COMMISSION ON ACCREDITATION FOR CORRECTIONS

STANDARDS COMPLIANCE REACCREDITATION AUDIT

Arkansas Department of Corrections Cummins Unit Grady, Arkansas

May 4 - 6, 2021

VISITING COMMITTEE MEMBERS

Brian A. Neagle, Chairperson ACA Auditor

Donnis Harris-Chatman ACA Auditor

> Mike Hatten ACA Auditor

A. Introduction

The audit of the Cummins Unit located in Grady, Arkansas was conducted on May 4-6, 2021, by the following team: Brain A. Neagle, Chairperson; Donnis Harris-Chatman, Member; and Mike Hatten, Member/Healthcare.

B.	Facility Demographics	
	Rated Capacity:	1876
	Actual Population:	1911
	Average Daily Population for the last 12 months:	1874
	Average Length of Stay:	4 years, 7 months, 25 days
	Security/Custody Level:	Maximum - Minimum
	Age Range of Offenders:	18years-85 years
	Gender:	male
	Full-Time Staff:	358
	(43) Administrative (41) Support (10) Programs, (228) Secur	rity (22) Other

C. Facility Description

The Cummins Unit is located in Grady Arkansas which is 28 miles southeast of Pine Bluff, Arkansas off Highway 65 in Lincoln County.

In 1902 the state purchased the Cummins and Maple Grove Plantations consisting of 10,000 acres. In the same year, an additional 6,727 acres adjoining the plantations was purchased making the total number of acres 16,727 of what would be the Cummins State Farm. This remained the acreage until 2009 when the state purchased 1,060 adjoining acres and brought the total to 17,787 today. The facility sits on 42 acres and is enclosed by a secure perimeter (lethal fence). The buildings are made of concrete blocks (most buildings), precast concrete (East Building), and metal (Laundry, 17 barracks, South Hall, Garment Factory, and Vinyl Bindery).

At full capacity the unit will house 1850, but is currently at approximately 1650. The units houses minimum, medium, and maximum security inmates.

The main compound consists of 22 barracks located on a hallway that runs east and west and includes our open population and restrictive housing area and with five buildings outside the central building.

The rest of the 17,745 acres consists of garden crops, row crops, a dairy, chicken houses/egg processing, beef herd, cold storage, milk processing, feed mill, a dog kennel, outside maintenance, farm construction and 24 houses and 12 mobile homes are available for qualified staff. Sergeants and above may live on the compound in their own mobile homes if the permission has been granted after a request has been submitted.

The garden has two hot houses. It produced 1,317,000 pounds of vegetables in 2020. The 2020 harvest produced 213,458 bushels of soybeans, 222,801 bushels of rice, 48,513 bushels of wheat, 265,499 bushels of corn, and 35,216 bushels of oats. In addition to the row crops grown on the farm, a cold storage (slaughterhouse) and milk processing plant provides beef and milk to all units in the Arkansas Department of Corrections. There were 79,450 pounds of meat processed and 262,325 gallons of milk processed for 2020. The Cummins Unit Farm has 252 dairy cattle. There are five chicken houses. Currently we have approximately 56,941 chickens. Egg production for 2020 was 8,556,480. The Cummins Farm also has approximately 800 cattle/dry herd, and 34 horses.

D. Pre-Audit Meeting

On May 3rd, 2021, at approx. 8:30PM the team met at the Holiday Inn Express (2903 Pines Mall Drive, Pine Bluff, Arkansas) lobby to discuss the audit schedule and assignments.

The chairperson divided standards into the following groups:

Standards #5-ACI- 1A-01 to 2G-03-BrianA.Neagle, Chairperson Standards #5-ACI- 3A-01 to 5F-08-Donnis Chatman-Harris Standards #5-ACI- 6A-01 to END-Mike Hatten, Healthcare/Member

E. The Audit Process

1. Transportation

The team was escorted to and from the facility by: Shelly Lawrence, Agency ACA Coordinator.

2. Entrance Interview

The audit team arrived at the Cummins Unit at approximately 8:00am on the first day. The team was escorted to the administrative conference room. The team expressed the appreciation of the association for the opportunity to be involved with the Cummins Unit reaccreditation. At this time all introductions were made. The Chairperson discussed the audit schedule for the week including but not limited to the tour, standard review, visitation of the shifts and departmental follow up visits.

At this time, we also discussed any areas of concern involving possible isolations/quarantines and any other COVID related information that may pose any concerns. Warden Culclager was then advised that the audit team would provide a daily informal close out briefings at the end of each audit day. This would be done with staff of her choosing to discuss the progress and any concerns up to that point.

The chairperson stated that it was important the audit team observe normal operations of the facility and requested there not be any changes to operations or procedures unless the audit team was informed. The need to interview personnel on all shifts was also emphasized and a tentative schedule was discussed to accomplish this goal.

The chairperson made a request to staff that all the team's interviews will be conducted without facility staff monitoring. This would ensure the integrity of all the interviews conducted. it was agreed that any monitoring would interfere in any interviews conducted with staff or inmates. The Warden was then asked if there was anything in which she was aware that would interfere with the reaccreditation of the facility? In which her reply was no.

We were then escorted by the Warden Culclager to an area where we met the rest of her team so formal introductions could take place.

The following persons were in attendance:

Superintendent	Aundrea Culclager
Deputy Director	William Straughn
Deputy Warden/Security	Jeremy Andrews
Deputy Warden/Operations	Robert Pierce
Unit Accreditation	Mary Ann Allen
Farm Manager	Mike Hickerson
R/H Classification	Laura Cook
Sergeant	Darren Dill
Director	Dexter Payne
CSO Field	Vernon Robertson
Major Bldg.	Clyde Daniels
Maintenance	Kevin Robbins
FPM	Captain A. Smarjesse
Fire/Safety Coordinator	Lt. Byron Brown
Deputy Director	Dale Reed
Agency ACA/Mgr.	Shelly Lawrence
ARO	J.D. Rana
Cummins Unit	Orin Odom

It was explained that the goal of the visiting team was to be as helpful and nonintrusive as possible during the conduct of the audit. The chairperson emphasized the goals of accreditation toward the efficiency and effectiveness of the correctional systems throughout the United States. The audit schedule and tour route were also discussed at this time.

As a result of postings around the facility announcing the upcoming audit, the staff stated that no inmate, staff or member of the public had asked them to speak to the team.

3. Facility Tour

The team decided that the tour at times would be split up due to the size of the Cummins Unit. Therefore, the tour continued over the first two days of the audit giving a better and more thorough audit. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Superintendent	Aundrea Culclager
Deputy Director	William Straughn
Deputy Warden/Security	Jeremy Andrews
Deputy Director	Dale Reed
ARO	J.D. Rana
Fire/Safety Coordinator	Lt. Byron Brown
Agency ACA Mgr.	Shelly Lawrence
Deputy Warden/Operations	Robert Pierce

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:

Security is a very primary concern at the Cummins Unit. The Unit has a secure perimeter with twelve-foot outer perimeter fence, and twelve-foot interior fence. in between the two fences is a lethal fence that surrounds the entire perimeter. There is double layered razor wire deployed at the top of the interior and exterior fencing. The fence is made up of four zones. If activation occurs, it will alert the Armory Tower. The Tower officer contacts the rover who will check the specific zone. The Armory Tower officer also controls the gates entering the front of the compound and security doors leading into the administration building. Monitoring all radio traffic between the building, farm and field along with transportation, and issuing weapons when authorized are also part of this officer's duties.

There are 58 high mast pole lights located around the perimeter of the facility; 26 high mast pole lights illuminate inside the perimeter and recreation area, and nine high mast pole lights illuminate the parking lot area. Illumination at nighttime is adequate.

The Main Gate serves to provide security from the farm and free line personnel by checking the destination and identity of every vehicle that enters the compound. The officer at this post will contact necessary personnel to clear any visitors or deliveries that are either made to the farm, or any vehicle or service that may have to enter the compound through the Sally Port entrance.

Sally Port Gate serves as the entrance to the compound for all vehicles. All vehicles that enter or exit the Unit are subject to the Heartbeat monitor which can detect a living being. The Sally Port is manned 24hrs a day. Overlooking the Sally Port is the Sally Port Tower which is the second of three manned towers still in use.

Upon arrival, all staff and visitors enter through the outer perimeter front entrance building and must produce a picture ID. all personnel belonging are sent through an X-ray machine and searched. Everyone then is required to step on a body scanner for additional search. Once that is complete, they will pass through a metal detector. All visitors are escorted and must display a visitors pass.

The Master Control is manned 24hrs a day. Staff there controls the distribution of keys to various locations of the facility. Keys to all gates, emergency keys and keys to all barracks and security doors are located inside Master Control. The fire alarm systems are also monitored from this location.

The team noted throughout the tour that each security post had post orders. to which all staff assigned were well aware of their specific responsibilities and duties.

The movement of inmates is closely controlled by staff and monitored by Master Control. The movement is controlled by the assigned building schedule, pass system, and escort. Metal detectors are located at four entrances to the main building that inmates must pass through before leaving the building and upon their return to the barracks. The facility conducts eight formal counts within a 24-hour period. informal counts are also conducted throughout the day by officers on post to ensure accountability for all inmates.

Key Control

Key Control is monitored by the Key Control Officer. Facility keys are secured, issued and controlled by the Key Control Officer. Keys are issued from the Armory and the Armory Officer serves as the Alternate Key Control Officer. The Key Control Officer performs daily key inventories. Spare keys, originals, back up key rings and exact sets are kept in the armory that is restricted to authorized staff personnel only.

Armory

The armory is located outside the facility's secured area on the north side of the facility by the main entrance building. A full time armory officer is assigned to control weapons and chemical munitions. There is a clearing barrel outside the perimeter fence near the main entrance. The armory is secured by a fence and a steel door, there is a window inside the fence for issuing or receiving items; the armory is also secured by a solid steel interior door which is closed when items are not being received or issued.

Entry into the armory is restricted by the use of an access roster. The Armory is also observed from the main armory tower. The audit team did inventory items in the armory along with log sheets and found no discrepancies.

Tool Control

There are strict tool control procedures in place at the facility. Tools are located in the maintenance room, clothing room, housekeeping, medical, Food Service kitchens, and farm areas. All tools are in locked cabinets or cages displayed on shadow boards. All tools that are classified as type A tools can only be issued by the supervisor and must be under close observation.

All tools are inventoried monthly with a report being submitted to the Tool Control Officer which must be received by the last day of the month. Broken tools are to be submitted by the department supervisors with the broken tool and accompanied by the appropriate paperwork to the Tool Control Officer. All tools are labeled by etching the appropriate number on the tool. The issuance of tools is done by the area supervisor or designee. Staff requesting a tool is required to list the tool on the area appropriate tool Control Logbook.

During the course of the audit, team members did spot checks in the various areas that contained tools and found no discrepancies.

Execution Chamber

Inmates who are on death row are kept three to five days prior to the execution in one of the quiet cells in the Punitive Housing. During this time, the inmate is allowed visitation prior to his execution. The day of execution, the inmate receives a visit from spiritual advisors. When it is time for the execution, the inmate is taken to the Execution chamber. There are visitors (up to nine random residents), attorneys, victim family members and three media reporters present. Once the inmate is ready for execution, the curtains are opened with everyone seated. The Director reads the order form the Governor's office, then the execution begins. No one knows who is performing the execution except for the Director.

Environmental Conditions:

The Environmental conditions in all the housing units were good. The facility in general has a good inmate climate, with good inmate/staff relations. The temperature of the facility was within normal comfort range. Noise levels throughout the facility were within acceptable ranges. Inmate housing areas were clean, property neatly stored, and inmate uniforms were clean and in good repair.

