upon entering the complex is the Randall L. Williams Unit. Further into the complex after passing through a security gate, you will arrive at the Pine Bluff and Ester Units.

Randall Williams Unit:

Construction began on a Jefferson County Jail/correctional Facility began in June 1989, to house 72 jail detainees and 328 state inmates opening in 1990. A 34 – bed expansion to the Jefferson County jail was completed in June 1995. Construction of the modular unit to house an additional 180 state inmates was later completed.

Jefferson County opened a new Adult detention facility in October 2007. In December 2007, the Arkansas Department of correction purchased the 106 beds, Jail Side of the facility, and the 10 Acres of land. The facility was officially renamed the Randall L. Williams Correctional Facility in April 2008, after the Circuit Judge Randall L. Williams’ who served Chairman of the Board of Correction and Community Punishment. Now being a part of the Pine Bluff Complex housing 553 male inmates, medium security level. The physical plant includes four main barracks and a large modular unit off the west hall. There are three cell blocks off the east hall and a segregation unit that consists of 13 cells. There are several small yards off the living units and also a larger yard. There is a central laundry, kitchen and dining area, infirmary off the main hallway. The administration offices, visiting room and training room are off the main entrance.

Ester Unit:

Original construction of this facility began in 1978 with inmate labor bussed from Cummins Unit each day until the latter part of 1979. Temporary housing was established for the inmate labor until the first structures were completed. The Diagnostic Unit began operating as a reception center for the ADC in 1981 when the first inmates were delivered from the county jails. The initial construction had not been completed when it was expanded to a capacity of 486 inmates. In 1993, modifications to accommodate inmates with special needs reduced the capacity to 467 and then in 1995, beds were added back. In February 2012 this facility was closed, moving all operation to the Ouachita River Correction Facility in Malvern. In 2015 the remodeling of this unit began with inmate living area first.

In July of 2015 inmates moved in starting with 184 then in December adding another 196 inmates making the capacity be 380.

The kitchen was opened in January of 2016 at the Ester Unit. The opening of the last barracks and the Medical Department opened in 2017. The first day for the infirmary was November 1, 2017. Bringing the Total Count up to 6. Ester Unit now has a max capacity of 579.

Pine Bluff Unit:

The Pine Bluff Unit was built in 1976, originally as the Women's Unit, to house the state's 128 female offenders who had been transferred from the Cummins Unit. By 1994, the women had outgrown this facility and were transferred to the Tucker Unit at Tucker, Arkansas. Male inmates from the Tucker Unit were transferred to this unit and the name was changed to the Pine Bluff Unit. In 1993, the Pine Bluff Unit was changed to an all-male facility. At the end of 2009, the Board of Correction reduced the bed capacity for the Work Release Center from 120 to 62 due to an economic down turn in free world jobs and the need to fill those beds to help reduce the beds in the county jails filled by state inmates. Today, the Pine Bluff Unit has a capacity to house 487 inmates. Seventy-four of these beds are devoted to a Work Release Program and three-hundred sixty eight beds who work in various jobs in and around the unit. Some of those assignments include, Food Service, Construction, Maintenance, Regional Maintenance, Barracks Porters, Freeline Lawn, Horse barn.

The Pine Bluff Unit serves a dual function, Work Release Center, and as general inmate housing unit. The Work Release area consist of three dormitory style structures which include one single and one double occupancy room and five apartments housing multi-occupancy rooms. The Unit now houses trustee inmates in Barracks One and Three. An iron fence separates the Work Release Center and the General Population area. The General Population area includes three dormitory style structures with single and double occupancy rooms, two structures with five open barracks, and a separate segregation unit housing up to seventeen inmates in single occupancy cells. Other structures within the perimeter fence include the Administrative offices, a Chapel, Food Service, Infirmary, and Laundry. The physical plant consists of apartments for the work release inmates and nine separate barracks made up of single and double rooms, military style barracks, and 17 cells in the segregation unit. The facility has covered walkways that connect to the administrative building, chapel, gym, infirmary, kitchen, laundry and to an outside courtyard. There is a large recreation yard.

D. Pre-Audit Meeting

On March 4th, 2019 at approximately 8:30 p.m. the team met at the Comfort Inn and Suites (3620 Camden Road, Pine Bluff, Arkansas) lobby to discuss the audit schedule and assignments.

The chairperson divided standards into the following groups:

Standards #4-4001 to 4169 to Danny Hartline, Chairman
Standards #4-4170 to 4343 to James McClelland, Member

E. The Audit Process

1. Transportation

On March 5, 2019 the team was escorted (by Sandra Kennedy, Internal Auditor/Agency Accreditation Manager) from the Comfort Inn and Suites to the Pine Bluff Complex arriving at approximately 7:50 a.m.

2. Entrance Interview

The team was met at the main entrance (Randall Williams Unit) by Chief Deputy Director M.D. “Dale” Reed who escorted the team to the Warden’s conference room.

NOTE:

The Warden of the Pine Bluff Complex had just had an emergency surgery and was not able to participate in the audit. Chief Deputy Director M.D. “Dale” Reed was taking the place of the Warden for this audit.

The team was welcomed in the conference room by Chief Deputy Director M.D. “Dale” Reed, Director Wendy Kelly, Deputy Warden (Ester) Michelle Gray, Deputy Warden (Pine Bluff) Moses Jackson III, Deputy Warden (Randall Williams) Kenneth Davis, Agency Accreditation Manager, Sandra Kennedy and Facility ACA Tammy Robertson. The audit process and schedule were discussed.

The audit team proceeded to the (Randall Williams) Visiting Room for the formal entry meeting. The following persons were in attendance.

Director	Wendy Kelley
Chief Deputy Director	Dale Reed
Deputy Director	Dexter Payne
Deputy Director	Rory Griffin
Assistant Director	Mark Cashion
Regional Vice President Well Path	Dona Gordon
Regional Manager Well Path	Rebekah Davis
Deputy Warden (Ester)	Michelle Gray
Deputy Warden (Pine Bluff)	Moses Jackson III
Deputy Warden (Randall Williams)	Kenneth Davis
Health Services Administrator (Ester)	Mary Carter
Health Services Administrator (Pine Bluff)	Ramona Huff
Health Services Administrator (Randall Williams)	Patti Conley
Fire Safety (Pine Bluff)	Joann Singleton
Business Manager (Ester)	Jamie Gillum
Business Manager Pine Bluff	Connie Dean
Key Control (Ester)	Cory Evans

Tool Control (Ester)	Iris McBride
Fire Safety (Ester)	Tammy Murphy
School President	GB Davis
Human Resource (Ester)	Rachelle Beggs
Grievance (Ester)	Lisa Free,
Training (Pine Bluff Unit)	Linda Hill
Mental Health Advisor (Ester)	Karen Mattin
Rehab Supervisor (Pine Bluff Unit)	David Ryles
Chemicals (Ester)	Tamarcus Howard
Emergency Preparedness Coordinator (Ester)	Louis Skinner
Chief of Security (Ester)	Cordall Akins
Captain (Pine Bluff)	Gregg Moore
Kitchen Captain (Ester)	Robert Miller
Maintenance (Ester)	David Connor
EPC Assistant (Randall L. Williams)	Ronald Weast
Pine Bluff Complex Emergency Preparedness Lieutenant	Daniel Laminack
Emergency Preparedness Assistant	Christopher Bennett
Captain (Pine Bluff Unit)	Jonathan Smart
Corporal (Randall Williams)	Bianca Green
Corporal (Randall Williams)	Cheryl Griffin
Chaplain (Ester)	Jerry Tolbert
Property Officer (Pine Bluff)	Zillah Redix
Program Specialist (Pine Bluff)	Karen Lawson
Corporal (Randall Williams)	Keli Nelson
Sergeant (Randall Williams)	Shurrel Freeman
Corporal (Pine Bluff Unit)	Ryan Robinson
Corporal (Randall Williams)	Katie Tosca
Grievance (Randall Williams)	Tanya Collins
Visitation (Randall Williams)	Lee Skinner
Chief of Security (Pine Bluff)	LaSaundra Malone
Lieutenant (Pine Bluff)	Latrina Rayford
Sergeant (Pine Bluff)	Latonya Earl
Records (Pine Bluff)	Lynne Taylor
Work Release Supervisor (Pine Bluff)	Crystal Woods
Human Resource (Pine Bluff)	Marla Dewease
Fire and Safety (Randall Williams)	Sherry Overs
Classification (Pine Bluff)	Velma Barnes
Kitchen Captain (Pine Bluff)	Cynthia Moore
SATP Counselor (Randall Williams)	D'Carlos Johnson
Program Specialist (Ester)	Cozette Fuller
Key Control (Pine Bluff)	Ross Anderson
Disciplinary (Pine Bluff)	Jaerica Culclager
Recreation (Ester)	Alvonia Miller
Recreation (Randall Williams)	Lewattis Garrett
Captain (Randall Williams)	Kevin Courtney
Sergeant (Randall Williams)	Taylor Surveyor

