

COMMISSION ON ACCREDITATION FOR CORRECTIONS  
STANDARDS COMPLIANCE REACCREDITATION AUDIT

Arkansas Department of Corrections  
Varner Unit  
Grady, Arkansas

October 5-7, 2021

VISITING COMMITTEE MEMBERS

James H. Ball, Chairperson  
ACA Auditor

Donnis Chatman-Harris  
ACA Auditor

Brenda J Boyd  
ACA Auditor

**A. Introduction**

The audit of the Varner Unit/Varner Super Max, Grady, Arkansas was conducted on October 5-7, 2021, by the following team: James H Ball, Chairperson; Brenda J. Boyd, Member; and Donnis Chatman-Harris, Member.

**B. Facility Demographics**

Rated Capacity:	1737
Actual Population:	1761
Average Daily Population for the last 12 months:	1733
Average Length of Stay:	5 years 7 months
Security/Custody Level:	Maximum, Medium & Minimum
Age Range of Offenders:	19-76 years of age
Gender:	Male
Full-Time Staff:	304
<b>66</b> Administrative, Support, Program & <b>238</b> Security	

**C. Facility Description**

The Varner Unit/Varner Super Max is a high-security state prison for men of the Arkansas Department of Correction in Grady, Arkansas. The prison can house over 1,700 offenders, and it includes a 468-bed Super Max (Super Maximum Security) facility. The Super Max and non-Super Max facilities are separate from one another.

The Varner Unit Super Max houses male offenders scheduled for execution in Arkansas, currently performed by lethal injection. The actual executions take place at the nearby Cummins Unit. Varner is one of the state of Arkansas's "parent units" for male offenders; it serves as one of several units of initial assignment for processed male offenders. The Varner Unit was opened in 1987 with 300 beds, and its capacity was soon increased to 700 beds. Further construction has brought the total capacity to 1737. The Super Max units opened in 2000, and federal grants paid 90% of the construction costs.

On Friday August 22, 2003, all 39 Arkansas death row offenders were moved from the Maximum Security Unit to the Super Max at the Varner Unit.

During 2004/2005, ADC installed an electric fence between two non-electric fences in the Varner Unit. It received testing in late December 2004 and was activated in January 2005. The system used offender labor to assist with the construction of the fence

The mission of the Arkansas Department of Corrections is to provide public safety by carrying out the mandate of the courts; provided a safe humane environmental for staff and offenders; strengthen the work ethic through teaching of good habits; and provide opportunities for staff and offenders to improve spiritually, mentally, and physically.

There is an entrance building located outside the perimeter where staff and visitors go through security checks before entering the facility. The main building houses general population offenders in 22 dormitories located off the main movement corridor. The main building also houses administrative offices, visitation, food service, offender dining halls, laundry, mail room, records commissary, segregation, gymnasium, training area, and medical services.

The Super Max houses the most difficult offenders of the Arkansas Department of Corrections as well as Death Row. It has six housing units with each unit having three floors for a total of 78 single cells, there are elevator on each unit for transporting laundry carts and the nurses' medications carts.

Offenders in this area have access to programming and regular visits by Medical Staff, Mental Health Staff, Religious Services, and Supervisory Staff the same as offenders in general population. Due to the nature of the offenders' behavior a more restricted environment is required. Offenders housed in these cells have a writing table, toilet, shower, and television within their cells.

Buildings outside the perimeter include the horse barn, grounds, maintenance building, the vegetable processing plant, general maintenance building, and the vocational education building. The Varner Unit site is on 17,546 acres it shares with the Cummins Unit. Most of it is planted with cotton, soybeans, rice, corn and pastures.

New offenders go through an intake diagnostic process. Male offenders are received at the Ouachita River Unit in Malvern, Arkansas for intake. Female offenders go to the McPherson Unit in Newport for intake. Offenders cannot have visitors or use telephones during the intake process. After intake, offenders are transferred to a parent unit for their initial assignment. Exceptions for initial assignments are made for health reasons or security concerns. Initial assignments last for a minimum of 60 days. Behavior, bed space, job availability and institutional need dictate future assignments. Offenders are classified in three ways: custody classification, good time earning classification and medical classification.

