COMMISSION ON ACCREDITATION FOR CORRECTIONS

STANDARDS COMPLIANCE REACCREDITATION AUDIT

Arkansas Department of Corrections Ouachita River Correctional Unit Malvern, Arkansas May 25-27, 2021

VISITING COMMITTEE MEMBERS

Ernest Umunna, Chairperson ACA Auditor

> Joy C. Bell ACA Auditor

Donnis Chatman-Harris ACA Auditor

A. Introduction

The reaccreditation audit of the Ouachita River Correctional Unit (ORCU), Malvern, Arkansas was conducted on May 25-27, 2021, and utilizing the American Correctional Association (ACA) Standards for Adult Correctional Institutions, 5th Edition. The following team conducted the audit: Ernest Umunna, Chairman, Joy C. Bell, Member and Donnis Chatman-Harris, Member.

B. Facility Demographics

Rated Capacity:	1898
Actual Population:	1655 as May 16, 2021
Average Daily Population for the last 12 months:	1639
Average Length of Stay:	5 months, 15 days
Security/Custody Level:	
Minimum	648
Medium	563
Maximum	361
High Security	82
Unassigned	1
Age Range of Offenders:	18-91
Gender:	Male
Staff: 328:	
212- Security Positions	
12-Administration Positions	
39-Program Staff Positions	
40-Support	
plus (25) Contracted Medical (Wellpath)	

C. Facility Description



Ouachita River unit is an intake and classification facility located at 100 Walco Lane, Malvern, AR, 72104. The Ouachita River Correctional Unit (ORCU) is the newest facility in the Arkansas Department of Corrections. Almost all inmates in the state initially start at this facility and only stay for a few days to a few weeks to be classified and then moved on to their more permanent facility. Because of this the institution houses inmates ranging from minimum to medium custody and often visitation is not possible due to the short duration of their stay. Ouachita River Unit can house approximately 1898 inmates. The facility is divided into two separate areas and many services are provided separately for each side. The facility includes several different types of housing areas for inmates.

This facility offers a variety of inmate services including substance abuse education, reduction of sexual victimization programs for sex offenders and special needs programs. The facility also has a livestock and forage production and allows inmates to work with animals in the Paws program. There are educational opportunities such as earning a GED and basic adult education. Laundry processing and construction are just some of the available jobs for inmates.

The oldest part of this facility includes three housing units, each with three tiers with four different barracks. Most of these cells are double bunked with only a few single handicapped cells. This part of the facility also includes East and West Isolation housing area (segregation) which includes 60 cells which are single cells.

The newer part of the facility includes Alpha, Charlie, Delta, Echo, Foxtrot, Golf, Hotel, SNC and SND which house general population and specialized populations. Bravo Barracks house the inmates who are participating in the Principals and Applications for Life (PAL) Program which is a faith-based program. Alpha houses the Think Legacy(reentry) program.

The Residential Program Unit (RPU) provides housing for 96 inmates who are mentally ill and unable to be housed in a general population unit. The Habilitation Program houses up to 40 inmates that are developmentally delayed and are unable to function in the general population. These inmates are under the care of mental health staff. There are eight single cells in the Habilitation Barracks.

Inmates assigned to the RSVP (Reduction of Sexual Victimization Programs) are housed in the barracks 9 (78 inmates), 10 (80 inmates), and 11 (80 inmates).

Intake barracks 1-5 houses male inmates entering the Arkansas Department of Corrections and has a 246-bed capacity. All male inmates entering the ADOC are processed in this area except for those sentenced to death.

The hospital houses inmates in need of medical care and SND houses inmates who need significant medical care assistance for daily living.

Other areas inside the compound include the infirmary, inmate dining halls, staff dining, kitchen, gyms, school, general/law library, laundry, canteen, and Votech. Outside the compound are four towers, armory, firing range, dog kennels, horse barns, main entrance and sallyport buildings, and maintenance.

The mission of the Ouachita River Correctional Unit is "To provide a safe, humane environment for staff and inmates, strengthen the work ethic through teaching of good habits and provide opportunities for inmates to improve spirituality, mentally, and physically. To create a model correctional system by carrying out the intentions of the Courts, Governor, Legislature and the Director of the Department of Corrections".

D. Pre-Audit Meeting

The team met on May 24, 2021, in Malvern, Arkansas to discuss the information provided by the Association staff and the officials from Ouachita River Correctional Unit.

The chairperson divided standards into the following groups:

Standards # 5-ACI-1A-01 to 5-ACI-2G-03, Joy C. Bell, Member Standards # 5-ACI-3A-01 to 5-ACI-5D-15, Donnis Chatman-Harris, Member Standards # 5-ACI-5E-01 to 5-ACI-7F-08, Ernest Umunna, Chairperson/Health Care Member

E. The Audit Process

1. Transportation

The team was escorted to the facility Shelly Lawrence, Agency ACA Manager

2. Entrance Interview

The team proceeded to the Warden's conference room for a pre-audit meeting. Later, the team proceeded to the Visitation Main Area where the official opening session was held. The team expressed the appreciation of the Association for the opportunity to be involved with the Ouachita River Correctional Unit in the accreditation process.

The following persons were in attendance:

Randy Watson, Warden Roy Griffin, Director, ADC Maurice Culclager, Deputy Warden of Operations Richard T. Ball, Deputy Warden of Security Dexter Payne, Director Dale Reed, Chief Deputy Director Soloman Graves, Department of Corrections Secretary

Stephanie Voss, Building Major's Administrative Specialist Cindy Johns, Deputy Warden Security Administrative Specialist Stephanie Pearson, Deputy Warden Operations Administrative Specialist Nancy Flores, Warden Administrative Specialist Susan Brooks, Visitation Clerk Rachel McLelland, Intake Processing Supervisor Marsha Ricks, ACA Manager Perry Robinson, Lieutenant-Training Academy Dan Flora, Senior Chaplain Jason Gray, Grievance Officer Dorothy Coleman, Habilitation Supervisor Stacy Wiley, Hobby Craft Supervisor Angela Williams, Records Supervisor Kelly Moring, Business Operations Specialist Mary Littles, Mail Room Technician Phyllis Deever, Training Supervisor Kaye O'Neal, Human Resources Supervisor Joi Harris, McPherson, Unit Building Major Virginia Robins, McPherson Unit, ACA Manager Donna Dycus, Reduction of Sexual Victimization Program (RSVP) Rehab Program Manager Amanda Murdock, Residential Program Unit/Habilitation Rehab Program Manager Thomasena McNutt, Rehabilitation Director Emma Hamer, Rehab Program Manager Kristen Caldwell, Psychological Examiner Darline Thorson, PhD, Psychologist Supervisor Kim Rosenthal, Director of Operations-WellPath Bernard Williams, Regional Manager, WellPath Andrew Ruh, OMEGA Warden Larry Bowman, IT Chase Bell, Computer Support Technician Sheila Johnson, Shift Captain Danny Crook, Field Major Bryant Dallas, Utility Captain Darryl Bassham, Infirmary Manager Shirley Champon, Director of Nursing Crystal McCoy, Health Services Administrator Deborah McAfee, Dietician/Food Preparation Manager Barbara Holliman, Administrative Review Officer/Unit Drug Coordinator Channon Newman, School Principal Burt Vanhorn, Vo-Tech Project Manager Richard Cooper, Assistant Director Construction & Maintenance Shelly Lawrence, Agency ACA Manager.

3. Facility Tour

The team toured the facility from 8:52 a.m. to 12:05 p.m. on Tuesday, May 25, 2021, and from 7:53 a.m. to 10:25 a.m. on Wednesday, May 26, 2021. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Randy Watson, Warden Roy Griffin, Director, ADC Maurice Culclager, Deputy Warden of Operations Richard T. Ball, Deputy Warden of Security Dale Reed, Chief Deputy Director Marsha Ricks, ACA Manager Stephanie Voss, Building Major's Administrative Specialist Cindy Johns, Deputy Warden Security Administrative Specialist Nancy Flores, Warden Administrative Specialist Joi Harris, McPherson, Unit Building Major Virginia Robins, McPherson Unit, ACA Manager Bryant Dallas, Utility Captain Shelly Lawrence, Agency ACA Manager

Notices of the upcoming audit were posted throughout 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 summarize the findings regarding the quality of life.



Security:

The compound is surrounded by a double fence 12 feet 6 inch high. These fences have one roll of razor wire and a micro-wave detection system that includes 17 microwave zones.

The perimeter detection system also includes 40 cameras which are monitored by the control center. When a zone is transgressed, an audible-visual alarm is activated in the Control Room. The Central Control Room officer alerts tower and/or perimeter patrol vehicle to check and clear the alarm as needed. Alarms are cleared in Central Control after being cleared by a tower officer and/or the Perimeter Patrol Vehicle. The perimeter is observed from four towers staffed 24/7 whose staff are equipped with AR 15 riles. The four towers have good line of sight observation of the perimeter fence and there is a perimeter patrol post from dusk till dawn. The perimeter staff person is equipped with an 870 shotgun. Entry into the perimeter is accessed through the front walk-through gate and a vehicle sallyport at the rear of the facility.

There are 764 cameras in the Unit, 4 fire alarm systems (North Control, South Control, Hospital Control & Intake), 44 SCBA units, 234 fire extinguishers, 10 fire hydrants, 7 fire hoses, 297 smoke heads, and 4,006 sprinkler heads. The Simplex Check Fire Panel was conducted on May 24, 2021.

The transport vehicles from both the agency and other law enforcement agencies use a weapons vault located near this vehicle sallyport which is under the supervision of the tower. Facility transport staff is equipped with Glock handguns.

This facility conducts shift briefings for each of the two 12-hour shifts which provides all staff the ability to enter their work area informed of any changes or potential issues. Most security staff carry keys, OC spray, handcuffs, and a radio.