All interior fixtures observed were in good working order. The housing units that were observed had adequate ventilation and there were no noticeable odors. lighting levels were well within standards.

The general condition of the entire facility was clean and in fairly good repair. all housing units have an appropriate number of showers, sinks and toilets which are easily accessible to all inmates. The classification system appears to work well with the placement of inmates in the various housing units.

Sanitation:

The facility has placed a very high priority on sanitation especially since this audit was being conducted during the time of the COVID Pandemic. But it was also evident to the audit team that the level of cleanliness has been and will continue to be a focus of the facility. The level of sanitation observed by the team was well within standards. The facility is continuously being cleaned. Inmates under the direct supervision of staff, provide sanitation services. Weekly Safety and Sanitation inspections are conducted by appropriate staff and are documented on inspection forms.

Chemical control was good throughout the housing units as well as the control of other cleaning materials. The appropriate Material Safety Data Sheets were at locations where chemicals were being stored. Housekeeping plans are utilized and inspections are conducted as required. 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 outside vendors also provide services such as sewage, waste management and pest control. A current analysis of potable drinking water was on file.

Fire Safety:

The Fire/Safety Officer is in charge of all fire/safety issues and ensuring compliance with all fire and safety inspections. Smoke detectors, heat detectors, standpipes, fire extinguishers, hoses and hydrants provide fire protection throughout the facility. An Ansul hood suppression is located in the kitchen.

The fire suppression systems are checked regularly and are in good working order. There are over 402 fire extinguishers, 14 fire hydrants along with 3 standpipes and hoses along with fire department connections. During our tour of the facility spot checks were done to ensure monthly inspections were being made to the fire extinguishers. In addition, eye wash stations were observed for the same purpose. No deficiencies were observed.

Staff that was interviewed were knowledgeable of the systems and procedures to be followed in the event of an emergency. Emergency exit signs were appropriately posted along with evacuation plans.

Actual fire drills are conducted quarterly in all areas and all shifts. The only exception is segregation which conducts simulated drills, to which staff is aware of the plan for the immediate release of inmates.

The Cummins Unit has three separate fire departments that would respond in case of an emergency. The Cummins Volunteer Fire department which is located on the unit's grounds. The next two are the Grady Fire Department and the Gould Fire Department. Both of those departments are each approximately 10 miles away, with a response time of approximately 20 minutes. Annual fire inspections are conducted by the States Fire Inspector.

Toxic, caustic, flammable materials were properly stored. All fire equipment was maintained in good condition. There is also a detailed fire emergency plan in place. Fire and Safety inspections are conducted both weekly and monthly. The facility contracts with Fire Extinguishers Sales & Services along with Johnson Control Fire Protection for maintenance and pressure testing.

Food Service:

The Food Services Manager oversees the operation of the kitchen. The kitchen operation is maintained by both staff and inmates. There are nine full time staff along with inmate workers. All inmate workers receive a pre-assignment exam and are then medically approved by a physician. Inmates are trained prior to assignment and receive in-service training after assignment. Staff members also receive monthly training.

The Mess Hall has a capacity of 336 inmates plus 4 handicap seats. The Eastside dining room holds up to 164 inmates with 2 handicap seats. The Westside dining room holds up to 172 inmates with 2 handicap seats. Inmates are given 20 minutes each to eat per meal.

During the tour we inspected the Food Service areas where all rooms and equipment were checked. The temperatures of the freezers and refrigerators were well within standards. All inventoried items were in place or checked out and accounted for. Although the areas checked were clean and in order, auditors did find some areas of minor concern. These areas of concern were immediately rectified and were found to be no issue upon revisit.

The visiting committee did sample an inmate meal. The meal was found to be nutritious, respectfully hot, and appropriately seasoned.

The audit team during the course of the audit did not receive any complaints out of the ordinary from any inmate about the quality of the meals.

Medical Care

The Arkansas Department of Corrections (ADC) Cummins Unit provides sevenday-a-week clinical and infirmary care through its contracted medical Vendor, WellPath, Inc. The medical department provides ambulatory medical care: Dental; and Mental Health Services onsite. There is a six bed infirmary for those patients requiring overnight, or ongoing treatment.

There are three examination rooms located in the medical department. Medical exams are conducted in a private, secured setting. Education material is provided to those offenders needing it (IDDM; heart healthy diets; etc.) Other educational material was freely visible and obtainable in the forms of pamphlets. Medical Staff are licensed to practice in their respective areas of practice. Licenses were reviewed as part of the audit process and found to be current.

The current WellPath staffing level is as follows:

- MD/MEDICAL DIRECTOR 1 Dr. James Beck
- Health Service Administrator Carol Chisom, RN
- Director of Nursing Kristen Marter, BSN RN
- Assistant Director of Nursing Felicia Spencer, RN
- Mid-Level Providers 2
- Psychiatrist 1
- Mental Health Professional 1
- RN-4
- LPN 8
- CNA 4
- Dentist -1
- Dental Hygienist 1
- Dental Assistant 1

Vacant positions include:

- 1 part-time LPN
- 4 full-time LPN (current being filled with Agency Nurses)

Patients requiring emergent offsite transfer are transferred via Emergency Medical Services (EMS) to Memorial Hospital at Dumas, or to the Ouachita River Unit (ORU) located within the Arkansas Department of Corrections.

During the audit approximately 35 offenders were interviewed, all were complementary of medical with none voicing any complaints. All reported timely sick call response, and reported receiving their medications as ordered and on time.

An interview was conducted with a Chronic Care/Infection Control Nurse. She is responsible for immunizations, TB testing, and Chronic Care Management. She reported approximately 59% of the Inmate Population choose to receive the Pfizer Covid-19 vaccine. This number held true for the workforce vaccination rate also. There were no active Covid-19 cases during our visit, nor were any offenders in isolation. Everyone entering the facility had their temperature taken via an automated thermometer, and was questioned as to signs and symptoms.

Cummins Unit has an ADA Coordinator and a Disability Placement Program (DDP) that provides for accessible housing, showers, beds with grab bars, accessible day room tables and CPAP accommodating housing. There are TDD phones available. However, The Cummins Unit does not house severely disable offenders requiring special management. Offenders requiring care beyond that available at Cummins Unit are transferred to the Ouachita River Unit (ORU), where specialized housing is available.

During the audit 3 AED's were reviewed and all were secure and inspected. X-Ray is provided via mobile X-ray. Lab is drawn on site and sent out to LabCorp for analysis. Oxygen is available via portable oxygen tanks and oxygen concentrators. Sick call requests are submitted via kiosks located in the housing units that go directly to medical. These are triaged by an RN within 24 hours and requests requiring more extensive service are referred to a Medical Provider and seen within 7 days (Normally the next day).

Upon admittance to the Cummins Unit, Offenders receive Offender Orientation including an Offender handbook to aid the individual in their adjustment to correctional living. This documentation contains information regarding medical, mental health and dental services. Such information as the medical sick all procedures; the co-pay; diets; Keep on person mediations (KOP); OTC medications available; medication administration, to name a few are included in this orientation packet.

Medications

Medications are stored in medication rooms secured behind double locks. Nursing staff administer medications by pill pass windows to general population offenders three times a day. Restrictive Housing offenders are administered medications cell side by Nurses.

Medications are documented in an electronic Medication Administration Record (MAR). Medication pass was viewed without incident. Narcotics were accounted for using a perpetual inventory system. Wasted/refused medications were destroyed in accordance with DEA regulations and according to written policy and procedure.

Mental Health

Mental Health is provided by ADC. The following staff make up the Mental Health Department:

- 1 Rehab. Program Manager Jonathan Wiscaver
- 1 Administrative Specialist
- 1 Psychologist
- 6 Mental Health Advisors
- 2 LCSW
- 1 Psychiatrist provided by WellPath

During the audit the Caseload at Cummins was 187 all on medications, with 31 being diagnosed as severely mentally ill (SMI) all being managed on medication. Offenders who decompensate beyond the capability of the Cummins Unit staff are transferred via a Doctor's order to the ORU specialty care unit. There were three offenders on suicide precautions (ideation) during the audit. Documentation was in order, and there was a current interdisciplinary treatment plan being followed.

Recreation:

There are three full time staff in the recreation department. Recreation activities are available to inmates seven days a week, weather permitting. The facility contains two outside recreation yards for the inmate population. The yards are secured by cross fencing. The yards are also secured by security personnel stationed inside and outside the perimeter fence by an armed perimeter rover. Activities available to the inmates on the yards include; handball, volleyball, soft ball, basketball, soccer, horse shoes, disc golf and a walking track along with isometric weight stations. The facility also has an enclosed gym that offers basketball, table tennis, isometric weight stations, and shuffleboard. There are also board games available including chess, checkers, and dominoes.

Social Services:

The Arkansas Department of Corrections "Think Legacy Reentry Program" has evolved from individual unit programs to a standardized system wide reentry program supported by a specific Administrative Directive (AD 2017-13) and Standard Operating Procedures. The AD and SOP ensure that best practices are incorporated, and all stakeholders clearly understand implementation and management of best practices. The Think Legacy Program unit is defined as a unit that provides housing, ADC staff facilitators, citizen volunteers, and trained security staff for the facilitation of a 24-week curriculum delivered in a structured environment. The "Think Legacy Reentry 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 must be ongoing.

Another component of the Think Legacy Reentry provides is the use of prior offenders that were once incarcerated.

There is one program established in 1985, by a group of inmates to simply assist "New Arrivals" with adjusting to the realities of prison life as a way of survival. This program is known as M.M.T. (Making the Transition) includes Alcohol/Drug Abuse/Chemical Dependency, Goal Setting and Family Values, Peer Pressure and Behavioral thinking, Prison Life and Criminal Behavior and Stinking Thinking.

Religious Programming:

There are currently three full time Chaplains on staff at the Cummins Unit to counsel inmates on numerous personal, family and religious matters. Catholic, Islamic and Protestant Services are conducted at the Unit on a regular basis. The Chaplains visit the barracks on a weekly basis counseling and dispersing literature with inmates and visit segregation 4 times per week.

The Chaplains coordinate pastoral visits between inmates and free world pastors and work with 15 certified religious assistants to meet a multitude of religious needs. A total of three Revival Services are conducted each year to encourage inmates to look to spiritual areas of their lives for strength and the power to change.

Principles and Applications for Life (PAL) Program is also available. This is a 12-month program. Inmates are required to live in the PAL Barracks for the duration of the program. Certificates will be issued at the completion of the course. The purpose for the PAL Program is an attempt to create better morale among the inmates, reduce disciplinary actions, and prepare the inmate to be a productive citizen. The PAL Program focuses on incarcerated men as holistic individuals who have psychological, educational, physical and spiritual needs. The PAL Program seeks to address, through educational and group sessions, the spiritual element of a person's life. The curriculum used is based on Christian principles. Concepts and principles will be taught using the Old and New Testaments of the Bible. All faith traditions are welcome and encouraged to apply.

Education:

The Cummins Unit School is part of the Arkansas Department of Correction School District. There are four classes, one basic level, one mid-level, one Pre-GED level, and one GED level. English as a Second Language (ESL), Title 1 for adolescents, and Homebound for students who are unable to attend a traditional classroom are offered as well.

There are currently five licensed teachers, one teacher's aide, and one principal employed at the facility. The teacher and teacher's aide only come to the Unit on Thursdays. The rest of their time is spent at the Varner unit. A new school building was completed in 2019. For the 2020-2021 school year there are approximately 230 students enrolled in school. As per Arkansas Law, all incarcerated individuals who do not already have a verified high school diploma or GED are eligible for school, which is a mandatory program. inmate students are expected to progress through the levels and are tested quarterly to determine their academic growth. Initial placement is based on the threading level of each student.

