

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

Arkansas Division of Corrections  
Grimes Unit (ARDOC)  
Newport, Arkansas

April 05 - 07, 2021

**VISITING COMMITTEE MEMBERS**

Robbin Bell, Chairperson  
ACA Auditor

Joy C. Bell  
ACA Auditor

Bruce Edward Bell  
ACA Auditor

**A. Introduction**

The audit of the Grimes Unit, in Newport, Arkansas was conducted on April 5 – 7, 2021, by the following team: Robbin Bell, Chairperson; Joy Bell, Member; and Bruce Bell, Member.

**B. Facility Demographics**

Rated Capacity: 1077  
Actual Population: 1019  
Average Daily Population for the last 12 months: 998  
Average Length of Stay: 1 year, 8 months, 4 days  
Security/Custody Level: Maximum, Medium, Minimum  
Age Range of Offenders: 18 to 71  
Gender: Male  
Full-Time Staff: 295  
Administrative - 6, Support - 21, Program - 9, Security - 212, Other – 4  
Contractual: 34

Vacancies: Security – 41, Non-Security - 2

**C. Facility Description**

Grimes Unit is a multi-security level facility seated on approximately 325 acres of land, situated on the White River, 84 miles northeast of Little Rock, in the city of Newport, Arkansas. Located in the county seat of Jackson, Arkansas, Grimes Unit’s physical plant is comprised of over 200,734 square feet. Originally constructed in 1997 as a private facility, its contract, and all authority was acquired shortly thereafter (2001), by the Arkansas Department of Corrections.

The stated mission of the Grimes Unit is “to provide public safety with the incarceration of convicted inmate felons, to provide a safe secure and humane environment for both staff and inmates, to provide the opportunity for inmates to serve their sentences positively and productively with the available programs, to provide the proper training and staff support for employee development of professional correctional standards and attitudes, and to provide prudent fiscal management of the Arkansas Department of Correction facilities, equipment, and resources”. Its mission further states, “we will strive to create a model correctional system by carrying out the intentions of the Courts, Governor, Legislature, and the Director of the Division of Corrections.”

Grimes Unit’s perimeter is surrounded by a double chain link fence reinforced with a height of 13 feet. The outer fence is topped with three rolls of coiled taught razor ribbon wire, the inner fence is topped with one roll of coiled taught razor ribbon wire. The facility is patrolled by one full time perimeter vehicle that services 24 hours per day, 7 days a week. Grimes Unit’s perimeter security is comprised of a microwave alarmed system consisting of 4 zones monitoring the facility 24 hours per day, 7 days per week.

Grimes Unit's Central Control operations is responsible for the monitoring of all security surveillance. Grimes Unit has three (3) points of egress into the facility. The Administration building serves as the facility's main entrance and pedestrian gate through which staff, contractors, and visitors enter. The Sallyport serves as the second point of egress and services all truck traffic. The "Turnout Gate" serves as the third point of egress which services the field staff and offender field squads.

Grimes Unit's physical plant includes six (6) housing units utilizing a variety of living configurations comprised of double-occupancy cells, open-bay dormitories, and single occupancy cells. The housing unit breakdown includes: four (4) General Population Housing Units and two (2) Restrictive Housing Units. Housing Unit one (1) consists of 7 Barracks which contain 81 double-occupancy cells and 144 open-bay dormitory beds. Housing Unit two (2) consists of 7 Barracks which contain 81 double-occupancy cells and 144 open-bay dormitory beds. Housing Unit three (3) consists of four (4) Barracks which contain 100 double-occupancy cells. Housing Unit four (4) consists of four (4) Barracks which contain 100 double-occupancy cells. Housing Unit five (5) consists of one (1) Barrack which contain 45 restrictive housing, single-occupancy cells. Housing Unit six (6) consists of one (1) Barrack which contain 42 restrictive housing, single-occupancy cells. Barrack – 9 houses offenders in need of ADA accommodations. Barrack – 11 houses offenders enrolled in the PAL program. Kiosk located in each housing unit/barrack are for the use of: commissary orders, sick call requests, video visits, and other related items. Mail, sick call, and grievance boxes are located in the main facility corridor as well as in the housing units/barracks. Grievances and sick call request forms are also available in the housing unit/barracks.

Grimes Unit's Medical Department is comprised of a six (6) bed Infirmary, two (2) double-occupancy cells, and two single-occupancy observation cells, one of which is used to accommodate RHU offenders. At the time of the audit, due to unforeseen circumstances (COVID-19, etc.), a number of barracks within the facility were "temporarily" closed. Offenders previously housed in these locations were temporarily transferred to alternate sites.

Additional departmental space is provided for intake and discharge processing, mental and medical health services, indoor and outdoor recreation, religious services, academic and social services programming, food preparation and dining, commissary services, maintenance, laundry and library services, visitation, mailroom, security, administrative, and other related supportive services.

Grimes Unit is categorized as a parent unit. Offenders are received directly from the Ouachita River Unit (Intake Unit). Offenders are reviewed prior to transfer to ensure they meet the criteria of Grimes Unit. Upon arrival, offenders are placed in the Intake Barracks (Barracks 7), then reviewed by the facility classification committee to be assigned jobs, academic assignments, etc in accordance with listed programming and/or medical needs.

Additional programming provided at the Grimes Unit include: Substance Abuse Treatment Program (SATP) and the Principles Application of Life (PAL) Program.

Grimes Unit's physical plant also includes an onsite: Canine Unit, a Horse Barn Program, a Garden and Bee Operation, and an ADC Industry operation. Grimes Unit's ADC-Industry's main source of operation consist of coffee grinding, and the packaging of coffee and tea. This ADC Industry operation is governed separately under the ACA Correctional Industry standards.

Agricultural services are also located on the compound and is comprised of garden, crop, and hay operations. This full scaled operation is responsible for providing hay and vegetables, to Grimes, McPherson, and several other correctional Units around the area. Honey is also produced from this operation. Under the supervision and coordination of both Grimes and McPherson field staff/offender squads, the gardening operation received the "2020 - Garden of the Year Award.

In 2020, the combined work of Grimes and McPherson Unit's field staff/offender squad produced over 277,000 pounds of produce. The Grimes Unit field staff/offender squad bale up to 600 bales of hay which is provided to the Grimes, McPherson, and North Central Units' Horse Program. The Grimes Unit Regional Maintenance (staff and offender squad) also provides assistance to the community by assisting with sandbagging at the river when flooding becomes a problem. Regional Maintenance (staff and offender squad) assists the community with storm damage cleanup, as well as beautification projects in downtown Newport.

#### **D. Pre-Audit Meeting**

The team met on Sunday April 4, 2021, in Newport, Arkansas, to discuss the information provided by the Association staff and the officials from Grimes Unit.

The chairperson divided standards into the following groups:

Standards # 1A-01 to 3C-08 - Joy Bell, Member

Standards # 3C-09 to 5F-08 and 7B-01 to 7F-08 - Bruce Bell, Member

Standards # 6A-01 to 7A-15 – Robbin Bell, Chairperson

#### **E. The Audit Process**

##### **1. Transportation**

The team was escorted to the facility each day of the audit by Shelly Lawrence, Agency ACA Manager.

##### **2. Entrance Interview**

The audit team proceeded to the office of Joe Page III, Warden. The team expressed the appreciation of the Association for the opportunity to be involved with Grimes Unit in the accreditation process.

Warden Joe Page escorted the team to the visiting room where the formal entry meeting was held.

The following persons were in attendance:

Joe Page III, Warden  
Dexter Payne, Director  
Dale Reed, Chief Deputy Director  
William Straughn, Deputy Director  
Kenneth Davis, Deputy Warden  
Bernard Williams, Wellpath  
Thomasina McNutt, Mental Health Rehab Director  
Shelly Lawrence, Agency ACA Manager  
Lt. Byron Brown, Agency Fire Safety Coordinator  
Larry Bailey, Maintenance  
Phillip Thompson, Maintenance Supervisor  
Dough Dixon, Substance Abuse Treatment Coordinator  
Robert Freeman, Unit Chaplain  
Peter Amplo, Restrictive Housing Sergeant  
Maurice Williams, Field Major  
Tanya Higgins, Business Office  
Crystal Runsick, HR Coordinator  
Benny Nettles, School  
John Moss, STTG  
Avery Cox, Tool Control  
Asia Ellis, Sanitation  
Carl Wilson, Sanitation  
Robert Potter, Unit Training Supervisor  
Myra Glass, Law Library Supervisor  
Billy Cowell, Health Service Administrator  
Lori Reeves, Rehab Program Manager  
Denise Jaramillo, Mental Health Advisor  
Raylinia Ramsey, Classification  
Shurika Brown, Inmate Grievance Coordinator  
Kim Hoffman, Wellpath  
Abby Rizor, Records Supervisor  
Casey Blankenship, Visitation Clerk  
Lantz Goforth, Key Control  
Paul Cowell, ARO  
Sherri McEwen, ACA Unit Manager  
Kristen Rogers, Deputy Warden's Assistant  
Deborah Robertson, Warden's Assistant  
Lewis Young, Building Major  
John Sparks, Fire/Safety/Sanitation  
Richard Lee, Emergency Preparedness Coordinator

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

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

### 3. Facility Tour

The team toured the facility on the first day of the audit from 8:52am to 11:45pm. The tour of the facility continued on the second day of the audit from 8:33am and concluded at 11:47am. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Joe Page III, Warden  
William Straughn, Deputy Director  
Shelly Lawrence, Agency ACA Manager  
Lt. Byron Brown, Agency Fire Safety Coordinator  
Kenneth Davis, Deputy Warden  
Larry Bailey, Maintenance  
Phillip Thompson, Maintenance Supervisor  
Peter Amplo, Restrictive Housing Sergeant  
John Moss, STTG  
Asia Ellis, Sanitation  
Kristin Rogers, Deputy Warden's Assistant  
Lewis Young, Chief of Security  
Keri Ring, Sanitation  
John Sparks, Fire/Safety/Sanitation  
Richard Lee, Emergency Preparedness Coordinator

ACA notification and PREA signs were strategically posted throughout various areas of the facility.

### 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

Grimes Unit is a multi-security level facility. Its perimeter is surrounded by a double chain link fence reinforced with a height of 13 feet. The outer fence is topped with three rolls of coiled taugted razor ribbon wire. The inner fence is topped with one roll of coiled taugted razor ribbon wire. The facility is patrolled by one full time perimeter vehicle that services 24 hours per day, 7 days a week. Grimes Unit's perimeter security is comprised of a microwave, hard wire detection alarmed system consisting of 4 zones monitoring the facility 24 hours per day, 7 days per week. Grimes Unit's Central Control operations is responsible for the monitoring of all security systems.

Grimes Unit has three (3) points of egress into the facility. The Administration building serves as the facility's main entrance and pedestrian gate through which staff, contractors, and visitors enter. The Sallyport serves as the second point of egress and services all truck traffic. The "Turnout Gate" serves as the third point of egress which services the staff and offender field squads.

Identification is checked, with log entry on each individual entering the building. This includes staff, offenders, volunteers, contractors, and other authorized personnel. Entrance and exit into the compound is through the Front Administration building. Upon entry, temperature checks are conducted with masks required. If not in possession of a mask, one will be provided. Volunteers, contractors, and other authorized personnel then proceed with a pat down search, (if needed a metal detector) and if all clear, entry is granted. All personal items are screened by way of a security monitoring conveyor machine prior to entering into the facility.

Offsite law enforcement probation/parole, and other authorized personnel, are notified they must secure their weapons in their vehicle. Staff do not carry personal protection devices. In lieu of these devices, radios are distributed to designated staff to assist with the monitoring of offender movement and communication. Grimes Unit security department is comprised of 212 fulltime staff. Shift coverage consists of two (2) 12-hour shifts: 5:45am – 6:00pm and 5:45pm – 6:00am.

Grimes Unit has a total of 145 cameras that have been strategically placed throughout the facility. Camera surveillance monitor all staff entrances, living quarters, outside perimeter, and offender work areas. Camera are monitored in the Central Control and in the facility's camera room. Central Control maintains one (1) less lethal cage containing chemical agents and munitions. All items were inventoried and properly secured. It was recommended to have the board hosting the belly restraints located in Central Control be "shadowed" to provide better identification and accountability.

Post orders and evacuation procedures were reviewed and were found to be clear, concise, and in order. Central Control staff interviewed were very knowledgeable and understood their role as being the nerve center of the facility.