The facility has 976 cameras in place and functioning. Staff enters the facility through the main entrance building. As part of the screening process staff must clear a metal detector, must clear a total body scanner and then they are pat searched by a staff member. Their belongings are searched through an x-ray machine, they sign in through a biometric scanner and then a time clock. The body scanner was just recently added to the entry procedure and the details of its use was explained to the audit team. Staff operating the machine seemed to be knowledgeable about limitations of it use and the precautions needed for specific. types of medical conditions or pregnancy. **Concerns were raised by the audit team regarding the strength and amount of radiation exposure to staff and the incredibly intrusive nature of the scan itself. This is a repeat concern and was raised by the audit team during the ACA audit of May 15-17, 2018.**

In addition, there was no gender-to-gender protocol in place in the monitoring of the scanner. Female officers were allowed to view and scan male staffs and visitors, and male officers were allowed to view and scan female staffs and visitors. This process was immediately address during the audit and was corrected. The Visiting Committee Team strongly recommended the calibration and review of radiation exposures to staff.

Inmates enter the facility through the intake area at the rear of the facility. Inmates must clear a medical detector and then they are strip searched prior to leaving the immediate entrance area. This process is conducted for inmates who are new arrivals as well as those leaving the perimeter to report to their outside work areas.

The Armory/Key Control building is located outside the secure perimeter near the main entrance. The Armory building was clean and well organized. All inventories that were checked by the auditor were accurate and the assigned staff was responsive to all questions from the auditor. There are 2,848 keys for the Unit. Inventory consists of the following: (49) Glocks, (17) Shotguns, (16) Ars, (3) Nonlethal Shotguns, (9) 37 MM (7 in Armory, 2 in Central Control), (13) Glocks (for Pine Bluff Central Transportation), (78 per monthly log / 77 perpetual log) MK4 units, (8) Foggers, (16) Stream, (2) Vapor. The chemical inventory is properly dated. They have an ample supply of the following ammunition: 223, 556, 40, slug and buckshot. The Armory also has (25) Escape bags (includes flashlight, roll of tissue, security log, emergency restraints (flex-cuffs), directions to location).

Security staff normally carries keys, radio, and OC. Some keys are issued by the three control centers, others are exchanged on post, while others still are issued as permanent "TAKE HOME" keys. Some staff is also assigned "TAKE HOME" OC. There seemed to be many take-home keys and issue points. Daily key issue tracking is maintained by a key issue log which is accurately maintained and checked during and following each shift. If a set of keys is discovered to have been inadvertently taken from the property, the person who took them is contacted and directed to return to the facility to return the keys.

The keys were properly inventoried, stored, and accurate issue documentation was maintained. Spot checks on issue and use of keys were conducted with several staff members (Security and Administrative). The staff checked was found to know both the number and use of their assigned keys. The issue documentation was cross-checked and found to be accurate. Inventories are maintained via computer program and paper backup. The paper backup was updated according to the inventory check schedule, checked, and found to be accurate.

Post orders were located on each post checked and the proper documentation was also present per policy. Staff questioned regarding content of Post Orders displayed a keen awareness of their content and knowledge of how to carry out their intentions. There is a canine program is for scent specific dogs and consists of three Blood Hounds and forty-two mix Hounds. The Canine Unit assists the local law enforcement, including the game and wildlife in searches and apprehension. A local Veterinarian is contracted to provide services. There is a good management of chemicals and tools.

There is horse barn consisting of nineteen horses housed in two separate stables for horses that work with the dog tracking team as well as horses that are used to monitor inmate working outside of the perimeter of the facility. There is a good management of chemicals and tools.

Special Management and Restrictive Housing:

East and West Restrictive Housing is accommodated with 30 cells in each housing unit, totaling 60 cells for the Restrictive Housing area. Each cell is a single occupancy cell equipped with sink and toilet. There are four single occupancy showers on each side. Inmates are afforded the opportunity to shower times 3 (Mon/Wed/Fri) a week. Cells clean up, haircuts, and shaves are also conducted three times a week (Mon/Wed/Fri). Inmates receive outdoor recreation for one hour five days a week. Mental Health and Medical staff conduct daily rounds, as well as when requested by the inmate. Chaplaincy department conducts emotional services rounds. Inmates are afforded the opportunity to have access to law library and notary. Inmates who are participating in the Shorter College program or GED will have their homework brought to them and collected for submission. Inmates are allowed to use the phone during phone hours and have access to use the phone to call PREA and/or state police hotline when requested. Prior to COVID and the suspension of visitation, inmates were allowed non-contact visitation. Inmates who receive punitive time that exceeds 30 consecutive days will receive a 48- hour relief. Upon initial assignment to Restrictive Housing pending disciplinary court review, inmates are seen by the Classification committee weekly until they have attended disciplinary court. If inmates receive punitive time their job assignment is changed to AM restrictive housing and PM punitive. If an inmate receives more than 30 days of punitive time, he will be seen by the classification committee after his first 30 days of punitive has been served. Inmates can be assigned to RH for disciplinary court review, punitive, investigation, treatment precaution, COVID quarantine.

Extended Restrictive Housing has 50 single occupancy cells, and equipped with two indoor yards and natural skylight, and six showers. Inmates also are given the opportunity to shower, receive haircut, and shave three times a week (Mon/Wed/Fri). Extended Restrictive Housing has six televisions mounted in areas where all inmates will be able to view at least one television. The television will play the unit movie, and barrack rules apply to the other televisions. Inmates are limited to spending \$10 in restricted commissary items. Inmates have access to library, law library, and notary.

To be placed in Extended Restrictive Housing, inmates would have been recommended by the classification committee while assigned to Restrictive Housing. Upon assignment to Extended Restrictive Housing, inmates will be seen by the classification committee once every seven days for the first 30 days, and then 30-day review. Inmates will receive a release plan back to general population within the first 30-day review. In both Restrictive Housing and Extended Restrictive Housing, chow and pill call are conducted at the cell. Mail call is logged with both incoming and outgoing.

Environmental Conditions:

The facility was clean and well lit. Maintenance of the physical plant is good, and the day-to-day operation is conducted in a quiet and orderly fashion. The lighting, airflow, and temperature controls were all within acceptable levels at the time of the audit.

The noise levels were extremely low throughout the facility. The movement in all areas did not reflect overcrowding. There was a good number of activities going on in the living and program areas. Adequate toilets and washbasins were available. Water temperature appeared to be within acceptable limits as evidence by physical checks by the team and additionally, the team received no complaints from the inmates regarding water temperature. The grounds were well kept throughout the institution. There is a backup electric generator.

ORCU has a recycling program for cardboard, pallets, and used motor oils from the vehicle maintenance shop.

Sanitation:

The Caustic/Toxic is controlled by the Health and Safety Officer. All dilution of products deemed Hazardous, or Toxic are directly controlled by the officer. Chemical boxes are locked and sent to housing and treatment areas in the am and returned by shift change when an exchange of boxes occur for the Evening shift. The Food Service area has its own chemicals which are on inventory by the health and safety officer and food service staff. Inventories were checked at both locations with all found to be in order.

The facility is clean and well maintained in all areas. Inmate workers/porters are responsible, under the direction of staff for cleaning the facility. Inspections by staff ensure the areas are maintained at a high level. Weekly safety and sanitation inspections are conducted by appropriate staff and are documented on inspection forms. Inmate housing units has a janitor/mop closet and there is cleaning supplies maintained on the units. There are eye wash stations in key critical areas of the facility. All chemicals are controlled and have proper SDS sheets readily available. The visiting committee team recommended the need to highlight all the SDS sheets (name of chemicals and the first aid section) for easy reference.

Staff and inmates are required to know the proper use and what to do in case of an emergency involving chemical and caustics. All staffs are trained on safety precautions. Personal hygiene items are available to inmates and staff. There is a housekeeping plan. Daily, weekly, and monthly inspections are performed by facility staff and were made available for review. There are inmates assigned for cleaning the outside areas of the facility, such as sidewalks and the inner perimeter.

Facility grounds are well maintained and groomed. Safety and sanitation inspections are conducted annually, monthly, weekly, and daily. All floors were clean and polished. There was no smell of fresh paints. Offices were free of clutter, and grounds were free of trash. Vents, ceilings, and inmate's individual living areas were all clean.

ORCU is on public water and sewage system. Waste management and pest control are provided by certified and/or approved vendors. Furnishing throughout the facility had appropriated fire-rating as required. The facility has a well-established housekeeping plan that outlines areas for cleaning on a daily, weekly and monthly basis.

Fire Safety:

The facility is monitored by an electronic fire detection system with enunciation panels in central control. Throughout the facility, exits were clearly marked. Evacuation routes were posted. The facility has fire extinguishers, fire hydrants, sprinkler systems, and range hoods that are inspected and with necessary documentations maintained. Annual fire inspections and weekly and monthly inspections by staff were available for review. Fire drills were being done for each housing unit on at least a quarterly basis and included evacuation of inmates from the buildings. There are Self-Contained Breathing Apparatus (SCBA) and sprinkler systems throughout the facility. Emergency keys have a series of drilled dots on each key ring providing tactile ID in low light environments. Fire drills are conducted on a quarterly basis on all shifts. The annual first inspections conducted by the Malvern Fire Department.

The facility's fire plan is reviewed and approved annually and in compliance with all applicable state fire safety regulations. Smoke sensors are a combination of smoke and heat throughout the facility.

The facility has backup electric diesel generators. The Generators are tested full load quarterly and routine tested weekly. Inspection of outside security lights found all operational.

Food Service:

The Food Service is provided by State employees. The facility has four Chow Halls. The kitchen is staffed with a Food Preparation Manager, seven Food Preparation Supervisors when fully staffed, and supervised over 180 inmates 24/7. They provide meals to approximately over 1655 inmates and 200 staffs daily. In addition, they provide medical snacks and special medical diets. The Food Service utilizes the "blind serving" process.

Temperatures of walk-in freezers, walk-in coolers, and dry storage met standards as verified by observation and logs reviewed by the visiting committee team. Dry goods are organized neatly with caustic substances properly controlled and logged. Foods items are dated and rotated and did not exceed expiration dates. Kitchen sharps and tools are properly shadow-boarded, and logs matched counts.

Average cost per meal is \$1.08 per inmate and approximately \$3.25 per day. The facility follows a rotating cycle menu. All inmates assigned to work in food service are housed separately and medically cleared before being assigned to work in kitchen.