Vocational Education:

The Cummins Unit does not have a vocational education.

Offender Work programs:

At a facility this large with industries and a huge agriculture operation every inmate able to work can be assigned a job or be enrolled in an education program. Jobs available include the list below:

- Chapel
- Commissary
- Education & Vocational Programs
- Inmate Tutors
- Food Service
- Hobby Craft
- Library
- Maintenance
- Medical Services
- Sanitation
- Barracks & Hall Porters
- Inside & Outside Maintenance
- Farm Workers Dairy, Beef Herd, Poultry, Dog Kennel, Horse Barn
- Garment/Vinyl Bindery

The garment factories can utilize up to approximately 200 inmates in their facility. Inmate clothing and jackets are put together in this facility. The garment factory also makes jumpsuits and clothing for inmate wear in city and county facilities.

There are currently two hot houses at the Cummins Unit Farming Operations. Plants are started here during the winter months for planting by the squads in the spring. Each house can hold approximately 665,000 plants.

There are ten grain storage bins on the farm to hold rice crops when harvested. These have the capacity of 24,000 bushels per bin.

The feed mill on the farm processes and produces feed for all livestock. The feed is processed and shipped to other units. There are approximately one million pounds of feed processed per month to feed horses, beef herd, dairy cattle and chickens.

The Farm garage maintains all the farm equipment used in farming operations. The inmates also provide maintenance for the trucks and any other vehicle used on the farm. This operation provides practical experience for those inmates interested in diesel mechanics and work on farm equipment.

The Dry Beef Herd runs around 772 head of cattle that graze on the farmland.

The milk processing facility opened in April 2006. This state-of-the-art processing facility not only produces milk for the Cummins Unit, but every unit throughout ADC. The dairy crew milks twice a day. Inmates are taught how to care for the cows and how to process milk in sanitary conditions. In 2020, 262,325 gallons of milk was provided for processing from the dairy.

Inmates assigned to farms are given the opportunity to attend Farrier School conducted at the Cummins Unit by a Master Farrier. They learn how to properly shoe a horse which could be useful upon their release.

Mail

Mail received by this unit shall be delivered within 24 hours during normal workdays and packages shall be delivered within 48 hours of receipt. This does not apply to those inmates in punitive segregation. Inmates in punitive segregation will receive first class mail in the same time frame, but will not receive anything other than first class mail until after release from punitive segregation. Mail drop boxes are located on the West and East Hall in front of the chow halls and at East #3 Riot Gate coming from 13/15 Barracks.

Visitation:

Inmates are allowed to visit immediate family members for a period of up to 30 days after the inmate completes intake and is received at their initial unit of assignment until such time as a permanent visitation list is established. The family relationship must be validated by inmate information on record. Immediate family members are defined as the inmate's father, mother, sisters, brothers, spouse, children, grandchildren, and any other person whose relationship with the inmate has been verified as that of a parent/guardian such as mother-in-law, father-in-law, grandparents, aunts or uncles, or whose relationship has been verified as that of a child/ward such as a foster child, sonin-law, daughter-in-law, niece or nephew. The list of immediate family members includes stepfamily members and half siblings. After the initial 30-day period at the initial unit of assignment, only visitors on a permanent visitation list will be allowed to visit. Inmates will receive information regarding procedures governing visitation within the first week of arrival at each facility. All Class I inmates housed in general population will be permitted weekly Saturday and Sunday visits for a maximum of 4 or 5 visits a month depending on the number of Saturdays and Sundays, All Class II, III and IV inmates housed in general population will be permitted two (2) visits a month, either the first and third Saturday of the month or the second and fourth Saturday of the month as determined by unit schedule.

Restrictive Housing/Protective Custody are only allowed to visit by video and there are only a total of 10 video visitations per day.

Library Services:

The Cummins Unit 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.

The General Library is a recreational reading library with inter-library loan available through our local library systems. The general library currently has over 7500 books. Magazines and periodicals are also available for viewing. The books are reviewed annually, and new volumes are added on an ongoing basis.

Laundry Services:

Staff and inmates operate the laundry. There are two full time staff, along with eighteen inmate workers. It is equipped with seven large commercial washers and seven large commercial dryers. All the washers and dryers appeared to be in good working order. The laundry area was very clean and well organized. Dryer vents are cleaned regularly.

Uniforms will be cleaned daily with the exception of Sunday and holidays. Personal laundry bags consisting of state issued items, such as socks, underwear, etc are laundered on days designated by the housing unit. Clothing items will be laundered on the days designated for their barracks and are marked with the inmate's name and an Arkansas Department of Corrections number, so they receive their own clean clothes back from the laundry. All chemicals are dispersed and inventoried daily using a perpetual inventory sheet.

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 Main Conference room to review the accreditation files and evaluate compliance levels of the policies and procedures. The facility has no notices of non-compliance with local, state, or federal laws or regulations.

1. Litigation

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

2. Significant Incidents/Outcome Measures

The audit team reviewed and discussed the Significant Incident Summary and Outcome Measures worksheet and found the numbers reflected in the report consistent with the overall mission and security level of the facility.

3. Departmental Visits

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

Department Visited	Person(s) Contacted
Death Chamber	Major C. Daniels
Kitchen	Captain A. Smarjesse
School	Principal David Webb
Chapel	Chaplain Jim Babcock
Restrictive Housing	Captain I. Wade
Medical	Carol Ann Chisom -HSA
Mail Room	Tina Gibson

4. Shifts

Shifts at the Cummins Unit are divided into two main shifts: 6:00 a.m. to 6:00 p.m. and 6:00 p.m. to 6:00 a.m. There are other shifts that overlap the two main shifts.

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

The team was present at the facility during the day shift on May 4th. On the first day of the audit, we toured the facility and we visited with both staff and inmates as we moved about the facility. The team observed all programs that were in progress, inmate dining and recreation along with normal operations. Shift members were very professional, understood policy and procedure and were familiar with their post orders.

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

The team was present at the facility during the evening shift. Auditors were present and spoke with staff members at their shift briefing and also again as they came off shift. Again, the staff was very professional and well maintained. The staff and inmates appeared to understand the importance of the accreditation process and seemed motivated to do a good job.

- 5. Status of Previously Non-compliant Standards/Plans of Action
 - Standard #5-ACI-1D-05 regarding vacancy rate is still noncompliant.
 - Standard #5-ACI-1D-10 regarding new employee orientation is now compliant.
 - Standard #5-ACI-2C-01 regarding unencumbered space is still noncompliant.
 - Standard #5-ACI-2C-02 regarding unencumbered space in single cells is still noncompliant.
 - Standard #5-ACI-2C-03 regarding inmate sleeping areas is now compliant.
 - Standard #5-ACI-2C-04 regarding dayroom space is still noncompliant.
 - Standard #5-ACI-4B-06-04 regarding unencumbered space in restrictive housing is still noncompliant.

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

During the course of the audit, the team spoke with approximately 97 inmates. We received no complaints of a repetitive nature regarding the facility. Any complaints were of normal concern. The inmate/staff interaction was good. In general, the inmates interviewed all reported that they are being treated fairly by staff and their basic needs, including food and medical were being met. The inmates have adequate access to telephones, mail and staff as needed.

Staff was observed interacting with the inmate population in almost all areas visited. There were no major consistent complaints received by the audit team. Auditors did observe inmates engage staff with basic concerns and questions. In turn we observed staff doing what they could to rectify the issue. The inmates that were interviewed reported the facility was as safe as it could be. They also stated staff treated them fairly and respectfully.

2. Staff Interviews

The team had the pleasure of speaking with a staff of dedicated, knowledgeable professionals. The audit team spoke with approximately 79 staff members. The staff was professional, motivated and job knowledgeable. They stated that they enjoyed working at the facility and felt they were in a fairly safe work environment and were respected by the administration. They feel the training they have received is adequate and efficient which enables them to perform their duties with confidence.

Staff spoke highly and openly of the Warden and their supervisors. They were polite, cooperative and conducted themselves in a highly professional manner. There was a normal working correlation between the departments and the communication flowed freely.

There were three letters submitted to the ACA related to this facility. All inmates were individually contacted in regard to their correspondence to set up a time for a one on one interview with the Chairperson. All the inmates stated that they did not wish to speak with the ACA representative and all signed statements stating the same. Statements were forwarded to ACA.

H. Exit Discussion

The exit interview was held at 11:00am on May 6th, 2021, in the Training Building. The staff present was the same as in the In-Brief.

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, 5 th Edition		
Supplement	N/A		
Facility/Program	Arkansas Department of Corrections Cummins Unit		
Audit Dates	May 4 – 6, 2021		
Auditor(s)	Brian A. Neagle Donnis Harris-Chatman Mike Hatten		
	MANDATORY	NON-MANDATORY	
Number of Standards in Manual	64	NON-MANDATORY 509	
Number of Standards in Manual Number Not Applicable			
	64	509	
Number Not Applicable	64 7	509 66	
Number Not Applicable Number Applicable	64 7 57	509 66 443	

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

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections Cummins Unit Grady, Arkansas

May 4 - 6, 2021

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

Standard #5-ACI-1C-05

THE WARDEN/SUPERINTENDENT CAN DOCUMENT THAT THE OVERALL VACANCY RATE AMONG THE STAFF POSITIONS AUTHORIZED FOR WORKING DIRECTLY WITH INMATES DOES NOT EXCEED TEN PERCENT FOR ANY 18-MONTH PERIOD.

FINDINGS:

The Cummins Unit did not meet the 10% vacancy rate for any 18 month period.

AGENCY RESPONSE:

Plan of Action

We will challenge all staff at the Cummins Unit to recruit prospective employees. We will also extend an open opportunity five days a week for applicants to become potential new employees by directly visiting the Cummins Unit compound. The Cummins Unit employees will also form a recruitment team that will work diligently and consistently to assist the unit with recruitment efforts through various methods such as conducting quarterly job fairs in the community. The Arkansas Department of Correction has a website (www.arcareers.arkansas.gov) that lists all available jobs and an on-line application process to aid all interested parties in seeking employment at the ADC.

Task

- a. Retain Staff
- b. Process Available Applicants
- c. Mentor all staff in developing the skills needed for a career with the ADC

Responsible Agency

- a. Human Resource Administrator
- b. Human Resource Staff
- c. Warden and Human Resource Manager

Assigned Staff

- a. Human Resource Administration Staff
- b. Unit Human Resource Manager
- c. Unit Recruitment Team

Anticipated Completion Date

ACA Audit 2024 or sooner.

AUDITOR'S RESPONSE:

The team concurs with the Corrective Action Plan

Standard #5-ACI-2C-01

CELLS/ROOMS USED FOR HOUSING INMATES SHALL PROVIDE AT A MINIMUM, 25 SQUARE FEET OF UNENCUMBERED SPACE PER OCCUPANT. UNENCUMBERED SPACE IS USABLE SPACE THAT IS NOT ENCUMBERED BY FURNISHING OR FIXTURES. AT LEAST ONE DIMENSION OF THE UNENCUMBERED SPACE IS NO LESS THAN SEVEN FEET. IN DETERMINING UNENCUMBERED SPACE IN THE CELL OR ROOM, THE TOTAL SQUARE FOOTAGE IS OBTAINED AND THE SQUARE FOOTAGE OF FIXTURES AND EQUIPMENT IS SUBTRACTED. ALL FIXTURES AND EQUIPMENT MUST BE IN OPERATIONAL POSITION.

FINDINGS:

Some of the cells at the Cummins Unit do not meet the requirement for a minimum of 25 feet of unencumbered space per occupant.