Keys and tool control are monitored appropriately. A master inventory of all keys is maintained. Administrative staff members review requests for keys and have established a system under which special authorization is required to receive keys other than those assigned to them on the basis of post or duty assignment. Emergency keys are available for issuance in the event of a life-safety or security emergency. Back-up emergency keys are maintained. Keys are inventoried and inspected on each shift. A check-in and check-out system is in place and duty keys issued to staff are logged in and out on an issuance logbook.

The facility has a multi-faceted system of tool control. Tools are classified as “Class A” tools, “Class B” tools, or “Class E” tools based on their potential risk for use as a weapon or the likelihood the tool could be utilized to facilitate escape. The highest risk tools are designated as Class A tools. These tools are stored in a locked cage area which is restricted to staff members only. These tools must be issued by a staff member and may only be used by inmates under the direct supervision of a staff member. The Class B tools are considered less risky than those designated as Class A, but their issuance and use is also strictly controlled. Class E tools include lower risk equipment type tools such as those issued for daily cleaning tasks. Tools are stored by means of a shadow board storage system which is used in conjunction with a check-in and check-out logbook. All tools are inventoried daily. The main tool storage area is located in the maintenance building. There is a system in place which requires that new tools be added to the master inventory prior to being placed in service. Broken equipment or tools are promptly removed from the main compound in an effort to prevent them from being fashioned into weapons or other contraband. During the course of the tour, several tools were checked to ensure inventory and issuance records were accurate. Food service and medical sharps were also checked during the tour. No significant problems were found. It was recommended to have “all of the tool board shadowed” to better facilitate identification and accountability.

Searches are conducted on offenders as they depart and return from varied work assignments. Offender movement is controlled, and offender searches are conducted randomly in key areas within the facility. Within a 24-hour period there are a total of six (6) formal counts (6:30am, 8:30am, 1:30pm, 5:30pm, 6:30pm, and 10:30pm). Following the 10:30pm count, informal counts are conducted every two (2) hours up until 6:00am. Additional wellness counts are conducted throughout the day/evenings.

Grimes Unit maintains a small Armory, with a limited supply of munitions, weapons, and equipment. All items were found properly labeled, secured and inventoried. All keys are provided by way of the chit system. Each housing unit has their own Emergency Response Team.



Inspection of ICC Garage had a number of minor deficiencies needing to be addressed. Information was noted discontinued tools should not have a shadow behind them. It was also recommended that chits or tags should be used on missing or outdated tools. It was noted that covers should be placed on all power sources. Inspection found all Class A and Class B tool were secured and properly inventoried.

Inspection of facility Horse Barn and the Canine Unit found all assigned chemicals, tools, and equipment were sorted properly. The inspection of the Training building found area clean and in order. Additional note was provided to area supervisor that the “berm” needed to be placed after so many years due to the lead.

Inspection of the facility’s Warehouse found all of its processes of accountability in order. When a key is broken by an officer, they complete a 005, when a key is broken by an offender they are charged. American standard keys are ordered and sorted in the Armory. Safety Data Sheet were in order and in secured in the chemical cage.

Grimes and McPherson Unit share a 12-person Emergency Response Team (ERT). This team assists both the facilities with shakedowns and emergency situations, such as riots, forced cell movements, etc. Grimes Unit also maintains an onsite “Canine Unit” comprised of seven (7) tracking dogs. Care and services are under the supervision of the assigned security staff. Grimes Unit’s Emergency Response Team and the Canine Unit are also available to assist other Units in shakedowns and emergency situations upon request.

In November 2020, four (4) officers graduated from the Arkansas Department of Corrections 2020 P-2 Academy Class. The lead instructor was Grimes Unit’s Training Supervisor. This academy curriculum included four weeks of in class studies, and two weeks of on-the-job training at the cadet’s assigned Unit.

### **Special Management and Restrictive Housing**

Grimes Unit maintains two (2) Restrictive Housing Units (RHU). Grimes Unit does not utilize Extended Restrictive Housing, nor does it house offenders in RHU that are under the age of 18.

Housing Unit five (5) is comprised of one (1) Barrack which contain 45 restrictive housing, single-occupancy cells. Housing Unit six (6) is comprised of one (1) Barrack which contain 42 restrictive housing, single-occupancy cells. Grimes RHU also maintains two (2) suicide/preventions cells, one located in each of the restricted housing units. The medical department also provides one additional single observation cell specifically designated to monitor RHU offenders in crisis.

Grimes RHU provides outdoor covered exercise areas. RHU exercise areas are comprised of individual yard modules. Each yard module consists of 180 square feet of unencumbered space. Documentation reflects all offenders housed in RHU receive a minimum of one (1) hour of exercise outside their cells, five (5) days per week, unless security or safety considerations dictate otherwise. Sanitation in the RHU cells and recreation areas were good. Additional mattresses were sanitized, covered, and readily available for usage.

Documentation of security cell to cell observation rounds were found in compliance. Daily rounds conducted by the Senior Security Supervisor and medical/mental health staff rounds were logged in all of the RHU areas. Weekly programming staff rounds are also conducted in the RHU. Barbering services are provided in house by assigned offender barbers. Services are provided on a weekly basis in accordance with in-house showering and hygiene scheduling.

Documentation reflect RHU visitation hours are conducted on Tuesdays and Thursdays via video visitation, unless security or safety considerations dictate otherwise. Face to face (non-contact) visitation is expected to resume once COVID-19 protocols have been rescinded. Documentation reviewed reflect RHU offenders are afforded telephone privileges with administrative approval.

Library and law library services are offered to offenders housed in RHU. Offenders submit written requests or may submit request via kiosk located in the RHU. Requests are processed by the librarian. If authorized, requested items are forwarded to the RHU with a two (2) day return date. Items are inspected by security staff prior to and upon exiting the RHU. Weekly rounds are conducted by the facility Chaplain. Additional religious requests or services are provided by the Chaplain in accordance with provisions noted by security. Documentation review reflect laundry, mail, and other related services are provided to offenders housed in RHU in accordance with the same schedule as offenders housed in general population, unless otherwise designated by security. Documentation reviewed reflect new offenders assigned directly to RHU receive written orientation and/or translations in their language. When a literacy problem exists, a staff member assists the offender in understanding material. Grimes Unit telephone system is comprised of language line services.

Medical and mental health services are provided to all offenders housed in RHU. RHU offenders requesting medical care/assistance submit paper requests to nursing staff during daily cell to cell rounds. Documentation reflects required screenings are reviewed promptly in accordance to health care protocols. Medical staff nurses conduct medication pass (with security escort) twice daily or more often as required. Mental health staff advisors (2) conduct RHU rounds a minimum of three (3) times per week. A Licensed Clinical Social Worker conducts RHU rounds a minimum of once per week.

Meals are transported from the Food Service Department to the RHU in temperature controlled hot boxes. Offenders housed in RHU are provided the same meal and content, at the same time as offenders housed in general population. In the instance that it is officially documented that an offender's voluntary or involuntary action warrants an alternate meal, review and approval can only be authorized by the Warden/designee and Health Authority/designee.

Records reviewed confirm that the facility's classification committee review offender's status in accordance with RHU standards.

PREA signs were observed mounted throughout unit. Gloves were observed readily available for staff usage.

### **Environmental Conditions**

Grimes Unit is a smoke-free environment. Review of facility inspection reports reflect compliance with the applicable standards relating to environmental conditions. The facility's water, sewage, and power supply is serviced by the city of Newport.

The facility's building structure was found to be in good order and properly maintained. Light levels exceeded the required standard of 20 feet at desk level and in group areas. Air circulation exceeded the 15 feet of outside or recirculated filtered air permitted per person. The audit team found the temperature within the facility to be conducive to comfort. Noise levels throughout the facility was within acceptable limits. The audit team tested the hot and cold running water and found temperatures suitable as required. The ratio of showers, washbasins, and toilets to offenders are in compliance with state statutes and ACA standard guidelines.

The facility has a preventive maintenance program that is ongoing. In the event the facility loses power, two (2) emergency generators are in place serving the facilities operations.

### **Sanitation**

Sanitation throughout the facility was exceptional. The facility's attention to detail and organization has set high standards in cleanliness and efficiency. Sanitation inspections are conducted by the assigned security and Fire/Safety staff. Housekeeping plans were reviewed throughout the facility. The team observed offenders cleaning in various areas of the facility. Offenders were found to be clean, beds were made, property stored, and shoes properly placed. Housing unit furnishings were found to be clean and in good order.

Chemicals/cleaning supplies used throughout the facility are inventoried and dispensed from the Central Caustic supply room. Cleaning supplies are transported to locations throughout the facility by way of secured caustic mobile carts. Safety Data Sheets and safety equipment were located in close proximity to area. Cleaning supplies located in the housing units were limited. Inspection of supplies were found to be organized, properly stored, and inventoried. Janitorial closets with sinks and cleaning supplies were found accessible to all housing units and activity areas.

Institutional grounds were well maintained and groomed with no evidence of dumping or improper material disposal. A contract is in place for monthly pest control (Delta Pest), recycling, and bio-hazard waste services (Stericycle). Facility first aid kits contain red bio-hazard bags for use of proper bio-hazard disposal. A maintenance prevention plan is in place ensuring follow-up with an organized system of check and balances.

### **Fire Safety**

Grimes Unit's fire protection system is a wet system that contain approximately 1,300 wet sprinkler heads and is activated by heat build-up. The alarm system is monitored from a central control panel located in Central Control. Servicing is provided by Johnson & Johnson Control Services. The food production area is protected with a vent-a-hood system over each cooking area, a pilot light system for gas appliances, and an emergency cut off system. The most recent hood suppression system was serviced by Simplex, Inc, in February 2021. There are six (6) enunciator panels located in the Maintenance shop. All are service by Simplex, Inc. Grimes Unit is equipped with 452 smoke heads, 34 duck detectors, and 18 pull stations. Designed buildings within the facility are tested by an automatic sprinkler system which is maintained and tested quarterly. Facility fire evacuation routes are clearly and strategically posted throughout the facility.

The Newport Fire Department provide fire services to the facility. Distance is approximately 10 minutes from the facility.

Security staff are regularly trained in the use of all fire equipment including portable fire extinguishers and self-contained breathing apparatus (SCBA's). The 12 SCBA's and 110 fire extinguishers have been strategically placed throughout the facility. The facility contracts with a local vendor (Fire Protection of Arkansas) to provide quarterly service on all of the fire extinguishers. Facility staff was knowledgeable of the procedures for evacuating offenders from locked areas such as within the general population housing unit and the RHU. Additional training is provided in evacuation procedures, setting of a fire watch, and how to accumulate evidence after a fire. One (1) fire drill is conducted per shift, per area, per quarter. Means of egress were properly identified and unobstructed. A review of the facility's "offender orientation" handbook specifically provides fire safety instructions.

Flammables, toxic chemical were found properly stored and inventoried. Diluted products which have been pre-mixed are utilized for routine cleaning. A review of the facility cleaning supply inventories Safety Data Sheets and safety equipment were found to be organized, properly labeled, inventoried and stored.

First aid kits and AED's were strategically located throughout the facility. Eye wash stations were present, easily accessible, and operational.

COVID-19 precautions delayed the scheduling of the facility's annual 2020 fire/safety inspection. Documentation was presented to the audit team confirming the rescheduling of this inspection. During this time period, in accordance with fire safety standards and protocols, precautions have been put in place and ongoing, ensuring fire safety checks, etc are adhered to.

### **Food Service**

Grimes Unit-ADC food service department is under the supervision of one (1) Food Service Production Manager, four (4) Food Service supervising staff, and two (2) fulltime Security staff. There are a total of ninety (90) offenders assigned as food service workers. All food service managers and supervising staff are certified in Serfsave procedures. The Food Service Manager provide offenders workers orientation and hands-on food service safety/sanitation training. Medical clearance is obtained on all food service offender workers prior to being placed on assignment.

Offenders housed at Grimes Unit are provided three (3) hot meals per day. If offenders are not physically in the facility at the time of the hot meals, a meal tray is set aside (refrigerated) for the offender's return. Sack lunches are prepared for the offenders assigned to offsite details. Hours of offender meal service are: 3:00am, 10:00am, and 3:00pm.

Food service tools and equipment were found secured and properly inventoried. Inspection of chemical/cleaning supplies found items organized and properly inventoried. It was recommended to have the "tool board shadowed" to better facilitate identification and accountability. Restroom facilities for both offenders and staff were in close proximity to all workstations. An outside vendor conducts hood suppression inspections every six (6) months. Most recent inspection was conducted February 2021.