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

The team met on October 4, 2021, in White Hall, Arkansas, to discuss the information provided by the Association staff and the officials from the Varner Unit/Varner Super Max.

The chairperson divided standards into the following groups:

Standards 5-ACI-1A-01 to 2F-03 to James Ball (Chairperson)

Standards 5- ACI-2G-01 to 4B-34 to Donnis Chatman-Harris (Member)

Standards 5-ACI-5A-01 to 7F-08 to Brenda J. Boyd, RN (Member)

## **E. The Audit Process**

### **1. Transportation**

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

The audit team proceeded to the office of James Gibson; Superintendent The team expressed the appreciation of the Association for the opportunity to be involved with Varner Unit/Varner Super Max in the accreditation process.

Superintendent Gibson escorted the team to the meeting room where the formal entry meeting was held.

The following persons were in attendance:

Solomon Graves	Secretary of Division of Correction
Dexter Payne	Director – Central Office
Dale Reed	Chief Deputy Director – Central Office
William Straughn	Deputy Director Institutions
Jada Lawrence	Executive Assistant to Director
Shelley Lawrence	Agency Accreditation Manager
Bryon Brown	Agency Fire and Safety Coordinator
Kim Rosenthal	Regional Director of Operations-Well Path
Kelly Patton-Beatty	Varner Unit Accreditation Manager
Maire Rodela	Mental Health
Charlotte Jones	Work Craft
Sherry Conrad	Varner Unit Human Resources
Scott Taylor	Varner Unit Chief Security Officer
Sondra Parker	Varner Unit Health Services Administrator
Malcom Crompton	Varner Lieutenant Utility
Tiffany Williams	Administrative Specialists #1
Santrice Reynolds	Varner Super Max Programs Specialists
Ernestine Hillard	Varner Super Max Administrative Specialists #1
Tarrell McEwen	Emergency Preparedness Coordinator, Varner Unit
Mary Lloyd	Varner Super Max Lieutenant Utility
Karla Hargraves	Varner Unit Director of Nursing
Jeremy Jones	Varner Shift Captain
Mark Thompson	Seminary College Program
Tanya Hill	Administrative Specialists #3 to Warden
Cara Lennox	Offender Grievance Coordinator
Caitlin Thrower	Offender Grievance Coordinator
Annette Pierce	Rehab Facility Supervisor
Adam Clark	Deputy Warden Restrictive Housing
Barbara Smallwood	Business Operations Specialists
James Plummer	Varner Super Max Captain

Cheryle Johnson

Varner Lieutenant Utility

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

### 3. Facility Tour

The team toured the Varner facility from 10:00 a.m. to 1:30 p.m. on October 5<sup>th</sup> and from Varner Super Max from 11:30 a.m. to 1:00 p.m. on October 6<sup>th</sup>. The following persons accompanied the team on the tours and responded to the team's questions concerning facility operations:

Kelly Patton-Beatty	Varner Unit Accreditation Manager
Scott Taylor	Varner Unit Chief Security Officer
Cheryle Johnson	Varner Lieutenant Utility
McKinzy Dunn	Sergeant
Adam Clark	Deputy Warden Restrictive Housing
Shelley Lawrence	Agency Accreditation Manager
Bryon Brown	Agency Fire and Safety Coordinator
Malcolm Crompton	Lieutenant
Sherry Conrad	Human Resources
Christopher Johnson	Deputy Warden
Brandon Carroll	Varner Super Max Major
Rodney Brown	Varner Super Max Captain
Laurie Thompson	Vander Super Max
Charles James	Maintenance Supervisor
Robert Blevins	Maintenance Tech

The Visiting Committed noted that ACA Accreditation notices 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 summarizes the findings regarding the quality of life.

#### **Security:**

The Varner Unit has total of one hundred and eighty-six cameras. One rotating camera, one hundred and twenty-five stationary cameras. Sixty of the stationary cameras are outside.