AGENCY RESPONSE:

Waiver Request

The Arkansas Department of Correction became accredited with the American Correctional Association in 1989. Barracks 13, 14, 15, and 16 were completed in 1979 before becoming accredited in 1996, therefore ACA standards were not taken into consideration during the planning and construction phase of this part of the facility. It would be cost prohibitive to try and come into compliance with this standard, therefore we are requesting a waiver for standard 5-ACI-2C-01.

AUDITOR'S RESPONSE:

Due to the age and physical layout of Cummins Unit, the team concurs with the request of a waiver for this standard. It should be noted that there was zero complaints concerning this standard.

Standard #5-ACI-2C-02

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT SINGLE-OCCUPANCY CELLS/ROOMS SHALL BE AVAILABLE, WHEN INDICATED, FOR THE FOLLOWING:

- INMATES WITH SEVERE MEDICAL DISABILITIES
- INMATES SUFFERING FROM SERIOUS MENTAL ILLNESS
- SEXUAL PREDATORS
- INMATES LIKELY TO BE EXPLOITED OR VICTIMIZED BY OTHERS
- INMATES WHO HAVE OTHER SPECIAL NEEDS FOR SINGLE HOUSING

WHEN CONFINEMENT EXCEEDS 10-HOURS A DAY, THERE IS AT LEAST 80 SQUARE FEET OF TOTAL FLOOR SPACE, OF WHICH 35-SQUARE FEET IS UNENCUMBERED SPACE.

FINDINGS:

The Cummins Unit single cell occupancy does not meet the ACA requirement of 80 square feet of total floor space, of which 35 square feet is unencumbered space.

FACILITY RESPONSE:

Waiver Request

The Arkansas Department of Correction became accredited with the American Correctional Association in 1989. Barracks 13, 14, 15, and 16 were completed in 1979 before becoming accredited in 1996, therefore ACA standards were not taken into consideration during the planning and construction phase of this part of the facility. It would be cost prohibitive to come into compliance with this standard. Therefore, we are requesting a waiver for standard 5-ACI-2C-02.

AUDITOR'S RESPONSE:

Due to the age and physical layout of Cummins Unit, the team concurs with the request of a waiver for this standard. It should be noted that there were zero complaints concerning this standard.

Standard #5-ACI-2C-04

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 Cummins Unit day rooms do not meet the requirement of a minimum of 35 square feet of space per inmate.

FACILITY RESPONSE:

Waiver Request

The Cummins Unit was constructed in 1902. Since then, there have been drastic changes made to enhance the quality of life for the inmate population. The barracks were renovated from large 150-200 man open barracks to smaller barracks that afforded the addition of individual dayrooms along with air conditioning, televisions, and the inmate telephone system. During the hours of 7:00 a.m. (wake-up) through 4:30 p.m. (end of workday), the dayroom is only utilized with the minimum number of inmates. It was noted by officers, the majority of the inmates spend the evening hours on their respective racks reading, writing letters or visiting with one another. Now the inmates are able to tap into the program on the television through their radios and headphones and hear what is going on without being in the dayroom to watch the television, which some inmates prefer. May it be noted, that on the "A" side, the television might be viewed from their racks. On the "B" side approximately 50% of the population can view the television from their racks. May it also be noted, a good majority of the inmates who are physically able to work, go out each day to their respective jobs. For those who cannot work, activities outside of their barracks include, church call, gym call, yard call, library call, commissary call and school, The Think Legacy Program and the Principles and Applications for Life Program (PAL). To try to come into compliance with this standard would be cost prohibitive. For this reason, we are requesting a waiver for standard 5ACI-4C-04.

AUDITOR'S RESPONSE:

Due to the age and physical layout of Cummins Unit, the team concurs with the request of a waiver for this standard. It should be noted that there were 0 complaints from inmates on this standard.

Standard #5-ACI-4B-06

ALL CELLS/ROOMS IN RESTRICTIVE HOUSING PROVIDE A MINIMUM OF 80 SQUARE FEET AND SHALL PROVIDE 35 SQUARE FEET OF UNENCUMBERED SPACE FOR THE FIRST OCCUPANT AND 25 SQUARE FEET OF UNENCUMBERED SPACE FOR EACH ADDITIONAL OCCUPANT

FINDINGS:

The Cummins Unit does not meet the requirements of providing a minimum of 80 square feet and shall provide 35 square feet of unencumbered space for the first occupant and 25 square feet of unencumbered space for each additional occupant.

FACILITY RESPONSE:

Waiver Request

The Arkansas Department of Correction – Cummins Unit Segregation (Restrictive Housing) barracks are Barracks 14, 16 which were completed in 1979 and the East Building which was completed in 1970. Standards were not known or taken into consideration during the planning or construction phases of these areas, since the Arkansas Department of Correction did not get involved with the accreditation process until 1989. It would be cost prohibitive to try and come into compliance with this standard, therefore, we are requesting a waiver for standard 5ACI-4B-06

AUDITOR'S RESPONSE:

Due to the age and physical layout of Cummins Unit, the team concurs with the request of a waiver for this standard.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections Cummins Unit Grady, Arkansas

May 4 - 6, 2021

Visiting Committee Findings

Mandatory Standards

Not Applicable

Standard #5-ACI-5B-12

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

FINDINGS:

The Cummins Unit does not house adjudicated delinquent offenders or youth.

Standard #5-ACI-6A-10

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 Cummins Unit does not house female inmates.

Standard #5-ACI-6A-21

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 TREATMENTOFFENDERS 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 Cummins Unit is not a reception center. The Cummins Unit receives inmates from intra-system transfer.

Standard # 5-ACI-6A-25

A COMPREHENSIVE HEALTH APPRAISAL FOR EACH INMATE IS COMPLETED BY QUALIFIED HEALTH CARE PERSONNEL WITHIN 14 DAYS AFTER ARRIVAL AT THE FACILITY. IF THERE IS DOCUMENTED EVIDENCE OF A HEALTH APPRAISAL AND EVIDENCE OF REVIEW BY QUALIFIED STAFF WITHIN THE PREVIOUS 90 DAYS, A NEW HEALTH APPRAISAL IS NOT REQUIRED EXCEPT AS DETERMINED BY THE DESIGNATED HEALTH AUTHORITY. HEALTH APPRAISAL DATA COLLECTION AND RECORDING INCLUDES THE FOLLOWING:

- 1. A UNIFORM PROCESS AS DETERMINED BY THE HEALTH AUTHORITY
- 2. DOCUMENTATION OF REVIEW OF THE EARLIER RECEIVING SCREENING
- 3. RECORDING OF HEIGHT, WEIGHT, PULSE, BLOOD PRESSURE, AND TEMPERATURE BY HEALTH-TRAINED OR QUALIFIED HEALTH PERSONNEL
- 4. COLLECTION OF ADDITIONAL DATA TO COMPLETE THE MEDICAL, DENTAL, MENTAL HEALTH, AND IMMUNIZATION HISTORIES BY HEALTH-TRAINED OR QUALIFIED HEALTH PERSONNEL
- 5. MEDICAL EXAMINATION, INCLUDING REVIEW OF MENTAL AND DENTAL STATUS BY QUALIFIED HEALTH PERSONNEL
- 6. LABORATORY AND /OR DIAGNOSTIC TESTS TO DETECT COMMUNICABLE DISEASE, INCLUDING VENEREAL DISEASE AND TUBERCULOSIS
- 7. OTHER TESTS AND EXAMINATIONS AS APPROPRIATE
- 8. DEVELOPMENT AND IMPLEMENTATION OF TREATMENT PLAN, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION
- 9. INITIATION OF THERAPY, WHEN APPROPRIATE
- 10. REVIEW OF THE RESULTS OF THE MEDICAL EXAMINATION, TESTS, AND IDENTIFICATION OF PROBLEMS BY A PHYSICIAN OR MID-LEVEL PRACTITIONER, AS ALLOWED BY LAW.

The Cummins Unit is not an intake unit. Intake for new commitments is at Ouachita River Correctional Unit

Standard #5-ACI-6A-32

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 PERSONSPECIFIC 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 Cummins Unit is not a reception center. The Cummins Unit receive inmates from intra-system transfer.

Standard #5-ACI-6A-41

WITHDRAWAL MANAGEMENT IS DONE ONLY UNDER MEDICAL SUPERVISION IN ACCORDANCE WITH LOCAL, STATE, AND FEDERAL LAWS. WITHDRAWAL MANAGEMENT FROM ALCOHOL, OPIATES, HYPNOTICS, STIMULANTS, AND SEDATIVE HYPNOTIC DRUG IS CONDUCTED UNDER MEDICAL SUPERVISION WHEN PERFORMED AT THE FACILITY OR IS CONDUCTED IN A HOSPITAL OR COMMUNITY TREATMENT CENTER. SPECIFIC GUIDELINES ARE FOLLOWED FOR THE TREATMENT AND OBSERVATION OF INDIVIDUALS MANIFESTING MILD OR MODERATE SYMPTOMS OF INTOXICATION OR WITHDRAWAL FROM ALCOHOL AND OTHER DRUGS. OFFENDERS EXPERIENCING SEVERE, LIFE-THREATENING INTOXICATION(AN OVERDOSE), OR WITHDRAWAL ARE TRANSFERRED UNDER APPROPRIATE SECURITY CONDITIONS TO A FACILITY WHERE SPECIALIZED CARE IS AVAILABLE.

FINDINGS:

The Cummins Unit does not conduct detoxification.

Standard #5ACI-4A-01

WHEN AN OFFENDER IS TRANSFERRED TO SPECIAL MANAGEMENT HOUSING, HEALTH CARE STAFF WILL BE INFORMED IMMEDIATELY AND WILL PROVIDE A SCREENING AND REVIEW AS INDICATED BY THE PROTOCOLS ESTABLISHED BY THE HEALTH AUTHORITY. UNLESS MEDICAL ATTENTION IS NEEDED MORE FREQUENTLY, EACH OFFENDER IN SEGREGATION RECEIVES A DAILY VISIT FROM QUALIFIED HEALTH CARE PROFESSIONAL. THE VISIT ENSURES THAT THE OFFENDERS HAVE ACCESS TO THE HEALTH CARE SYSTEM. THE PRESENCE OF A HEALTH CARE PROVIDER IN SEGREGATION IS ANNOUNCED AND RECORDED. THE FREQUENCY OF PHYSICIAN VISITS TO SPECIAL MANAGEMENT HOUSING IS DETERMINED BY HEALTH AUTHORITY.

FINDINGS:

The Cummings Unit does not house Special Management inmates. Special Management inmates are housed at the Varner Super Max.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections Cummins Unit Grady, Arkansas

May 4 - 6, 2021

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

Standard #5-ACI-1B-24

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 #5-ACI-1C-12

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT EMPLOYEES COVERED BY MERIT SYSTEMS, CIVIL SERVICE REGULATIONS, OR UNION CONTRACT ARE APPOINTED INITIALLY FOR A PROBATIONARY TERM OF AT LEAST SIX MONTHS BUT NO LONGER THAN ONE YEAR.

FINDINGS:

The Cummins Unit does not provide civil service employment or contract with union representatives or members.

Standard #5-ACI-2B-04

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

The Cummins Unit has not had any new single-cell construction after January 1, 1990.

Standard #5-ACI-2C-06

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

FINDINGS:

The Cummins Unit was constructed prior to June 2014.

Standard #5-ACI-2C-08

(NEW CONSTRUCTION AFTER JUNE 2014). INMATES HAVE ACCESS TO OPERA-BLE 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 Cummins Unit was constructed prior to June 2014.