Three hot meals a day are provided that are nutritionally adequate, properly prepared and served in pleasant surroundings. Medical diets are coordinated with the food service. ORCU follows "Diet for Health". The Medical Director approves all medical diets, and the Chaplain approves all religious diets.

The visiting committee team on the second day of the audit ate a lunch meal consisting Swiss steak, Great Northern beans, Mashed potatoes, Seasoned mixed vetables, Oatmeal cookies, Diet applesauce, and chioce of lowfat milk or Koolade or Tea. The team found the meal to be tasty, reasonable portion size and temperature appropriate. Inmates interviewed were complimentary of the food service. The visiting team also verified that the same meals are served to employees and inmates. Cold/hot holding temperatures are appropriate. Pest control and food inspections were current.

Medical Care:

The review of health care at the Ouachita River Correctional Unit includes direct observation and review of local policies and written procedures, approved clinical protocols and review of medical records, as well as interviews with medical staffs and inmates.

Medical services at the Ouachita River Correctional Unit (ORCU) are contracted through the WellPath. They employ full-time, part-time and PRN health professionals to provide medical, dental, and mental health services.

ORCU is an intake facility with multiple missions and accepts in-transit and intrasystem transfers and many have history of high-risk behaviors, compounded by lack of medical care and /or mental health treatment, and are more likely to have chronic illnesses and infectious diseases. The facility has a Responsible Physician (MD) and Health Services Administrators. Medical staffs are well trained and caring professionals. The medical auditor interviewed several inmates, and they were complimentary of medical services. There are peers review evaluations, access to care meeting, CQI and MAC meetings. Facility utilizes language lines, video orientation and sign language interpreters.

Medical at the ORCU is divided into two: the Infirmary and the Sensitive Needs Unit (SNU) that includes Intake, Day Clinic, and a 28-bed Hospital. The Infirmary is in old section, and the Hospital, Intake and Day Clinic in the new section. The Sensitive Needs Unit (SNU) clinic areas comprised of two floors. The first floor consists of Day Clinic, Dental, Dialysis, On-site Clinic Procedure Room, Intake Medical, Intake Dental and Alphabet Pill Room. The second floor consists of Hospital/SND, Hospital 2 (used for clinic housing), and the Physical Therapy. They share staffs. ORCU serves as an unofficial hospice facility and provides end-of-life care (or EoLC) and palliative care. Nursing shortages continues to be a problem.

The ORCU-Infirmary clinic (old section) is staffed with one (1) F/T Physician, one (1) F/T RN-Health Services Administrator, three (3) F/T Registered Nurses, one (1) P/T-Registered Nurse, six (6) F/T Licensed Practical Nurses, P/T (2) P/T Licensed Practical Nurses, one (1) F/T Certified Nursing Assistant, one (1) F/T Medical Assistant and one (1) F/T Medical Record Clerk. Clinic hours are from 6:00 a.m.-6:00 p.m. and 6:00 p.m.-6:00 a.m. (Mon-Fri). The medical auditor observed shift change on the second day of the audit.

The Hospital-SNU and the Day Clinic (new section) are staffed with one (1) F/T Medical Director, one (1) F/T Physician, one (1) F/T Health Services Administrator, two (2) F/T Directors of Nursing, three (3) F/T Mid-level Providers, nine (9) F/T Registered Nurses, thirteen (13) PRN-Registered Nurses, twenty (20) F/T Licensed Practical Nurses, eight (8) PRN-Licensed Practical Nurses, six (6) F/T Certified Nursing Assistants, thirteen (13) PRN-Certified Nursing Assistants, five (5) F/T Medical Record Clerks, one (1) PRN-Medical Record Clerk and one (1) F/T Administrative Assistant. Clinic hours are from 6:00 a.m.-6:00 p.m. and 6:00 p.m.-6:00 a.m. (Sun-Sat), the Day clinic hours are from 8:00 a.m.-4:30 p.m. (Mon-Fri), and the Alpha Pill room hours are from 6:00 a.m.-6:00 p.m. and 6:00 p.m.-6:00 a.m. (Sun-Sat). The medical auditor observed shift change and intake process on the second day of the audit.

The medical at the ORCU has vacancy rate at 13% at the time of the review. Vacancies includes six (6) CNAs, five (5) LPNs, one (1) APN, and five (5) RN's.

There are fourteen (14) examination rooms (2- Infirmary, 1-Hospital, 8-Day clinic, and 3-Intake). Medical examination rooms have access to water, bathrooms, education materials and health pamphlets. In addition, there are eleven patient room with capacity of two beds on the second floor for GI preps once per month from all over the states.

ORCU medical is quipped as follows:

- 4 AEDs (1-Infirmary, 3-Hospital, secured and inspected)
- 4 EKGs (1-Infirmary, 3-Hospital, secured, inspected, and read by CompuMed)
- 4 Jump bags (1-Infirmary, 3-Hospital, secured and inspected)
- 5 Emergency stretchers with straps (2-Infirmary, 3-Hospital, secured and inspected)
- 4 Transportation gurneys (1-Infirmary, 3-Hospital, secured and inspected)
- 2 Secure medication rooms (1-Infirmary, 1-Hospital)
- 9 Refrigerators (2-Infirmary, 7-Hospital for Flu, TB Solutions, etc.)
- 4 Refrigerators (1-Infirmary, 3-Hospital for Specimens)
- 2 Medical crash carts (1-Infirmary, 1-Hospital, secured and inspected)
- 30 Oxygen Concentrators (2-Infirmary, 10-Hospital, secured and inspected by Dr. MET)
- 43 Portable oxygen cylinders (8-Infirmary, 17-Hospital, secured and inspected by EspriGas)
- 15 Dialysis machines- Fresenius 2008k with chairs (Contract with Chardonnay Dialysis Mon/Wed/Thurs, 5:00 a.m. to 5:30 p.m. (12 hrs./day)
- 1 Two-body mobile refrigerator morgue. Temperature logs are maintained, and the morgue was empty at the time of the audit.

ORCU has a State ADA Coordinator at the Pine Bluff, AR and has a Disability Placement Program (DPP) that provides for housing accessible lockers, TDD phones, handicap showers, beds with grabs bars, accessible day room tables and elevator. There are ample supplies of walking sticks, crutches, and wheelchairs in the facilities. ORCU can house severely disabled inmates. There are wheelchair-accommodating cells and CPAP accommodating housing. There are two (2) inhouse Physical Therapists provided by All Star Therapy, Pennsylvania Mon-Fri from 08:00 a.m.-04:30 p.m.

ORCU has an agreement with the Malvern Fire Department (7-8 minutes) and the Life Net, Malvern EMS (3-4 minutes) in the event of a medical emergency. Nonemergent medical transportation is done by facility staff to either a hospital facility or community provider for offsite consultations. Drills are performed regularly to test medical emergency responses. Nursing staffs have Basic Life Support (BLS) certified through the American Heart Association (AHA). Master SDS is maintained in medical. Staffs are trained on CPR and First Aid and have current certifications. Officers are trained on First Aids, CPR and AED, and considered first responders. The ORCU medical maintains affiliation agreements to provide emergency room and inpatient medical services with the following hospitals:

- 1. Baptist Health Medical Center-Hot Springs County, Malvern, AR (ER)
- 2. National Park Medical Center, Hot Springs National Park, AR
- 3. CHI St. Vincent Hot Springs, Hot Springs, AR
- 4. University of Arkansas for Medical Sciences, Little Rock, AR

Upon admittance to the ORCU, inmates receive an Inmate Orientation Manual to aid the individual in their adjustment to correctional setting. This documentation contains information regarding medical, metal health and dental services. Information on the handbooks also includes medical and sick call procedures, general information on medical, co-pay, diets, medication administration, keep on person (KOP) medication and over the counter (OTC) medication. Other educational guides are utilized to inform inmates about AIDS and the spread of HIV, blood borne pathogens and safety when working with body fluids.

The ORCU Physician approves medically necessary diets. The medical auditor examined the manual during the audit and found it current. The manual is examined regularly by the HSA for updates. There were 417 medical diets and 92 diabetics (69-insulin and 23 non-insulin dependents) at the time of the audit 5/26/2021. Insulin dependents diabetics receive midnight snacks.

Sick calls are provided 5 day/week in the infirmary and SNU. Segregation round are made daily. Inmate accessed all medical services via centralized sick call boxes. The average monthly sick calls are 376. The medical auditor observed both runs on the second day of the audit and found the process timely and organized. Medical requests are triaged within three days, and any patient with symptoms is seen within one day. There is a \$3.00 health service fees. The quality and level of care between the inmates are the same. No inmate is denied health care because of inability to pay. ORCU uses electronic and paper medical records. Specialty services are arranged through the Utilization Dept. 1-2 days. Optometry service is contracted through the Institutional Eye Care 1x/mo. Ophthalmology clinic is offered at ORCU. Inmates are provided with age specific medical exams. The average monthly number of chronic care inmates excluding mental health at the time of the audit was 171. Telemedicine is practiced at the ORCU. Dialysis services provided through the Chardonnay Dialysis three time per week. There are 21 inmates receiving dialysis treatment as of audit period 5/26/2021.

Medical grievance is through the centralized grievance box and reviewed by the HSAs within 3-5 days. There is a grievance coordinator. ORCU averages 1-2 substantiated medical grievances per month. ORCU has mainline station to help address inmates concern early. The number of substantiated inmate grievances related to health care during review period is 36 due to copay and medication refill.

ORCU has a plan for the management of communicable diseases including education on prevention, diagnosis, treatment, and isolation. ORCU has an infectious disease specialist. All employees and visitors follow the Coronavirus (COVID-19) precautions for entering the facility, including the temporal temperature checks and questionnaires. COVID-19 related patients are temporarily quarantined and housed in the facility. At the time of the review, May 27, 2021, Barack 5 (Intake) and ISO hospital are under COVID-19 quarantine, and 44% of the inmates have received the first dose of the COVID-19 vaccination, 45% have completed the first and second doses, and 45% of the staffs have received the first dose of the COVID-19 was 46 and HIV infections (Outcome Measure Std 6A-6) at a given point during the audit review period was 114.