Captain (Randall Williams)	Robert Pierce
Mental Health Advisor (Pine Bluff)	Earl Glass
Grievance (Pine Bluff)	Lesa Haynes
Key Control (Randall Williams)	Ruben Millan
Lieutenant (Ester)	Sherly Owney
Kitchen Captain (Randall Williams)	Bruce Harding

The audit team introduced themselves and provided brief descriptions of their experience, qualifications, correctional and auditing backgrounds. The team emphasized the goals of accreditation, which are to improve the efficiency and effectiveness of correctional systems throughout the United States. The team expressed the appreciation of the Association for the opportunity to be involved with the re-accreditation process of the Pine Bluff Complex. The audit team expressed that they were aware that the facility staff had worked long and hard in preparation for this event and would endeavor to provide as fair and thorough audit as possible while holding them accountable to high standards. The audit schedule and procedures were discussed with Chief Deputy Director Reed. Chief Deputy Director Reed was asked about any problem areas the team should be made aware. Chief Deputy Director Reed was asked if any inmate or employee had requested to speak with the auditors. Escorts were we requested by the team to accompany them on the tour and subsequent visits to departments and note the number of inmates and the names and titles of employees with whom the auditors spoke. The Chief Deputy Director was advised that the audit team would meet with him each evening prior to its departure from the facility to discuss the progress of the audit up to that point, and any problems that were encountered. It was explained that the goal of the visiting team was to be as helpful and non-intrusive as possible while conducting the audit. The team members would visit as many departments and areas as possible and meet and speak with as many staff as possible in the time available. It was requested that when an audit team member paused to speak to inmates, to please step away so the conversation may remain private.

3. Facility Tour

The team toured the entire facility from 8:20 a.m. to 3:15 p.m. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Chief Deputy Director	Dale Reed
Deputy Warden (Randall Williams)	Kenneth Davis
Deputy Warden (Pine Bluff)	Moses Jackson
Deputy Warden (Ester)	Michelle Gray
Unit Accreditation Specialist	Tammy Robertson
Program Specialist (Pine Bluff)	Karen Lawson
State Accreditation Specialist	Sandra Kennedy
Corporal	Ronald West
Key Control	Rueben Millan

Fire Safety	Sherry Overs
Tool Control	Taylor Survey
Major (Randall Williams)	Danny Crook
Captain (Randall Williams)	Robert Pierce
Emergency Preparedness	Daniel Laminack
Major (Pine Bluff)	LaSaundra Malone
Tool Control (Pine Bluff)	Latonya Earl
Captain (Pine Bluff)	Gregg Moore
Key Control (Pine Bluff)	Ross Anderson
Fire Safety (Pine Bluff)	Joann Singleton
Emergency Preparedness Assistant (Pine Bluff)	Christopher Bennett
Utility Lieutenant	Latrina Rayford
Sanitation Officer	Ryan Robinson
Fire Safety (Ester)	Tammy Murphy
Key Control (Ester)	Cory Evans
Emergency Preparedness (Ester)	Louis Skinner
Sergeant (Ester)	Johnny Giddens

(Scribes – Katie Tosca, Jaerica Culclager, Cozette Fuller)

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:

The Randall Williams unit has two points of entrance; the front entrance and the vehicle sally port. The facility is secured with a shaker fence that surrounds the facility and is monitored within the main control room. To gain access into the perimeter, security staff remotely open an exterior perimeter pedestrian gate. Once inside the lobby, all staff and visitors are required to clear a walk thru metal detector and all bags are searched. A handheld wand is also available for use and during the course of audit, the audit team observed numerous staff and visitors being patted down. Visitor's sign in and out utilizing a paper visitor log.

In order to gain access to the Pine Bluff and Ester facilities, staff and visitors must proceed thru a vehicle security check point which is equipped with lift gates. This post is manned by a correctional officer and the assigned staff member verifies identification upon entrance and visually searches vehicles both upon entrance and exit.

The Pine Bluff and Ester units have nearly identical entrance procedures as the Williams unit. Each of these two units are equipped with the both walk thru metal detectors and hand-held wands. There is a security presence 24 hours a day seven days a week at each entrance point.

Each of the three units audited have Central Control Centers which are manned 24 hours a day, seven days a week. These Control Rooms account and issue security equipment to include keys, restraints and handheld radios. The control room staff are also responsible to monitor facility cameras that monitor movement both inside and outside the facility.

The audit team reviewed the key issue log within each control room and found practices consistent with good correctional practice. Key ring identification was noted as “blue” key rings were standard operating keys, “yellow” key rings were restricted keys and “red” key rings were emergency keys. Certain key rings were also “notched” to be identified easily in “low light” situations. These key rings could be easily identified on the keyboards in the control centers.

Each of the three unit’s perimeters are walked twice per day by foot patrol. Although there are no perimeter vehicles assigned to rove, vehicles are available and can be used during unusual incidents or inclement weather. Additionally, there are four towers on the property. Two towers are designated for the Pine Bluff Unit and two towers are designated for the Ester Unit. These towers are manned 24 hours a day, seven days a week and armed with AR-15 rifles.

NOTE: The audit team visited all four towers during the course of the audit and questioned assigned security staff in regard to their job responsibilities and job descriptions. One of the four assigned tower officers was not thoroughly familiar with the assigned job duties and complex leadership staff ensured remedial training was conducted during the course of the audit.

Offender Movement

Security Staff monitor and control offender movement by both electronic and key operated pedestrian gates. Staff are strategically located at each security gate to supervise all inmate movement. Mass movement including chow, programs and recreation is announced at specific times to ensure appropriate supervision is in place. Prior to Youthful Offender movement, all adult offender movement is restricted to ensure no sight or sound contact occurs.

Key Control:

Key Control is monitored by the assigned Key Control Officer Sergeant Ross Anderson. The Key and Lock area is located outside the secure perimeter and is adjacent to the secured armory. The Key Control Officer maintains a master inventory for all keys including blanks. During the audit tour an inspection of both the master inventory and key issue log was conducted, and the documentation reviewed was found to be accurate. There is one key cutting machine within the Key and Lock shop and Sergeant Anderson has the ability to cut new keys when authorized.

Armory:

The Armory is located in the back of the complex rounds and outside the perimeters of all three units.

The Armory is seated behind a perimeter fence that can only be accessed by key. Once inside the fence, there are two additional key operated doors that must be navigated before entering into the "Armorer's" area. There is a fourth door that must be opened to access the firearms and ammunitions at the facility. There are also Non-Lethal chemical munitions including: Smoke, Triple Chase, Riot Control, Flameless Tri Chambers, Pocket Tactical, Aerosol Grenade, Rubber Baton, .32 Cal. Stringer, OC Muzzle Blast, Bean Bag, Rubber Buckshot, .60 Cal Stringer, Wood Baton, Stabilizer Fin, Foam Baton, Rubber Ball Stinger, OC Stinger and various MK3/4/9 gas.

The firearms inventory in use at the Pine Bluff Complex consists of Remington 12 Ga. Shotgun (12), Ruger Mini 14 (13), Ruger AR15 (one), Windham AR15/M4 (two), Combined Tactical 37MM (three), Penn Arms 37MM (one), Glock Model 22 (31). Assigned transportation and those responsible for unit perimeter checks carry the Glock firearms.

Lieutenant Laminke and Corporal Weast are the assigned firearms trainers for all three units. Corporal Weast is also the institutional armorer and certified to armor on all firearms at the units.

The Emergency Response Team is headed by ERT Team Leader Lieutenant Laminke. There are 18 members on the ERT. Each interested staff member of the Randall L. Williams, Pine Bluff and Ester Units may request admission to the ERT based upon recommendation, passing of fitness evaluation to serve, Superintendent/Warden approval and completion of the 40-hour ERT training program and meeting firearms proficiency criteria set.

The Pine Bluff Complex provides a horse mounted detail which is responsible for the cleaning and maintenance of grounds around the complex. The mounted detail also operates a vegetable farm during the spring and summer months. The rider is armed with a Glock 22 40 cal. with a ten round magazine from the West Tower. The horse barn supervisor ensures the rider's horse has been shod, saddled and bridled prior to the rider reporting for work call. Each detail consists of 15-20 inmates and works a full day. The Field Sergeant is responsible for maintaining an accurate count of inmates on at least a five-minute interval. Inmates are not allowed to get closer than ten and no further than thirty yards from the rider. Field Sergeants are responsible for reporting any suspicious activities, or any problems involving inmates. At the end of each shift, inmates are returned to the sally port, counted, and strip searched prior to returning to their living units.

Shift Change:

At shift change, a briefing is conducted with the officers where they go through a dress inspection and then then debriefing begins. The briefing includes all information on any occurrences that may have taken place on the previous shift. Policy and procedures are read during these briefings to keep the officers up to date. An audit team member addressed shift change at all three Units during this audit.