Standard #5-ACI-2C-10

(NEW CONSTRUCTION AFTER JUNE 2014). INMATES HAVE ACCESS TO OPERA-BLE SHOWERS WITH TEMPERATURE – CONTROLLED HOT AND COLD RUNNING WATER, AT A MINIMUM RATIO OF 1 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

The Cummins Unit was constructed prior to June 2014.

Standard #5-ACI-2C-12

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 Cummins Unit does not house inmates that cannot perform basic life functions.

Standard #5-ACI-2D-04

ALL INMATE ROOMS/CELLS PROVIDE INMATES WITH ACCESS TO NATURAL LIGHT BY MEANS OF AT LEAST THREE SQUARE FEET OF TRANSPARENT GLAZING, PLUS TWO ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER INMATE IN ROOMS/CELLS WITH THREE OR MORE INMATES.

FINDINGS:

The Cummins Unit was constructed prior to June 2008.

Standard #5-ACI-2D-05

(NEW CONSTRUCTION OR RENOVATION AFTER JUNE 1, 2014). EACH DORMITORY PROVIDES INMATES WITH ACCESS TO NATURAL LIGHT BY MEANS OF AT LEAST 12 SQUARE FEET, PLUS 2 ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER INMATE IN THE DORMITORY.

FINDINGS:

The Cummins Unit was constructed prior to June 2014.

Standard #5-ACI-2D-06

EACH DAY ROOM 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]

The Cummins Unit is not classified as new construction.

Standard #5-ACI-2E-02

SPECIAL MANAGEMENT HOUSING UNITS HAVRE EITHER PUT DOOR COVERED OR OUTDOOR COVERED EXERCISE AREAS. THE MINIMUM SPACE REQUIREMENTS FOR OUTDOOR EXERCISE AREAS FOR SPECIAL MANAGEMENT UNITS ARE AS FOLLOWS:

- GROUP AREAS: 330-SQUARE FEET OF UNENCUMBERED SPACE CAN ACCOMMODATE TWO INMATES. FOR EACH ADDITIONAL 150-SQUARE FEET OF UNENCUMBERED SPACE, AN ADDITIONAL INMATE MAY USE THE EXERCISE AREA SIMULTANEOUSLY. (FORMULA; FOR EACH 150-SQUARE FEET OF UNENCUMBERED SPACE EXCEEDING THE BASE REQUIREMENT OF180-SQUARE FEET FOR THE FIRST INMATE, EQUALS THE MAXIMUM OF INMATES WHICH MAY USE THE RECREATION AREA SIMULTANEOUSLY).
- INDIVIDUAL AREAS: 180-SQUARE FEET OF UNENCUMBERED SPACE.

IN CASES WHERE COVER IS NOT PROVIDED TO MITIGATE THE INCLEMENT WEATHER, APPROPRIATE WEATHER RELATED EQUIPMENT AND ATTIRE SHOULD BE MADE AVAILABLE TO THE INMATES WHO DESIRE TO TAKE ADVANTAGE OF THEIR AUTHORIZED EXERCISE TIME.

FINDINGS:

The Cummins Unit does not house Special Management Inmates

Standard #5-ACI-3A-07

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 Cummins Unit does not house female inmates.

Standard #5-ACI-3A-17

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 Cummins Unit does not house female inmates.

Standard #5-ACI-3D-05

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 Cummins Unit does not house female inmates.

Standard #5-ACI-4A-02

SPECIAL MANAGEMENT UNITS PROVIDE LIVING CONDITIONS THAT APPROXIMATE THOSE OF THE GENERAL INMATE POPULATION: ALL EXCEPTIONS ARE CLEARLY DOCUMENTED. SPECIAL MANAGEMENT CELLS/ROOMS PERMIT THE INMATES ASSIGNED TO THEM TO CONVERSE WITH AND BE OBSERVED BY STAFF MEMBERS.

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5ACI-4A-03

ALL CELLS/ROOMS IN SPECIAL MANAGEMENT HOUSING PROVIDE A MINIMUM OF 80 SQUARE FEET, AND SHALL PROVIDE 35 SQUARE FEET OF UNENCUMBERED SPACE FOR THE FIRST OCCUPANT AND 25 SQUARE FEET OF UNENCUMBERED SPACE FOR EACH ADDITIONAL OCCUPANT.

The Cummins Unit does not house Special Management inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-04

WHEN SPECIAL MANAGEMENT UNITS EXIST, WRITTEN POLICY, AND PROCEDURE GOVERN THEIR OPERATION FOR THE SUPERVISION OF INMATES UNDER ADMINISTRATIVE SEGREGATION, PROTECTIVE CUSTODY, AND DISCIPLINARY DETENTION.

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-05

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT AN INMATE IS ADMITTED TO THE SPECIAL MANAGEMENT HOUSING UNIT FOR PROTECTIVE CUSTODY ONLY WHEN THERE IS DOCUMENTATION THAT PROTECTIVE CUSTODY IS WARRANTED AND NO REASONABLE ALTERNATIVES ARE AVAILABLE.

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-06

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDED THAT AN INMATE IS PLACED IN DISCIPLINARY DETENTION FOR A RULE VIOLATION ONLY AFTER A HEARING BY THE DISCIPLINARY COMMITTEE OR HEARING EXAMINER.

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-07

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

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-08

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

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-09

THERE IS A SANCTIONING SCHEDULE FOR INSTITUTIONAL RULE VIOLATIONS. CONTINUOUS CONFINEMENT FOR MORE THAN 30 DAYS REQUIRES OF THE REVIEW AND APPROVAL THE WARDEN/SUPERINTENDENT DESIGNEE. OR INMATES HELD IN DISCIPLINARY STATUS FOR PERIODS EXCEEDING 60 DAYS ARE PROVIDED THE SAME PROGRAM SERVICES AND PRIVILEDGES AS INMATES IN ADMINISTRATIVE STATUS AND PROTECTIVE CUSTODY.

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-10

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT A QUALIFIED MENTAL HEALTH PROFESSIONAL PERSONALLY INTERVIEWS AND PREPARES A WRITTEN REPORT ON ANY INMATE REMAINING IN SPECIAL MANAGEMENT HOUSING FOR MORE THAN 30 DAYS. IF CONFINEMENT CONTINUES BEYOND 30 DAYS, A MENTAL HEALTH ASSESSMENT BY AQUALIFIED MENTAL HEALTH PROFESSIONAL IS MADE AT LEAST EVERY 30 DAYS FOR INMATES WHO HAVE AN IDENTIFIED MENTAL HEALTH NEED EVERY THREE MONTHS FOR ALL OTHER INMATES-MORE FREQUENTLY IF PRESCRIBED BY THE CHIEF MEDICAL AUTHORITY.

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-11

WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE THAT ALL SPECIAL MANAGEMENT INMATES ARE PERSONALLY OBSERVED BY A CORRECTIONAL OFFICER TWICE PER HOUR, BUT NOT MORE THAT 40 MINUTES APART, ON A IRREGULAR SCHEDULE. INMATES WHO ARE VIOLENT OR MENTALLY DISORDERED OR WHO DEMONSTRATE UNUSUAL OR BIZARRE BEHAVIOR RECEIVE MORE FREQUENT OBSERVATION: SUICIDAL INMATES ARE UNDER CONTINUOUS OBSERVATION.

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-12

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING RECEIVE DAILY VISITS FROM SENIOR CORRECTIONAL SUPERVISORS IN CHARGE, DAILY VISITS FROM A QUALIFIED HEALTH CARE OFFICIAL (UNLESS MEDICAL ATTENTION IS NEEDED MORE FREQUENTLY), AND VISITS FROM MEMBERS OF THE PROGRAM STAFF UPON REQUEST.

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-13

WRITTEN POLICY, PROCEDURE GOVERN THE SELECTION CRITERIA, SUPERVISION, AND ROTATION OF STAFF WHO WORK DIRECTLY WITH INMATES IN SPECIAL MANAGEMENT HOUSING ON A REGULAR AND DAILY BASIS.

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-14

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT STAFF OPERATING SPECIAL MANAGEMENT HOUSING UNITS MAINTAIN A PERMANENT LOG.

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-15

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT ALL INMATES IN SPECIAL MANAGEMENT HOUSING ARE PROVIDED PRESCRIBED MEDICATION, CLOTHING THAT IS NOT DEGRADED, AND ACCESS TO BASIC PERSONAL ITEMS FOR USE IN THEIR CELLS UNLESS THERE IS IMMINENT DANGER THAT AN INMATE OR ANY OTHER INMATE(S) WILL DESTROY AN ITEM OR INDUCE SELF-INJURY.

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-16

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING HAVE THE OPPORTUNITY TO SHAVE AND SHOWER THREE TIMES PER WEEK.

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-17

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING RECEIVE LAUNDRY, BARBERING, AND HAIR CARE SERVICES AND ARE ISSUED AND EXCHANGE CLOTHING, BEDDING, AND LINEN ON THE SAME BASIS AS INMATES IN THE GENERAL POPULATION. EXCEPTIONS ARE PERMITTED ONLY WHEN FOUND NECESSARY BY THE SENIOR OFFICER ON DUTY; ANY EXCEPTION IS RECORDED IN THE UNIT LOG AND JUSTIFIED IN WRITING.

FINDINGS:

The Cummins Unit does not house Special Management Inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-18

ALTERNATIVE MEAL SERVICE MAY BE PROVIDED TO AN INMATE IN SPECIA;L MANAGEMENT HOUSING WHO USES FOOD OR FOOD SERVICE EQUIPMENT IN A MANNER THAT IS HAZARDOUS TO SELF, STAFF, OR OTHER INMATES. ALTERNATIVE MEAL SERVICE IS ON AN INDIVIDUAL BASIS, IS BASED ON HEALTH OR SAFETY CONSIDERATIONS ONLY, MEETS BASIC NUTRITIONAL REQUIREMENTS, AND OCCURS WITH WRITTEN APPROVAL OF THE WARDEN/SUPERINTENDENT, OR DESIGNEE AND RESPONSIBLE HEALTH AUTHORITY, OR DESIGNEE. THE SUBSTITUTION PERIOD SHALL NOT EXCEED SEVEN DAYS.

FINDINGS:

The Cummins Unit does not house Special Management inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-19

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT WHENEVER AN INMATE IN SPECIAL MANAGEMENT HOUSING IS DEPRIVED OF ANY USUALLY AUTHORIZED ITEM OR ACTIVITY, A REPORT OF THE ACTION IS FILED IN THE INMATES CASE RECORD AND FORWARDED TO THE CHIEF OF SECURITY.

The Cummins Unit does not house Special Management inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-20

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING CAN WRITE AND RECEIVE LETTERS ON THE SAME BASIS AS INMATES IN THE GENERAL POPULATION.

FINDINGS:

The Cummins Unit does not house Special Management inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-21

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING HAVE OPPORTUNITIES FOR VISITATION UNLESS THERE ARE SUBSTANTIAL REASONS FOR WITHHOLDING SUCH PRIVILEGES.

FINDINGS:

The Cummins Unit does not house Special Management inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-22

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING HAVE ACCESS TO LEGAL MATERIALS.

FINDINGS:

The Cummins Unit does not house Special Management inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-23

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING HAVE ACCESS TO READING MATERIALS.

The Cummins Unit does not house Special Management inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-24

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING RECEIVE A MINIMUM OF ONE HOUR OF EXERCISE PER DAY OUTSIDE THEIR CELLS, FIVE DAYS PER WEEK, UNLESS SECURITY OR SAFETY CONSIDERATIONS DICTATE OTHERWISE.