Facility also conducts monthly wastewater surveillance to monitor for early signs of disease spread. Wastewater can be tested for RNA from SARS-CoV-2, the virus that causes COVID-19. ORCU has 6 negative pressure rooms and 22 licensed infirmary beds. Most of the inmate's patients are housed in the infirmary pods require assistance with the activities of daily living (ADL). The medical auditor recommended a professional inspection of the negative pressure rooms to measure the required air exchange calculations per hour (ACH). This is a repeated recommendation. The total monthly TB tests at time of the audit are 250. Universal precautions are practiced throughout the facility.

There are available first aid kits, blood borne pathogen kits and eye wash stations. Medical areas are well maintained and clean. Hand sanitizers dispensers were located throughout medical and other areas. Sanitation and housekeeping are provided using trained porter's help.

Medications are stored in medication rooms and secured behind double door locks. A nurse administers medications 3x per day/7days per week (Sun-Sat) in infirmary, SNU and segregation (cell side). Prior to giving medications, an inmate's identification is confirmed, and mouth cavities checked after administration. The medical auditor observed medication administrations on the second day of the audit and found the process organized and timely. There is a separate diabetic line 3x per day/7days per week (Sun-Sat). All no shows or refusal to medications are document and /or referred. Inmates are allowed Keep on Person (KOP) medications. MARS are electronic and paper. There are approximately 958 inmates on prescription medications, and 49 on control medication at the time of the audit. Some medications are crushed per specification. ORCU has a distribution list of over the counter (OTC) medications and approved by the Regional Medical Director.

ORCU has dispensaries. Medications are obtained through the Diamond Pharmacy and delivered by a courier. The backup pharmacies are local Walgreens and Fred's. Patient specific and stock medications are maintained. The Diamond pharmacy and Department of Health audits the dispensaries monthly. The medial auditor found the medication secured, and random inventory inspections on sharps, controlled medications were accurate. Basic medical supplies and materials are obtained through the McKesson.

The disposal of expired, unused, discontinued, recalled, over stocked medications including Over the Counter (OTC) prescriptions, (pills and liquids) and narcotics are arranged through a Reverse Distributor. There were some expired medications or discontinued medications found in the facility scheduled for pick-up. Records are maintained on disposal process. Upon release inmates are provided with 30-day medications.

ORCU medical has a draw only lab. Specimens are collected on site. Blood is spun and sent out for analysis to the Lab Corp 5–days/week and reports received online within 24-48 hours by fax/phone. STAT labs are sent to the Baptist Health Medical Center-Hot Springs County, Malvern, AR, and reports received 2-4 hours by fax/phone. Average monthly inmate lab tests are 1322. Stericycle is contracted to pick up the biohazard and sharps wastes. The medical auditor checked the specimen refrigerators temperature logs and found the records current. EKGs are performed and read on-site. Radiology services are through MobilexUSA X-Ray and the Baptist Health Medical Center-Hot Springs County.

ORCU has two dental clinics: the Intake dental and the Clinic dental. The Intake dental is open from 8:00 a.m.-4:30 p.m. (Mon-Fri) and supported by one (1) F/T Dentist and one (1) F/T Dental Hygienist. The Intake dental is equipped with one (1) Panorex digital x-ray machine, one (1) bitewing digital x-ray machine and three (3) dental chairs. Dental procedures at the Intake dental includes examinations and initial screens.

The Clinic dental is open from 6:00 a.m.-4:30 p.m. (Mon-Thurs) and supported by one (1) F/T Dentist, two (2) F/T Dental Assistants, and four (4) P/T Subcontracted Dentists. The Clinic dental is equipped with six (6) dental chairs and four (4) bitewing digital x-ray machines. Dental services include basic dentistry, fillings, dentures, partials, extractions, root canal, restoration and oral cancer screenings and hygiene.

Oral surgery provided through the St, Vincent Hospital, Little Rock, AR. The inmates access dental health services through the sick call process. The medical auditor reviewed the licenses, registrations, records and random inventory of sharps and instruments and found them accurate. The dental area is clean. Dental chair traps are cleaned weekly. Sterilization is monitored using the Crosstex by Henry Schein. Dental supplies and equipment services are through the Henry Schein. Dental x-ray inspection conducted by Dr Met Biomedical Services, Springdale, AR. Dental amalgam wastes are disposed through the Stericycle.

There is a medical pathway in case of emergency. It was recommended that dental amalgam separators to be installed on the compressors as required by the EPA. The average number of inmates seen monthly is 1173 (combined). ORCU has a dental prosthetics for dentures and partials for the State and are staffed with four inmates. Completed dental treatment is good for the review period.

ORCU is an inpatient psychiatric facility and residential treatment programs for mentally ill inmates in the ADC-WellPath. ORCU mental health is staff with four (4) F/T Psychiatrists (subcontracted through the WellPath)-SNU, five (5) F/T Mental Health Advisors (State), two (2) F/T Licensed Master Social Workers (State), one (1) F/T Advisor (State), two (2) F/T Records Clerk (State), two (2) F/T Administrative Specialists I (State) and one (1) F/T General Population and Intake Supervisor (State). Services are provided 07:00 AM to 03:00 PM (Mon-Fri) and on call.

There are approximately 171 inmates seen monthly by the provider and 5704 by the Mental health counselors. Any staff member has concerns about an inmate's mental stability may refer the inmate to the Mental Health Department. In addition, an inmate may self-refer for a clinical interview to discuss their mental health needs. Daily rounds are conducted in Restricted Housing Unit (RHU). Inmates are evaluated 30/60/90 days or sooner if clinically indicated. Inmates are provided information on enhanced victim services and rape crisis hotline. At the time of the audit, there were 189 inmates on anti-psychotic and 338 on anti-depressant medications.

Program services include crisis intervention, individual/group counseling and medication management. All suicide ideations are referred to Mental Health, monitored and observed 1:1. ORCU have 8 suicide cells. Suicide garments are available.

Recreation:

There are two coaches (one for each side of the prison). They have equipment for and host the following sports: Volleyball, Basketball, Shuffleboard, Football, Checkers, Table Tennis, Badminton, Spike Ball, Hockey, Baggo Boards, Frisbee, intramural sports, and there is an exercise station. (Some sports are played outside in the recreation yards.) While there are no assistants, there are six (6) recreational porters that are trained in activities. The only tools are one pair of scissors that are well secured. The gym has a rest room, bleachers, and a scoreboard.

There are options for recreation, both indoor and outdoor, and are provided in a variety of manners and locations throughout the facility. Inmates in the isolation unit are provided access to covered outdoor recreation areas. Inmates in the hospital and SND unit have access to an outdoor courtyard and indoor dayroom.

The Habilitation program inmates and any inmates that are wheelchair bound are provided access to a small outside recreation yard and an indoor gym. Most of the population is given access to an indoor gym and one of three outdoor recreation areas. Recreation options include basketball, volleyball, handball, soccer, softball, stationary workout framework, shuffleboard, ping pong, and board games.

The facility offers a hobby craft program that allows for leather craft, woodcraft and in cell art cards. The facility also allows inmates to earn the right to possess an MP4 player and/or electronic tablets. These devices include options to receive email, download music, podcasts, video games, and educational programs. The tablets also allow inmates to use the device as phone.

Religious Programming:

The ORCU Chaplaincy department is responsible for counseling with inmates via office session and/or cell/housing units visits. They act as liaison between inmates and their families when an emergency arises and distributing religious materials to the inmate population.

There are three full-time chaplains at the Unit. The Senior Chaplain oversees all religious programs including marriage and baptisms. All major religions are provided services which may include worship opportunities, study groups, religious videos, office counseling, and cell to cell visitation. The chaplain's office administers the volunteer program, approves religious diets, and provides training to volunteers.

Chapel programs and services includes Sunday Services, Islamic Studies, Celebrate Recovery Inside, Kairo Prison Ministry, Tuesday and Thursday Band and Choir Rehearsals, Tuesday and Thursday Chapel Services, Central Arkansas Baptist Bible Institute (Theology/Seminary Studies), Intake Ministry, Catholic Services, Man-up Programs, and the PALS faith-based Program.

Offender Work Programs:

ORCU has work assignments available to inmates such as: utility squads, kitchen workers, education- full and part-time, laundry, and maintenance. The facility also assigns inmates to work outside of the perimeter fence as well as providing crews to the community when requested. Many inmates are assigned to specific programs, such as the RSVP (Reduction of sexual victimization program) or the habilitation program.

Academic and Vocational Education:

The ORCU Education department is part of the public school within the Correctional School System. There are seven teachers providing instruction in seven classrooms (three are computer classrooms) and are equipped with Smartboards and Elmo. The objective of the school is to assist the inmates to acquire their GED diplomas. The students are assigned a classroom level based on the Test of Adult Basic Education (T.A.B.E.) and English as a Second Language (ESL). Students with prior Special Education needs are screened at orientation. The Academic and Vocational programs at this facility are accredited by the Correctional Education Association.

The school hosts a graduation once per year. Inmates who have completed the Central Arkansas Bible Baptist Institute program are also a part of this graduation ceremony. Upon completion of the student's GED, notification is sent to the Unit Program Coordinator and the Vo-Tech Project Manager for possible student review/enrollment. The following GED graduations are as follows: 92 in 2018-2019, 67 in 2019-2020 and 11 in 2020-2021. Due to COVID-19 restrictions there were no GED testing from March -June 2020 and limited student enrollment due to strict inmate movement protocol.

The Riverside Vocational Technical School (RVTS) at the ORCU is supported by a Program Manager and eight Technical Instructors. The campus offers Building Trades Technology, Computer Application Technology, Plumbing and Welding and provides NCCER certified curriculum. A separate Vo-Tech building is provided to inmates who are assigned to one of two vocational programs: computer applications and building trades. The building has room for additional programs and the vocational staff is currently working to add to the options provided in this area. During the 2019-2020 school year, the program graduated 19 students, each completing1440 hours of technical training. RVTS-ORCU also recorded 30 NCCER certifications in the Core and Carpentry disciplines.