A certified dietitian reviews and approves the master menu system. Grimes Unit food service department provides the offender an average daily caloric count of 3500. Both general and medical diets have a four (4) week rotating menu cycle. Medical and religious diets are provided upon review and administrative approval. At the time of the audit there were a total of 150 authorized medical diets. There was one (1) eye wash station in close proximity of the food service workstations. Eye wash station was clean, operable and in good working order.

Equipment temperature inspections conducted on areas such as the tray machine, cup machine, meal transport hotboxes, freezer, cooler, and dry storage all were found compliant and in accordance with safety standards. The food service department is inspected weekly and monthly by designated facility staff.

Commissary services are provided to offenders housed at Grimes Unit. Hours of operation are Monday – Friday, 8:00am until finished, except for weeks that include holidays or inventory. There are a total of three (3) commissary stores located within the facility. The main store is located in between Housing Unit 1 and 2, a second store is located in the corridor leading to Housing 3, and a third store is located in the corridor leading into Housing 4. Each store is supervised under the direction of two (2) Commissary Store managers and three (3) offender store workers. Offenders may submit their commissary orders by using the kiosk located in the Barracks. A commissary order drop box is also available in each housing unit. There is a maximum of \$100.00 commissary allowance per week.

Inspection of all three stores found areas clean and in good order. All items sold in the commissary stores are approved by the Warden. Offenders on indigent status are provided a commissary allowance. Items allowed for purchase are limited and must be selected off of the Commissary Indigent list. Items for Indigent offenders allowed funds are approved through the Trust Fund Banking Department at the ADC Central Office.

### **Medical Care**

Grimes Unit's medical and mental health services are provided under the contractual authority of Wellpath Services. Its medical unit receives transfers of offenders throughout the county of Jackson and other surrounding areas with history of high-risk behaviors, compounded by lack of medical care and/or mental health treatment, within an aging population, and are more likely to have chronic illnesses and infectious diseases. The agency maintains a multi-disciplinary staffing complement of 26, consisting of full, part time, and prn. The medical unit operates 24 hours per day, 7 days per week, and provides after hours on-call physician coverage. The medical department provides comprehensive medical services for all offenders housed at Grimes.

Grimes Unit's medical services are provided by the following fulltime staff: (1) Health Services Administrator (HSA), (1) Director of Nursing (DON), (2) Advanced Practice Registered Nurses (APRN), (1) Dentist, (1) Dental Assistant, (1) Administrative Assistant, (1) Medical Records Clerk, (3) Registered Nurses (RN), (11) Licensed Practical Nurses (LPN), and (2) Nurse Assistants.

Parttime and prn medical services are provided by: (1) Medical Director, (1) Dental Hygienist, (1) Psychiatrist. Volunteers do not assist Grimes medical department in the delivery of healthcare.

Arkansas Department of Corrections mental health staff also providing assistance to offenders housed at Grimes Unit include: one (1) Psychologist, two (2) Advisors, and one (1) Licensed Clinical Social Worker.

Grimes Unit's medical department is comprised of one "main medical area", and one small satellite medical clinic located inside the Restrictive Housing Unit (RHU).

Entrance into the "main" medical department is by way of the front area security officer post. Adjacent to the security officer station is the offender/patient waiting area which holds a capacity of 10. An offender/patient restroom and water thermos is also located in this area. To the left of this post is the medication storage and pill call room. Entrance and exit is by way of one door, under camera surveillance, and is secured with double locked doors, double locked cabinets and locked medication carts with limited key access. Located on the opposite side of the wall, in this secured room is the "pill window". Secured with caged screening this window opens up in view of the adjacent corridor. This is where medication is dispensed. Adjacent to this room, are two (2) observation cells. These cells contain two beds each. Each cell maintains one (1) shower, one (1) toilet, and one (1) washbasin. There is a dividing wall from the floor ¼ way up the wall of the cell dividing the toilet and shower room and the rest of the cell to provide privacy. Down the corridor to the left of this area is the back section of the medical department. To the right of this area are office space for the Administrative Assistant, the Director of Nursing, and the Health Service Administrator. To the left of this area is the bio-hazard storage room containing infectious control and universal precaution equipment/supplies, a sterilization station, a medical supply room, and the newly acquired "Chemotherapy" room.

On the opposite side of this medical area are two (2) additional observation cells of which are categorized each as one (1) man cells. One (1) of the cells is designated for RHU offender/patients, and the second (2<sup>nd</sup>) cell is for any observation or admission into the Infirmary. There are privacy screens in each of the cells. There is a shower that is shared by these 2 rooms located in the center outside the door. To the back area of this corridor there is a six (6) bed Infirmary. The Infirmary areas are handicapped accessible and under constant security observation by means of 24/7 medical and security staff rounds. Records reviewed confirmed rounds were conducted by medical and security staff in accordance with medical protocol. The Nurse's station is within sight and sound of the Infirmary, and isolation/observation rooms. Grimes medical department does not provide negative pressure cells.

A lab and an employee restroom is to the left of this area. To the right is the office of the Grievance Nurse and the Infectious Control Nurse. Also in this corridor is the medical breakroom, the X-ray and Emergency room. To the left and down to the right of this corridor are three (3) examination rooms and the Dental Suite (Operatory).

Located in the center of this medical area and behind the security officers post is a spacious nurse's station. Nurse's, Certified Nurse Assistants (CNA), and medical records staff perform their assignments in this area. There are two (2) doors leading into the back of the nurse's station. The first (1<sup>st</sup>) door leads into the Chronic Care nurse and Assistant Practical Nurse (APN) offices. Telemed services are also conducted in this area. The second (2<sup>nd</sup>) door is the other side of the "Chemotherapy" room where oncology offender/patients will receive treatment.

Adjacent to the "main" medical clinic is a separate wing consisting of Grimes Unit's Mental Health department. Area is comprised of a separate offender waiting area, with additional office space and individual and group conference rooms.

Grimes Unit's medical services/supplies consists of the following: two (2) AED's (secured and inspected), one (1) EKG (secured and inspected), one (1) jump bag (secured and inspected), one (1) emergency stretchers with straps (secured and inspected), one (1) transport gurney, one (1) secure medication room, two (2) refrigerators (for flu, TB solutions, etc), one (1) refrigerator in Dental, one (1) refrigerator (for specimens), portable oxygen cylinders (secured and inspected). The facility "jump bag" is checked at shift change by nurses to make sure the seal is still on and not tampered with. Contents of jump bag is checked monthly. The AED are checked monthly.

Grimes Unit's medical department (main and RHU) was found to be exceptionally clean, spacious and well equipped to care for the offenders in a private and professional environment. Sanitation is provided by offender orderlies with the assistance of medical. Cleaning supplies are transported by security into the medical areas on a cleaning cart and transported back to the Central Caustic storage room on a daily basis. Inventory of daily distribution is inventoried prior to transporting to medical department and inventoried again upon return. Safety Data Sheets are maintained on all chemicals. All were items were found to be organized, accurate, and properly secured.

Grimes Unit provides Telemedicine services. All medical and mental health offender movement (scheduled and unscheduled) were found to be orderly and conducted in a secure manner. Refrigerators were observed clean and in order with records of temperature check logs monitored daily. Evidence of regular equipment checks for accuracy and calibration were well documented. An inspection of Grimes Unit's emergency equipment contents found items to be properly inventoried (weekly), well organized, and readily available for emergent situations. Grimes Unit's "main" medical department is serviced by one (1) generator located in the maintenance building.



Grimes medical satellite clinic located in the Restrictive Housing Unit (RHU) consist of a secured medical exam room, utilized by nursing staff for sick call, nursing callouts, etc. Room contains one (1) exam table, one (1) desk, one (1) sharp container, and one bio-hazard container. Offenders requiring additional medical services are escorted to the main medical clinic.

Grime's medical department nursing staff hours consist of two (2) 12-hour shifts: First shift 6:00am – 6:00pm, Second shift – 6:00pm – 6:00am. Medical provider hours are scheduled Monday – Friday from 8am – 4:30pm. General medical hours of operation are scheduled – Monday – Friday from 8am – 4:00pm.

When it is determined that an offender requires a higher level of care or services not provided at the facility, the offender is transported to Unity Harris Hospital in Newport, which is approximately 5 minutes from the facility. Auxiliary and/or emergent medical services are provided by Unity Hospital in Searcy, which is approximately 45 minutes away or White River in Batesville, which is approximately 45 minutes away.

White River Ambulance Service provides ambulatory services with an average response time of 15-20 minutes. There is a vast location adjacent to the facility which during instances of emergency could serve as a “helicopter pad”. Grimes medical staff are trained annually in CPR, AED, First Aid and are considered “First Responders”. Grimes conducts quarterly simulated drills to test the facilities medical emergency response. Documentation confirms emergency response as under 4 minutes.

Offenders are provided instructions and direction on how to access sick call upon arrival at the facility, at the time of the orientation, upon receipt acknowledgement of offender Handbook, at the end of the health appraisal, and a fourth time at the conclusion of each sick call visit.

All offenders access sick call by either submission of sick call paper requests or by submission on kiosk. Offenders may place their sick call paper requests in the designated locked sick call boxes located in the units and/ or in the sick call box leading into the chow hall corridor. Offenders housed in RHU submit their sick call requests to the nurses during daily medical rounds. Medical rounds are conducted in the RHU a “minimum” of twice per day. All sick call slips (paper/ kiosk email) are collected and triaged nightly, by the designated nurse using nursing protocol/guidelines. Per policy, sick call is required to be conducted five (5) days per week, but Grimes Unit sick call is conducted seven (7) days per week during the hours of 3:00am – 10:00pm for General Population and for RHU.

Routine sick calls are seen in accordance with Priority status. Priority 1 requires immediate attention and is seen within 24 hours or less. Priority 2 requires prompt attention and is seen within 48 hours. Priority 3 sick calls are routine and are seen within 72 hours. Priority 4 sick calls are answered without face to face and offenders are notified in writing of the action taken to resolve the issue.

Grimes Unit's medical departments 2021 first quarter sick call encounters averaged a monthly total of 921 nursing encounters, a monthly total of 60 physician encounters, and a monthly total of 561 midlevel encounters. First quarter RHU sick call encounters averaged a monthly total of 4,961, with a monthly average of 0 physician and 0 midlevel encounters. Offenders are charged a \$3.00 co-pay for each sick call visit. Follow-up visits and medical referral are not charged co-pays. Chronic care issues, work injuries and accidents are not charged co-pays. Offenders are not denied medical care due to their inability to pay.

Pill call for General Population and RHU is scheduled for Monday thru Sunday, 3:00am, 9:00am, 3:00pm and 9:00pm. Diabetic pill call is scheduled for Monday thru Sunday, at 3:00am and 3:00pm. There is a special designated medication time for offenders that require medication three (3) times per day. During Pill call hours there is one security officer station at the window providing confirmation of identity of offender prior to issuance of medication. During Pill call there are two (2) nurses on duty that administers medication, diabetic sticks and insulin. A designated nurse (with security escort) conducts Pill call to the offenders housed in the Restrictive Housing Unit. Medications are administered as direct observation therapy or nurse administered therapy. All no shows or refusals to medications are documented and/or referred for further medical review and assessment. During this pandemic period, pill call is conducted within the Barracks. Upon medical clearance and approval, regular pill call operations will resume (at pill call window).

Offenders are permitted Keep on Person (KOP) medications. There is a limited supply of Over the Counter (OTC) medication available in the Commissary for purchase by the offender. Morning pill call lines were observed and found to be secure, concise, and orderly. Grimes patient/offenders are provided a thirty (30) day supply of medication upon discharged and/or released.

Grimes offenders are screened and treated on a variety of chronic illnesses and are provided with education related to their illness during each chronic disease visit. Offenders are also scheduled for the following off-site Specialty Care Clinics as needed: Oncology, Cardiology, Orthopedic, Endocrine, Immunity, Neurology, General and Oral Surgery, Gastrointestinal, and Infectious Disease, Pacemaker clinic, Dermatology, Retinal Specialist, Vascular Surgery. The average time frame from request until seen by the physician is 7 to 10 days. The monthly average number of offsite chronic illness contacts are 50. Dialysis clinics are provided off site. At the time of this audit, there were two (2) offenders receiving Dialysis services. Medical screenings are conducted on all laundry and food service workers prior to receiving assignment approval.

Offenders are also scheduled for the following on-site Clinics are: Cardiovascular, Oncology, Gastrointestinal, Optometry, Respiratory, Audiology, Orthotics/ Prosthetics, Physical Therapy, General Surgery.