FINDINGS:

The Cummins Unit does not house Special Management inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-25

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN ADMINISTRATIVE STATUS OR PROTECTIVE CUSTODY ARE ALLOWED TELEPHONE PRIVILEGES.

FINDINGS:

The Cummins Unit does not house Special Management inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5-ACI-4A-26

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT AN INMATE IN DISCIPLINARY STATUS IS ALLOWED LIMITED TELEPHONE PRIVILEGES UNLESS PHONE RESTRICTIONS HAVE BEEN INVOKED BY THE WARDEN/SUPERINTENDENT OR DESIGNEE. RESTRICTIONS WOULD NOT APPLY TO CALLS RELATED SPECIFICALLY TO ACCESS TO THE ATTORNEY OF RECORD.

FINDINGS:

The Cummins Unit does not house Special Management inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5ACI-4A-27

WRITTEN POLICY, PROCEDURE AND PRACTICE PROVIDE THAT INMATES IN ADMINISTRATIVE STATUS AND PROTECTIVE CUSTODY HAVE ACCESS TO PROGRAMS AND SERVICES THAT INCLUDE, BUT ARE NOT LIMITED TO, THE FOLLOWING: EDUCATIONAL SERVICES, COMMISSARY SERVICES, LIBRARY SERVICES, SOCIAL SERVICES, COUNSELING SERVICES, RELIGIOUS GUIDANCE, AND RECREATIONAL PROGRAMS.

FINDINGS:

The Cummins Unit does not house Special Management inmates. Special Management inmates are housed at the Varner Super Max.

Standard #5ACI-4B-31

WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE STEP DOWN PROGRAMS ARE OFFERED TO EXTENDED RESTRICTIVE HOUSING INMATES TO FACILITATE THE REINTEGRATION OF THE INMATE INTO GENERAL POPULATION OR THE COMMUNITY. THESE PROGRAMS SHALL INCLUDE, AT A MINIMUM, THE FOLLOWING:

- PRE-SCREENING EVALUATION
- MONTHLY EVALUATIONS USING A MULTIDISCIPLINARY APPROACH TO DETERMINE THE INMATES COMPLIANCE WITH PROGRAM REQUIREMENTS
- SUBJECT TO MONTHLY EVALUATIONS; TO GRADUALLY INCREASING OUT-OF-CELL TIME TO GRADUALLY INCREASING GROUP INTERACTION TO GRADUALLY INCREASING EDUCATION AND PROGRAMMING OPPORTUNITIES TO GRADUALLY INCREASING PRIVILEGES
- A STEP-DOWN TRANSITION COMPLIANCE REVIEW
- POST-SCREENING EVALUATION

FINDINGS:

The Cummins Unit does not have a step-down program.

Standard #5-ACI-4B-32 NEW AUGUST 2018

FEMALE INMATES DETERMINED TO BE PREGNANT WILL NOT BE HOUSED IN EXTENDED RESTRICTIVE HOUSING.

FINDINGS:

The Cummins Unit does not house female inmates.

Standard #5-ACI-4B-33 NEW AUGUST 2018

CONFINEMENT OF OFFENDERS UNDER THE AGE OF 18 YEARS OF AGE IN RESTRICTIVE HOUSING IS PROHIBITED.

FINDINGS:

Non-Applicable per Arkansas Code 9-27-5 10. The Cummins Unit does not house delinquent offenders or youths.

Standard # 5-ACI-5A-01

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 Cummins Unit is not an intake facility.

Standard #5-ACI-5A-02

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

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

The Cummins Unit is not a reception center.

Standard #5-ACI-5A-03

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR 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 Cummins Unit is not a reception center.

Standard #5-ACI-5B-13

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

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

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

FINDINGS:

Non-Applicable per Arkansas Code 9-27-5 10. The Cummins Unit does not house delinquent offenders or youths.

Standard #5-ACI-5B-14

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

FINDINGS:

Non-Applicable Arkansas Code 9-27-5 10. The Cummins Unit does not house delinquent offenders or youths.

Standard #5-ACI-5B-15

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

FINDINGS:

Non-Applicable Arkansas Code 9-27-5 10. The Cummins Unit does not house delinquent offenders or youths.

Standard #5-ACI-5B-16

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

Non-Applicable Arkansas Code 9-27-5 10. The Cummins Unit does not house delinquent offenders or youths.

Standard #5-ACI-5D-11

THE INSTITUTION PROVIDES FOR THE THOROUGH CLEANING AND, WHEN NECESSARY, DISINFECTING OF INMATE PERSONAL CLOTHING BEFORE STORAGE OR BEFORE ALLOWING THE INMATE TO KEEP AND WEAR PERSONAL CLOTHING

FINDINGS:

Inmates at Cummins do not possess personal clothing.

Standard # 5-ACI-5E-10

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

FINDINGS:

Cummins Unit does not house female inmates.

Standard #5-ACI-5F-07

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT DESIGNATED STAFF ARE RESPONSIBLE FOR COORDINATION OF VICTIMS PROGRAMS AND THAT CURRICULUM IS ESTABLISHED FOR PROVIDING TRAINING TO STAFF INVOLVED WITH VICTIMS ISSUES. THIS CURRICULUM INCLUDES THE FOLLOWING TOPICS:

- SPECIFIC SERVICES AVAILABLE TO CRIME VICTIMS
- CHANGE IN LAWS IMPACTING VICTIMS
- WAY(S) OF GAINING ACCESS TO THE SERVICES
- CONFIDENTIALITY OF VICTIM INFORMATION
- WAY(S) FOR VICTIMS TO COMMUNICATE COMPLAINTS AND OTHER CONCERNS
- PROGRAM-EVALUATION MEASURES, WHICH INCLUDE VICTIM INPUT REGARDING THE EFFECTIVENESS OF SERVICES AND WAYS FOR THEM TO MAKE SUGGESTIONS REGARDING AGENCY POLICIES AND PRACTICES INTENDED TO ASSIST CRIME VICTIMS.

Victim programs are conducted by the Central Office of the Arkansas Department of Corrections.

Standard #5-ACI-5F-08

WHERE FACILITATED VICTIM OFFENDER DIALOGUE PROGRAM EXISTS, WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT THERE IS A PROGRAM INITIATED AND REQUESTED ONLY BY A VICTIM/SURVIVOR THAT PROVIDES AN OPPORTUNITY FOR SUCH VICTIMS OR SURVIVORS TO MEET FACE-TO-FACE OR BY OTHER MEANS WITH THE INMATE RESPONSIBLE FOR THEIR VICTIMIZATION IN A SAFE, SECURE, AND CONFIDENTIAL SETTING AFTER THOROUGH PREPARATION WITH, AND WITH THE ASSISTANCE OF A PROPERLY TRAINED FACILITATOR.

FINDINGS:

There is no victim/offender dialogue program at the Cummins Unit.

Standard #5-ACI-6A-11

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 Cummins Unit is an all-Male facility.

Standard #5-ACI-6A-24

ALL IN-TRANSIT OFFENDERS RECEIVE A HEALTH SCREENING BY HEALTHTRAINED OR QUALIFIED HEALTH CARE PERSONNEL ON ENTRY INTO THE AGENCY SYSTEM. FINDINGS ARE RECORDED ON A SCREENING FORM THAT WILL ACCOMPANY THE OFFENDER TO ALL SUBSEQUENT FACILITIES UNTIL THE OFFENDER REACHES HIS OR HER FINAL DESTINATION. HEALTH SCREENS WILL BE REVIEWED AT EACH FACILITY BY HEALTHTRAINED OR QUALIFIED HEALTH CARE PERSONNEL. PROCEDURES WILL BE IN PLACE FOR CONTINUITY OF CARE.

FINDINGS:

The Cummins Unit is not an intake facility.

Standard #5-ACI-6A-38

A MENTAL HEALTH RESIDENTIAL TREATMENT UNIT IS AVAILABLE FOR THOSE INMATES WITH IMPAIRMENT IN BEHAVIORAL FUNCTIONING ASSOCIATED WITH A SERIOUS ILLNESS AND/OR IMPAIRMENT IN COGNITIVE FUNCTIONING. THE SEVERITY OF THE IMPAIRMENT DOES NOT REQUIRE INPATIENT LEVEL OF CARE, BUT THE INMATES DEMONSTRATES A HISTORICAL AND CURRENT INABILITY TO FUNCTION ADEQUATELY IN THE GENERAL POPULATION. THERE SHOULD BE A SPECIFIC MISSION/GOAL OF THE PROGRAM, SUFFICIENT QUALIFIED STAFF TO MEET NEEDS OF PROGRAM, SCREENING PROCESS FOR THE PROGRAM, INDIVIDUAL TREATMENT PLANS FOR INMATES IN THE PROGRAM, SAFE HOUSING TO MEET THE THERAPEUTIC NEEDS OF THE INMATE AND TRANSITION PLAN UPON DISCHARGE FROM THE RESIDENTIAL TREATMENT UNIT.

FINDINGS:

Cummins Unit does not have a MH Tx Unit-inmates are transferred to ORC.

Standard #5-ACI-6A-39

INPATIENT CARE UNIT IS FOR THOSE WHO ARE OF NEED OF INPATIENT MENTAL HEALTH TREATMENT. THESE UNITS SHOULD HAVE 24 HOUR SERVICES SUCH AS NURSING AND AVAILABILITY OF A QMHP, BEHAVIORAL HEALTH TRAINED CORRECTIONAL OFFICERS, AND CLINICAL PROGRAMMING. INDIVIDUAL TREATMENT PLANS WHICH WILL DEFINE THE TYPES AND FREQUENCY OF CONTACTS WITH MENTAL HEALTH STAFF FOR INMATES IN THE PROGRAM, HOUSING TO MEET THE THERAPEUTIC NEEDS OF THE INMATE AND TRANSITION PLAN UPON DISCHARGE FROM THE INPATIENT CARE UNIT.

FINDINGS:

The ADC does not have an inpatient psychiatric unit. Inmates are transferred to ORC.

Standard #5-ACI-5B-17

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

The Cummins Unit does not house youthful offenders.

Standard #5-ACI-5B-18

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

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

FINDINGS:

The Cummins Unit does not house youthful offenders.

Standard #5-ACI-6A-11

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.

The Cummins Unit does not house female inmates.

Standard #5ACI-6B-04

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 Cummins Unit has qualified/licensed healthcare staff.

Standard #5-AC-6B-10

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 Cummins Unit does not use volunteers in the delivery of health care.

Standard #5-ACI-6B-11

ANY STUDENTS, INTERNS, OR RESIDENTS DELIVERING HEALTHCARE 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 Cummins Unit does not use students, interns or residents in the delivery of health care.

Standard #5-ACI-6B-12

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

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

OFFENDERS ARE NOT TO BE USED FOR THE FOLLOWING DUTIES:

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

FINDINGS:

The Cummins Unit does not use inmates to perform familial duties.

Standard #5-ACI-7A-14

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 Cummins Unit does not have a Private Industries Program.

Standard #5-ACI-7A-15

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

FINDINGS:

Inmates at the Cummins Unit are not employed by public or private organizations.