Shorter College provides college level courses to the inmates. At the time of the audit 8 courses were offered that included English comp, college algebra and principles of marketing. There are 24 students enrolled in Shorter College at ORCU

Social Services:

Programs available to the inmates include the RSVP (Reduction of Sexual Victimization Program), Habilitation program, Think Legacy, Alcoholics Anonymous, Narcotics Anonymous, PALS (Principles and Application of Life Skills), and the Residential Program Unit, and PAWS in Prison. These programs, coupled with the education, vocational, recreation, and mental health services provide a wide range of services and programs to the inmates assigned to this facility. These services are provided by unit managers, social workers, correctional program leaders, mental health staff and classification specialists.

The Reduction of Sexual Victims Program (RSVP) provides evidence-based treatment to incarcerated sex offenders who have felony sex offense convictions. Since a significant number of convicted sex offenders are eventually discharged back to the community, the goal of RSVP is to provide rehabilitation opportunities for these Inmates and therefore substantially reduce the risk of these inmates repeating their sex crimes or committing new sex offenses. Successful achievement of this goal leads to decrease victimization in our communities, therefore a safer community, and in turn leads to significant reduction in recidivism rates. The recidivism rates for the RSVP program have been lower than those of the general, untreated, population. The length of time to complete the program varies but averages 6 months. Participants' progress is evaluated by testing and assessing their individual efforts during case management sessions. RSVP currently has a bed capacity for 238 inmates and is located at the Ouachita River Correctional Unit (ORCU) in Malvern, Arkansas.

Participation in RSVP is voluntary. The program uses group therapy, case management sessions, and homework assignments in a cognitive behavioral therapy modality that focuses on helping inmates to correct their distorted thinking patterns, learn effective ways to control their deviant sexual behavior/s, and acquire improved impulse control.

To be considered for enrollment in RSVP, an inmate must be Class III or higher and must be motivated to change. RSVP currently has two licensed social workers, one licensed professional counselor, ten advisor positions, two administrative staff, and one rehab program manager. A psychologist is available for consultation each day of the week.

The Habilitation Program has a population of inmates with limited intellectual disabilities; significant neurological disabilities; significant limitations in adaptive functioning; and/or have demonstrated an inability to function in general population.

There are currently 47 inmates housed within the Habilitation program, which is maximum capacity currently. The Habilitation program consist of a treatment team; Rehabilitation Facility supervisor, and one mental health Advisor, clinical psychologist, provided services are case management, medication monitoring, crisis intervention, group setting, encouraged positive behavior, positive communication, and social skills. There are several areas of objectives within the Habilitation program: such as how to avoid future incarceration, living in a less restrictive setting, following all rules set by society, paying probation fees, how to obtain community resources, assist with parole plans, attending parole hearing, encouraging good hygiene, cleaning to assist in developing work ethics and job skills. Program hours are scheduled from 6:00 a.m. to 4:30 p.m. for inmates Monday through Friday, although at times program restrictions may carry throughout the weekend based on severity of ADC and program rule violation.

Residential Program Unit (RPU) provides a more direct form of mental health care for inmates that have been deemed mentally unstable. Inmates are referred to the program by a psychologist or a psychiatrist. Inmates may also be referred due to extended restrictive housing stays with a severe mental illness (SMI). The goal is to monitor and encourage appropriate medication to stabilize the inmate. Each inmate is followed by an advisor that sees them weekly and is afforded the opportunity to attend group sessions. Inmates who are assigned to RPU whether granted population or not must have a security escort any time they are leaving RPU. Inmates are also followed by the psychologist and psychiatrist. RPU functions as a unit of its own with a total of 8 barracks, each barracks can house up to 16 inmates for available beds of 128. RPU 1 through RPU 4 barracks are our "Population" barracks, these barracks attend chow and yard just as would be done in regular population but are not allowed to intermingle with general population inmates. RPU 5 is what we consider our halfway barracks. This barracks functions just as a population barracks would apart from them having the option to go to chow or eat in the barracks. This barracks is set up at a slower pace. Mental Health approves each inmate that is placed in this barracks. RPU 6 and RPU 7 are "gradual release" barracks. When an inmate is placed on gradual release, they are allowed to come out of their cell for 2 hours a day 3, 5 or 7 days per week. This is determined by Mental Health and approved through classification. RPU 8 is the Restrictive Housing barracks, where we would house inmates who are placed on Punitive, Disciplinary Court Review, Investigative Status and/or Treatment Precaution. In the instance that RPU 8 becomes full RPU 7 is set up to be used as Restrictive Housing overflow.

A movie license is held by the Inmate Council, and they have an inventory of over 3,000 movies. They periodically update them, and they are purchased through a catalog or Walmart. The inmates can request movies and they are previewed by the Program Specialist prior to approval for viewing. Movies with racial, underground, gang or sexually explicit content are not allowed.

There available mail services, barber shops and canteens. Inmates are allowed \$100/week on canteen and vary for confinement. COVID-19 have impacted some of these services.

Visitation:

This facility provides visitation in two different areas. Each of the visiting rooms provides both contact and non-contact areas for inmates to visit with their family or friends. Visitors are processed into the facility as the main entry area and then walk to the appropriate visiting area. The Inmate Council Concession Stand is available for visitors to purchase food items. Each of the visiting rooms were bright and provided ample space. Each of these areas were inspected during this audit and found to be clean and in good repair. Due to the COVID-19 pandemic, visitation was suspended. There are plans to resume normal visitations.

Library Services:

Library services are provided from two different library locations in this facility. Each of the libraries are open seven days a week and each provide inmates access to both books, magazines, and newspapers. The total volume of books is approximately 5,019 on hand and 431 loaned out.

The library also provides large print books and reference material. An interlibrary loan process is available through the Pine Bluff Library and the Little Rock Library. A total of nine inmates are assigned to work in the libraries. Inmates who are not allowed to visit the library may request a book be delivered to them.

The library locations include law library resources. There are two (2) computers with access to law material (West Law / Lexus Nexus). Most of the library access is provided through this system, however, there are limited volumes of legal material available for additional reference.

Laundry:

Laundry services are provided from two locations: the central laundry and the unit laundry. Inmates are provided with daily central laundry services. Clothing is turned over to an inmate worker who is a part of the laundry team. Clothing is inventoried and returned to the inmate the following day. All necessary clothing and hygiene items are provided to each inmate by the laundry, including linen, clothing, wash cloths, and towels, toilet paper, soap, and razors. The unit laundries provide inmates the opportunity to have clothing laundered daily. Sheets and blankets may be sent to the central laundry for cleaning on a weekly basis.

The audit team inspected each of these laundry facilities and found them to be clean and orderly. Chemicals were controlled according to policy and inmates assigned to work in these areas seemed knowledgeable concerning their duties and safety practices.

F. Examination of Records

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

Case Number Allegation	Inmate Name ADC#	<u>VS.</u>	Agency Unit	Service Accepte
4:19CV00931 Inadequate Medical Care Dental	Malcom J. Easley 158900	C Garden Rory Griffin	ORU	<u>d</u> 1/6/202 0
6:19CV06148 Failure to protect (from another inmate)	Jessie Lee Farmer 166000	Dorothy M. Griffin et al Dorothy Griffin	ORU	2/26//20 20
		LT. Erica Lucas -ORU		3/26/20 20
6:20CV06023 Mistreatment by Staff	Jesse L. Farmer 166000	Sergeant Chad Sorg	ORU	4/3/202 0
6:20CV06030 Excessive Force	Christopher Jones 611484	Trejo Dakota Trejo, Cpl - ORU	ORU	5/19/20 20
6:20CV06017 Interference with Legal Mail	Jessie Lee Farmer 166000	Sergeant Garrett and Warden Ball Todd Ball - DW ORU Chance Garrard - Sgt - ORU	ORU	6/3/202 0
6:19CV06126 Inadequate Mental Health Treatment; Failure to Protect (from another inmate)	Tyler Klingensmith 170977	Clayton Deboer, et al Clayton Deboer - Mental Health ORU Emma M Hamer - Mental Health ORU DeAngelo Earl Warden ORU Jerilynn J Hosman, Classification ORI Airrion D. Delaney - Lt ORU Todd Ball - DW ORU Corey L Hunter - Lt ORU Hospital Juan Mendoza - Cpl ORU James W Whitley - CPL ORU	l	6/3/202 0
6:20CV06056 Disciplinary Action Violated Due Process	Michael Jackson 122135	Warden Anthony Jackson, et al Wendy Kelley Raymond Naylor Anthony Jackson Caylib McGuire Jasmine Dickerson Todd Ball Keith Waddle Justine Minor Dexter Payne	ORU	7/7/202

6:20CV06065 Racial Discrimination	Jessie Lee Farmer 166600	Corporal Kallie Watson, et al Anthony Jackson, DW Keith Waddle	ORU	7/14/20 20
6:20CV06033 Excessive Use of Force	Marcus Walton 154132	Dillion R Voss, et al Floria Washington-Classification-Varu Dillan Jennings-Corp-ORU Tamisha Ivory-Corp-ORU James Gibson-Warden-Varner Dale Reed-Chief Deputy Director	ORU her	9/2/202
6:20CV06085 Failure to Protect (from another inmate); Inadequate Medical Care	Andrew S Walker 118512	Former Guard Keyshawn Bledsoe, et a Josh E Crosby, Captain	l <mark>l</mark> ORU	9/2/202 0
6:20CV06077 Excessive Use of Force	Adair Toston 105577	Lieutenant Walter, et al Paul Walter, Lt - ORU Bryant Dallas, Captain - ORU	ORU	9/14/20 20
6:20CV06089 Wrongful Death (Suicide) Inadequte Medical Care	Misty White (Administrator of the Estate of Robert Emery White Jr 163303)	Abdel Karimou, AR Dept of Correctional Christopher Cook Dustin A. Phillips Bryan Tankersley	nQRU	Service by Mail to Individual Defendant
6:20CV06058 Denial of Medical Care	Steven C Hayes 657050	Dr. Thomas Nathan Daniel, et al Sue Alford, Mailroom	ORU	10/7/20 20

Total for Year 2020

13

2. Significant Incidents/Outcome Measures

Significant Incidents:

Incident type	2018-2019	2019-2020	2020-2021
Disturbances	5	0	0
Sexual Assault	2	2	7
Assault-			
Offender/Offender	7	0	0
Assault-			
Offender/Staff	3	0	0
Suicide	2	0	2

Outcome Measures:

The medical auditor reviewed the Significant Incident Summary and the Health Care Outcome Measures with the health care administrative team. During the audit period there were a total of one hundred and two (102) deaths: 2018-2019: 2-suicide, 5-unexpected natural and 14-natural, 2019-2020: 4-unexpected natural and 26-natural, and 2020-2021: 3-suicide, 25-unexpected naturals and 23-natural. There are some inconsistencies in the reporting of suicides for period 2018-2019 and 2020-2021.