Environmental Conditions:

The Environmental conditions of the Pine Bluff Complex are maintained within the scope of ACA requirements. The inmate living areas have sufficient number of windows to the outside and outside lighting is adequate throughout the facility. Light, noise and airflow conditions have been tested by a qualified environmental expert and all fall within approved ranges. Temperature ranges are within the comfort level in all areas of the facility. The facility operates as a “no tobacco” facility so there are no issues with the air quality. The buildings were properly maintained. There is adequate shower, sink and lavatory facilities to meet the Arkansas Building code ratio requirements. Furnishings throughout the facility, including bedding in housing areas, are in good condition and are properly fire-rated. The facility was clean and orderly.

NOTE: Several housing units of the Randall Unit were all leaking. This was discussed with the Chief Deputy Director. The Chief Deputy Director informed the team that there was a bid selection in process to repair the roof. The bid was to go in the paper the next week.

NOTE: One Dayroom did not meet space and total square feet requirements. See notes on Non-Compliant.

Sanitation:

The facility was very clean and well maintained in all areas. Inmate workers are responsible, under the direction of staff, for the cleaning throughout the facility. Inspections by staff ensure the areas are maintained at a high level. Weekly Safety and Sanitation inspections are conducted by appropriate staff and is documented on inspection forms. Each inmate housing unit has a janitor/mop closet and there are cleaning supplies maintained on the units. All chemicals are controlled and have proper MSDS sheets readily available. Inventory and control documents were spot checked with no discrepancies noted. Staff and inmates are required to know the proper use and what to do in case of an emergency involving chemical and caustics. All staff are trained on safety precautions yearly. Personal hygiene items were available to inmates and staff. There is a housekeeping plan. Daily, weekly and monthly inspections are performed by facility staff and was made available for review. There are also inmates assigned to be responsible for the cleaning of the outside areas of the facility, such as sidewalks and the inner perimeter.

Certified vendors provide services such as sewage, waste management and pest control. A current analysis of potable drinking water was on file. The Pine Bluff Complex was presented as an audit ready facility.

Fire Safety:

Each of the three assigned unit safety sergeants toured with the audit team and were available throughout the audit to answer questions.

Fire Detection systems in place include: Smoke, Heat and Carbon Monoxide detection. Fire Suppressant systems in place include: Ansul vent hood system, overhead sprinkler, fire extinguishers and exterior standpipe located within State Fire Marshall code.

Simplex Grinnell conducts annual fire safety system check and maintenance. Range Guard contracts for extinguisher checks and replacement as needed; both Fire and Safety Sgts. Conduct weekly visual inspections. The Randall L. Williams unit maintains 127 Fire Extinguishers in service and the Pine Bluff unit maintains 48 in service. Randall L. Williams also has six wall-mounted SCBA devices and Pine Bluff unit maintains ten wall mounted devices. The Ester unit has a total of 41 Fire Extinguishers and four SCBA devices mounted throughout the facility. The nearest fire department location outside the facility is approximately three miles away. A review of Annual State Fire Marshall inspections found limited documented violations and corrective action is taken when discrepancies found. Evacuation routes were visible throughout each unit and the audit team found them easy to read. Fire Drills are conducted on each of the four shifts and documented as required at all three units.

Food Service:

The food service departments run in three shifts at each of the three Units audited. The food service departments were clean and well maintained. Kitchen utensils are maintained by use of master tool inventories and sign out/in logs. Assigned kitchen staff ensure all utensils are accounted for and these tools are secured behind locked doors and expanded metal cages. Tool issue logs reviewed during the audit were found to be accurate.

The Randall L. Williams Unit has one refrigerator and one freezer. The required temperatures were verified within the standards set and in accordance with proper food storage. The Pine Bluff Unit maintains two refrigerators and two freezers exterior to the food service department. The Ester Unit has two refrigerators and two walk-in freezers. All of the assigned refrigerators and freezers inspected during the audit were found to be in good working order and food was stored appropriately.

The food service menu is on a 14-day rotational cycle. This menu is reviewed and approved by a dietician. The Pine Bluff Complex has a garden with which they supply produce as part of the menu. Arkansas DOC units located at Cummins and Varner have the capability of blast freezing home grown produce so as to transport and supply food items to the Pine Bluff Complex and all other units throughout Arkansas.

The inmate commissary is stocked by inventory supplied by Keefe and Union Supply. Inmates at all three units are permitted to spend up to a \$65 weekly canteen limit. Inmates may submit vendor orders for clothing, shoes, and other goods as often as they like so long as they maintain less than threshold property limits set in policy.

Food Service also feed staff members at no charge. The Chairperson and team member of the audit team sampled an inmate tray consisting of beef stroganoff green beans, lima beans, beans, cinnamon apple slices and two slices of homemade bread. The audit team found the meal to be more than adequate in both taste and quantity.

Medical Care:

All three units, Randall Williams Unit, Ester Unit and Pine Bluff Unit offer healthcare via a contract with Wellpath (CCS & CMGC), with headquarters located in Nashville, Tenn., with the contract begin date of January 1, 2019 to December 31, 2019.

Nursing staff at the Williams Unit consists of the following: one Dr., one APN, one HSA, one RN, eight full time LPNs, and two part time LPNs. There are not any vacancies for this unit.

Pine Bluff Unit consists of the following staff: one Dr., HSA, six LPNs. There are two vacancies: one LPN and 20-hour Medical Records staff.

Ester Unit has the following staff: one Dr. (shared by all three units), HSA, five RNs, and thirteen LPNs. Vacancies consist of one LPN, part time LPN-night shift, one full time LPN-night shift. If any of these three units have a shortage on one shift, they can pull from another one of the three units. The three HSAs maintain the on-call status for all three units. Ester Unit is the only unit that has a 4-bed infirmary licensed by the state of Arkansas Department of Health. There is a call bell system in place for each bed, and the inmates in the infirmary are in sight/sound of the nurses and the security staff assigned to this area. The infirmary can maintain inmates needing long term antibiotics, observation, needing transport to treatment in the local hospital, DNRs, and inmates needing long term chemotherapy. If an inmate would need to be placed in isolation, he would be transferred to the Special Needs Unit in Malvern, Arkansas.

Services provided in house are the following: sick call, (which either can be in paper form (segregation) or by using a kiosk located in each housing unit, pill call, phlebotomy, physical therapy. Services offered by utilizing outside Providers are: Orthopedics, Ultrasound, Cardiology, Neurology, Oculist, Radiation, Hematology/Oncology, Infectious Disease, Ophthalmology, Rheumatology, Pulmonologist, Orthotics, Audiology, Dermatology, Endocrinology, Pain Management, Cardiology, GI, Surgery, Oral Surgery, Urology, and ENT. Offsite referrals requests are sent to the Regional Provider/ Regional APN approves such consults. The Regional Medical Director is Jeffrey Stieve, M.D.

The APRN, Matthew Wood, is on-site Tuesday, Wednesday and Thursdays from 8:00 a.m. to 6:00 p.m. The Unit Dr., Dr. Ronald Stuke, is on-site five hours on Friday. Provider on-call status is rotated between the Dr. and the APRN. All initial intake process is completed at the Ouachita River Correctional Center in Malvern Arkansas. All Staff of Sgt. and above are trained to be First Responders via First Aid, CPR and AED. Emergencies are triaged in each unit's treatment room, or on-site as needed. Each unit has an appropriate number of First Aid kits that are inventoried each month by the Medical Department. Each unit has an AED in each of their medical room and checked every shift. Each unit maintains a stretcher, back board and a jump bag.

If an emergency would occur, the following hospitals are utilized for inpatient hospitalization: Jefferson Regional Medical Center, Pine Bluff, AR., University of Arkansas for Medical Sciences, Little Rock, AR. and Baptist Hospital Little Rock AR. The ambulance service utilized is Easi Ambulance Service within a 10 to 20-minute call out time. Non-emergent medical transportation is done by the Units' Staff to either a hospital facility or community provider for off-site consultations. The Pine Bluff unit has backup inventory of walking canes, crutches, walkers and wheelchairs. If disabilities are permanent or severe, these inmates would be transferred to an appropriate Disability Placement Program designated facility.

Upon admittance to each unit, the inmate receives an Inmate Handbook which contains information pertaining to medical, co-pays, mental health and dental services offered. All three units utilize Diamond Pharmacy for ordering medications. Chronic Care medication is an automatic re-fill. The provider places an order via fax, and works off the Complex's formulary, with non-formulary medications reviewed. Formulary medication is approved annually by the Regional Medical Director. Medications are received by the units within a 24-48 hour turn around. All three units maintained an ample supply of stock medications. Such ordered medications are delivered via Fed Ex courier to the facility. The units utilize as a back-up pharmacy, Walgreens in Pine Bluff, Arkansas. The last pharmacy audit was conducted in January 2019, by Tiffany Keethley, and was found compliant. When medications are expired, they are sent to Quality RX for destruction. Narcotics that need to be destroyed, (patient specific), are sent to the Arkansas Department of Health. A recent contract with Recon, now has this company to come on-site for stock narcotic destructions.