Grimes Unit's Dental Clinic is under the supervision of one (1) Dentists, and one (1) Dental Assistant, and one (1) Dental Hygienist. Dental services are provided and triaged through the medical sick call process. The Dental department (Operator) maintains two (2) dental bays, two (2) dental chairs, a dental lab, a dark x-ray room, a sterilization /equipment room, and a janitorial closet. The cabinets in the "Operator" are all infection control supplies. Dental services are provided five (5) days per week during the hours of 7:00am – 5:30pm. The wait time for dental services requests are 24 to 72 hours from date of receipt, with the exception of emergencies. Some of the dental services provided are: fillings, dental screening, hygiene education, routine x-rays, stainless steel crowns, cleaning, root canals, and dentures. There is a small closet that holds the air compressor and vacuum system. The sterilization room contains all of the dental tools, sharps, chemical products and the fireproof safe for assigned chemicals. This autoclave for sterilization tools are also contained in this room. A check of all dental tools and sharps were conducted. The inventories were found to be accurate and up to date. Spore tests are performed weekly and there is a corresponding log as well as results on file. The Dental suite is equipped with two analog dental bitewing x-ray machines, an autoclave, an x-ray head, an x-ray processor, an air compressor, an ultrasonic machine, an amalgamator, a self-curing light, a refrigerator, a dental vacuum machine, and one (1) cavitron. Broken tools are documented and disposed of by facility maintenance. Sterilization procedures are monitored twice daily and were found compliant with state and federal standards. Grimes dental clinic receives approximately 40 – 50 sick call request per month.

Grimes Unit. meets necessary American Disability Act (ADA) standards, including accessible paths of travel, ramps, and TTY (Text Telephones) phones. Unit telephones with volume controls, and Language line access are provided in various areas of the facility as well as in the housing units. Prison Rape Elimination Act (PREA) instructions/informational signs were observed posted in various locations within the facility.

Medical/Mental health intake screening is conducted immediately upon the inmate arrival at the facility. Medical/Mental health orientation is conducted during the facility weekly orientation. Language line services, inmate handbook/orientation material (in Spanish) are provided to inmates with limited or non-English speaking capabilities. A midlevel provider is available onsite 24/hours/7 days per week, a physician is available 40 hours per week, and the HSA is on call 24 hours/7 days per week. Health appraisals are conducted 14 days of the inmate arrival by a qualified, licensed provider. Detoxification services are not provided. Grimes Unit offenders arriving in need of these services are immediately transferred to a facility offering these programs.

Grimes Unit does not operate a “Pharmacy” but has a Medication supply/Pill room. This medication supply/pill room is located within an area contained behind a secured locked screen door under camera surveillance.

Prescribed medications are ordered from Diamond Pharmacy and delivered six (6) days a week through the Fed-Ex within 24 to 48 hours of order request. The backup pharmacy is through the local Walmart, Walgreens, or Darling Pharmacy located in Newport. The storage/supply/pill room inventory is counted and verified monthly. Medications not utilized or expired are returned to a reverse distributor. A review of the proper disposal of expired medication were found to be accurate and in order. Routine quarterly audits are conducted. There is a process of a two (2) party nursing team count conducted, with the daily updated information reflected on the inventory log. When a nurse arrives for or leaves a shift, a count of all area sharps are completed by the first nurse with a second recount by the second nurse. Sharps are always locked up while not in use. Review of a number of sharp counts found all to be properly inventoried and in order. The auditor reviewed the Medical Appraisal and Revalidation System (MARS) for appropriate signatures and missed doses. All documents were found accurate and in order.

There are a total of 6 patient/offenders with active prescriptions for narcotics and 719 offenders with active prescriptions.

Medical complaints and grievances are submitted using the grievance process. The Grievance Coordinator responds to all grievances through the HSA. Step I and Step II grievances are addressed within the facility, Step III grievances are addressed and responded to by the Warden. The average number of medical grievances processed monthly is twenty-six (26).

Grimes Unit patient/offender medical records are electronic. A sample review of an offender medical record found documents concise, accurate, and well organized. A sample review of varied staff medical license, registrations, and random inventory of sharps and instruments found all inspected to be accurate.

Express Mobile Services provides radiology services twice per week to offenders housed at Grimes. Lab Corp provide onsite lab services at the main medical clinic. When lab work is ordered for offender/patients, medical staff obtains sample ordered. There is a secured Lab Corp lockbox container located in the front administration building. Medical staff contacts Lab Corp courier and schedules pickup. Medical staff then transports sample and secures item in Lab Corp lockbox container. Courier picks up and/or delivers requests from the Lab Corp locked container for processing. Key access is limited with authorized access only. There is a dedicated printer located in the lab area specifically for results which are processed and received the next day. STAT labs are processed via email or fax as soon as possible.

Grimes medical has a plan for the management of communication diseases including education on prevention, diagnosis, and isolation. Communicable disease and outbreaks are investigated and managed on-site, and reports are provided to the health department. MRSA precautions are in place. When the needs of the offenders are beyond the capabilities of the facility, referrals are made to a contracted hospital. Offender workers assigned to provide laundering services have been trained to take precautions to control or prevent the spread of infectious disease. Offenders are provided annual TB test at no cost. TB tests are also offered to Grimes staff, but, are not mandatory. Infectious control training is provided to all medical staff annually.

Grimes medical and mental health staff receive annual CPR, First Aid, and routine fire drill training. Grimes medical clinic oversees the contents, restocking, inventory and control of the facility AED, Blood-spill and First aid kits. There are two (2) AED's located on the facility compound. There are a total of fourteen (14) first aid kits, and one hundred-ten (110) fire extinguishers strategically located throughout the facility proper and satellite areas. Blood spill kits are maintained within each housing unit.

Monthly teleconference meetings are conducted with the facility HSA, Director, Assistant Director, Facility Compliance staff, and the Department Heads. Meetings consist of Quality Control, Patient Safety and other such related topics.

At the time of this audit, Grimes Unit has not completed PREA Accreditation. An audit was conducted of the Grimes Unit Infirmary by the Arkansas Department of Health in August of 2019. Two minor deficiencies were noted with status of corrections listed in follow-up. Grimes Unit was audited by MQRS in January of 2020 and in January of 2021. This independent company hired by the Arkansas Department of Corrections was assigned to monitor the facilities compliance with ADC policy. Results from these audits ranked Grimes Unit's Infirmary with a score of above 90% in every category reviewed.

All medical waste is properly bagged and stored in biohazard room located in the medical clinic. Monthly pickups and disposals are under the responsibility of the contracting (Stericycle) bio-hazard waste agency.

Medical diets allow for offenders to develop good eating habits. Requests for Therapeutic diets are processed through the medical department. All requests are reviewed by the assigned facility Dietitian and forwarded to the HSA for approval. Currently, Grimes Unit maintains a list of offenders approved and are assigned Special/Medical diets. There are a total of 2 -3 Special/Medical requests processed monthly.

Offenders access mental health services through the medical sick call kite process. Offenders can also be referred by facility staff and/or shift supervisors. Offenders are provided service within five (5) days from the date of kite submission, or sooner if emergent. Emergency mental health problems are addressed by on-call staff 24 hours per day/7 days per week. The on-call staff will conduct a risk assessment, and if deemed necessary, the offender will be placed on a “treatment precaution” status in one of the observation rooms located in the main medical clinic.

If an offender states that he will harm himself during regular business hours, he is seen by the Mental Health staff, when mental health staff arrive on grounds, medical will evaluate inmate using established mental health crisis protocol. The Suicide Assessment Five-step Evaluation and Triage (SAFE-T) process is used to assist in addressing the offender’s critical needs. If placed on “treatment precaution” status the level of observation is constant, unless otherwise ordered by the Mental Health provider. All orders are received by Mental Health. Observations of security/medical/mental health and counseling staff rounds documentation are noted in the “Watch log”. Under strict mental health instructions offenders are provided a safety apparel/items, one (1) safety pillow, one (1) safety mattress, one (1) safety blanket, one (1) safety gown, one (1) safety smock, and paper cutlery (spoons). Reading material, and one (1) safety helmet may be authorized/ordered depending on the situation. Offenders are temporarily housed on this status until a determination is made that either offender is to return back to general population or that an immediate transfer is needed which will be coordinated through the Mental Health Supervisor.

Mental health staff at Grimes Unit provides a comprehensive range of mental health services to the throughout the facility. These services include evaluation and assessment, case management, counseling, crisis management, psychiatric care, monitoring of medication compliance, psychological testing, and follow up for inmates in the Restrictive Housing Unit.

Additional mental health programs offered are: Life after Release, Crisis Intervention, Group Counseling, Dual Diagnosis, Sex Offender Treatment Program, Multi-Disciplinary programming, and Individual Treatment plans. Substance Abuse programming is provided to Grimes Unit’s offenders through ADC and Wellpath services. At the time of this audit, due to COVID precautions, self-study groups have been added to the programming curriculum. Telemed services are provided at Grimes Unit as needed. Mental health staff (advisors) conduct rounds in the Restrictive Housing Units a minimum of three (3) times per week. Rounds are also conducted by the facility LCSW on a weekly basis. The two (2) suicide prevention/observation cells located in RHU are monitored by camera and when occupied (treatment precaution) is under constant 24 hour – 15- minute watch. Offenders requiring mental health services are seen by a physician once every three (3) months or more often as needed. The psychiatrist meets with every inmate on psychotropic medications at least every 90 days, or more often as needed.

The total number of patient/offender “contacts” (routine caseload/emergent/referrals, etc) by Mental Health per month is 178. The number of patient/offenders authorized psychotropic meds total 178. The number of patient/offenders diagnosed as seriously mentally ill is 54.

All Grimes Unit employees receive annual suicide prevention training. The facility HSA and Mental Health Supervisor provides annual medical training. Training is conducted both onsite and online. New hires receive required 40 hours of facility wide-training, additional staff receive additional medical training based on position.

### **Recreation**

Grimes Unit provides a variety of recreational opportunities for the offender population. The recreational department is under the supervision of two (2) civilian recreational staff and one (1) security officer. Two (2) offender recreational workers also assist with scheduled activities. On the weekend security staff provide assistance as needed on the weekends and with larger events. The facility has a large outdoor recreational field, and an indoor gymnasium with two basketball courts.

Outdoor recreational activities include: a full basketball court, a workout station, soccer, toss bag, a sand volleyball pit, a walking area, and exercise space. Indoor recreational activities include: two basketball courts, a handball court, volleyball, a ping pong table, and a workout station.

The recreation department schedules special holiday events during major holidays such as Memorial Day, July 4<sup>th</sup>, Thanksgiving and Christmas. There are leagues throughout the year such as basketball, softball, volleyball, etc. Offenders participating must be class I or II. Organized and informal events such as tournaments are held with monetary prizes given to the winners.

Due to COVID precautions, group and other related recreational activities had been temporarily suspended. At the time of this audit, in accordance with CDC protocol, facility operations were gradually returning back to normal operations.

### **Religious Programming**

Grimes Unit provides a variety of religious services, which are supervised and coordinated by the fulltime licensed Chaplain. Volunteer clergy and community churches assist the Chaplain in the provisions of services. There are a total of 40 volunteers assisting in providing special services at this facility. The Chaplain provides religious literature and resource material to offenders housed at Grimes upon request.

Grimes Unit religious programming offer services for Non-Denominational, Islamic/Muslim, Jehovah Witness, Catholic, Church of Christ, Baptist and Mennonite studies. Pre-COVID, musical presentations were provided by religious volunteer organizations. Services and activities are conducted in the facility visitation and classroom areas.

The Grimes Unit Chaplaincy program also coordinate the facility's "Principle Application of Life (PAL)" Program. An exceptional opportunity, this 12-month program assist offenders in learning to apply the principles of faith-based materials for everyday life skills. Grime Unit, Barracks 11 houses all offenders enrolled in the PAL program. Established as a self-sufficient community-based environment, curriculum studies include: the Institute of Self-Worth, Life Skill lessons dealing with parenting, overcoming adversity, leadership, character qualities, and Basic Life Principles.

Additional Chaplaincy programs includes the Story Book Project. Programming is conducted four (4) times each year. Curriculum consist of offenders reading books into CD recorders. Books and tapes are then sent to the designated child or children.

At the time of the audit, due to COVID-19 precautions, a number of religious programs, and services were temporarily suspended. In lieu of these circumstances, the Chaplain conducts video services in conjunction with related spiritually inspired movies.