The analyses of the outcome measures are as follows:

- 1. Standard 6A-5: Number of inmates diagnosed with Hepatitis C viral infection at a given point in time was 110 in 2018-2019, 13 in 2019-2020 and 1647 in 2020-2021, and with average inmate population of 1835. ORCU is an Intake facility and testing more, and most inmates come in with the diagnosis, including prior lifestyle and tattoos.
- 2. Standard 6A-9: Number of inmates with an active individualized service/treatment plan for a diagnosed mental disorder (excluding sole diagnosis of substance abuse) at a given point in time during audit period was 110 in 2018-2019, 13 in 2019-2020 and 1647 in 2020-2021, and with average inmate population of 1835. The ORCU provides habilitation. ORCU is an inpatient psychiatric facility and residential treatment programs for mentally ill inmates in the ADC.

The medical auditor concurs with the responses.

3. Departmental Visits

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

Department Visited	Person(s) Contacted
<u>May 25, 2021</u>	
Administration	Nancy Flores, Warden's
	Administrative Specialist
Central Control	Joslyn Peterson, Corporal
School	Channon Newman, Principal
	Jennifer Phelps, Teacher
	Jennifer Wiseman, Teachers.
Library	Gary Gamble, Program Specialist
	3 Inmates
Infirmary	Darrell Bassham, Infirmary
	Manager-RN, Health Services
	2 Inmates.

Officer's Dining Room	Captain Deborah McAfee, Food
	Services Manager Cole McAnally, Sergeant Tool
	Control.
	1 Innmate
Kitchen	Captain Deborah McAfee, Food
	Service Dietician/Manager
	Corporal Donald Bullis, Kitchen
	Security
	P. Holley, Food Preparation
	Supervisor
	M. Charles, Corporal
	19 Inmates
Laundry	Judy Blackwood, Corporal-Laundry
	Security
	19 Inmates.
East Isolation	Dillion Voss, Lieutenant
West Isolation	Kenneth Watkins, Captain
	Shelia Johnson, Captain
	2 Inmates
Restrictive Housing, East & West Isolation	
	Housing Lieutenant
	Christopher Sutton, Corporal
	Dillon Voss, Lieutenant
	Barry Efird, Corporal
	Jasmine Dickerson, Corporal 10 Inmates.
Ambulance Bay	Maurice Culclager, Deputy Warden
Day Clinic/Special Needs Unit (SNU)	Crystal McCoy, Health Services
	Administrator
	Ward, Corporal
	Reyna, Radiologist
	9 Inmates.
Intake 2	11 Inmates
Intake Medical 1	Jerika Alfred, Dental Assistant
Housing Unit 2, Barracks	Jakina Brown, Sergeant
	Kyle Winters, Corporal
	William Norris, Sergeant
	John Haynes, Lieutenant-Emergency
Golf Barracks	Joi Harris, Major
	M. Jones, Corporal
	45 Inmates (Group)
Hotel Barracks	Joi Harris, Major
	45 Inmates (Group)
Alaha Damaska	Clark, Lieutenant
Alpha Barracks	Lynn, Corporal

	1 Inmate.
Alpha/Bravo Medical	M. Goldman, Director of Nursing
<u>r</u>	1 Inmate.
Bravo Barracks	12 Inmates.
Echo Barracks	12 Inmates.
Housing 3-Barracks 9	4 Inmates
Housing 3-Barracks 10	Sunny Masters, Sergeant
Housing 5-Danaeks 10	Madelyn Byrd, Corporal
	Haley Everett, Corporal
Housing 2 Porrocks 11	7 Inmates
Housing 3-Barracks 11	1 Inmate
Housing 3-Barracks 12 (Maint. Workers)	
Commissary-Echo	Lawrence, Commissary Manager
	4 Inmates.
Charlie Barracks	12 Inmates.
Delta Barracks	17 Inmates.
Barbershop	1 Inmate
Dog Program	Dennis Parker, Sergeant
	8 Inmates.
Chapel	Dan Flora, Chaplain Senior
	Jerry Wilson, Chaplain Support
	2 Inmates.
<u>May 26, 2021</u>	
Dog Kennel / Horse Barn / ICC Garage	Lt. Ray Anderson (K-9 Lieutenant /
	Horse Barn Supervisor),
	Sgt. John McLelland (Field
	Sergeant).
	3 Inmates
Maintenance	Cpl. Bryce Wren
Armory	Lt. John Haynes (Emergency
	Preparedness Coordinator)
	Sgt. Dillan Jennings (Tool Control)
	Sgt. Cole McAnally (Key Control &
	Communications)
	Sgt. Cody Scroggins (Armorer)
	Capt. Bryant Dallas (Special Needs
	Unit Commander)
	Major Jimmy Coleman (Chief of
	Building Security)
Kitchen	Capt. Deborah McAfee
	2 Inmates
Isolation Property Room	Lt. Dillon Voss (Isolation Security
isolation i topotty Room	Supervisor)
Main Gymnasium	Deputy Warden Maurice Culclager
mani Oyinnasium	
	Major Jimmy Coleman
	Major Joi Harris

	Capt. Shelia Johnson	
	Lt. Byron Brown	
	Sgt. Benjamin Caple	
	Gary Gamble (Program Specialist –	
	Recreation / Libraries / Hobby Craft	
	/ Programs)	
	Shelly Lawrence (Internal Auditor)	
	Coach Wilfred Healy (Recreation	
	Supervisor)	
Hobby Craft	Stacey Wiley, Program Specialist,	
	2 Inmates	
Count Room	Sgt. Chad Ray	
	Sgt. Bryan Tankersley (Supervisor of	
	the Unit's Sally Port)	

4. Shifts

The security operate 2 12-hour shifts from 6:00 a.m. to 6:00 p.m., 6:00 p.m. to 6:00 a.m.

a. Day and Evening Shift

The team was present at the facility during the day and evening shifts from 7:53 a.m. to 7:25 p.m. on the first day of the audit, and from 7:50 a.m. to 5:25 p.m. the second day. The briefing was mutual and participatory. The team briefly introduced themselves and discussed the purpose of the audit and matters pertaining to the audit. The team observed shift change, programs, pills passes while the rest of the security and medical staff was busy taking care of the inmates and the offenders and are pleasant and professional. In addition, the audit team met and spoked with many of the staff, including admin staffs. The facility was calm and orderly, and no signs of tension.

Two members of the audit team attended the roll call/briefing at 6:15 p.m. on the first day of the review. The auditor assigned to review the medical section observed the medical team shift change at 6:00 p.m. that same evening. There were no outside security lights out. The staffs observed were alert, appeared well trained for the duties they were assigned, and was professional, and courteous.

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

The team reviewed the status of standards previously found non-compliant, for which a waiver was not granted and found the following: None.

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 visiting committee team interviewed and spoke to approximately 255 offenders (individually and in groups) who stated that they generally felt safe at the facility and were treated fairly by staff. Their basic needs were being met and they felt that they were making positive progress towards eventual and successful release. They also felt that their basic medical needs were being met. There were limited complaints about quality of food except for portion sizes. There were some complaints regarding outside recreation, and due to the impact of the COVID-19 Pandemic. They have ready access to sick call process and were aware of the grievance process. No offender requested for a private interview with visiting committee team member.

2. Staff Interviews

The visiting committee team interviewed and spoke to approximately 94 staffs and observed them in the performance of their duties. The team observed structured security shift change briefings. Staffs were polite, cooperative, and conducted themselves in a professional manner. There was a normal working relationship between medical, programs and security, and communication flowed freely. In addition, morale appeared to be good. Staff indicated that their training were excellent and are applicable to their positions and job needs. No complaints were brought to the team and no staff asked for a private interview. It was clear that staffs took ownership for their specific areas and were proud of the facility. Staffs were complimentary concerning the administration. No staff reported that they do not feel safe at the facility.

H. Exit Discussion

The exit interview was held May 27, 2021, at 11:30 a.m. in the Main visitation area with Warden Randy Watson and 77 Ouachita River Correctional Unit staffs in attendance.

The following persons from outside the facility were also in attendance:

Shelly Lawrence, Agency ACA Manager Bryon Brown, Agency Fire and Safety Coordinator Virginia Robins, MCP ACA Manager Joi Harris, McPherson Major Shelly Byers, Assistant Medical Administration Lyn Bennett, ACA Wrightsville Kelly Patton, ACA Varner Unit Tanya Hill, Varner Unit William Straughn, Deputy Director Perry Robinson, Law Enforcement Training Instructor Raymond Naylor, IA Administration Lindsay Wallace, Chief of Staff Gerren Smith, Reporter Malvern Daily Record Terra Doering, Benton Work Release Holly Bartlett, Benton Work Release Rory Griffin, Deputy Director Bernard Williams, Regional Manager Kim Rosenthal, RDO Wellpath Dexter Payne, Director Dale Reed, ADC Chief Deputy Director

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

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

COMMISSION ON ACCREDITATION FOR CORRECTIONS

AND THE

AMERICAN CORRECTIONAL ASSOCIATION

COMPLIANCE TALLY

Manual Type	Adult Correctional Institution, 5 th Edition		
Supplement	Not Applicable		
Facility/Program	Ouachita River Correctional Unit (ORCU), Malvern, AR		
Audit Dates	May 25-27, 2021		
Auditor(s)	Ernest Umunna-Chairperson, Joy C. Bell-Member, and Donnis Chatman-Harris-Member		
	MANDATORY	NON-MANDATORY	
Number of Standards in Manual	64	509	
Number Not Applicable	2	36	
Number Applicable	62	473	
Number Non-Compliance	0	1	
Number in Compliance	62	472	
Percentage (%) of Compliance	100%	99.79%	

• Number of Standards minus Number of Not Applicable equals Number Applicable.