All three units utilize KOPs (Keep on Person) medications. These medications are closely monitored for compliance. Each inmate obtaining KOPS, are educated upon when to return to the medical department for re-order status, how/when to take such medications. The inmate is required to be able to verbalize the understanding of these processes.

All three units maintain a Red Book for counts on every shift change, verified by two nurses and signed off. Counts of critical instruments, sharps and narcotics were found to be compliant at all three units. Perpetual inventory is inventoried upon receipt and added to the count and removed from count as used. Medications were secured in a locked medication cart and secure behind double locked doors.

The following number of inmates receiving medications are: Williams Unit-#436, Pine Bluff Unit-#275 and Ester Unit-#450. Medication times for all three units are: 2:30 a.m., 9:45 a.m. and 2:30 p.m. Inmates in Administrative Segregation receive their medicines approximately after main line, with a nurse going cell to cell. At this time, the nurse will also receive and triage all health requests from the inmates housed in this area. Diabetic call line is held at each medication pill line window in all three units at appropriate times for the diabetics. Medication distribution is recorded in the inmate's MARS, (Medical Appraisal and Revalidation System). Diabetic medications, narcotics, HIV, TB, Psych. injections are also charted on paper MARS. Medical Records are both paper and electronic currently.

Williams Unit has approximately #335 requests/month, Pine Bluff Unit has approximately #150 requests/month and Ester Unit has approximately #262 requests/month. Inmates either utilize the Kiosk system or if in Segregation, paper form for placing their health service requests. These are triaged every shift by the medical staff, and placed accordingly, and if emergent, evaluated immediately. Sick Call is offered seven days a week at all three units. Monday through Friday for General Population is 8:00 a.m. and 8:30 a.m. Monday through Friday for Admin. Segregation. Nursing protocols are in place for the RNs for addressing non-emergent situations/ailments. Inmates in all three units are usually seen within a 24- hour period.

Inmates pay a \$3.00 co-pay for medical/dental services, as presented to them in the Inmate Handbook. There is no co-pay for follow-up appointments, chronic care, communicable diseases, mental health, indigent inmates, emergent care and Hepatitis C testing.

At the time of the audit, the following number of inmates were enrolled in Chronic Care clinics: Williams Unit-#436, Pine Bluff Unit-#207 and Ester Unit-#300. Upon review, all therapeutic diets were appropriate the affliction. Upon review, all Individual Treatment Plans were compliant, with periodic physicals, diets, education and laboratory tests. Diets for chronic care are compiled by the Regional Registered Dietician, Deborah Goldman.

Pine Bluff unit has a 17 bed Administrative Segregation unit. Health service requests in this area, are handwritten and delivered to the nurse during daily during the three medication distribution times. In this area, #1 cell is used for crisis management by mental health. Paper gowns are first given to the inmate, then is graduated to a smock. Security and the medical staff complete rounds for this cell and is documented appropriately in logbooks. There is not a medical exam room in this area, so if needed, they are taken to the medical department, via security.

Optometry services are offered via contract with an outside provider, Mobile Eye Care, and is conducted in house for all three units. Radiology services are via a contract with Mobil-X to include routine x-rays, MRI, CAT Scans and ultrasound Monday through Friday, for all three units. EKGs are read both on-site and off-site. Results are received within one to two hours, and films are viewed immediately. Emergency radiology is provided through the local hospital, JRMC, with results received within a 24- hour period. If an emergency x-ray has been ordered by the provider, Mobil-X is called to complete the test. All films are interrupted by a Radiologist employed by Mobil-X. Dosimeter readings are completed by the Mobil-X technologist.

Laboratory services are offered via contract with Lab Corp, for all three units. Lab specimens are transported for processing via courier Monday through Friday. Results are returned to the facility via electronically, with critical values called into the individual unit. The inmate is transferred to the local hospital for Stat orders.

Dental services are offered at the Ester unit. There are two working chairs. The Staff consists of: One Dentist, one Dental Assistant and one Dental Hygienist, all employed by Wellpath.

Hours are Monday through Friday 6:00 a.m. to 4:00 p.m. All units utilize Ester unit's dental facility. Services are cleaning, dental hygiene, cancer screening, dentures, fillings and extractions. There are approximately #30 dental requests/month. The Dentist is on-call nights and week-ends, if needed. Dental tools are controlled and are in a locked cabinet behind a locked door. These are inventoried each day by the Dental Assistant and the Dentist and results log into their logbook. Counts of all instruments in this area were compliant. Spore count and sterilization records were also compliant upon review.

Medical waste removal is via contract since 2014 with Steri-Cycle. Such waste was appropriately boxed, placed in a secure room and away from general traffic.

Mental Health:

Mental Health staff are employees of the State of Arkansas. Mr. David Ryles is the Rehab Supervisor. The Williams unit staff are: S.A.T.P. Counselors (Substance Abuse Treatment Program), a Licensed Psychological Examiner and a Mental Health Advisor. Ester unit has the following staff: Licensed Master Social Worker and a Mental Health Advisor. Pine Bluff unit has a Mental Health Advisor. Individual and group treatment is available to the inmate population five days a week. Crisis intervention services are available twenty-four hours a day through an on-call system. The total number of individual contacts varies from day to day.

Substance Abuse Treatment Program, (S.A.T.P.) helps individuals recognize the importance of understanding the principles of Release Prevention and will help recognize Faulty Thinking and the role that it plays in relapse as it relates to staying “clean” and “sober” and leading a criminal free lifestyle. These classes help the inmate recognize physical, emotional, spiritual and behavioral cues that indicate when relapse is about to occur. This is a Modified Therapeutic Community program that is a four to six-month program in the Williams unit. This program will help inmates recognizing the importance of surrounding themselves with the appropriate people.

Other classes offered are: Anger Management-a Cognitive Behavior Therapy that covers four types of CBT. Case Management-relaxation intervention, Cognitive intervention, Communication Skills intervention and Combine intervention. Domestic Violence-this program offered to the inmate population is to help them identify problems/issues, propose solutions, develop options and make changes in themselves which will help them lead non-abusive lives. Communication Skills-this program covers effective listening, different communication styles, handling differences of opinions and constructive conflict. Parenting-this is a psych-educational program available to inmates who have children ages 13 and younger. Information is offered concerning developing appropriate parenting skills as well as helping inmates better understand and cope with issues involving parenting. Thinking Errors-this course is designed to assist the inmate in gaining insight about thinking errors and help them to identify thinking distortions and recognize how these two works together to cause negative experiences in their lives.

This course also assists the inmates in learning how to change their thinking patterns. Stress Management-this program helps participants recognize the physical and mental signs of stress, identify warning signals and learn positive stress management coping skills.

At the time of the audit there were approximately, all three units combined, #220 inmates receiving psychotropic medication. There are approximately #10-20 requests for mental health services/month, usually evaluated within a 24- hour period, or if emergent, immediately. After hour emergencies are handled on-call by the Mental Health Advisors.

Mental Health screenings are initiated during their intake process at Ouachita River Unit in Malvern, AR. As part of the screening, all three units involved, and the nurse will ask questions regarding any mental health issues, with a positive response, they will be referred to the MH department for evaluation.

The Psychiatrists follows the inmate as clinically appropriate, Tele-Health, to include crisis intervention, supportive therapy and if needed, psychotropic medication.

All three units has a pre-release program where the inmate is assigned a Case Manager and the program outlines a thirty-ninety-day release date and provides a thirty-day script for chronic medication and a seven-day script for psychotropic medications. This process ensures that the inmate continues to receive psychiatric medication upon release and bridges the gap between health care for the incarcerated individuals and community mental health resources. Also, the Case Manager arranges for Medicaid, prescriptions, medical, housing and follow-up therapy.

Recreation:

All inmates are given the opportunity to exercise. Inmates are encouraged to participate in activities such as walking, jogging in place, basketball, softball, and isometrics. Within day rooms, inmates have access to television viewing, table games, etc. There are special activities for each holiday which is posted in each barrack Recreation activities are available to inmates seven days a week, weather permitting.

Ester Unit's recreational yard is 40,272 square feet. Pine Bluff Unit outdoor recreational yard is 63,300 square feet, the indoor recreational area (the gym) is 2,583 square feet, and the segregation recreation yards are 4,051 square feet and 1,639 square feet. Randall L. Williams Unit main covered court is 5,670 square feet and the overall yard is 18,486 square feet. The MOD unit recreational yard is 19,776 square feet. The Segregation area measures 14' 8" by 13'6". There are also board games available including chess, checkers, and dominoes.