Significant Incident Summary

Facility Name:Cummins UnitReporting Period:May 2020 thru April 2021

Incident Type	Months	May	June	July	August	September	October	November	December	January	February	March	April	Total for Reporting Period
Escapes		0	0	0	0	0	0	0	0	0	0	0	0	0
Disturbances*		1	0	0	0	0	0	0	0	0	0	0	0	1
Sexual Violence		0	1	0	1	0	1	0	0	0	0	1	0	4
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	1	3	1	2	2	1	1	1	2	3	2	6	25
	Offender/ Staff	1	0	1	1	1	0	0	0	0	0	0	0	4
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*		1	1	1	1	1	1	1	1	1	1	1	1	12

	Cycle Year 3		0	66			5.56			.469			541		.275				0				011		.201
	Denominator Accreditation																				_		-		-
Cycle Dates: through	Year 3		0	500			334.5			334.5			334.5		334.5				0				387		387
Cycle Da through	Year 3 Numerator		0	495			1850			157			181		92				0				4.333		78
/19 020	Accreditation Cycle Year 2																								
es:5/01 04/30/2	Year 2 Denominator	1.																							
Cycle Dates:5/01/19 Through 04/30/2020	Year 2 Numerator	irements																							
01/18 9	Accreditation Cycle Year 1	ory requi																							
tes: 05/0 04/30/1	Year 1 Denominator	statuto																							
Cycle Dates: 05/01/18 Through 04/30/19	Year 1 Numerator	tent with																							
	Outcome Measures	facility in a professional and responsible manner consistent with statutory requirements.	Number of Plans of Action completed in the past 12 months divided by the number of Plans of Action approved by the Commission on Accreditation.		Compliance verified through expected practice	No outcome measure required.	The average offender population in the past 12 months divided by the average number of filled full	time positions in the past 12 months.	The nu	reason in the past 12 months divided by the average number of filled full time positions in the	average number of medical an unce positions in the past 12 months.	The number of verified employee violations in the	past 12 months divided by the average number of filled full time staff mostitions in the next 12 months			average number of filled full time staff positions in	the past 12 months.	-	acceptable or higher in the past 12 months divided	by the total number of performance reviews			month for the past 12 months divided by the total		past 12 months divided by the total number of
		ge the '	1A-1	1A-2			1C-1		1C-2			1C-3		1C-4				1C-5				1C-6		1C-7	
	Performance Standards	1. Administration & Management: Administer and manage the facility in a	1A: Facility Administration - The facility is administered efficiently and responsibly. Performance is based on goals, objective, and standard operating procedures and a system	of regular review.	18: Fiscal Management - The facility utilizes appropriate fiscal planning burdenting and accounting proceedings and	provides for a system of regular review.	 Personnel - The facility promotes diversity and competency through employee staffing, recruitment. 	promotions, benefit allocations and performance reviews.																	

			Cycle Dates: 05/01 Through 04/30/19	Cycle Dates: 05/01/18 Through 04/30/19	18	Cycle Dates: through	tes:		Cycle Dates: through	ites:	
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
1D: Training & Development - The facility conducts pre- service, in-service, and specialized development programs to promote the effectiveness of staff, volunteers and other effected parties.		Compliance verified through expected practice files. No outcome measure required.									
1E: Case Records - The facility promotes appropriate security, access control, and other measures designed to assure the integrity of records entrusted to it's care.		Compliance verified through expected practice files. No outcome measure required.									
1F: Information Systems & Research - Effective systems of data and information storage and retrieval are vital for the maintenance of operational effectiveness and research capability.		Compliance verified through expected practice files. No outcome measure required.									
1G: Citizen Involvement & Volunteers - The facility is a responsible member of the community, supporting citizen involvement and volunteer initiatives as well as other community interaction.	16-1	The total number of hours of volunteer service delivered by members of the community in the past 12 months divided by the average daily population in the past 12 months.							21	1874	.011
	1G-2	The total number of hours of community service work delivered by offenders in the past 12 months divided by 12.							0	0	0
2. Physical Plant: The facilities' p	ohysical pl	 Physical Plant: The facilities' physical plant is designed, equipped and maintained in a manner that promotes safety, program functions and access 	at promotes	safety, pi	ogram fu	nctions an	d access				
2A: Building and Safety Codes - The facility complies with professional building and fire safety codes to help ensure the safety of all persons within the facility.	2A-1	Number of worker's compensation claims filed in the past 12 months divided by the average number of filled full-time staff positions in the past 12 months.							152	334.5	454
	2A-2	Number of sanitation or health-code violations identified by external agencies in the past 12 months.							2		
	2A-3	The number of fire and safe code violations identified by the governing jurisdiction in the past 12 months.							0		

			Cycle Dates: 05/01/18 Through 04/	Cycle Dates: 05/01/18 Through 04/30/19		Cycle Dates: through	ates:	Cycle Da through	Cycle Dates: through	
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2 Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
2B: Size & Organization - Facility capacity and functional design promote safety, an acceptable quality of life and operational innovation.	2B-1	Number of day's facility population exceeded the operational capacity in the past 12 months divided by 365.						216	365	.592
2C: Inmate Housing - Inmate housing areas are the foundation of institutional living and promote the safety and well-being of both inmates and staff		Compliance verified through expected practice files. No outcome measure required.								
2D: Environmental Conditions - Environmental conditions significantly influence the overall effectiveness of institutional operations. Lighting, air quality, temperature and noise levels are designed to preserve the health and well being of inmates and staff members.		Compliance verified through expected practice files. No outcome measure required.								
2E: Program and Service Areas - Adequate space is provided for the various program and service functions conducted within the institution. Spatial requirements reflect functional need.		Compliance verified through expected practice files. No outcome measure required.								
2F: Administrative and Staff Areas - All levels of staff are provided with adequate space to carry out their responsibilities safely and effectively.		Compliance verified through expected practice files. No outcome measure required.								
2G: Security - The physical plan supports the orderly and secure functioning of the institution.		Compliance verified through expected practice files. No outcome measure required.								

Appendix E: Out Come Measures

			Cycle D Through	Cycle Dates: 05/01/18 Through 04/30/19	01/18 .9	Cycle Dates: through	:Se		Cycle Dates: through	tes:	
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
3. Institutional Operations: The Facility Protects the community, the staff, the offenders, and others from harm while maintaining an orderly environment with clear expectations of behavior and systems accountability.	the staff,	the offenders, and others from harm while maintainin	ng an ord(erly envin	onment v	ith clear exp	oectatio	ins of be	ehavior an	d systems	
3A: Security and Control - The facility utilizes a combination of supervision, inspection, accountability, and measured force response to promote safe and orderly operations.	3A-1	The number of incidents in which force, as defined by the agency, was used in the past 12 months divided by the average daily population in the past 12 months.							115	1874	.061
	3A-2	Number of seizures of contraband, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.							440	1874	.234
	3A-3	The number of escapes, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.							0	1874	0
	3A-4	The number of disturbances, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 2 months.							0	1874	0
	3A-5	The number of acts of sexual violence, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.							4	1874	.002
	3A-6	The number of homicides, as defined in the Significant Incident Summary, in the past 12 months, divided by the average daily population in the past 12 months.							0	0	0
3B: Safety & Emergency Procedures - The number and extent of security, physical plant, environmental and other emergencies are minimized. When they occur, the response mechanism minimizes severity.		Compliance verified through expected practice files. No outcome measure required.									

			Cycle Da Through	Cycle Dates: 05/01/18 Through 04/30/19	1/18	Cycle Dates: through	ates:	οŧ	Cycle Dates: through	es:	
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
3C: Rules & Discipline - The institution's rules of conduct and sanctions and procedures for violations are communicated to all inmates and staff. The disciplinary process respects due process.	3C-1	The total number of major disciplinary reports, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.						5	2136	1874	1.139
	3C-2	The total number of minor disciplinary reports, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.							253	1874	.135
	3C-3	Number of offender on offender assaults, as defined in the SIS form, in the past 12 months divided by the average daily population in the past 12 months.							25	1874	.013
	3C-4	Number of offender on staff assaults, as defined in the SIS form, in the past 12 months divided by the average daily population in the past 12 months.							4	1874	.002
3D: Inmate Rights - The facility protects the constitutional rights of offenders and seeks a balance between the expression of protected liberties and the preservation of institutional order.	3D-1	Number of grievances found in an inmate's favor divided by the number of grievances filed in the 12 month period.							82	1779	.046
4. Special Management Housing & Restrictive Housing: In general, inmates who threaten the secure and orderly management of the institution, posing a threat to other or a danger to themselves, are removed from the general population and placed in designated units. Such assignments are made appropriately and justifiably and placed into such categories are treat justly, humanely, in a constitutionally correct manner and prepared for return to less restrictive units.	n general, placed in prepared	, inmates who threaten the secure and orderly management of the institution, posing a threat to other or a danger to designated units. Such assignments are made appropriately and justifiably and placed into such categories are treated for return to less restrictive units.	nagemen propriate	it of the i ly and ju	nstitutio stifiably a	n, posing and place	a threat ed into su	t to othe uch cate	er or a di egories a	anger to re treat	ed
4A: Special Management - Inmates who pose a threat are separated from general population and placed in a cell in a special management unit; (defined as segregation and including administrative segregation, protective custody or disciplinary detention); for periods of time less than 22 hours per day.	4A-1	Average number of offenders in Special Management Housing per month over the past 12 months divided by the average daily population in the past 12 months.						_	N/A	N/A	N/A

			Cycle Da Through	Cycle Dates: 05/01/18 Through 04/30/19		Cycle Dates: through	s:	Cycle Da through	Cycle Dates: through	
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator Year 2	Denominator Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
4B: Restrictive Housing - Inmates who pose a direct and clear threat to the safety of persons or a clear threat to the safe and secure operation of the facility are separated from general population and placed in restrictive housing units /	4B-1	Average number of offenders in Restricted Housing per month over the past 12 months divided by the average daily population in the past 12 months.						72	1874	.038
cells for periods of time 22 hours per day or greater.	4B-2	Average number of offenders in Extended Restricted Housing per month over the past 12 months divided by the average daily population in the past 12 months.						211	1874	112
	4B-3	Number of offenders released from Restrictive Housing by the appropriate authority within 24- hours in the past 12 months divided by the total placed in Restrictive Housing in the past 12 months.						76	677	.112
	4B-4	Number of offenders in Extended Restrictive Housing that were released directly into the community from either Restrictive Housing or Extended Restrictive Housing within the past 12 months divided by the total number of offenders released in the past 12 months.						19	437	.043
5. Institutional Services: Internal assignment to housing and program services should meet the basic needs of the offender consistent with the safe operation of the facility and should prepare the offender for successful reintegration into society upon release as appropriate.	ram servi	ces should meet the basic needs of the offender consistent w	with the s	afe operati	on of th∈	e facility anc	should pro	epare the	offender	for
5A: Reception & Orientation - All incoming inmates undergo thorough screening and assessment at admission and receive a thorough orientation to the institution's		Compliance verified through expected practice files.								
procedures, rules, programs, and services. 5B: Classification - Inmates are classified to the most appropriate level of custody and programming both on denoision and uncompared to activity.		No outcome measure required. Compliance verified through expected practice files.								
5C: Food Service - Meals are nutritionally balanced, well- planned, and prepared and served in a manner that meets established governmental health and safety codes.		Compliance verified through expected practice files. No outcome measure required.								