### **Offender Work Programs**

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

Routine work assignments at Grimes Unit include the usual found in a correctional setting such as sanitation, barbershop, food service, laundry, photographer, clerks, educational tutors, landscape, library aides, recreation, and maintenance. Offenders are not provided monetary wage reimbursements, nor are offenders charged for basic hygiene items, meals, nor laundry services.

Grimes Unit's offender field squads participate in agricultural and gardening programming. The Garden and Bee Operations are comprised of both Grimes and McPherson workers. Honey is also produced at this operation. These offender field squads are responsible for providing hay and vegetables, to Grimes, McPherson, and several other Units around the area. A combined total of 60 offenders from Grimes and McPherson Units currently are assigned to this gardening project.



The Prison Industry Enhancement (PIE) Certification Program located on the grounds of the Grimes Unit provide selected offenders the opportunity to work and receive hands on marketable vocational skills. In lieu of monetary wages, offenders employed receive good time with a percentage of offender's salary going towards family support and to the ADC for room and board expenses. Coffee Grinding and Coffee/Tea packaging are products manufactured at the Grimes Industry site. A total of 34 Grimes Unit offenders are currently employed in this PIE certification program.

Grimes Unit also provide vocational skills to offenders assigned to the ICC garage.

Grimes Unit staff and offender workers have participated in a number of community projects. Some of the most recent projects include: collaborating with the Newport Economic Development Commission in building a sign and bench at the site of the downtown corner of Newport. In this project the Regional Maintenance staff also participated in cleaning the lot and gazebo on the corner. An additional project included participating in the Muffins with Moms and Doughnuts with Dads breakfast. Grimes Unit offenders wanted to participate knowing that there may be children who do not have a mom or dad to share a muffin or doughnut together. So, if even for one day, one child had a positive breakfast with someone who cares.

### **Academic and Vocational Education**

Grimes Unit's academic and vocational educational program provides comprehensive educational training for offenders which enables them to be employed upon release from prison.

The Arkansas Correctional School is responsible for providing educational services at the Grimes Unit.

In 1997, the Arkansas Department of Correction (ADC) Board adopted compulsory school attendance for all offenders who did not have a verified high school diploma or GED. Students are placed in classes according to their scores achieved on a prescribe placement test. A computer lab is used to supplement classroom instruction. The curriculum is designed to help students obtain their GED. The GED is administered on computer approximately every four (4) to six (6) weeks while school is in session. While incarcerated in the ADC all offenders, regardless of age, are required to attend school unless they can provide verification of an accredited High School Diploma or GED.

This academic educational program is supervised by one (1) school principal, five (5) teaching instructors, and one (1) Special Education/Title I instructor. All school staff are certified. At the time of the audit there were at total of 57 offenders enrolled in GED programming, a total of 48 enrolled in Pre-GED programming, a total of 75 enrolled in Intermediate class, and a total of 40 enrolled in Basic Education (no reader to first grade level). The total number of offenders housed at Grimes Unit enrolled in GED programming in the 2020 academic school year was 2,029. The total of offenders housed at Grimes Unit successfully completing program and awarded their GED in the 2020 academic school year was 24.

Grimes Unit also provides offenders the opportunity to participate in college classes through Arkansas State University – Newport campus. Courses offered include: diesel mechanics, etc.

Grimes Unit vocational program is comprised of several Technical Certification courses. Job skills training programs are developed and managed by Riverside Vo-Tech and funded through the Department of Workforce Education.

Barbering services are provided offenders housed in general population and RHU, six (6) days per week in accordance with coordinated housing schedules. Services include: haircuts and shaves. There are a total of 24 offender barbers assigned to each housing unit, 1 for each general population Barrack (22), and one for each RHU (2). RHU barbering services are conducted in the unit during shower call. A Barbering tools and equipment are issued out of laundry services. Inspection of items were found to be properly inventoried, organized, sanitized and clean.

### **Social Services**

Upon arrival at Grimes Unit an individualized program is developed to assist offenders with the oversight of their sentences, classifications, housing assignments and other needs. In addition, staff from various departments utilizes a number of treatment modalities to facilitate the provision of substance abuse and other related treatment services. Such services include:

Substance Abuse Treatment Program (SATP) which follows a therapeutic community treatment model. The SATP, a six (6) to twelve (12) week program is divided into three (3) phases to include orientation and education, comprehensive treatment, and relapse prevention. The primary goal of the program is to eliminate negative patterns of behavior, thinking and feelings that predispose the participant toward substance abuse. The program utilizes the dynamics of peer group culture as a teaching and training tool to further program objectives. Good time is earned for treatment completion. The program is voluntary but may be mandated by the Arkansas Post Prison Transfer Board as a condition of parole. In 2020, there was a total of 68 offenders successfully completed program.

The Reduction of Sexual Victimization Program (RSVP) is a treatment program for male offenders focusing on controlling compulsive sexual behavior. Participation in the program is voluntary, but the Parole Board can require completion as a condition of early release.

Think Legacy Program is a voluntary six (6) to eighteen (18) month program focusing on Employment Readiness, Community Resources, Social Skill Readiness, Mentoring, Cognitive Behavior Awareness through “Thinking for a Change, Victim Impact, Budgeting Life Skills, Healthy Relationships, and Family Reunification.

Additional social service programming provided include: Thinking Errors, Anger Management, Domestic Violence, Parenting Class, Communication Skills, Stress Management, the Principle Application of Life (PAL) Program, ReEntry Planning, and the Offender Tablet Program.

The Tablet Program is a low-cost monthly subscription service that provides friends and family members the opportunity to lease a tablet device for their loved ones serving time in prison. Offenders must meet eligibility requirements and follow established rules. The tablets allow housed offenders the capability to listen to music, read books, play games, and search for jobs. Subject to rules governing the offender phone system, offenders can also utilize the tablet to place phone calls.

## **Visitation**

Grimes Unit provides onsite and video visitation twice per week. Visiting hours are scheduled on Saturday, Sunday, and holidays that fall on regular visitation days. Onsite visits hours are from 11:30am – 3:30pm. Video visitation hours are from 4:00pm – 10:00pm. A detailed schedule provides contact and noncontact visitation hours to all offenders housed within the facility. Attorney, clergy, and special visits are accommodated upon prior request and approval.

At the time of the audit due to COVID-19 precautions, onsite visits were “temporarily” suspended. In lieu of these precautions, video visitation remain and are available during scheduled hours. At the time of the audit, video visitation hours are scheduled from 8:30am – 10:25pm.

Grimes visitation room is designed to facilitate both contact and noncontact visits and is equipped with six (6) noncontact booths. The visiting room consists of a large spacious area. There are restrooms, and informational bulletin board accessible to visitors. Vending machines are available and visitors are allowed to bring in money to purchase items during the visits. With the exception of emergency medication, visitors are required to maintain personal items in vehicle. Grimes does not provide an outdoor face to face visitation area. There is a small children’s area located in the visitation room.

Telephone usage systems for offenders housed at Grimes Unit are not restricted (unless security provisions dictate otherwise). Offenders housed at Grimes Unit have access to institutional offender telephones in each housing unit area. All offender telephones have “language line” access. Emergency phone calls are also permitted upon administrative approval. A facility TTY machine is onsite and available upon request.

Grimes Unit mailroom procedures are comprised of five (5) authorized delivery components: general correspondence and packages, Keefe Secure Access mail, Inter-Unit Correspondence, privileged correspondence, and publications.

General correspondence and packages - consist of general items that are opened, inspected and screened for contraband and/or authorized status prior to delivery to offender. Mail is copied (3 pages) and then forwarded to offender. Keefe Secure Access mail - consist of photos and email delivered to offender. Once screened and approved, items are printed and then forwarded to offender. Inter-Unit Correspondence - is mail between ADC offenders. Once screened and approved, mail will be forwarded to offender. Privileged Correspondence - includes correspondence to and from officers of the court, Federal and State officials, attorneys, and other related officials. Outgoing mail must be labeled “legal mail” or privileged correspondence. Incoming mail must be labeled the same and on “official” letterhead. Incoming privileged correspondence may be opened in the presence of the offender for inspection of contraband. Publications, books, and magazines - may be ordered directly from the publisher and sent from same to the offender.

### **Library Services**

Grimes Unit library services are under the supervision of the facility Librarian. The facility fulltime librarian maintains a Master Degree of Library Science. Offender workers are assigned to assist with library services. The facility librarian provides hands on training to the general and law library offender clerks.

Grimes Unit library services are provided seven (7) days per week. Hours of operation are scheduled to accommodate morning, afternoon as well as evening availability. The library schedule provides offenders access to library services at a minimum, once per week. Special library accommodations are provided to offenders housed in RHU. These special accommodations conducted on Tuesday and Thursdays are reviewed and screened by library and administrative security staff prior to approval.

Grimes Unit is part of the interagency library loan program. Grimes Unit library inventory consists of 7,564 books, in conjunction with various magazines, and other newspaper publications. Large print books are available for offenders needing special accommodation materials. Additional library material and booklets are available for offenders having limited English-speaking capabilities.

Offenders may check out items for a period of two (2) weeks. Pre-COVID, the local Literacy Council provided additional library programming to the offenders. At the time of the audit, program was “temporarily suspended”.

The facility general library maintains three (3) computers: one (1) for the general library, one (1) for the law library, and one (1) for the Librarian. Legal assistance services are available to offenders who are unable to do their own legal work. The law library is equipped with a Westlaw terminal to assist offenders in conducting legal research. The computerized system is supplemental with some hard copy legal materials specific to the Arkansas legal system.

Offenders access library services through written library request. Upon receipt offenders are placed on the library callout list and are allowed 15 minutes per library visit. Request from offenders housed in RHU are processed through the Librarian. The library clerks obtain requested books, items are screened and approved by librarian and delivered to RHU with a two (2) day turnaround for pickup. Housing unit staff will inspect all library material for contraband prior to delivery and upon exiting from the RHU.

All law library requests will be available upon request and must show a valid proof of need. All law library requests are by appointment only. Requests for law library services are processed to the Program Coordinator.

The general library also maintains a large kiosk MP4 player where offenders receive their emails. These emails are closely monitored by the mailroom.

## **Laundry**

Grimes Unit provides a centralized laundry operation which is located on the secure compound. Laundry services are under the supervision of one (1) Laundry Supervisor (Corporal). At the time of the audit, there were a total of seven (7) offender workers assigned to laundry services.

Offenders housed at Grimes Unit are issued 3 sets of state issued clothing, 3 sets of undergarments, and 3 pair of socks. The undergarments are inventoried and exchanged twice each year. State clothing and personal laundry bags are washed/exchanged on a daily basis. Linen is washed/exchanged on a weekly basis. Blankets are washed/exchanged on a quarterly basis. Additional laundering services provided consists of: mops and barber shop and cleaning rags.

Offender workers providing laundering services are trained to take precautions to control or prevent the spread of infectious disease. Grimes Unit does not maintain a bio-hazard team. Water soluble bags available for use. Bio-hazard material is stored in the medical bio-hazard room and then transported to the outside bio-hazard building for pickup. Bio-hazard material is picked up every two (2) weeks.

Grimes Unit's large equipment consist of 3 commercial washers and 4 commercial dryers. Inspection of all equipment found machines to operable and in good condition. Maintenance conducts weekly equipment temperature checks. Lint traps and exhaust vents are cleaned on a daily basis. Chemicals are automatically dispensed into the machines. Inspection of inventory and issuance logs were found accurate and in order. Items containing bio-hazard waste are properly secured and placed in the facilities designated bio-hazard container for proper disposal.

The laundry services provide indigent packages to offenders classified as indigent.

### **Other Programs/Mitigating Circumstances affecting the Quality of Life**

#### Grimes Unit Inmate Council

The purpose of this organization is to serve as a viable tool that will increase the level of credibility with both the offender population and the unit administration. It also serves as a means of inter-communication between the offender population and the unit administration.

Any permanently assigned offender of the Grimes Unit population who has maintained a Class I-C status for six (6) months and no less than eighteen (18) months to his transfer eligibility date shall be considered for membership of this council. Assigned offenders meet on a monthly basis with administrative staff to discuss questions and/or concerns presented.

The Board of Directors of this Council consist of the President, Vice President, Secretary, Treasurer, Ways and Means, and Parliamentarian. The facility Corporal serves as volunteer staff assisting the committee in the coordination, approval and oversight of its projects and assignments. Office space has been provided to accommodate committee operations. Office hours are from 7:00am – 5:00pm.