Varner Super Mas has a total of one hundred and nineteen cameras. Eleven rotating cameras, ninety-five stationary cameras and thirteen outside cameras. The Varner Complex has a total of three hundred and five cameras.

The complex can maintain adequate power in the event of an emergency. The generators maintain power for the high voltage lethal fence, Varner Unit and Varner Super Max. The Varner complex has two entry point the front entry where staff and visitor are searched and body scanned.

There is also an armed tower adjacent to the front entry point the West tower has four Glocks, a shotgun, and a rifle. The Glocks are issued to transport staff for medical or any other transport run. This tower also opens the gates. All weapons are issued under the direction of the shift supervisor to ensure proper certification and a list of qualified staff is maintained on the tower

COVID testing is conducted on Monday and Wednesday to include testing for the rotating shift. All visitors are tested prior to entry as was the Visiting Committee upon entry into the facility

The Varner control room is manned by an officer who issues keys, kitchen knives and controls doors throughout the Varner Unit. This post is also manned with a Surveillance officer for the Varner Unit who is responsible for monitoring all activities outside and inside the Varner Unit. The area is also where the emergency keys are maintained.

The emergency key for the emergency key box is unsecured. It is recommended that the glass be replaced.

The rear sally point is the point of entry for all offenders and vendors. This post has a body scanner also and offender are also stripped searched. It is important to note offenders who enter this point are offenders assigned to the processing plant, free line lawn crew, vocational school, horse barn and field squad as well as those who are out on court, medical runs, and transfers in and out of the facility.

There is an armed tower adjacent to the sallyport. The East tower is armed with a rifle and a shotgun and control the gates for the rear sally port.

The rover patrol is armed with a shogun and rovers the perimeter and responds to any alarms from the fence.

The armory /key room is located outside the perimeter directly across from the main entrance to the complex and the west tower It is surrounded by a fence and prior to entry any offender performing outside work details must be secured.

The armory contains a space for lethal weapon. Those weapons are:

- Glock 40 caliber handguns
- Remington 870 12-gauge shotguns
- AR-15.223 rifles.

Less lethal weapons are 37mm multi launcher, 37mm single shot rifle, 37mm single shot pistol, less lethal pistols, chemical/pull pin rounds and all the ammunition to utilize the less lethal weapons.

Chemical agents that are stored in the armory:

- Def-Technology OC in sizes of MK3, MK4, and MK-9. OC/CS
- tear gas sizes MK-4 AND MK-9. CS tear gas in flameless Tri-chamber/pocket tactical /Triple chaser pull pin rounds and
- stinger rubber ball. Rubber,

Foam and wooden batons are located on the armory side as well as cleaning area with a sink. The armory is secured separately from the key room. The key room has an assortment of blank key for the facility and the equipment needed to duplicate keys by a trained locksmith. The armory is truly nice well-organized building.

Vegetable's processing was not in operation during the tour however the facility was visited. The director reported that the processing facility is responsible for processing all vegetable grown by the Arkansas department of corrections and inspected by the USDA. The facility would normally operate with about thirty to forty offenders. Tools were checked and all were complying with policy and procedures.

The Free line shop is responsible for Maintenance of lawn equipment. Tools and equipment were checked, all were compliant with policy and procedures.

The Horse Barn has a total of twelve horses. All medical records, medication and equine medical tools are maintained by the contracted veterinarian, who performs medical services to the horses.

### Special Management

The Varner Unit/Varner Super Max does not house Special Management Offenders.

### Restrictive Housing

When an offender is assigned to Restrictive Housing by the classification committee or the Disciplinary Review Officer, the offender will be given a release plan, detailing the steps the offender must complete to be considered for release to general population.