• Number Applicable minus Number Non-Compliance equals Number Compliance.

• Number Compliance divided by Number Applicable equals Percentage of Compliance.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections Ouachita River Correctional Unit Malvern, Arkansas

May 25-27, 2021

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

Standard 5-ACl-1 C-05

THE WARDEN/SUPERINTENDENT CAN DOCUMENT THAT THE OVERALL VACANCY RATE AMONG THE STAFF POSITIONS AUTHORIZED FOR WORKING DIRECTLY WITH INMATES DOES NOT EXCEED 10 PERCENT FOR ANY 18-MONTH PERIOD.

FINDINGS:

The ORCU vacancy rate exceeded 10 percent for any 18-month period of the audit period. The vacancy rate was 53.92%.

AGENCY RESPONSE:

Plan of Action

Ouachita River Correctional Unit has developed a thorough plan of action to ensure that our Vacancy Rate stays at or below 10% in an 18-month time frame. We will continue to focus on retention as well as recruiting. To have the highest number of potential applicants hired, we have partnered with local community colleges/universities and High School Districts to allow unit staff to speak to those students who are seeking degrees that could align with our Department and also to those students who have not decided on their career path. Those presentations will allow students the opportunity to know there is an outlet where they can put their degree to work. We host job fairs and set up booths in the community to inform the public of the job opportunities and benefits of starting a career with Arkansas Department of Correction. We have established a strong social media presence to reach millennials as they are social media driven and technologically savvy. We also encourage our staff to tell others (friends/family/associates) of the benefits of working at Ouachita River Unit. While we are currently experiencing a 53.92% vacancy rate, our past recruiting efforts have been successful. Our goal is to lower that margin by 40% by June 2022. In addition to recruiting new employees, we are ensuring that our quality staff are being retained. Our retention efforts begin with proper training. ORCU is in the process of developing a three-phase course for supervisory staff. That course will cover intercultural interaction, ethical practices, and policy in the first phase. Phase Two will cover interviewing, effective communication and counseling, respect, and professionalism. The final phase will address thinking outside the "toolbox", leadership development, and questions I answers with the Warden. With this course, it is our hope that our staff develops what it takes to be effective at all positions regardless of rank. We encourage all staff to enroll in higher education classes and to seek additional training hours through our Agency Training Academy. Our mission is to ensure that all staff are properly trained for the requirements of the job, and to know that every employee embraces that practice.

Our staff is dedicated to the mission of recruiting and retaining, and we implore all staff to offer suggestions as to what could potentially improve our mission.

<u>Task</u> a. Recruit b. Train c. Retain

<u>Responsible Agency</u> a. Ouachita River Correctional Unit

<u>Assigned Staff</u> a. Human Resources Department b. Training Department c. Shift Supervisors

Anticipated Completion Date a. July 01, 2021 b. August 01, 2022 c. Maintain a vacancy rate below 10% throughout the accreditation cycle (2021- 2024)

AUDITOR'S RESPONSE:

The visiting committee supports the Plan of Action.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections Ouachita River Correctional Unit Malvern, Arkansas

May 25-27, 2021

Visiting Committee Findings

Mandatory Standards

Not Applicable

Standard #5-ACI-5B-12 (MANDATORY)

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

FINDINGS:

The Ouachita River Correctional Unit does not house youthful offenders.

Standard #5-ACI-6A-10 (MANDATORY)

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

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

FINDINGS:

The Ouachita River Correctional Unit does not house female offenders.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections Ouachita River Correctional Unit Malvern, Arkansas

May 25-27, 2021

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

Standard #5-ACI-1B-24

WRITTEN POLICY, PROCEDURES, AND PRACTICE PROVIDE THAT CONSISTENT WIT THE LAWS AND LEGAL PRACTICES WITHIN THE JURISDICTION, RESTTITUTION IS COLLECTED AND ULTIMATELY MADE AVAILABLE TO THE VICTIMS OF CRIME AND/OR THEIR SURVIVORS. WHERE SUPPORTED BY STATUE, 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:

Per ACT 1262 of 1997, ADC is not responsible for the collection of restitution per state law.

Standard #5-ACI-1C-12

WRITTEN POLICY, PROCEDURES, AND PRACTICE PROVIDE THAT EMPLOYEES COVERED BY MERIT SYSTEMS, CIVIL SERVICE REGULATIONS, OR UNION CONTRACTS ARE APPOINTED INITIALLY FOR A PROBATIONARY TERM OF AT LEAST SIX MONTHS BUY NO LONGER THAT ONE YEAR UNLESS NATIONAL OR STATE REGULATIONS SPECIFY OTHERWISE.

FINDINGS:

The ORCU is not covered by merit systems, civil service regulations, or union contracts.

Standard #5-ACI-2C-08

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

FINDINGS:

The ORCU has no new constructions after June 2014.

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:

The ORCU has no new constructions or renovation after June 2014.

Standard #5-ACI-3A-07

WRITTEN POLICY, PROCEDURES, AND PRACTICE PROVIDE THAT WHEN BOTH MALES AND FEMALES ARE HOUSED IN THE FACILITY, AT LEAST ONE MALE AND ONE FEMALE STAFF MEMBER ARE ON DUTY AT ALL TIMES.

FINDINGS:

The ORCU only houses 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.

The ORCU only houses male inmates.

Standard #5-ACI-3D-05

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

FINDINGS:

The ORCU only houses male inmates.

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 MINUMUM, THE FOLLOWING:

- PRE-SCREEDUCATION
- ENING EVALUATION
- MONTHLY EVALUATIO USING MULTIDISCIPLINARY APPROACH TO DETERMINE THE INMATE'S COMPLIANCE WITH PROGRAM REQUIREMENTS
- SUBJECT TO MONTHLY EVALUATIONS; TO GRADUALLY INCREASING OUT-OD CELL TIME TO GRADUALLY INCREASING GROUP INTERACTION TO GRADUALLY INCREASING EDUCATION AND PROGRAMINING OPPORTUNITIES TO GRADUALLY INCREASING PRIVILEGES
- A STEP-DOWN TRANSITION COMPLIANCE REVIEW
- POST-SCREENING EVALUATION

FINDINGS:

The ORCU does not have step-down program.

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

(EFFECTIVE NLT OCTOBER 1, 2020) FEMALE INMATES DETERMINED TO BE PREGNANT WILL NOT BE HOUSED IN EXTENTED RESTRICTED HOUSING.

The ORCU only houses male inmates.

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

(EFFECTIVE NLT OCTOBER 1, 2020) CONFINEMENT OF OFFENDERS UNDER THE AGE OF 18 YEARS OF AGE IN EXTENTED RESTRICTED HOUSING IS PROHIBITED.

FINDINGS:

The ORCU does not house inmates under the age of 18.

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
- A QUALIFIED MEDICAL OR MENTAL-HEALTH SPECIALIST DOCUMENTS THAT THE YOUTHFUL OFFENDER WOULD BENEFIT FROM PLACEMENT OUTSIDE THE UNIT.

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

FINDINGS:

The ORCU 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:

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

FINDINGS:

The ORCU 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 OFFENDER AND ALLOWS FOR THEIR PERSONAL INTERACTIONS AND GROUP-ORIENTED ACTIVITIES.

FINDINGS:

The ORCU does not house youthful offenders.

Standard #5-ACI-5B-17

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

The ORCU 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:

The ORCU does not house youthful offenders.

Standard #5-ACI 5E-10

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

The ORCU is an all-male facility.

Standard #5-ACI 5E-11

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR SUBSTANCE ABUSE PROGRAM, TO INCLUDE MONITORING AMD DRUG TESTING FOR INMATES WITH DRUGS AND ALCOHOL ADDICTION PROBLEMS.

FINDINGS:

The ORCU does not have substance abuse treatment program.

Standard #5-ACI-5E-12

WHERE A SUBSTANCE USE DISORDER TREATMENT PROGRAM EXIST, WRITTEN POLICY, PROCEDURES, AND PRACTICE PROVIDE THAT THE ALCOHOL AND DRUG ABUSE TREATMENT PROGRAM HAS A WRITTEN TREATMENT PHILOSOPHY WITHIN THE CONTEXT OF THE TOTAL CORRECTIONS SYSTEM, AS WELL AS GOALS AND MEASURABLE OBJECTIVES. THESE DOCUMENTS ARE REVIEWED AT LEAST ANNUALLY AND UPDATED AS NEEDED.

FINDINGS:

The ORCU does not have substance abuse treatment program.

Standard #5-ACI-5E-13

WHERE A SUBSTANCE USE DISORDER TREATMENT PROGRAM EXIST, WRITTEN POLICY, PROCEDURES, AND PRACTICE PROVIDE FOR AN APPROPRIATE RANGE OF PRIMARY TREATMENT SERVICES FOR ALCOHOL AND OTHER DRUG ABUSING INMATES THAT INCLUDE, AR A MINIMUMM THE FOLLOWING:

- INMATE DIAGNOSIS
- IDENTIFIED PROBLEM AREAS
- INDIVIDUAL TREATMENT OBJECTIVES
- TREATMENT GOALS
- COUNSELING NEEDS
- DRUG EDUCATION PLAN
- RELAPSE OREVENTION AND MANAGEMENT
- CULTURAL SENSITIVIE TREATMENT OBJECTIVES, AS APPROPRIATE
- THE PROVISION OF SELF-HELP GROUPS AS AN ADJUNCT TO TREATMENT
- PRE-RELEASE AND TRANSITIONAL SERVICE NEEDS

• COORDINATION EFFORTS WITH THE COMMUNITY SUPERVISION AND TREATMENT STAFF DURING THE PRERELEASE PHASE TO ENSURE A CONTINUUM OF SUPERVISION AND TREATMENT

FINDINGS:

The ORCU does not have substance abuse treatment program.

Standard #5-ACI-5E-14

WHERE A SUBSTANCE USE DISORDER TREATMENT PROGRAM EXIST, WRITTEN POLICY, PROCEDURES, AND PRACTICE PROVIDE THAT THE FACILITY USES A COORDINATED STAFF APPROACH TO DELIVER TREATMENT SERVICES. THIS APPROACH TO SERVICE DELIVERY SHALL BE DOCUMENTED IN TREATMENT PLANNING CONFERENCES AND INDIVIDUAL TREATMENT FILES.