Inmate Council at the Grimes Unit (pre-Covid-19) was involved with many projects during the operation of offender visitation. During the time, Inmate Council and participating staff were present to sell various food items such as (popcorn, nachos, hot dogs, etc) to family members and the offender population.

Inmate Council at the Grimes Unit also conducted weekly and monthly food sells which included the staff at the facility. The staff food project provided items that were not available to the staff vending machine, which included the following items: popcorn, nachos, polish, sausages, etc.

The Inmate Council also provides a photo project to the offender population whereas the offenders can purchase photos of themselves which are shared with their families. This outreach project help to build relationship and strengthen bonds with families providing hope to the offender population.

The audit team had the opportunity to meet and conduct interviews with the following offender representatives of Grimes Inmate Council: President, Chairperson for the Entertainment Committee and the Representative for the Movie and Entertainment Committee.

Representatives interviewed voice positive comments of the Inmate Council. It was apparent that the representatives not only enjoyed working with the council, but obviously enjoyed working with the team of staff as well. The representatives voiced ways in which they continue to work with staff to make the facility and its population a positive as well as cohesive environment. The representative expressed their sincere appreciation for being selected as members of the committee.

### Coronavirus Pandemic

Since the onset of the Coronavirus Pandemic, the Arkansas Division of Corrections has worked diligently in the prevention, detection, and mitigation of COVID-19 within each of the department's facilities. Methods such as staff and offenders wearing masks, staff undergoing temperature monitoring at entrance points of the unit, offender temperature screening upon each entering the chow hall, staff reporting any fever, body aches, pains, or coughs to the supervisor, increased staff use of personal protective equipment, and increased hand sanitizing stations were all implemented in the early stages of the pandemic.

In October 2020, the Arkansas Division of Corrections started a new initiative to ensure the safety of employees as well as the offender population in the battle against the coronavirus. Each employee or visitor entering the Grimes Unit submitted to a COVID-19 rapid antigen test weekly. Administrative staff and security personnel were tested on their first workday of each week. Any staff testing positive and who were symptomatic was sent home for the appropriate quarantine period as designated by the Center for Disease Control. Asymptomatic staff who tested positive were permitted to work in positive quarantine areas upon the Warden's approval.

In January 2021, the Grimes Unit received its first set of vaccines available for staff. Vaccine clinics were scheduled and all staff who wished to receive the vaccine, received both shots of the Pfizer vaccination. Staff inoculation was completed in early February 2021. Wellpath and the Arkansas Division of Corrections are currently working with other government agencies to define the protocols and implementation of the offender vaccine clinics.

When the Grimes Unit experiences an active COVID-19 offender, they utilize guidelines set forth by the Arkansas Department of Correction administration, the Arkansas Department of Health, and the Center for Disease Control.

These protocols have evolved since the beginning of the pandemic but involve quarantining positive living areas from the rest of the offender population when a COVID positive offender is identified. During this time (14-day period), chow, commissary, library books, and other necessities are delivered to the barracks. The expose group is tested regularly until they have two (2) consecutive negative Polymerase Chain Reaction tests. Once this occurs, the exposed group is considered negative and will be assimilated back into general population.

Records confirmed during this reporting period there have been a total of two (2) deaths that were a result of complications from the coronavirus (1- offender and 1- staff).

## **F. Examination of Records**

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

### **1. Litigation**

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

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

The Significant Incident Summary and Healthcare Outcome Measures were reviewed for the past 3 years with the Healthcare Administrative Team. Documentation appears to be consistent with a facility of this size and nature. Further review finds no additional issues of concern in this report.

Areas discussed requiring clarification:

Healthcare Outcome Measures  
2020 – 2021

6D-3 – Number of offender suicide attempts in the past twelve (12) months ...6

Facility Response

Correction - 5

- 4/3/2020 – offender received bad news – attempt w/laundry bag around neck, evaluated by medical and mental health staff
- 9/28/2020 – attempt w/ shoestring around neck, evaluated by medical and mental health staff. Sent to local hospital by ambulance.
- 10/11/2020 – attempt, evaluated by medical and mental health staff
- 11/22/2020 – attempt, cut self w/razorblade, report swallowing batteries, metal piece from mask, and rods in eyeglasses. Medical and mental health evaluated. KUB was ordered.



- 01/10/2021 – attempt, offender cut brachial arteries bilaterally. Sent to Local hospital by ambulance.

6D-5 – Number of unexpected natural deaths in the past twelve (12) months...1

Facility Response

- 6/16/2020 – death - Lung Cancer
- 11/25/2020 – death as a result of Diabetes/Asthma with complications R/T COVID-19

### 3. Departmental Visits

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

<u>Department Visited</u>	<u>Person(s) Contacted</u>
Visitation area	
RHU	
Medical	Billy Cowell, HSA
Gymnasium	
Main Commissary	Tanya Higgins, Business Operations Mgr/ Angela Jones, Mains Commissary Store Mgr
Back Hall	
Inmate Recycling	
Chaplains Office	Chaplain Freeman
Programs	
Library/Law Library	Myra Glass, Law Library Clerk
School	Benny Nettles, School Principal
Count Room/Zone 3	
Food Service	Lori Skinner, Food Prep Supervisor
Back Loading Dock	
Maintenance Shop	Philip Thompson, Maintenance Supervisor
Sallyport	Mr. Bailey, Maintenance/Ronnie Tackett, Maintenance Supervisor
Intake	Corporal Patel
Laundry	Billy Robertson, Corporal/Calvin Ford, Sgt
Mechanical Room/Zone 3	
Transportation Office	Sgt Burnside
Housing Unit-3	Corporal Armstrong
Central Control	Corporal Christian
Key Control	Corporal Goforth
Housing Unit-2	
Housing Unit-4	Tanya Higgins, Business Operations Mgr/
Commissary 4	Jan Tucker, Commissary Mgr
Housing Unit-1	Russell Pfitzner, LPN
Classification	Raylinia Ramsey, Classification Officer

Inmate Council  
Key Warehouse  
Armory  
ICC Garage  
Training Building  
Canine Unit  
Horse Barn  
Industry Building  
Telephone Room  
Fusion Center/STTG

Warden Page/Shelly Lawrence

4. Shifts

a. Day/Afternoon Shift (5:45am – 6:00pm)

The team was present at the facility on the first day of the audit during the day shift from 8:00am to 6:00pm, on the second day of the audit during 8:00am to 4:30pm, and on the third day of the audit during 8:15am to 12noon.

During this time, the audit team participated in the Entrance Session, toured the facility, reviewed the electronic files, observed the functions of the Canine Unit and the Horse Barn, observed medication pass, and conducted both staff and offender interviews. Also, during this time period the audit team participated in the Exit Session.

b. Evening/Night Shift (5:45pm – 6:00am)

The team was present at the facility on the first day of the audit during the evening shift from 6:00pm to 6:30pm.

During this time period, the audit team tested a sample meal tray. The meal was warm, tasty, the appearance was colorful, and the content did appear to meet all nutritional requirements. Also, during this time period the audit team observed both security and medical shift change, conducted both staff and offender interviews and reviewed the electronic files.

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

There were no standards from the previous audit of the Grimes Unit that were found non-compliant.

## **G. Interviews**

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

### **1. Offender Interviews**

The audit team interviewed 79 offenders with no major concerns voiced. Offenders interviewed stated that they have regular access to supervisory staff. Offenders interviewed voiced positive comments regarding access to library services and programming. Offenders interviewed stated that medical issues are taken care of in a timely manner. Offenders also expressed satisfaction as to the quality of medical care. Offenders stated in times of crisis they are able to discuss and address concerns confidentially. A number of offenders stated that routine fire drills are conducted within their housing units. A number of offenders expressed that communication between staff and offenders for the most part was good.

### **2. Staff Interviews**

The audit team interviewed approximately 54 staff during the course of this audit. Staffing consist of both seasoned and newly assigned employees. All staff were friendly and knowledgeable of their job duties. Staff interviewed voiced positive comments regarding supervisory staff and the manner in which communication is handled at the facility. Staff acknowledged receiving 40 hours of annual training and were versed in fire safety and suicide prevention protocols. Some staff expressed that the past number of months had been difficult with the varied changes in security and recent COVID-19 precautions, but despite difficult times staff worked hard to ensure everyone (staff and offenders) remained safe. It was voiced on numerous occasions by staff that the difficult times only made the team stronger.

## **H. Exit Discussion**

The exit interview was held at 12noon in the Visitation room with the Warden Joe Page and 65 staff in attendance.

The following persons were also in attendance:

Solomon Graves, Secretary of Corrections, ARDOC  
Dexter Payne, Director, ARDOC Division of Corrections  
Dale Reed, Chief Deputy Director, ARDOC  
William Straughn, Deputy Director, ARDOC  
Richard Cooper, Assistant Director, ARDOC  
Laura Robbins, Constituent Services Officer, Division of Corrections  
Bernard Williams, Regional Manager, Wellpath  
Shelly Lawrence, Agency ACA Manager

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

<b>COMPLIANCE TALLY</b>
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<b>Manual Type</b>	Adult Correctional Institutions, 5 <sup>th</sup> Edition	
<b>Supplement</b>	Not Applicable	
<b>Facility/Program</b>	Grimes Unit Arkansas Division of Corrections	
<b>Audit Dates</b>	April 5 – 7, 2021	
<b>Auditor(s)</b>	Robbin Bell-Chairperson, Joy Bell-Member, Bruce Bell-Member	
	<b>MANDATORY</b>	<b>NON-MANDATORY</b>
Number of Standards in Manual	64	509
Number Not Applicable	4	36
Number Applicable	60	473
Number Non-Compliance	0	0
Number in Compliance	60	473
Percentage (%) of Compliance	100%	100%
	<ul style="list-style-type: none"> <li>• Number of Standards <i>minus</i> Number of Not Applicable <i>equals</i> Number Applicable</li> <li>• Number Applicable <i>minus</i> Number Non-Compliance <i>equals</i> Number Compliance</li> <li>• Number Compliance <i>divided by</i> Number Applicable <i>equals</i> Percentage of Compliance</li> </ul>	

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Division of Corrections  
Grimes Unit (ARDOC)  
Newport, Arkansas

April 05 - 07, 2021

Visiting Committee Findings

Mandatory Standards

Not Applicable

**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/REGISRY DOES NOT LIST A CORRECTIONAL FACILITY AS THE PLACE OF BIRTH

FINDINGS:

Grimes Unit does not house female offenders.

**Standard # 5-ACI-6A-21**

INTAKE HEALTH 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 APPROVAL BY THE HEALTH AUTHORITY. THE SCREENING INCLUDES AT LEAST THE FOLLOWING:

INQUIRING INTO:

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

OBSERVATIONS OF THE FOLLOWING:

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

MEDICAL DISPOSITION OF THE OFFENDER:

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

OFFENDERS WHO ARE UNCONCIOUS, SEMICONSCIOUS, BLEEDING, OR OTHERWISE OBVIOUSLY IN NEED OF IMMEDIATE MEDICAL ATTENTION, ARE REFERRED. WHEN THEY ARE REFERRED TO AN EMERGENCY DEPARTMENT, THEIR ADMISSION OR RETURN TO THE FACILITY IS PREDICATED ON WRITTEN MEDICAL CLEARANCE. WHEN SCREENING IS CONDUCTED BY TRAINED CUSTODY STAFF, PROCEDURES WILL REQUIRE A SUBSEQUENT REVIEW OF POSITIVE FINDINGS BY THE LICENSED HEALTH

CARE STAFF. WRITTEN PROCEDURES AND SCREENING PROTOCOLS ARE ESTABLISHED BY THE RESPONSIBLE PHYSICIAN IN COOPERATION WITH THE FACILITY MANAGER. INMATES CONFINED WITHIN A CORRECTIONAL COMPLEX WITH CONSOLIDATED MEDICAL SERVICES DO NOT REQUIRE HEALTH SCREENING FOR INTRA-SYSTEM TRANSFERS.

FINDINGS:

Grime Unit is not an Intake Unit.

**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 A 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:

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



FINDINGS:

All transfers into Grimes Unit are inter-system transfers.