Work Craft is a Privilege, inmates must be a class I, with 90 day disciplinary free to apply. Hobby craft consists of leather craft, wood craft, and art. Inmates are allowed to sell their crafts to employees and visitors.

Social Services:

The Program consists of Anger Management, Substance Abuse, Case Management, Domestic Violence, Communication Skills, Parenting, Thinking Errors, and Stress Management.

Substance Abuse Treatment Program (S.A.T.P) This program will help participants recognize the importance of understanding the principles of Relapse Prevention and will help recognize Faulty Thinking and the role that it plays in relapse as it relates to staying clean and sober and leading a criminal free lifestyle. The class will help inmates recognize physical, emotional, spiritual, and behavioral cues that indicates when relapse is about to occur. This Program will help inmates recognize the importance of surrounding themselves with clean and sober people. It will help them to recognize their triggers and to combat there thinking errors.

Anger Management:

A Cognitive Behavior Therapy (CBT) treatment program that covers four types of CBT

Case Management: Relaxation intervention, Cognitive intervention, Communication Skills intervention, and Combine intervention.

Domestic Violence:

This is a mental health program offered to the inmate population to help them identify problems/issues, propose solutions, develop options and make changes in themselves which will help them lead non-abusive lives.

Communication Skills:

This program covers effective listening, different communication styles, handling differences of opinion, and constructive conflict.

Parenting:

This is a psycho-educational program available to inmates who have children ages 13 and younger.

Information is offered concerning developing appropriate parenting skills as well as helping inmates better understand and cope with issues involved in parenting.

Thinking Errors:

The course is designed to assist inmates in gaining insight about thinking errors and help them to identify thinking distortions and recognize how the two work together to cause negative experiences in their lives. The course will also assist the inmates in learning how to change their thinking patterns.

Stress Management:

This program will help participants recognize the physical and mental signs of stress, identify warning signals of stress, and learn positive stress management coping skills.

The Think legacy Program is a 24-hour week curriculum delivered in a structured environment. The Think Legacy Re-entry Program design relies heavily on citizen volunteers and professional ADC staff members to teach and facilitate best practice curriculum.

Training and support of staff and volunteers are always welcomed. The Participants of the Think Legacy Program completes an eight chapter workbook that encourages goal setting, and introduces the concept of “career planning” versus “just getting a job”. The Think Legacy Program help those who are released from prison to be career goal oriented with the skills to keep them from returning.

Religious Programming:

The Chaplain Services provide a wide variety of services to accommodate the many different religious and denominational needs and backgrounds of inmates and staff; as well as to provide opportunities for Spiritual growth through worship services, religion/denominational meetings, counseling, revivals, notable speakers and singers, group choirs, etc.

The services offered to the inmate population through volunteers and volunteer chaplains. The fulltime chaplains coordinate religious activities and the volunteer programs. Typical religious activities include bible study courses/classes, cell group ministry, KAIROS prison ministry, PAL program, worship services (all denominations), revivals and one-on-one ministry. Marriage counseling, pre-marriage counseling and weddings are also services provided by the chaplains. These programs have a great impact on the inmates at the Pine Bluff Complex. The Chaplains minister to the families of inmates at various times of need.

Education:

This area was not audited by ACA. They are of CEA (Correctional Education Association).

Visitation:

The Pine Bluff Complex has three Visitation Clerks. Visitation is run Saturday and Sunday from 12:00 p.m. to 4:00 p.m. including holidays. Special Visitations can be arranged Monday through Friday between 8:00 a.m. and 4:00 p.m. Two visits are allowed for four hours each. The visit must be scheduled 24 hours in advance

Library Services:

All three units have fully stocked libraries as well as functional Law Libraries. Each unit as a designated Staff Member who is the liaison between the inmates and Administration. The general library is a Recreational Reading Library with Inter-Library Loan available through our local library systems. Library porters are assigned to assist other inmates in finding reading materials and legal references. Inmates may retain their legal work in their possession to be placed in their issued lockers. The library is seven days per week.

Law Library:

The Law Library provides for the rights of inmates to have access to an appropriate law library, typing services and other supplies and services related to legal matters. The law library includes at a minimum, relevant and up to date constitutional, statutory, and case law materials, applicable to court rules, and practice treatises. To ensure when an inmate is unable to make meaningful use of the law library on his / her own, additional assistance necessary for effective access is provided. To ensure that inmates in segregation have access to legal materials.

The Pine Bluff Complex meets the ACA guidelines for inmate access to courts through the use of the law library. The law library provides all the necessary federal law books and many other law books as required by the specific inmate housing contract.

Laundry Services

The Pine Bluff Unit operates central laundry service for both the Pine Bluff Unit and Ester Unit. Inmate clothing is washed daily. The laundry provides all inmates with the opportunity to launder their linen at least weekly.

There is a laundry at Randall L. Williams Unit, also washing clothing daily, with linen and personal clothing weekly.

It should be noted that notices of this ACA audit were posted throughout the facility.

F. Examination of Records

Following the facility tour, the team proceeded to the Randall Training 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

Both the Significant Incident Summary and Outcome measures were reviewed for thirty-six months.

Incidents noted on the Significant Incident Summary reflect a level of operations that is consistent with the overall mission and security level of the facility. The

Outcome Measures were reviewed and found to be within reasonable ranges for this facility.

The medical auditor reviewed the Significant Incident Summary and the Health Care Outcome Measures with the health care administrative team. The Chairman also discussed the Significant Incident Summary with Chief Deputy Director Reed.

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>
Armory	Captain Jonathon Smart, Lieutenant Daniel Laminack
Medical	Health Services Administrator (Ester) Mary Carter Health Services Administrator (Pine Bluff) Ramona Huff Health Services Administrator (Randall Williams) Patti Conley
Mental Health	Advisor (Ester) Karen Mattin Advisor (Pine Bluff) Earl Glass
Key and Lock	Sergeant Ross Anderson
Dietary	Food Service Captain Bruce Harding Food Service Captain Cynthia Moore Fire Safety Captain Robert Miller
Library	Cozette Fuller
Laundry	Sergeant Arkeama Johnson
Commissary	Peggy Falls
Maintenance	Sergeant Witt Lowery
Training	Training Supervisor Linda Hill Training Supervisor Patrice Lewis
Chaplain	Chaplain Jerry Tolbert

Restrictive Housing	Major Danny Crook Sergeant Whitted Sergeant John Tate
Grievance Office	Connie Jenkins
Business Office	Business Manager, Connie Dean
Housing Units	Correctional Officer O'Neil Correctional Officer Overton Captain Robert Pierce Sergeant Sherry Overs Correctional Officer McMiller Corporal Brian Cook Corporal Shaina Curry Captain Gregg Moore Corporal Frank Yelland
Youthful Housing	Coach Garrett Corporal McCray Mrs. Rowland
Towers	Correctional Officer Fraizer Correctional Officer Patterson Corporal Catherine Wilson Corporal Shirley Gooseberry

4. Shifts

Shifts at the Pine Bluff Complex are divided into two main shifts: 6:00 a.m. -6:00 p.m. and 6:00 p.m. -6:00 a.m. There are other shifts that overlap the two main shifts.

a. Day Shift (6:00 a.m.-6:00 p.m.)

The team was present at the facility during the day shift on March 5, 2019 from 7:50 a.m. to 6:00 p.m. and on March 6, 2019 from 7:50 a.m. to 6:00 p.m. and on March 7, 2019 from 7:55 a.m. to 12:00 p.m. The team observed all programs, inmate dining and recreation. The shift was well groomed, professional, understood policy, procedure and post orders and was motivated about carrying out their responsibilities for the overall operation of the facility. Their control of the inmates was good and their interaction with the inmates was evidenced by how well they worked together to maintain the cleanliness of the facility at a high level.

b. Night Shift (6:00 p.m.-6:00 a.m.)

The team was present at the facility during the evening shift on March 5th, 2019 from 6:00 p.m. to 7:15 p.m. and on March 6th, 2019 from 6:00 p.m. to 7:20 p.m. The team visited with the shift as they entered the building and observed information being passed from one shift to another.

The team was impressed with the staff, who were very professional and well groomed. The staff and inmates understood the importance of the accreditation process and seemed motivated to do a good job in their areas of responsibilities. A team member stood roll call and addressed all staff the evening shift of March 5, 2019 and March 6, 2019 to address all three Units to discuss the audit process.

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

There were zero non-compliant standards on the previous audit.

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 team interviewed a total of approximately 115 inmates. The inmates interviewed were cooperative and willing to speak to the team. The inmates interviewed stated that they felt safe at this facility. The inmates also stated that they had access to medical and dental care. The inmates were supportive of the Warden and the Administrative Staff. The only complaint inmates voiced was the leaking roof in the Randall L. Williams Unit. The team informed the inmates the Pine Bluff Complex Administration was addressing this issue.