Measures
Come
E: Out
Appendix E
App

Image: Compliance verified through expected practice Through od/30/13 Through od/30/13 <thtp>10/13 Through od/30/13</thtp>				Appendix	Appendix E: Uut Come Measures	e Measur	S	
Outcome Measures Outcome Measures Outcome Measures Compliance verified through expected practice Image: About the substance verified through expected practice Compliance verified through expected practice Image: About the substance use disorder treatment No outcome measure required. Where a substance use disorder treatment Year 1 Where a substance use disorder treatment Year 2 Where a substance use disorder treatment Year 3 Where a substance use disorder treatment Year 3 Woulded by the average daily Depoulation in the past 12 months. Where a sex offender treatment Year 3 Mored by the average daily population in the past 12 months. Peant 3 Depoulation in the past 12 months. Peant 3 Depoulation in the past 12 months. Peant 12 months. Depoulation in the past 12 months. Peant 12 months. Depoulation in the past 12 months. Peant 12 months. Depoulation in the past 12 months.			Cycle Dates: 05/01/18 Through 04/30/19	Cycle Dates: through	th C	Cycle Dates: through		
SD: Sanitation and Hygiene - The institution's sanitation Compliance verified through expected practice Image: Social Services - Professional services including Compliance verified through expected practice Image: Social Services - Professional services including Mo outcome files. SE: Social Services - Professional services including The number of offeating and difficultat and tamily consciouted measure everage daily provide and tamily consciouted and tamily tamily consciouted and tamile and tamilition in the past 12 months. <	Performance Standards	Outcome Measures	Vumerator Year 1 Denominator Accreditation	Numerator Year 2	Year 3 Year 3 Year 3	Numerator Year 3 Denominator	Accreditation Cycle Year 3	
5E: Social Services - Professional services including individual and family counseling, and program exists, the number of treatment slot alcohol addiction problems, meet the needs of identified alcohol addiction problems, meet the needs of identified alcohol addiction problems, meet the needs of identified alcohol addiction problems, meet the needs of identified immates. Where a substance use disorder treatment program exists, the number of completers of the program divided by the average daily program exists, the number of program slot divided by the average daily population in the past 12 months. Where a substance use disorder treatment immates. Where a substance use disorder treatment program exists, the number of program slot divided by the average daily population in the past 12 months. Where a sex offender treatment/management program to help immates a structured program to help immates a structured program to help immates a structured program to help immates make a satisfactory transition upon their release from incarceration. E. Healthrare: Each offender treaters erition and hermuce of acceptable levels of wellness coccess to a continuum of health care services ot hart har average daily population in the past 12 months. Marces to Services - Offender treaters erition and hermit and hermit and hermit are erition. E. Healthrare: Each offender treaters stored and propulation upon their release from incarceration.	5D: Sanitation and Hygiene - The institution's sanitation and hygiene program protects the health and safety of staff and offenders.	Compliance verified through expected practice files. No outcome measure required.						
immates. Where a substance use disorder treatment Immodel Imm	5E: Social Services - Professional services including individual and family counseling, family planning and parent education; and programs for inmates with drug and alcohol addiction problems, meet the needs of identified	Where a substance use disorder treatment program exists, the number of treatment slot available divided by the average daily population in the past 12 months.			47	7 1874	.025	
SF: Re-entry - The institution provides a structured Where a sex offender treatment/management Image: Completent of program slot divided by the average daily population in the past 12 months. SF: Re-entry - The institution provides a structured Where a sex offender treatment/management Image: Completent of completent and the program slot divided by the average daily population in the program exists, the number of completent program exists, the number of completent program to help immates make a satisfactory transition Where a sex offender treatment/management Image: Completent program slot divided by the average daily population in the past 12 months. SF: Re-entry - The institution provides a structured The number of offenders who have completed Image: Completent provides a structured Image: Completent provides a structured Image: Completent provided by the average daily population in the past 12 months. 6: Healthcare: Each offender receives appropriate physical and behavioral health care necessary to foster the restoration and maintenance of acceptable levels of wellness diagnosed with a MRSA Image: Completent care provention and health care necessary to foster the restoration and maintenance of acceptable levels of wellness duration, are met in a timely and	inmates.	Where a substance use disorder treatment program exists, the number of completers of the program divided by the average daily population in the past 12 months.			13	3 1874	.006	
SF: Re-entry Where a sex offender treatment/management Image in the program exists, the number of completers divided by the average daily population in the past 12 months. Where a sex offender treatment/management Image in the past 12 months. SF: Re-entry The institution provides a structured point in the past 12 months. Image individed by the average daily population in the past 12 months. Image individed by the average daily population in the past 12 months. 6. Healthcare: Esch offender receives appropriate physical and behavioral health care necessary to foster the restoration and maintenance of acceptable levels of wellness ducation, are met in a timely and Number of offenders diagnosed with a MRSA Image individed by the average daily population		Where a sex offender treatment/management program exists, the number of program slot divided by the average daily population in the past 12 months.			N/A	A N/A	N/A	
5F: Re-entry - The institution provides a structured The number of offenders who have completed Image: Completed I		Where a sex offender treatment/management program exists, the number of completers divided by the average daily population in the past 12 months.			N/A	A N/A	N/A	
6. Healthcare: Each offender receives appropriate physical and behavioral health care necessary to foster the restoration and maintenance of acceptable levels of wellness 6A: Access to Services - Offenders have unimpeded Number of offenders diagnosed with a MRSA 6A: Access to a continuum of health care services so that their health care needs, including prevention and health 6A-1 infection within the past twelve (12) months Infection within the average daily population 1	5F: Re-entry - The institution provides a structured program to help inmates make a satisfactory transition upon their release from incarceration.	The number of offenders who have completed their re-entry plan, as defined by the agency, in the past 12 months divided by the number of inmates released in the past 12 months.			17	7 437	.038	
6A-1	6. Healthcare: Each offender receives appropriate physical and beh	lavioral health care necessary to foster the restoration and mair	tenance of acceptable lev	els of wellness		-		
efficient manner.					2	1861	0.0001	

	Accreditation Cycle Year 3	0	0	0	0.1	600.0	60.0	0.92
ates:	Year 3 Denominator	1861	0	0	1861	1861	149	14
Cycle Dates: through	Year 3 Numerator	0	0	0	182	17	13	13
	Accreditation Cycle Year 2							
Cycle Dates: through	Year 2 Denominator							
Cycle Da through	Year 2 Numerator							
01/18 9	Accreditation Cycle Year 1							
Cycle Dates: 05/01/18 Through 04/30/19	Year 1 Denominator							
Cycle D Throug	Year 1 Numerator							
	Outcome Measures	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months divided by the average daily population.	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the 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.	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months divided by number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time divided by Total offender population at that time.	Number of offenders diagnosed with HIV infection at a given point in time divided by Total offender population at that time.	Number of offenders with HIV infection who are being treated with highly active antiretroviral treatment (HAART) at a given point in time divided by Total number of offenders diagnosed with HIV infection at that time.	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 total number of treated offenders with HIV infection that were
		6A-2	6A-3	6A-4	6A-5	6A-6	6A-7	6A-8
	Performance Standards							

			Cycle Da Through	Cycle Dates: 05/01/18 Through 04/30/19	1/18	Cycle Dates: through	tes:	th C	Cycle Dates: through		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2 Year 3	Vumerator Year 3	Denominator	Accreditation Cycle Year 3
	6A-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 divided by the total offender population at that time.							134 19	1904	0.07
	6A-10	Number of offender admissions to off-site hospitals in the past twelve (12) months divided by average daily population.						2	59 18	1861	0.03
	6A-11	Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months divided by the average daily population in the past 12 months.						11	119 18	1861	90.0
	6A-12	Number of offender speciality consults completed during the past twelve (12) months divided by Number of speciality consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.						12	1248 19	1908	0.65
	6A-13	Number of selected hypertensive offenders at a given point in time with a B/P reading > 140 mmHg/ >90 mm Hg divided by total number of offenders with hypertension who were reviewed.						15		50	0.3
	6A-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 divided by Total number of diabetic offenders who were reviewed.							9	30	0.2
	6A-15	The number of completed dental treatment plans within the past twelve (12) months divided by the average daily population during the reporting period.						42	428 18	1861	0.23

Year 2 Numerator Year 2 Denominato Decreditatio
prior to undertaking their job divided by Number of new health care staff during the twelve (12) month period. Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months divided by the number of employees. 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 divided by the number of direct care staff tested for TB infection in the past twelve (12) months divided by the number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations. Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months divided by number of evaluated offender grievances related to health care services in the past twelve (12) months.
Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months divided by the number of employees. 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 divided by the number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations. Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months divided by number of evaluations in the past twelve (12) months divided by number of evaluated offender grievances related to health care services in the past twelve (12) months.
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 divided by the number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations. Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months divided by number of evaluate offender grievances related to health care services in the past twelve (12) months.
Number of offender grievances related to health Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months divided by number of evaluated offender grievances related to health care services in the past twelve (12) months.

Appendix E: Out Come Measures

			Cycle Da Through	Cycle Dates: 05/01/18 Through 04/30/19	01/18 19	Cycle Dates: through	es:	Cycle Dates: through	ates: h	
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator Year 2	Denominator Accreditation	Cycle Year 2 Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
	6C-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 divided by Number of offender adjudicated lawsuits related to healthcare delivery in the past twelve (12) months.						0	0	0
6D: Performance Improvement - Health care services are evaluated and continually improved.	6D-1	Number of problems identified by quality assurance program that were corrected during a twelve (12) month period divided by the number of problems identified by quality assurance program during a twelve (12) month period.						0	0	0
	6D-1	Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.						0	0	0
	6D-1	Number of offender suicide attempts in the past twelve (12) months divided by average daily population.						6	1861	.005
	6D-1	Number of offender suicides in the past twelve (12) divided by average daily population.						0	1861	0
	6D-1	Number of unexpected natural deaths in the past twelve (12) months divided by Total number of deaths in the same reporting period.						11	13	0.85
	6D-1	Number of serious medication errors in the past twelve (12) months.			<u> </u>			0	0	0
6E: Safety, Sanitation and Offender Hygiene - The facility or program is safe and sanitary. Appropriate services and supplies are provided to promote the maintenance of acceptable levels of offender hygiene.		Compliance verified through expected practice files. No outcome measure required.								

			Cycle Di Through	Cycle Dates: 05/01/18 Through 04/30/19	l/18	Cycle Dates: through	es:	Cycle Dates: through	ates: h	
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator Year 2	Denominator Accreditation	Cycle Year 2 Year 3 Mumerator	Year 3 Denominator	Accreditation Cycle Year 3
7. Inmate Programs: The Institution's programs for inmates provide meaningful work, educational, and recreational programs designed to facilitate a stable environment and the inmate's subsequent reentry into the community.	ide meani	ngful work, educational, and recreational programs desig	gned to fac	cilitate a st	able envir	onmentanc	the inma	e's subsequ	lent reent	ry into
7A: Work and Correctional Industries - Work and correctional industries programs incorporate work conditions that reflect jobs in equivalent work categories outside of the institution.	7A-1	The number of academic/vocational educational program slots available in the past 12 months divided by the average daily population in the past 12 months.						160	1874	.085
	7A-2	The average number of offenders with full time work/program assignments in the past 12 months divided by the average number of offenders eligible for work assignment in the past 12 months.						1283	1372	.935
7B: Academic and Vocational Education - The facilities academic and vocational education programs improve the educational levels of assigned offenders and participate in	7B-1	The number of academic/vocational slots available divided by the average daily population in the past 12 months.						160	1874	.085
program accreditation, promote staff professional certification, incorporate community resources and participate in internal and external peer review.	7B-2	The number of offenders who passed the General Equivalency Diploma (HI Set) exams while confined in the past 12 months divided by the average daily population in the last 12 months.						1	1874	5.33
	7B-3	The number of academic/vocational competency certificates issued in the past 12 months divided by the number of program slots available in the past 12 months.						1	160	.006
7C: Recreation and Activities - Recreation and similar leisure activities are provided to reduce idleness, provide opportunities for skill acquisition, promote healthy activities and foster positive group Interaction.		Compliance verified through expected practice files. No outcome measure required.								

Outcome Measures
Compliance verified through expected practice files.
No outcome measure required
Compliance verified through expected practice
No outcome measure required.
The number of regular participants, as defined
7F-1 by the agency, in structured religious
programming in the past 12 months divided by
the average daily population in the past 12
months.