The release plan may consist of, but not be limited to the following:

- Completion of the step-down program
- Completion of sanctions issued by the Disciplinary Review Officer
- All classes must be approved by majority vote of the classification committee

Step Down Program – Offenders who are assigned to Step-Down Program will enter program at Level 1 status, reviewed every 30 days. The Offender must remain disciplinary free. Level 2 status can be granted after 30 successful days at Level 2. Level 3 status can be granted after 60 successful days at Level 2. Offenders must remain disciplinary free and receive recommendation from classification committee and then approved by Warden or designee for outside cell job assignment. Level 4 status can be granted after 90 successful days at Level 3. Offenders at Level 4 can either be transferred to another facility, released to general population, or remain at Level 4 step-down long term, or until transfer or release to general population is approved.

Offenders on Step-Down program will be offered self-help material, and at Level 3 and 4 be allowed to be assigned a job, where the offender is allowed to work outside the cell without restraints.

Offenders in the Step-Down program that are removed due to a major disciplinary rule violation will be placed back into Extended Restrictive Housing and will be seen by the classification committee and given a new release plan.

#### Extended Restrictive Housing

On the offender's 31<sup>st</sup> day of Restrictive Housing, he will be reassigned to Extended Restrictive Housing, if not released to general population.

Offenders who are assigned to Extended Restrictive Housing, will be reviewed every 7 days for the first 60 days. After 60 days is completed, they will be seen by classification every 60 days afterwards and their status will be reviewed every 30 days. Offenders are reviewed every 30 days to be considered for release to general population or early entry to the step-down program.



**Environmental Conditions:**

Light levels within the facility were within the appropriate range for the age and type of the facility. Air circulation levels were within the appropriate range. Temperature ranges were well within the comfort zone. All offenders housed at the Varner/Varner Super Max Unit had appropriate access wash basins, showers, and toilets, within their assigned living units for offender use and the offenders all appeared well-groomed with clean clothing.

All housing units were neat and clean with adequate storage for offender property. The dayroom areas have televisions, telephones, and board games available for offender use.

The offender in Super Max has small televisions mounted to the walls in their cells and security determines which programs will be available.

The grounds are well manicured and decorated with flowers which added much to the appearance of the facility. All office space was neat and uncluttered.

There were some maintenance and sanitation-related issues that the Visiting Committee observed but most were promptly addressed. Overall, the Warden and his staff were extremely responsive to the team's observations and recommendations

**Sanitation:**

Sanitation is completed daily in the housing areas and work areas by the assigned offender porter. All trash is removed daily from the living areas and disposed of in a central location outside of the main facility. Inspections of the housing areas occur weekly; these inspections are completed by the zone Sergeant assigned in the area. Monthly inspections of the facility and surrounding buildings are completed by the Fire Safety Officer.

The facility maintains a master housekeeping plan which is reviewed annually and updated as needed. The floors were clean and in good repair. The departmental guidelines regarding property control and storage require offenders to keep their assigned bed areas in proper order. This contributes to the appearance and cleanliness of the bed areas.

The housekeeping plan provides for the appropriate training and supervision of offenders performing sanitation-related duties. Officers supervising cleaning details are responsible for ensuring that offenders assigned as janitors are proficient in proper cleaning procedures which include the use of sanitation supplies and equipment.

Chemicals were stored properly, labeled, and accessible only through staff assistance. Dispensing and monitoring are accomplished through a system designed to eliminate spills and improper concerted. Janitorial closets and equipment were located throughout the facility pursuant to documentation review, substantive daily, weekly, and monthly inspection are completed in a timely manner with follow-up corrective action. Inventory on chemical was compliant.

**Fire and Safety:**

Fire drills are conducted quarterly evacuation plans are posted throughout the facility. The facility has six fire panels manufactured by Simplex Grinnell, Silent Knight, Edward System Tech and Guard Tronic systems. All were last inspected May 11, 2021. The Complex sprinkler system, smoke detector (463), Standpipes (19) were last inspected May 11, 2020. The standpipes were flow tested during the inspection. The State of Arkansas Fire Marshals last inspection was conducted 7/1/2021. The hood suppression system is conducted biannually and was last inspected by Johnson Controls May of 2021. Last fire extinguisher (165) check May of 2021.