**Standard # 5-ACI-6A-32**

INMATES WHO ARE REFERRED AS A RESULT OF THE MENTAL HEALTH SCREENING OR BY STAFF REFERRAL WILL RECEIVE A MENTAL HEALTH APPRAISAL BY A QUALIFIED MENTAL HEALTH PERSON WITHIN 14 DAYS OF ADMISSION TO A FACILITY OR THE REFERRAL. 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 EXAMINATION INCLUDE, BUT ARE NOT LIMITED TO:

1. REVIEW OF THE MENTAL HEALTH SCREENING
2. HISTORICAL REVIEW OF THE FOLLOWING:
  - a. Available historical records of inpatient and outpatient psychiatric treatment
  - b. Treatment with psychotropic medication
  - c. Psychotherapy, psycho-educational groups, and classes or support groups
  - d. Education status
  - e. Drug and alcohol use/abuse; treatment
  - f. Sexual abuse-victimization and predatory behavior
3. Assessment of current mental status and condition, including
  - a. Current suicidal potential and person-specific circumstances that may increase suicide
  - b. Violence potential and person-specific circumstances that may increase violence potential
  - c. Drug and alcohol abuse and/or addiction
4. Use of additional assessment tools, as indicated
5. Development and implementation of a treatment plan, as indicated, including recommendations concerning housing, job assignment, and program participation
6. Referred to treatment, as indicated

FINDINGS:

Grimes Unit is not an Intake Unit.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Division of Corrections  
Grimes Unit (ARDOC)  
Newport, Arkansas

April 05 - 07, 2021

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

**Standard # 5-ACI-1B-24**

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT, CONSISTENT WITH 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:

In accordance with Arkansas code: 5-4-205; Act 817-1997, Grimes Unit-ADC does not maintain jurisdiction nor authority over the Victims Division nor its functions.

**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 UNLESS NATIONAL OR STATE REGULATIONS SPECIFY OTHERWISE.

FINDINGS:

Grimes Unit is not unionized and are not covered by merit system on civil service regulations.

**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 8 INMATES IN FEMALE FACILITIES. URINALS MAY BE SUBMITTED FOR UP TO ONE-HALF OF THE TOILETS IN MALE FACILITIES. ALL HOUSING UNITS WITH THREE OR MORE INMATES HAVE A MINIMUM OF TWO TOILETS. THESE RATIOS APPLY UNLESS ANY APPLICABLE BUILDING OR HEALTH CODES REQUIRE ADDITIONAL FIXTURES.

**FINDINGS:**

Grimes Unit has not had any new construction, after 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:**

Disabled offenders who cannot otherwise perform basic life functions are not housed at Grimes Unit.

**Standard # 5-ACI-2D-04**

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

**FINDINGS:**

Grimes Unit has not had any renovations, additions or new constructions of inmate housing/living areas after 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 TWO ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER INMATE IN THE DORMITORY.

FINDINGS:

Grimes Unit's inmate housing living units has not had any renovations, additions on new construction, after June 1, 2014.

**Standard # 5-ACI-2C-08**

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

FINDINGS:

Grimes Unit has not had any new construction in the housing units, after June 2014).

**Standard # 5- ACI-2C-10**

(NEW CONSTRUCTION after June 2014) INMATES HAVE ACCESS TO OPERABLE SHOWERS WITH TEMPERATURE CONTROLLED HOT AND COLD RUNNING WATER, AT A MINIMUM RATIO OF ONE SHOWER FOR EVERY 12 INMATES, UNLESS APPLICABLE CODES REQUIRE ADDITIONAL FIXTURES. WATER FOR SHOWERS IN THERMOSTATICALLY CONTROLLED TO TEMPERATURES RANGING FROM 100 DEGREES FAHRENHEIT TO 120 DEGREES. FAHRENHEIT TO ENSURE THE SAFETY OF INMATES AND TO PROMOTE HYGIENE PRACTICES.

FINDINGS:

Grimes Unit was constructed before June 2014.

**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:

Grimes Unit houses only male 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:

Grimes 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:

Grimes Unit does not house female inmates.

**Standard # 5-ACI-4B-26**

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN EXTENDED RESTRICTIVE HOUSING HAVE ACCESS TO PROGRAMS AND SERVICES THAT INCLUDE, BUT ARE NOT LIMITED TO THE FOLLOWING: EDUCATIONAL SERVICES, COMMISSARY SERVICES, LIBRARY SERVICES, SOCIAL SERVICES, BEHAVIORAL HEALTH AND TREATMENT SERVICES, RELIGIOUS GUIDANCE, AND RECREATIONAL PROGRAMS.

FINDINGS:

Grimes Unit does not utilize Extended Restrictive Housing.

**Standard # 5-ACI-4B-29**

WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE THAT THE AGENCY WILL ATTEMPT TO ENSURE OFFENDERS ARE NOT RELEASED DIRECTLY INTO THE COMMUNITY FROM EXTENDED RESTRICTIVE HOUSING. IN THE EVENT THAT THE RELEASE OF AN OFFENDER DIRECTLY FROM EXTENDED RESTRICTIVE HOUSING INTO THE COMMUNITY IS IMMINENT, THE FACILITY WILL DOCUMENT THE JUSTIFICATION AND RECEIVE AGENCY LEVEL OR DESIGNEE APPROVAL (DOES NOT APPLY TO IMMEDIATE COURT ORDER RELEASE).

IN ADDITION TO REQUIRED RELEASE PROCEDURES (SEE 5-ACI-5F-05) THE FOLLOWING MUST BE TAKEN AT A MINIMUM:

- DEVELOPMENT OF A RELEASE PLAN THAT IS TAILORED TO SPECIFIC NEEDS OF THE OFFENDER (DOES NOT APPLY TO IMMEDIATE COURT ORDER RELEASE)
- NOTIFICATION OF RELEASE TO STATE AND LOCAL LAW ENFORCEMENT
- NOTIFY RELEASING OFFENDER OF APPLICABLE COMMUNITY RESOURCES
- VICTIM NOTIFICATION (IF APPLICABLE/THERE IS A VICTIM)

FINDINGS:

Grimes Unit does not utilize Extended Restrictive Housing.

**Standard # 5-ACI-4B-30**

AN INDIVIDUAL DIAGNOSED WITH A SERIOUS MENTAL ILLNESS WILL NOT BE PLACED IN EXTENDED RESTRICTIVE HOUSING, UNLESS THE MULTIDISCIPLINARY SERVICE TEAM DETERMINES THERE IS AN IMMEDIATE AND PRESENT DANGER TO OTHERS OR THE SAFETY OF THE INSTITUTION. THERE MUST BE AN ACTIVE INDIVIDUALIZED TREATMENT PLAN THAT INCLUDES WEEKLY MONITORING BY MENTAL HEALTH STAFF, TREATMENT AS NECESSARY, AND STEPS TO FACILITATE THE TRANSITION OF THE OFFENDER BACK INTO GENERAL POPULATION.

FINDINGS:

Grimes Unit does not utilize Extended Restrictive Housing.

**Standard # 5-ACI-4B-31**

WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE THAT 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 EVALUATION USING A MULTIDISCIPLINARY APPROACH TO DETERMINE THE INMATE'S 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:

Grimes Unit does not utilize Extended Restrictive Housing

**Standard # 5-ACI-4B-32**

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

FINDING:

Grimes Unit does not house female inmates.

**Standard # 5-ACI-4B-33**

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

FINDINGS:

Grimes Unit does not house juvenile offenders, nor does it utilize Extended Restrictive Housing.

**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:

- DETERMINING THAT THE INMATE IS LEGALLY COMMITTED TO THE INSTITUTION
- THOROUGH SEARCHING OF THE INDIVIDUAL AND POSSESSIONS
- DISPOSING OF PERSONAL PROPERTY
- SHOWERING AND HAIR CARE, IF NECESSARY
- ISSUING 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 PROCEDURES COMPLETED AT A CENTRAL RECEPTION FACILITY

FINDINGS:

Grimes Unit is not a Reception Center and does not receive new admissions.

**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 A MINIMUM THE FOLLOWING INFORMATION:

- LEGAL ASPECTS OF THE CASE
- SUMMARY OF CRIMINAL HISTORY, IF ANY
- SOCIAL HISTORY
- MEDICAL, DENTAL, AND MENTAL HEALTH HISTORY
- OCCUPATIONAL EXPERIENCE AND INTERESTS
- EDUCATIONAL STATUS AND INTERESTS



- VOCATIONAL PROGRAMMING
- RECREATIONAL PREFERENCE AND NEEDS ASSESSMENT
- PSYCHOLOGICAL EVALUATION
- STAFF RECOMMENDATIONS
- PREINSTITUTIONAL ASSESSMENT INFORMATION

FINDINGS:

Grimes Unit is not a Reception Center and does not received new admissions.

**Standard # 5-ACI-5A-03**

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

FINDINGS:

Grimes Unit is not a Reception Center and does not receive new admissions.

**Standard # 5-ACI-5A-04**

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

FINIDNGS:

Grimes Unit is not a Reception Center and does not receive new admissions.

**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 SPECIALIZED 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:

Grimes Unit does not house youthful offenders.

**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:

Grimes Unit does not house youthful offenders.

**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 FOR ADOLESCENTS. CLASSIFICATION PLANS SHALL INCLUDE CONSIDERATION OF PHYSICAL, MENTAL, SOCIAL, AND EDUCATIONAL MATURITY OF THE YOUTHFUL OFFENDER.

FINDINGS:

Grimes Unit does not house youthful offenders.

**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 OFFENDERS AND ALLOWS FOR THEIR PERSONAL INTERACTIONS AND GROUP-ORIENTED ACTIVITIES.

FINDINGS:

Grimes Unit does not house youthful offenders.

**Standard # 5-ACI-5B-17**

YOUTHFUL OFFENDERS SHALL NOT HAVE PHYSICAL CONTACT WITH ANY ADULT INMATE THROUGH USE OF A SHARED DAYROOM, SHOWER AREA, OR SLEEPING QUARTERS. IN AREAS OUTSIDE THE HOUSING UNITS, AGENCIES SHALL EITHER: (1) MAINTAIN SIGHT AND SOUND SEPARATION BETWEEN YOUTHFUL OFFENDERS OR (2) PROVIDE DIRECT STAFF SUPERVISION WHEN YOUTHFUL INMATES AND ADULT OFFENDERS HAVE SIGHT, SOUND OR PHYSICAL CONTACT.

FINDINGS:

Grimes 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 REQUIRE TRAINING FOR STAFF SPECIFICALLY ASSIGNED TO THE UNIT OR STAFF WHO ARE 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:

Grimes Unit does not house youthful offenders.

**Standard # 5-ACI-5E-10**

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

FINDINGS:

Grimes Unit does not house female inmates.

**Standard # 5-ACI-5F-08**

WHERE A FACILITATED VICTIM OFFENDER DIALOGUE PROGRAM EXISTS, WRITTEN POLICY, PROCEDURE AND PRACTICE PROVIDE THAT THERE IS A PROGRAM INITIATED AND REQUESTED ONLY BY A VICTIM OR 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:

Grimes Unit does not have a Victim/Offender Dialogue Program.

**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:

Grimes Unit does not house female offenders, nor nursing infants.

**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 MENTAL ILLNESS AND/OR IMPAIRMENT IN COGNITIVE FUNCTIONING. THE SEVERITY OF THE IMPAIRMENT DOES NOT REQUIRE INPATIENT LEVEL OF CARE, BUT THE INMATE 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:

Grimes Unit does not maintain a Mental Health Residential Treatment Unit.

**Standard # 5-ACI-6A-39**

INPATIENT CARE UNIT IS FOR THOSE WHO ARE IN NEED OF INPATIENT MENTAL HEALTH TREATMENT. THESE UNITS SHOULD HAVE 24 HOUR SERVICE 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:

Grimes Unit does not maintain an Inpatient Care Unit.

**Standard # 5-ACI-6B-04**

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

FINDINGS:

Arkansas Department of Corrections contracts with Wellpath, Services to provide fulltime qualified personnel.

**Standard # 5-ACI-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 A 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:

Grimes Unit does not utilize volunteers in the delivery of health care.

**Standard # 5-ACI-6B-11**

ANY STUDENTS, INTERNS, OR RESIDENTS DELIVERING HEALTH CARE IN THE FACILITY, AS PART OF A FORMAL TRAINING PROGRAM, WORK UNDER STAFF SUPERVISION, COMMENSURATE WITH THEIR LEVEL OF TRAINING. THERE IS A WRITTEN AGREEMENT BETWEEN THE FACILITY AND TRAINING, OR EDUCATIONAL FACILITY THAT COVERS THE 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:

Grimes Unit does not utilize students, interns, or residents in the delivery of health care.

**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 housed at Grimes Unit are not permitted to work (public or private) within the community.