2. Staff Interviews

The audit team spoke with approximately 73 staff in the course of the audit. Staff at the facility are professional in their interaction with the inmates and other staff. There was a great deal of support for all levels of the management team and the administration. The audit team observed a sense of pride by all levels of staff in the facility regarding the jobs they perform. The staff that the audit team spoke with felt that their contributions are recognized and that they make a difference.

H. Exit Discussion

The exit interview was held at 11:20 a.m. on March 7, 2019 in the Randall Williams Visiting with Chief Deputy Director Reed and 136 staff in attendance.

Also in attendance were:

Dextor Payne	Deputy Director
Mark Cashion	Assistant Director
Rory Griffin	Assistant Director
Dale Maynard	Assistant Director
Sandra Kennedy	ACA Coordinator
William Straughn	Warden Cummins
Jeremy Andrews	Superintendent Eat Arkansas Regional Unit
Donna Gordon	VP Well Path
Kelly Beatty	ACA, Varner Unit
Lonetta Howard	Facility ACA East Arkansas
Cindy Vent	Facility ACA Wrightsville
Mary Ann Allen	Facility ACA Cummins
Sharon Carter	Facility ACA Tucker

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.

AMERICAN CORRECTIONAL ASSOCIATION
AND THE
COMMISSION ON ACCREDITATION FOR CORRECTIONS

COMPLIANCE TALLY

Manual Type	Adult Correctional Institution, 4 th Edition	
Supplement	2016 Standards Supplement	
Facility/Program	Pine Bluff Complex	
Audit Dates	March 5 th –7 th , 2019	
Auditor(s)	Danny Hartline James McClelland Janine Farr	
	MANDATORY	NON-MANDATORY
Number of Standards in Manual	62	465
Number Not Applicable	4	23
Number Applicable	58	442
Number Non-Compliance	0	3
Number in Compliance	58	439
Percentage (%) of Compliance	100%	99.3%
<ul style="list-style-type: none"> ● Number of Standards <i>minus</i> Number of Not Applicable <i>equals</i> Number Applicable ● Number Applicable <i>minus</i> Number Non-Compliance <i>equals</i> Number Compliance ● Number Compliance <i>divided by</i> Number Applicable <i>equals</i> Percentage of Compliance 		

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections
Pine Bluff Complex
Pine Bluff, Arkansas

March 5-7, 2019

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

Standard #4-4082

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT ALL NEW FULL-TIME EMPLOYEES MUST COMPLETE A FORMALIZED 40- HOUR ORIENTATION PROGRAM BEFORE UNDERTAKING THEIR ASSIGNMENTS. AT A MINIMUM, THE ORIENTATION PROGRAM SHOULD INCLUDE INSTRUCTION IN THE FOLLOWING: THE PURPOSE, GOALS, POLICIES, AND PROCEDURES FOR THE FACILITY AND PARENT AGENCY; SECURITY AND CONTRABAND REGULATIONS; KEY CONTROL; APPROPRIATE CONDUCT WITH OFFENDERS; RESPONSIBILITIES AND RIGHTS OF EMPLOYEES; UNIVERSAL PRECAUTIONS; OCCUPATIONAL EXPOSURE; PERSONAL PROTECTIVE EQUIPMENT; BIO HAZARDOUS WASTE DISPOSAL; AND AN OVERVIEW OF THE CORRECTIONAL FIELD, AND THE EMERGENCY PLAN.

FINDINGS:

Multiple Non-Security staff did not receive 40 hours of orientation training before undertaking their assignments. Staff did receive 24 hours of orientation training prior to undertaking their assignment, however the remaining 16 hours of orientation training were after undertaking their assignments.

AGENCY RESPONSE:

Plan of Action

Task

- a. Review the Administrative Directive and Standard to update Unit Policy.
- b. Review unit Policy to ensure corrective action are in place.
- c. Set up a Check sheet by Training Officers to ensure 40 hours of Orientation.
- d. Set up a Communication between the Human Resource and Training Supervisors to prevent anyone being missed.

Responsible Agency

- a. Policy Committee Members
- b. Policy Committee Members
- c. Training Supervisors
- d. Human Resource and training officers.

Assigned Staff

- a. Tammy Robertson, Linda Hill, Patrice Lewis & other members
- b. Tammy Robertson, Linda Hill, Patrice Lewis & other members
- c. Linda Hill and Patrice Lewis
- d. Warden Gaylon Lay, Deputy Wardens: Moses Jackson, Michelle Gray, & Kenneth Davis

Anticipated Completion Date

- a. April 2019
- b. April 2019
- c. April 2019
- d. April 2019

AUDITOR'S RESPONSE:

Appropriate staff and time periods have been established for the correction of this standard. The team concurs with the Facility's Corrective Action.

Standard #4-4135

DAYROOMS WITH SPACE FOR VARIED INMATE ACTIVITIES ARE SITUATED IMMEDIATELY ADJACENT TO THE INMATE SLEEPING AREAS. DAYROOMS PROVIDE SUFFICIENT SEATING AND WRITING SURFACES AND ALL FURNISHINGS ARE CONSISTENT WITH THE CUSTODY LEVEL OF THE INMATES ASSIGNED. DAYROOMS PROVIDE A MINIMUM OF 35-SQUARE FEET OF SPACE PER INMATE (EXCLUSIVE OF LAVATORIES, SHOWERS, AND TOILETS) FOR THE MAXIMUM NUMBER OF INMATES WHO USE THE DAYROOM AT ONE TIME, AND NO DAYROOM ENCOMPASSES LESS THAN 100 SQUARE FEET OF SPACE (EXCLUSIVE OF LAVATORIES, SHOWERS, AND TOILETS).

FINDINGS:

The Pine Bluff Complex has one dayroom (Ester Unit #3 barracks) that does not meet the 35 square feet of space per inmate requirement. The dayroom has 27.43 square feet per inmate.

AGENCY RESPONSE:

Appeal

The Documentation in the file was incorrect, there are two areas of day room space in the 2 and 3 Barrack of Ester. The Documentation only showed the measurements for one Day room.

AUDITOR'S RESPONSE:

The audit team can only review what is in the file. The Facility did not produce any more documentation during the audit. When the Facility produces the documentation mentioned above, the team concurs that the dayroom space should be adequate. The team will leave this appeal at the discretion of the Reaccreditation Committee at the time of re-accreditation.

Standard #4-4262

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SEGREGATION HAVE THE OPPORTUNITY TO SHAVE AND SHOWER AT LEAST THREE TIMES PER WEEK.

FINDINGS:

The Pine Bluff Correctional Complex only allow inmates in Segregation to shave once weekly in both policy and practice.

AGENCY RESPONSE:

Plan of Action

Task

- a. To ensure shaves are offered three time a week along with showers.
- b. Ensure the post orders are written to match the Unit Policy to show Shaves.
- c. Train or practice following policy and post orders and the documentation to show the actions are being done.

Responsible Agency

- a. Majors and Captains
- b. Major
- c. Training Supervisors

Assigned Staff

- a. Danny Crook, LaSaundra Malone, Robert Pierce, Kevin Courtney, Jonathan Smart, & Gregg Moore
- b. Majors Danny Crook, LaSaundra Malone,
- c. Linda Hill and Patrice Lewis

Anticipated Completion Date

- a. April 2019
- b. April 2019
- c. April 2019
- d. April 2019

AUDITOR'S RESPONSE:

Appropriate staff and time periods have been established for the correction of this standard.
The team concurs with the Facility's Corrective Action.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections
Pine Bluff Complex
Pine Bluff, Arkansas

March 5-7, 2019

Visiting Committee Findings

Mandatory Standards

Not Applicable

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 Pine Bluff Complex does not house female inmates.

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:

- A. ANY PAST HISTORY OF SERIOUS INFECTIOUS OR COMMUNICABLE ILLNESS, AND ANY TREATMENT OR SYMPTOMS (E.G. CHRONIC COUGH, HEMOPTYSIS, LETHARGY, WEAKNESS, WEIGHT LOSS, LOSS OF APPETITE, FEVER, NIGHT SWEATS THAT ARE SUGGESTIVE OF SUCH ILLNESS), AND MEDICATIONS
- B. CURRENT ILLNESS AND HEALTH PROBLEMS, INCLUDING COMMUNICABLE DISEASES
- C. DENTAL PROBLEMS
- D. 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)
- E. THE POSSIBILITY OF PREGNANCY AND HISTORY OF PROBLEMS (FEMALE ONLY); AND OTHER HEALTH PROBLEMS DESIGNATED BY THE RESPONSIBLE PHYSICIAN

OBSERVATION OF THE FOLLOWING:

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

MEDICAL DISPOSITION OF OFFENDER:

- I. GENERAL POPULATION
- J. GENERAL POPULATION WITH PROMPT REFERRAL TO APPROPRIATE HEALTH CARE SERVICE
- K. 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 UPON WRITTEN MEDICAL CLEARANCE. WHEN SCREENING IS CONDUCTED BY TRAINED CUSTODY STAFF, PROCEDURES WILL REQUIRE SUBSEQUENT REVIEW OF POSITIVE FINDINGS BY 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 Pine Bluff Complex is not a reception center. The Pine Bluff Complex receive inmates from intra-system transfer.