The first responder for fire is the Cummins Volunteer Fire Department, which is approximately ½ mile away from the facility, Grady Fire Department, which is five miles away and the Dumas Fire Department, 15 miles away. Annual inspection is conducted by Fire Marshall and all deficiencies noted on the inspection report were minor and were corrected. Flammable lockers re located throughout the facility with correct inventories and MSDS sheets for each chemical contained within.

**Food Service:**

The Food Service staff includes one Food Production Manager II, who is the supervisor, and three Food Production Manager I. There is a Registered Dietician who prepares menus for all units to make sure that all food groups are met in healthy and nutritious meals that are provided three times per day. In addition, while working with the infirmary, food service is responsible for preparing all meals for those offenders on restricted or modified diets due to medical, dental, or religious needs.

Offender workers are trained in the preparation of tasty nutritious meals. The kitchen detail employs 105 offenders' who are employed as cooks, bakers, servers, janitors, and dishwasher. Meals are served three times per day.

There was good accountability for utensils and chemicals. Offenders were wearing appropriate safety attire-safety shoes, hair nets, and beard guards.

Food is taken to the Super Max in large, heated carts where it is place on a warming table. The workers then spoon the food on to insulated trays and it is then taken door to door to the offenders.

The food service and dining areas are well-maintained and clean. Temperatures in dry storage, refrigerator and freezer were appropriate and logged. All foods in coolers or freezers were dated for first in first out usage. Good thawing practice were observed. Temperature records were maintained for freezer, cooler and dry storage areas and all recorded temperatures were within the appropriate ranges. The food service department is inspected weekly and monthly by designated facility staff. Annual inspections are conducted by the Arkansas Department of Health Environmental Health Protection Services.

#### **Medical Care:**

Varner / Varner Super Max Unit is a correctional facility that houses security of various levels of offenders with age ranges 19.60 to 76.50. The facility has an average daily population (ADP) of approximately 560 reported during the site visit due to the COVID pandemic and other operational concerns.

The security of offenders is the highest priority. Varner/Varner Super Max Unit houses adult males that have been convicted of felony crimes and sentenced by the courts Varner/Varner Super Max Unit is home to one medical area.

The Varner institution does have an infirmary. The unit comprises of two suicide observation rooms, two handicap accessible rooms and two negative pressure rooms. All patients have access to hot and cold water for bathing.

The medical personnel are provided by Wellpath and with some assistance by contractual staff 24 hours per day. The personnel include Health Services Administrator (HSA), Assistant Director of Nursing, Licensed Practical Nurses, Certified Nurse Practitioner, Clerical, Registered Nurses and Physician. The physician is on call for medical issues/concerns and HSA is on call for administrative needs after hours.

Medical Services and clinical activities provided at Varner Institution were observed by the auditor. The health care clinic is clean with four exam rooms a large central room with an exam table for emergencies. There is a well-equipped dental service are with two rooms and two chairs.

A nursing station is centrally located and all-clinical staff have areas in which they conduct their daily duties.

The health care staff provides one-on-one counseling, patient teaching, discharge planning, and medication administration, wound management, triage, emergency care as needed, sprains/strains, eye irrigations, continuous assessments related to need for special housing assignments, suicide watch, screening for sick call, glucose testing, monitoring vital signs, admission assessments and work-ups, venipuncture and observations, continuous monitoring of high risk offenders, infection control and documentation of the nursing process. Offenders are seen in the medical unit for sick call or for routine complaints or in designated areas on the units as needed.

Varner Institution and vendor Wellpath oversees the use of on-site and off-site specialty clinics, (via tele-med and/or specialty clinics). Specialty Services include Physical Therapy, Orthopedic, Optometry, Ophthalmology, Gastroenterology, Cardiology and Psychiatry. Most of the specialty care continues to be done by local hospitals which are utilized for emergency purposes and treatment. Emergency ambulance services are provided through the 911 call service.

Pharmacy: Orders are transcribed and sent to Diamond pharmacy daily. Medications are delivered to the facility Monday through Friday. The local pharmacy is utilized for immediate or emergency medication needs.