### Significant Incident Summary

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

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

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

Facility Name: Grimes Unit  
Reporting Period: April 2020- March 2021

Incident Type	Months	April 20	May 20	June 20	July 20	August 20	Sept. 20	Oct. 20	Nov. 20	Dec. 20	Jan. 21	Feb. 21	Mar. 21	Total for Reporting Period
	→													
Escapes		0	0	0	0	0	0	0	0	0	0	0	0	0
Disturbances*		0	0	0	0	0	0	0	0	0	0	0	0	0
Sexual Violence		0	0	0	0	0	0	0	0	0	0	0	0	0
Homicide	Offender Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Staff Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Other Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
Assaults	Offender/Offender	0	0	1	1	1	1	1	0	0	0	0	2	7
	Offender/Staff	0	0	0	0	0	0	1	0	0	0	0	0	1
Suicide		0	0	0	0	0	0	0	0	0	0	0	0	0
Mandatory Non-Compliance*		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Fire*		0	0	0	0	0	0	0	0	0	0	0	0	0
Natural Disaster*		0	0	0	0	0	0	0	0	0	0	0	0	0
Other*		0	0	0	0	0	0	0	0	0	0	0	0	0

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





## Significant Incident Summary Glossary

**Assaults:** An altercation which results in serious injury requiring urgent and immediate medical attention and restricts usual activities.

**Disturbance:** Offender action that resulted in loss of control of the facility or a portion of the facility and required extraordinary measures to regain control.

**Escape:** As defined by the jurisdiction reporting.

**Fire:** A fire which results in evacuation of staff or offenders and/or significant damage to a facility or part of a facility structure.

**Homicide:** As defined by the jurisdiction reporting.

**Non-Compliance with Mandatory Expected Practices:** Determination that a condition results in non-compliance with a mandatory standard that is expected to result in sustained non-compliance.

**Natural Disaster:** A natural event such as a flood, tornado, tsunami, earthquake, or hurricane that causes great damage or loss of life.

**Other:** Any significant negative event or distraction that adversely impacts normal operations.

**Serious Injury:** Is a physical injury which creates a substantial risk of death, or which causes serious and protracted impairment of health or protracted loss or impairment of the function of any bodily organ.

**Sexual Violence** (as defined by PREA): A substantiated, non-consensual sexual act includes one or more of the following behaviors:

- Contact between the penis and the vagina or the penis and the anus involving penetration, however slight. It does not include kicking, grabbing or punching genitals when the intent is to harm or debilitate rather than to sexually exploit.
- Contact between the mouth and the penis, vagina, or anus.
- Penetration of the anal or genital opening of another person by a hand, finger, or other object.

**Unnatural Death** – Death of a person in confinement for causes other than suicide, homicide, or accident that is contrary to the ordinary course of nature or otherwise abnormal.

**American Correctional Association: Adult Correctional Institutions  
Accreditation Manual - 5th Edition Outcome Measures**

Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1
<b>1. Administration &amp; Management: Administer and manage the facility in a professional and responsible manner, consistent with statutory requirements.</b>					
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.	1A-1	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.	0	0	0.00%
	1A-2	Number of expected practices in compliance divided by the number of applicable expected practices.	0	0	0.00%
1B: Fiscal Management - The facility utilizes appropriate fiscal planning, budgeting, and accounting procedures and provides for a system of regular review.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
1C: Personnel - The facility promotes diversity and competency through employee staffing, recruitment, promotions, benefit allocations and performance reviews.	1C-1	The average offender population in the past 12 months divided by the average number of filled full time positions in the past 12 months.	998	226	4.42%
	1C-2	The number of staff who left employment for any reason in the past 12 months divided by the average number of filled full time positions in the past 12 months.	99	226	0.44%
	1C-3	The number of verified employee violations in the past 12 months divided by the average number of filled full time staff positions in the past 12 months.	20	226	0.09%
	1C-4	The number of staff terminated for conduct violations in the past 12 months divided by the average number of filled full time staff positions in the past 12 months.	10	226	0.04%
	1C-5	The number of performance reviews rated acceptable or higher in the past 12 months divided by the total number of performance reviews conducted in the past 12 months.	173	191	0.91%
	1C-6	Average number of security staff positions filled per month for the past 12 months divided by the total number of authorized security positions.	3.54	212	0.02%
	1C-7	Number of security staff who left employment in the past 12 months divided by the total number of authorized security positions.	99	239	0.41%
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			

1F: Information Systems & Research - Effective systems of data and information storage and retrieval are vital for the maintenance of operational effectiveness and research capability.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
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.	1G-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.	0	998	0.00%
	1G-2	The total number of hours of community service work delivered by offenders in the past 12 months divided by 12.	26,796	12	2,233%
<b>2. Physical Plant: The facilities' physical plant is designed, equipped and maintained in a manner that promotes safety, program function and access.</b>					
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.	35	226	0.15%
	2A-2	Number of sanitation or health-code violations identified by external agencies in the past 12 months.			
	2A-3	The number of fire and safe code violations identified by the governing jurisdiction in the past 12 months.			
2B: Size & Organization - Facility capacity and functional design promote safety, an acceptable quality of life and operational innovation.	2B-1	Number of days facility population exceeded the operational capacity in the past 12 months divided by 365.	0	365	0.00%
2C: Inmate Housing - Inmate housing areas are the foundation of institutional living and promote the safety and well-being of both inmates and staff		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
2F: Administrative and Staff Areas - All levels of staff are provided with adequate space to carry out their responsibilities safely and effectively.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
2G: Security - The physical plan supports the orderly and secure functioning of the institution.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			

<b>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 of accountability.</b>					
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.	74	998	0.07%
	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.	72	998	0.07%
	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	0	0.00%
	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 12 months.	0	0	0.00%
	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.	0	0	0.00%
	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	0.00%
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
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.	1872	998	1.90%
	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.	2393	998	2.40%
	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.	5	998	0.005%
	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.	1	998	0.001%
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.	64	1,251	5%

**4. Special Management Housing & Restrictive Housing: In general, inmates who threaten the secure and orderly management of the institution, posing a threat to others or a danger to themselves, are removed from the general population and placed in designated units. Such assignments are made appropriately and justifiably, and offenders placed into such categories are treated justly, humanely, in a constitutionally correct manner and prepared for return to less restrictive units.**

<p>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.</p>	<p>4A-1</p>	<p>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.</p>	<p>12</p>	<p>998</p>	<p>0.01%</p>
<p>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 / cells for periods of time 22 hours per day or greater.</p>	<p>4B-1</p>	<p>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.</p>	<p>68</p>	<p>998</p>	<p>0.07%</p>
	<p>4B-2</p>	<p>Average number of offenders in Extended Restrictive Housing per month over the past 12 months divided by the average daily population in the past 12 months.</p>	<p>0</p>	<p>998</p>	<p>0.00%</p>
	<p>4B-3</p>	<p>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.</p>	<p>6</p>	<p>826</p>	<p>0.007%</p>
	<p>4B-4</p>	<p>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.</p>	<p>2</p>	<p>474</p>	<p>0.004%</p>

**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.**

<p>5A: Reception &amp; Orientation - All incoming inmates undergo thorough screening and assessment at admission and receive a thorough orientation to the institution's procedures, rules, programs, and services.</p>		<p><i>Compliance verified through expected practice files. No outcome measure required.</i></p>			
<p>5B: Classification - Inmates are classified to the most appropriate level of custody and programming both on admission and upon review of their status.</p>		<p><i>Compliance verified through expected practice files. No outcome measure required.</i></p>			
<p>5C: Food Service - Meals are nutritionally balanced, well-planned, and prepared and served in a manner that meets established governmental health and safety codes.</p>		<p><i>Compliance verified through expected practice files. No outcome measure required.</i></p>			

<b>5D: Sanitation and Hygiene -</b> The institution's sanitation and hygiene program protects the health and safety of staff and offenders.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
<b>5E: Social Services -</b> 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 inmates.	5E-1	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.	50	998	0.05%
	5E-2	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.	65	998	0.07%
	5E-3	Where a sex offender treatment/management program exists, the number of program slot divided by the average daily population in the past 12 months.	0	0	0.00%
	5E-4	Where a sex offender treatment/management program exists, the number of completers divided by the average daily population in the past 12 months.	0	0	0.00%
<b>5F: Reentry -</b> The institution provides a structured program to help inmates make a satisfactory transition upon their release from incarceration.	5F-1	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.	0	0	0.00%
<b>6. Healthcare: Each offender receives appropriate physical and behavioral health care necessary to foster the restoration and maintenance of acceptable levels of wellness.</b>					
<b>6 A:Access to Services</b> Offenders have unimpeded access to a continuum of health care services so that their health care needs, including prevention and health education, are met in a timely and efficient manner.	6A-1	Number of offenders diagnosed with a MRSA infection within the past twelve (12) months divided by the average daily population	2	998	0.002%
	6A-2	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months divided by the average daily population.	0	998	0.00%
	6A-3	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.	0	0	0.00%
	6A-4	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.	0	0	0.00%
	6A-5	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time divided by Total offender population at that time.	128	954	0.134%
	6A-6	Number of offenders diagnosed with HIV infection at a given point in time divided by Total offender population at that time.	9	954	.009

	6A-7	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.	9	9	1 %
	6A-8	Number of selected offenders with HIV infection at a given point in time who have been on antiretroviral therapy for at least six months with a viral load of less than 50 cps/ml total number of treated offenders with HIV infection that were reviewed	3	9	.333%
	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.	112	984	.113%
	6A-10	Number of offender admissions to off-site hospitals in the past twelve (12) months divided by average daily population	38	998	.038%
	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.	73	998	.073
	6A-12	Number of offender specialty consults completed during the past twelve (12) months divided by Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.	1062	997	1.06%
	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.	0	4	0%
	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.	1	4	.25%
	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.	630	998	.631%
<b>6 B. Staff Training</b>  The provision of health services should be done in a professionally acceptable manner including the requirement that all staff be adequately trained and qualified and can demonstrate competency in their assigned duties.	6B-1	Number of health care <i>staff</i> with lapsed licensure or certification during a twelve (12) month period divided by Number of licensed or certified staff during a twelve (12) month period.	0	22.8	0%
	6B-2	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job divided by Number of new health care staff during the twelve (12) month period.	5	5	1%
	6B-3	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months divided by the number of employees.	0	22.8	0%

	6B-4	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.	0	0	0.00%
<b>6 C. Offender Treatment</b>  Offenders are treated humanely, fairly, and in accordance with established policy and all applicable laws.	6C-1	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.	3	58	.051%
	6C-2	Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period divided by the number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.	0	0	0.00%
	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	0.00%
<b>6 D. - Performance Improvement</b>  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	1	0.00%
	6D-2	Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.	0	0	0.00%
	6D-3	Number of offender suicide attempts in the past twelve (12) months divided by average daily population	6	998	.006%
	6D-4	Number of offender suicides in the past twelve (12) divided by average daily population.	0	998	0.00%
	6D-5	Number of unexpected natural deaths in the past twelve (12) months divided by Total number of deaths in the same reporting period.	1	2	.5%
	6D-6	Number of serious medication errors in the past twelve (12) months	0	0	0.00%
<b>6 E. - Safety, Sanitation and Offender Hygiene</b>  The facility or program is safe and sanitary. Appropriate services and supplies are provided to promote the maintenance of acceptable levels of offender hygiene.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			



<b>7. Inmate Programs: The institution's programs for inmates provide meaningful work, educational, and recreational programs designed to facilitate a stable institutional environment and the inmate's subsequent reentry into the community.</b>					
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.	234	998	.23%
	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.	998	998	1%
7B: Academic and Vocational Education - The facilities academic and vocational education programs improve the educational levels of assigned offenders and participate in program accreditation, promote staff professional certification, incorporate community resources and participate in internal and external peer review.	7B-1	The number of academic/vocational slots available divided by the average daily population in the past 12 months.	234	998	.23%
	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.	8	998	0.008%
	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.	8	998	0.008%
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		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
7D: Mail, Telephone & Visiting - The maintenance of family and community ties through the provision of comprehensive mail, telephone and visiting services is critical to stable institutional adjustment and improves opportunities for successful reintegration.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
7E: Library - The facility should provide library services that support educational programs, promote reading skills, enhance leisure activities and maintain awareness of circumstances in the community at large.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
7F: Religious Programs - The offender population should have the opportunity to participate in the practices of their faith group as enhanced through the supplemental contributions of community resources.	7F-1	The number of regular participants as defined by the agency, in structured religious programming in the past 12 months divided by the average daily population in the past 12 months.	905	998	0.91%