FINDINGS:

The ORCU does not have substance abuse treatment program.

Standard #5-ACI-5E-15

WHERE A SUBSTANCE USE DISORDER TREATMENT PROGRAM EXIST, WRITTEN POLICY, PROCEDURES, AND PRACTICE PROVIDE INCENTIVES FOR TARGETED TREATMENT PROGRAMS TO INCREASE AND MAINTAIN THE INMATE'S MOTIVATION FOR TREATMENT.

FINDINGS:

The ORCU does not have substance abuse treatment program.

Standard #5-ACI-5F-08 NEW AUGUST 2018

(EFFECTIVE NLT OCTOBER 1, 2020) WHERE A FACILITATED VICTIM OFFENDER DIALOGUE PROGRAM EXIST, 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 INMATE RESPONSIBIBLE FOR THEIR VICTIMIZATION IN A SAFE, SECURE, AND CONFIDENTIAL SETTING AFTER THOROUGH PREPARATION WITH, AND WITH THE ASSISTANCE OF A PROPERLY TRAINED FACILITATOR.

The ORCU does not have the 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:

The ORCU does not house female inmates.

Standard #5-ACI-6A-24

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

FINDINGS:

The ORCU does not receive in-transit inmates.

Standard #5-ACI-6A-39 New August 2018

(*EFFECTIVE NLT OCTOBER 1, 2020*) INPATIENT CARE UNIT IS FOR THOSE WHO ARE IN NEED OF INPATIENT MENTAL HEALTH TREATMENT. THOSE UNITS SHOULD HAVE 24 HOUR SERVICE SUCH AS NURSING AND AVIALABILITY OF A QMHP, BEHAVIORAL HEALTH TRAINED CORRECTIONAL OFFICERS, AND CLINICAL PROGRAMMING. INDIVIDUAL TREATMENT PLANS WHICH WILL DEFINE THE TYPES AND FREQUENCY OF CONTACTS WITH MENTAL HEALTH STAFF FOR INMATES IN THE PROGRAM, HOUSING TO MEET THE THERAPEUTIC NEEDS OF THE INMATE AND TRANSITION PLAN UPON DISCHARGE FROM THE INPATIENT CARE UNIT.

FINDINGS:

The ORCU does not have an inpatient psychiatric Unit.

Standard #5-ACI-6B-04

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

FINDINGS:

The ORCU has a qualified health care staff, health trained personnel to coordinate the health deliver services.

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 DEFINITION OF TASKS, RESPONSIBILITIES AND AUTHORITY THAT IS APPROVED BY THE HEALTH AUTHORITY. VOLUNTEERS MAY ONLY PERFORM DUTIES CONSISTENT WITH THEIR CREDENTIALS AND TRAINING. VOLUNTEERS AGREE IN WRITING TO ABIDE BY ALL FACILITY POLICIES, INCLUDING THOSE RELATING TO THE SECURITY AND CONFIDENTIALITY OF INFORMATION.

FINDINGS:

The ORCU does not use volunteers in the delivery of healthcare.

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 FACILITY AND TRAINING OR EDUCATIONAL FACILITY THAT COVERS SCOPE OF WORK, LENGTH OF AGREEMENT, AND ANY LEGAL OR LIABILITY ISSUES. STUDENTS OR INTERNS AGREE IN WRITING TO ABIDE BY ALL FACILITY POLICIES, INCLUDING THOSE RELATING TO THE SECURITY AND CONFIDENTIALITY OF INFORMATION.

FINDINGS:

The ORCU does not utilize students, interns, or residents for the delivery of healthcare services.

Standard #5-ACI-7A-08

WHERE AN INDUSTRIES PROGRAM EXISTS, THERE WILL BE A STATUTE AND OR WRITTEN POLICY AND PROCEDURE THAT AUTHORIZES THE ESTABLISHMENT OF AN INDUSTRIES PROGRAM AND DELINEATES THE AREAS OF AUTHORITY, RESPONSIBILITY, AND ACCOUNTABILITY FOR THE PROGRAM.

FINDINGS:

The ORCU does not operate an industry program.

Standard #5-ACI-7A-09

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT THE SECURITY AND PROGRAM DETERMINATIONS NECESSARY FOR ANY INDIVIDUAL TO BE ELIGIBLE FOR INDUSTRIES WORK ARE MADE BY THE CLASSIFICATION COMMITTEE.

FINDINGS:

The ORCU does not operate an industry program.

Standard #5-ACI-7A-10

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT THE NUMBER OF INMATES ASSIGNED TO INDUSTRIES OPERATIONS MEET THE REALISTIC WORKLOAD NEEDS OF EACH INDUSTRIES OPERATING UNIT.

FINDINGS:

The ORCU does not operate an industry program.

Standard #5-ACI-7A-11

EACH INDUSTRIES OPERATING UNIT HAS A WRITTEN QUALITY CONTROL PROCEDURE THAT PROVIDES FOR RAW MATERIAL, IN PROCESS, AND FINAL PRODUCT INSPECTION.

FINDINGS:

The ORCU does not operate an industry program.

Standard #5-ACI-7A-12

A COST ACCOUNTING SYSTEM FOR EACH OPERATING INDUSTRIES UNIT IS DESIGNED, IMPLEMENTED, AND MAINTAINED IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES.

FINDINGS:

The ORCU does not operate an industry program.

Standard #5-ACI-7A-14

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

FINDINGS:

The ORCU does not have any private industries on the institution grounds.

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:

The ORCU does not allow inmates to be employed in the community by public or private organizations.

Significant Incident Summary

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

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

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

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Incident Type	Months	Мау 2020	June 2020	ylul 2020	Aug 2020	Sept 2020	Oct 2020	Nov 2020	Dec 2021	Jan 2021	Feb 2021	March 2021	April 2021	Total for
Escapes		0	0	0	0	0	0	0	0	0	0	0	0	
urbances*		0	0	0	0	0	0	0	0	0	0	0	0	

Facility Name: Ouachita River Correctional Unit Reporting Period: 2020-2021

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



:porting Period

		Number of Months Data Collected: 12 Health Care Outcome Measure Worksheet	Appe	ndix A
		Health Care Outcomes		
Standard	Outcome Measure	Numerator/Denominator	Value	Calcu- lated O.M.
6A	(1)	Number of offenders diagnosed with a MRSA infection within the past twelve (12) months	9	
	divided by	The average daily population	1830	0.004
	(2)	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months	4	
	divided by	Average daily population.	1830	0.002
	(3)	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months	17	
	divided by	Number of offenders administered tests for TB infection in the past twelve (12) months as part of periodic or clinically-based testing, but not intake screening.	23	0.739
	(4)	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months	1	
	divided by	Number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	6	0.166
	(5)	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time	1647	
	divided by	Total offender population at that time.	1830	0.9
	(6)	Number of offenders diagnosed with HIV infection at a given point in time	119	
	divided by	Total offender population at that time.	1830	0.065
	(7)	Number of offenders with HIV infection who are being treated with highly active antiretroviral treatment (HAART) at a given point in time	119	
	divided by	Total number of offenders diagnosed with HIV infection at that time.	119	1
	(8)	Number of selected offenders with HIV infection at a given point in time who have been on antiretroviral therapy for at least six months with a viral load of less than 50 cps/ml	119	
	divided by	Total number of treated offenders with HIV infection that were reviewed.	119	1
	(9)	Number of offenders with an active individualized services/treatment plan for a diagnosed mental disorder (excluding sole diagnosis of substance abuse) at a given point in time.	358	
	divided by	Total offender population at that time.	1830	0.20
	(10)	Number of offender admissions to off-site hospitals in the past twelve (12) months	249	

	divided by	Average daily population.	1830	0.14
	(11)	Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months	323	
	divided by	Average daily population in the past twelve (12) months.	1830	0.14
	(12)	Number of offender specialty consults completed during the past twelve (12) months	4046	
	divided by	Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.	4063	0.995
	(13)	Number of selected hypertensive offenders at a given point in time with a B/P reading > 140 mmHg/ >90 mm Hg	15	
	divided by	Total number of offenders offenders with hypertension who were reviewed.	44	0.340
	(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	4	
	divided by	Total number of diabetic offenders who were reviewed.	19	0.210
	(15)	The number of completed dental treatment plans within the past twelve (12) months	4382	
	divided by	the average daily population during the reporting period.	1830	2.39
6B	(1)	Number of health care <i>staff</i> with lapsed licensure or certification during a twelve (12) month period	0	
	divided by	Number of licensed or certified staff during a twelve (12) month period.	116	0.00
	(2)	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job	23	
	divided by	Number of new health care staff during the twelve (12) month period.	23	1.00
	(3)	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months	0	
	divided by	Number of employees.	125	0.00
	(4)	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past twelve (12) months	0	
	divided by	Number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.	2	0.00
6C	(1)	Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months	22	
	divided by	Number of evaluated offender grievances related to health care services in the past twelve (12) months.	102	0.22
	(2)	Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period	0	
	divided by	Number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.	0	0
	(3)	Number of adjudicated offender lawsuits related to the delivery of health care found in favor of the offender in the past twelve (12) months	0	
	divided by	Number of offender adjudicated lawsuits related to healthcare delivery in the past twelve (12) months	0	0

6D	(1)	Number of problems identified by quality assurance program that were corrected during a twelve (12) month period	1	
	divided by	Number of problems identified by quality assurance program during a twelve (12) month period.	1	1
	(2)	Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.	0	
	(3)	Number of offender suicide attempts in the past twelve (12) months	3	
	divided by	Average daily population	1830	0.001
	(4)	Number of offender suicides in the past twelve (12) months	3	
	divided by	Average daily population	1830	0.001
	(5)	Number of unexpected natural deaths in the past twelve (12) months	25	
	divided by	Total number of deaths in the same reporting period.	51	0.490
	(6)	Number of serious medication errors in the past twelve (12) months	0	0
5A	None			
6A	None			
7A	None			
7B	None			
7C	None			