Pill-Call is held and is conducted door to door at the hours of 5am, 10:30am and 4pm. The diabetic accuchecks and insulin is at 6:30 unless there are specific orders from a provider. Times may vary should security issues arise.

Discharge planning for HIV offenders is coordinated through the appropriate Health Departments. Paroles and discharges are managed closely to ensure adequate follow-up care is available. The Health Service Administrator (HSA) and Assistant Director of Nursing will address all informal complaints, grievances, attend required meetings and complete necessary reports monthly. Current staffing is adequate to meet the needs of the offenders housed at the correctional institution.

There is a general medical assessment with inquiry into chronic conditions, current medications or treatments, recent hospitalizations, TB symptom screen, dental problems etc., a mental health history, substance use assessment, and concludes with a final disposition for continued care, housing referral and treatment plan. The offender is given instructions on how to access care at that time. Educational material for oral hygiene and dental care are being distributed to the offenders at intake or at the time of the physical exam.

There is one AED's and throughout the facility. Medical staffs respond to emergencies with an emergency bag, AED, oxygen, and supplies appropriate to care for the level of emergencies encountered.

Emergency equipment is checked each shift by the nurse with adequate documentation in logs. Offenders requiring emergency care are sent to local hospital emergency.

There is a general medical assessment with inquiry into chronic conditions, current medications or treatments, recent hospitalizations, TB symptom screen, dental problems etc., a mental health history, substance use assessment, and concludes with a final disposition for continued care, housing referral and treatment plan. The offender is given instructions on how to access care noted at that time.

The nurses' use published nursing protocols to address offender health concerns and refer to the nurse practitioner or physician offenders with health concerns out of their scope of practice. There is co-pay per visit for offender initiated sick call requests and unscheduled offender initiated sick call. However, no one is denied care based on ability to pay. Co-pay is excluded for Chronic Care, Emergencies, Mental health, and follow-up appointments. Additionally, the nurses visit the segregation housing unit and document the visits daily.

The nurse practitioner conducts sick call and conducts chronic care clinic Monday through Friday and refers any health concerns out of her scope of practice to the physician for follow up care. There is a list of community providers that are used for care outside of the scope of practice of the facility providers. There is an excellent relationship with the health department.

The Health Services Unit is clean and spacious and well equipped to care for the offenders in a private and professional environment. There is a waiting area for offenders with access to water and a restroom. The clinic was very clean and well organized. All sharps and critical tools were properly secured and inventoried. Medications were secured, properly inventoried and current. All inventories were accurate.

There is an AED on the emergency equipment and in the emergency areas. Eye wash stations in all work areas were functional and well maintained. Medical staffs respond to emergencies with an emergency bag, AED, oxygen, and supplies appropriate to care for the level of emergencies encountered. Emergency equipment is checked each shift by the nurse with adequate documentation in logs. Offenders requiring additional emergency care are sent to the local hospital emergency.

A registered nurse sees the offender within fourteen days of incarceration and places a TB test and completes a physical assessment including a review of the receiving screening and new set of vital signs and dental examination.

The physical assessments done by the registered nurse is reviewed and signed by the physician. All medical documentation is done either with paper or electronically through an electronic medical and/or pharmacy record.

Offender's access sick call by submitting a written sick call request and placing on the medical box on the unit.es. Nurses receive and triage the sick call requests daily. Sick call is conducted 5 days a week with emergency sick call being available as needed. Co-pay is excluded for Chronic Care, Emergencies, Mental health, and follow-up appointments. Additionally, the nurses visit the segregation housing unit and document the visits daily.

The nurses' use published nursing protocols to address offender health concerns and refer to the nurse practitioner or physician offenders with health concerns out of their scope of practice. There is co-pay for offender initiated sick call requests, but no one is denied care based on ability to pay. The nurse practitioner conducts sick call and conducts chronic care clinic Monday through Friday and refers any health concerns out of her scope of practice to the physician who is on site fifteen hours a week for sick call, administrative meetings, and chronic care clinic. There is a list of community providers that are used for care outside of the scope of practice of the facility providers. The Nurse Practitioner and physician conduct the chronic care clinic using the America Correctional Association Performance Measures. Offenders with chronic illnesses are seen within thirty days of admission unless otherwise requested by medical staff. There was documentation reviewed of chronic care visits. Use of community providers for coordination of chronic care conditions such as HIV and renal patients was present in the documentation reviewed. There is an excellent relationship with the health department. The health department comes on site weekly, and offenders can request to be seen for screening for sexually transmitted diseases as appropriate by Health Department protocols.