Standard #4-4365

A COMPREHENSIVE HEALTH APPRAISAL FOR EACH OFFENDER, EXCLUDING INTRA-SYSTEM TRANSFERS, IS COMPLETED AS DEFINED BELOW, AFTER ARRIVAL AT THE FACILITY. IF THERE IS DOCUMENTED EVIDENCE OF A HEALTH APPRAISAL WITHIN THE PREVIOUS 90 DAYS, A NEW HEALTH APPRAISAL IS NOT REQUIRED, EXCEPT AS DETERMINED BY THE DESIGNATED HEALTH AUTHORITY. HEALTH APPRAISALS INCLUDE THE FOLLOWING:

WITHIN 14 DAYS AFTER ARRIVAL AT THE FACILITY:

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

WITHIN 14 DAYS AFTER ARRIVAL FOR INMATES WITH IDENTIFIED SIGNIFICANT HEALTH CARE PROBLEMS:

- F. 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)
- G. REVIEW OF THE RESULTS OF THE MEDICAL EXAMINATION, TESTS, AND IDENTIFICATION OF PROBLEMS BY A HEALTH CARE PRACTITIONER OR OTHER QUALIFIED HEALTH CARE PERSONNEL, IF SUCH IS AUTHORIZED IN THE MEDICAL PRACTICE ACT
- H. INITIATION OF THERAPY, WHEN APPROPRIATE

- I. 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:

- J. 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 DISEASE, AND SO FORTH)
- K. 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
- L. INITIATION OF THERAPY, WHEN APPROPRIATE
- M. DEVELOPMENT AND IMPLEMENTATION OF TREATMENT PLAN, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION

FINDINGS:

The Pine Bluff Complex is not a reception center. The Pine Bluff Complex receive inmates from intra-system transfer.

Standard #4-4371

ALL INTER-SYSTEM OFFENDER TRANSFERS WILL UNDERGO A MENTAL HEALTH APPRAISAL BY QUALIFIED MENTAL HEALTH PROFESSIONAL WITHIN 14 DAYS OF ADMISSION TO A FACILITY. IF THERE IS DOCUMENTED EVIDENCE OF A MENTAL HEALTH APPRAISAL WITHIN THE PREVIOUS 90 DAYS, A NEW MENTAL HEALTH APPRAISAL IS NOT REQUIRED, EXCEPT AS DETERMINED BY THE DESIGNATED MENTAL HEALTH AUTHORITY. MENTAL HEALTH EXAMINATIONS INCLUDE, BUT ARE NOT LIMITED TO:

- A. REVIEW OF AVAILABLE HISTORICAL RECORDS OF INPATIENT AND OUTPATIENT PSYCHIATRIC TREATMENT
- B. REVIEW OF HISTORY OF TREATMENT WITH PSYCHOTROPIC MEDICATION
- C. REVIEW OF HISTORY OF PSYCHOTHERAPY, PSYCHO-EDUCATIONAL GROUPS, AND CLASSES OR SUPPORT GROUPS
- D. REVIEW OF HISTORY OF DRUG AND ALCOHOL TREATMENT
- E. REVIEW OF EDUCATIONAL HISTORY

- F. REVIEW OF HISTORY OF SEXUAL ABUSE-VICTIMIZATION AND PREDATORY BEHAVIOR
- G. REVIEW OF CURRENT MENTAL STATUS AND CONDITION
- H. ASSESSMENT OF CURRENT SUICIDAL POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT INCREASE SUICIDE POTENTIAL
- I. ASSESSMENT OF VIOLENCE POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT INCREASE VIOLENCE POTENTIAL
- J. ASSESSMENT OF DRUG AND ALCOHOL ABUSE AND/OR ADDICTION
- K. USE OF ADDITIONAL ASSESSMENT TOOLS, AS INDICATED
- L. REFERRAL TO TREATMENT, AS INDICATED
- M. DEVELOPMENT AND IMPLEMENTATION OF TREATMENT PLAN, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION

FINDINGS:

The Pine Bluff Complex is not a reception center. The Pine Bluff Complex receive inmates from intra-system transfer

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections
Pine Bluff Complex
Pine Bluff, Arkansas

March 5-7, 2019

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

Standard #4-4128

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

FINDINGS:

The Pine Bluff Complex has not had any new single-cell construction after January 1, 1990.

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 RATION OF ONE FOR EVERY 12 INMATES IN MALE FACILITIES AND ONE FOR EVERY 12 INMATES IN MALE FACILITIES AND ONE FOR EVERY EIGHT INMATES 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 INMATES HAVE A MINIMUM OF TWO TOILETS. THESE RATIOS APPLY UNLESS ANY APPLICABLE BUILDING OR HEALTH CODES REQUIRE ADDITIONAL FIXTURES.

FINDINGS:

The Pine Bluff Complex was constructed prior to June 2014.

Standard #4-4138-1

(NEW CONSTRUCTION AFTER JUNE 2014).

INMATES HAVE ACCESS TO OPERABLE WASH BASINS 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 RE-QUIRE ADDITIONAL FIXTURES.

FINDINGS:

The Pine Bluff Complex was constructed prior to June 2014.

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 12 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 Pine Bluff Complex was constructed prior to June 2014.

Standard #4-4143

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR THE ASSIGNMENT OF APPROPRIATELY TRAINED INDIVIDUALS TO ASSIST DISABLED OFFENDERS WHO CANNOT OTHERWISE PERFORM BASIC LIFE FUNCTIONS.

FINDINGS:

The Pine Bluff Complex does not house inmates that cannot perform basic life functions.

Standard #4-4149

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. [NEW CONSTRUCTION ONLY AFTER JANUARY 1, 1990]

FINDINGS:

The Pine Bluff Complex is not classified as new construction.

Standard #4-4181

WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE THAT 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:

The Pine Bluff Complex does not house female inmates.

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 Pine Bluff Complex does not house female inmates.

Standard #4-4208

WHERE A CANINE UNIT EXISTS, POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR THE FOLLOWING:

- A MISSION STATEMENT, INCLUDING GOALS AND OBJECTIVES
- EMERGENCY PLANS THAT ARE INTEGRATED INTO THE OVERALL EMERGENCY PLANS OF THE FACILITY.

FINDINGS:

The Pine Bluff Complex does not have a Canine Unit.

Standard #4-4209

WHERE A CANINE UNIT EXISTS, POLICY, PROCEDURE, AND PRACTICE FOR TRAINING OF HANDLERS/DOG TEAMS AND UPKEEP AND CARE OF ANIMALS PROVIDE FOR THE FOLLOWING:

- CRITERIA FOR SELECTION, TRAINING, AND CARE OF ANIMALS
- CRITERIA FOR SELECTION AND TRAINING REQUIREMENTS OF HANDLERS
- AN APPROVED SANITATION PLAN WHICH COVERS INSPECTION, HOUSING, TRANSPORTATION, AND DAILY GROOMING FOR DOGS

EACH HANDLER/DOG TEAM SHOULD BE TRAINED, CERTIFIED, AND RECERTIFIED ANNUALLY BY A NATIONALLY RECOGNIZED ACCREDITING BODY OR A COMPARABLE INTERNAL TRAINING AND PROFICIENCY-TESTING PROGRAM.

FINDINGS:

The Pine Bluff Complex does not have a Canine Unit

Standard #4-4210

WHERE A CANINE UNIT EXISTS, POLICY, PROCEDURE, AND PRACTICE PROVIDE DAILY AND CURRENT RECORDS ON TRAINING, CARE OF DOGS, AND SIGNIFICANT EVENTS.

FINDINGS:

The Pine Bluff Complex does not have a Canine Unit

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 Pine Bluff Complex does not house female inmates

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 Pine Bluff Complex 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 Pine Bluff Complex 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 Pine Bluff Complex 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 Pine Bluff Complex is not a reception center.

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 Pine Bluff Complex does not house female inmates.

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 Pine Bluff Complex have qualified/licensed healthcare staff.

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 Pine Bluff Complex does not use volunteers in the delivery of health care.

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 Pine Bluff Complex does not use students, interns or residents in the delivery of health care.

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 Pine Bluff Complex does not house female inmates.

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:

This facility and the Arkansas Department of Corrections is not responsible for the collection of restitution per state law.

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 Pine Bluff Complex does not have a Private Industries Program.

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 Community Residential Facilities, Juvenile Correctional Facilities, Juvenile Detention Facilities, Adult Community Residential Services, and Small Juvenile Detention Facilities.

Facility Name: Barbara A. Ester Unit

Reporting Period: 2018

Incident Type	Months	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total for Reporting Period
														
Escapes		0	0	0	0	0	0	0	0	0	0	0	0	0
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	1	0	0	1
	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
Mandatory Non-Compliance*		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
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.