Pharmacy services are provided by the Central Pharmacy of Columbus OH. Medication orders are transmitted electronically and delivered by UPS. There are relationships with two local pharmacies Ryan's or Rite Aid pharmacies for medications needed immediately. There is documentation that the pharmacy comes on site quarterly and inspects the medication room and medication carts for proper medication storage and outdated medications. I did a spot check of narcotics, sharps, needles and syringes and instruments that was correct and validated a good system of accountability.

Refrigerator logs, medication carts and medication storage areas were inspected and indicated a good system of medication storage. The medications are administered to offenders at the housing units by directly observed therapy. Insulin dependent diabetics are generally seen three times a day for blood sugar testing and insulin administration.

The nurse visits the offenders in segregation daily. While performing medication administration he/she rounds and checks each offender and documents the visit prior to leaving the unit.

The biohazardous waste management is picked up weekly or more frequently if needed. The facility has an agreement with Stericycle Biohazard Waste Management Services with bimonthly pick up and one time per month for sharps. Personal Equipment Protections (PEP) education provided to staff and protocols are in place.

There is a contract with for routine laboratory tests. Laboratory tests needing to be done immediately are sent to St Vincent Mercy Medical Center.

There is a contract with Mobilex Diagnostic Service Radiology for x-ray and ultrasound services bi- weekly and as needed. For radiological studies needing to be done immediately the offender is sent to St Vincent Mercy Medical Center if Mobilex STAT is not immediately available.

There is an Infectious Disease program. TB screening and annual TB testing is done. Sexually transmitted diseases are screened for by the health department and treated by the medical staff. The tracking of communicable illness and statistics is shared in quarterly meetings held in conjunction with the Quality Improvement Meeting.

The Quality Improvement Program identifies aspects of care to be monitored to assure the delivery of quality health care. Aspects of care I reviewed included appropriate entry for off -site service, timeliness of receiving screening. Any aspect of care not meeting a preset threshold was monitored until the threshold was met. The results of these studies are shared in the Quarterly Infection Control/Quality Assurance Meeting that is attended by medical, mental health and security.

Medical staff training is primarily done annually on-site. All staff receives a minimum of 36.5 hours of e-learning at the time of employment in addition to CPR and first Aide training. All training is repeated annually. The training includes correctional orientation specific to use of radio, responding to emergencies etc.

A review of the Significant Incident Summary also is exceptional for the fact that there have been absolutely no grievances substantiated or non-substantiated in the facility regarding food, medical, commissary, mail etc. for the past three years of the audit cycle.

There were concerns that there were no first aid kits available in what is considered hazardous areas. When addressed the concern with the Health Service Administrator of first aid kits not being available in those areas. I was informed everyone must come to the clinic and first aid kits are not distributed.

The auditor chair was made aware of the situation and comments during the audit.

The above action was deemed non-compliant.

All other recommendation provided to the medical team and compliance officer were completed during the audit.

Dental services are provided on site. There are 2 dental chairs Scheduled dental personnel are full time employees. That consists of Dentist, Dental Assistants and 1 Hygienist on site 5days a week. The dentist primarily sees offenders for extractions, acute or emergent dental needs and performs annual dental examinations. I did a count of dental instruments and medication with the dental assistant. The dental instruments count was accurate and indicated a good system of accountability. Spore counts are done weekly to assure the efficacy of the sterilizer and the logs were in good order.