Significant Incident Summary

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Facility Name: **Pine Bluff Unit** Reporting Period: 2018

Incident Type	Months													Total for Reporting Period
	→	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	
Escapes		0	0	0	0	0	0	0	0	0	0	0	0	0
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	1	0	0	0	0	0	0	0	1	1	3
	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
Mandatory Non-Compliance*		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
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.

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.

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Facility Name: Randall L. Williams

Reporting Period: 2018

Incident Type	Months	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total for Reporting Period
														
Escapes		0	0	0	0	0	0	0	0	0	0	0	0	0
Disturbances*		0	0	1	0	0	0	0	0	0	0	0	0	1
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
Mandatory Non-Compliance*		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
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.

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	538	0.00185
	(2)	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months	0	
	divided by	Average daily population.	538	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	0	
	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.	413	0
	(4)	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months	0	
	divided by	Number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	0	0
	(5)	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time	54	
	divided by	Total offender population at that time.	533	0.1013
	(6)	Number of offenders diagnosed with HIV infection at a given point in time	2	
	divided by	Total offender population at that time.	533	0.00375
	(7)	Number of offenders with HIV infection who are being treated with highly active	2	

		antiretroviral treatment (HAART) at a given point in time		
	divided by	Total number of offenders diagnosed with HIV infection at that time.	2	1
	(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	2	
	divided by	Total number of treated offenders with HIV infection that were reviewed.	2	1
	(9)	Number of offenders with an active individualized services/treatment plan for a diagnosed mental disorder (excluding sole diagnosis of substance abuse) at a given point in time	26	
	divided by	Total offender population at that time.	473	0.0549
	(10)	Number of offender admissions to off-site hospitals in the past twelve (12) months	23	
	divided by	Average daily population.	538	0.0427
	(11)	Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months	56	
	divided by	Average daily population in the past twelve (12) months.	538	0.104
	(12)	Number of offender specialty consults completed during the past twelve (12) months	767	
	divided by	Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.	496	1.546
	(13)	Number of selected hypertensive offenders at a given point in time with a B/P reading > 140 mmHg/ >90 mm Hg	5	
	divided by	Total number of offenders with hypertension who were reviewed.	15	0.333
	(14)	Number of selected diabetic offenders at a given point in time who are under treatment for at least six months with a	5	

		hemoglobin A1C level measuring greater than 9 percent		
	divided by	Total number of diabetic offenders who were reviewed.	14	0.357
	(15)	The number of completed dental treatment plans within the past twelve (12) months	531	
	divided by	the average daily population during the reporting period.	538	0.9869
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.	8	0
	(2)	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job	0	
	divided by	Number of new health care staff during the twelve (12) month period.	8	0
	(3)	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months	0	
	divided by	Number of employees.	8	0
	(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.	8	0
3A	(1)	Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months	2	
	divided by	Number of evaluated offender grievances related to health care services in the past twelve (12) months.	17	0.117
	(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	3	0
4A	(1)	Number of problems identified by quality assurance program that were corrected during a twelve (12) month period	3	
	divided by	Number of problems identified by quality assurance program during a twelve (12) month period.	1	3
	(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	0	
	divided by	Average daily population	538	0
	(4)	Number of offender suicides in the past twelve (12) months	0	
	divided by	Average daily population	538	0
	(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	0	
5A	None			
6A	None			
7A	None			
7B	None			
7C	None			

Name of Facility ESTER COMPLEX
 Data Collected from APRIL 2018-JAN 2019

Number of months = 10 months

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	0	
	divided by	The average daily population	577	577
	(2)	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months	0	
	divided by	Average daily population.	577	577
	(3)	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months	0	
	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.	829	0
	(4)	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months	0	
	divided by	Number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	0	0
	(5)	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time	78	
	divided by	Total offender population at that time	578	0.135
	(6)	Number of offenders diagnosed with HIV infection at a given point in time	10	
	divided by	Total offender population at that time.	578	57.8
	(7)	Number of offenders with HIV infection who are being treated with highly active antiretroviral treatment (HAART) at a given point in time	10	

	divided by	Total number of offenders diagnosed with HIV infection at that time.	578	57.8
(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	6	
	divided by	Total number of treated offenders with HIV infection that were reviewed.	6	0
(9)		Number of offenders diagnosed with an Axis I disorder (excluding sole diagnosis of substance abuse) at a given point in time	42	
	divided by	Total offender population at that time.	496	0.0846
(10)		Number of offender admissions to off-site hospitals in the past twelve (12) months	30	
	divided by	Average daily population.	577	0.52
(11)		Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months	37	
	divided by	Average daily population in the past twelve (12) months.	577	0.064
(12)		Number of offender specialty consults completed during the past twelve (12) months	751	
	divided by	Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.	677	1.109
(13)		Number of selected hypertensive offenders at a given point in time with a B/P reading > 140 mmHg/ >90 mm Hg	29	
	divided by	Total number of offenders with hypertension who were reviewed.	174	0.167
(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	10	
	divided by	Total number of diabetic offenders who were reviewed.	40	0.25
(15)		The number of completed dental treatment plans within the past twelve (12) months	562	
	divided by	the average daily population during the reporting period.	577	0.974

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.	18	0
	(2)	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job	4	
	divided by	Number of new health care staff during the twelve (12) month period.	4	0
	(3)	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months	0	
	divided by	Number of employees.	16	0
	(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	2	
	divided by	Number of evaluated offender grievances related to health care services in the past twelve (12) months.	21	0.95
	(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	1	0

4A	(1)	Number of problems identified by quality assurance program that were corrected during a twelve (12) month period	5	
	divided by	Number of problems identified by quality assurance program during a twelve (12) month period.	4	1.25
	(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	0	
	divided by	Average daily population	577	0
	(4)	Number of offender suicides in the past twelve (12) months	0	
	divided by	Average daily population	577	0
	(5)	Number of unexpected natural deaths in the past twelve (12) months	1	
	divided by	Total number of deaths in the same reporting period.	3	0.33
	(6)	Number of serious medication errors in the past twelve (12) months	0	
5A	None			
6A	None			
7A	None			
7B	None			
7C	None			

Name of Facility Randall L. Williams
 Data Collected from APRIL 2018-JAN 2019

Number of months = 10 months

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	2	
	divided by	The average daily population	552	.003
	(2)	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months	0	
	divided by	Average daily population.	552	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	0	
	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.	378	0
	(4)	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months	1	
	divided by	Number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	1	1
	(5)	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time	66	
	divided by	Total offender population at that time	556	.1
	(6)	Number of offenders diagnosed with HIV infection at a given point in time	6	
	divided by	Total offender population at that time.	578	.01
	(7)	Number of offenders with HIV infection who are being treated with highly active antiretroviral treatment (HAART) at a given point in time	4	
	divided by	Total number of offenders diagnosed with HIV infection at that time.	4	1
	(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	3	
	divided by	Total number of treated offenders with HIV infection that were reviewed.	3	1
	(9)	Number of offenders diagnosed with an Axis I disorder (excluding sole diagnosis of substance abuse) at a given point in time	45	
	divided by	Total offender population at that time.	560	.08
	(10)	Number of offender admissions to off-site hospitals in the past twelve (12) months	27	

	divided by	Average daily population.	552	.04
	(11)	Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months	12	
	divided by	Average daily population in the past twelve (12) months.	552	.02
	(12)	Number of offender specialty consults completed during the past twelve (12) months	391	
	divided by	Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.	567	.6
	(13)	Number of selected hypertensive offenders at a given point in time with a B/P reading > 140 mmHg/ >90 mm Hg	4	
	divided by	Total number of offenders with hypertension who were reviewed.	30	.13
	(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	3	
	divided by	Total number of diabetic offenders who were reviewed.	14	.2
	(15)	The number of completed dental treatment plans within the past twelve (12) months	276	
	divided by	the average daily population during the reporting period.	552	.5
2A	(1)	Number of health care <i>staff</i> with lapsed licensure or certification during a twelve (12) month period	1	
	divided by	Number of licensed or certified staff during a twelve (12) month period.	105	.009
	(2)	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job	2	
	divided by	Number of new health care staff during the twelve (12) month period.	2	2
	(3)	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months	1	
	divided by	Number of employees.	105	.009
	(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.	15	0
3A	(1)	Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months	0	
	divided by	Number of evaluated offender grievances related to health care services in the past twelve (12) months.	12	0
	(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	2	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	552	.001
	(4)	Number of offender suicides in the past twelve (12) months	0	
	divided by	Average daily population	552	0
	(5)	Number of unexpected natural deaths in the past twelve (12) months	0	
	divided by	Total number of deaths in the same reporting period.	0	0
	(6)	Number of serious medication errors in the past twelve (12) months	0	
5A	None			
6A	None			
7A	None			
7B	None			
7C	None			