Mental Health Services are provided through on site and Telehealth. The staff consists of Licensed Social Workers, BHPS, LISW, CNP and Registered Nurses. Additionally, Psychology/Psychiatry appointments are provided via Telehealth. Initial mental health screening, mental health evaluations, individual therapy, Medication follow-ups, suicide prevention, and PREA assessments are evaluated upon arrival to the institution. Parts of the services provided are for therapeutic purposes. Individual therapy is offered as part of ITP. Offender may be referred to Crisis Management for emergent needs.

There are case managers as a part of evolving offender re-entry program. The case manager addresses housing, employment, linkage to medical and mental health, and substance use programs that might be available for the offender upon his release. The goal is to begin the offender's community re-entry plan at the time of admission to the facility.

The programs and services listed below have been significantly impacted by COVID-19 protocols and procedures. Some of the programs have been re-instated and activity schedules reflect the modifications.

**Recreation:**

The Varner/Varner Super Max Unit provides a variety of recreational opportunities for the offender population. The recreation yard provides areas for softball, basketball, flag football, volleyball, horseshoes, a running track, soccer, and handball. The indoor gymnasium as available basketball, multi-fitness machines, table tennis, and body building equipment, jump ropes, speed ag, and body bag. The recreational areas employ two full-time staff and seven offender workers. The yard is secured by fencing and security is stationed inside and outside the perimeter fences.



The Recreation Department has sponsored special programs – basketball tournaments, softball and ping pong tournaments, and board game tournaments in the winter, among others. Hobby craft are available for approved offenders in art, woodwork, and leather craft. The offender must purchase his own materials for this program.

Boards games are available in each dormitory for use in the day room areas. There are also two televisions in each living area day room, one tuned to sports and one for movies.

### **Religious Programming:**

Catholic, Islamic and Protestant Services were regularly conducted at the Unit. The Chaplains visits the barracks on a weekly basis counseling with offenders and distributing religious literature to offenders.

The Chaplain works with several certified religious assistants (CRA) to meet a multitude of religious needs through the Pal Program (Principles and Applications for Life): The purpose for the PAL Program is an attempt to create a better morale among the offenders, reduce disciplinary actions, and prepare the offender to be a productive citizen. The PAL Program focuses on incarcerated men as holistic and spiritual needs. The PAL Program seeks to address, through educational and group sessions, the spiritual element of a person's life. The curriculum used is based on Christian principles. Concepts and principles will be taught using the Old and New Testaments. All faith traditions are welcome and encouraged to apply. Major Goals of the PAL Program are as follows: Bring God to people and people to God. Teaching and encouragement of responsible attitudes and behavior through positive relationship with God and people. Assisting offenders in gaining self-respect and a new self-concept. Leading offenders to repentance, regeneration, reconciliation, and reformation. To provide for a positive and productive reentry in society.

### **Offender Work Programs:**

The facility offers various types of work opportunities for the offender population to learn work ethics and relevant job skills. The offender population can acquire working skills from maintenance of grounds to work in the fields. Learning the skills necessary to harvest edible vegetables crops to maintenance of soybean, corn, and cotton. The facility has a vegetable processing plant and provides frozen vegetables for all Arkansas facilities. The vegetables are grown and harvested and taken to the processing plant. The processing plant cleans, slices, packages and flash freeze the produce. The vegetables are then trucked to other sites.

### **Academic and Vocational Education:**

The Varner Unit School is part of the Arkansas Correctional School System. There are four classes covering Adult Basic Education (ABE), intermediate, Pre-GED. The school has, 1(one) Title I class for all student under 21 years of age, an English as a Second Language (ESL) and two computer labs.

The Test of Adult Basic Education is given three times a year. Every prison in Arkansas includes a school, regardless of size or geographic location. Education for offenders is mandatory in Arkansas, every effort is made to enroll all eligible offenders into the GED program All offenders who do not have a high school diploma or a GED are required to attend school.

Once students are tested, the student is assigned to the appropriate class, then classification is informed of the school assignment. Offenders normally attend school twenty hours a week. At most units, offenders attend school for one-half day each day. At some units, adjustment must be made to the norm. Because of offender work schedules or security status, some offenders may attend school one- and one-half days per week. The primary goal is to remove as many barriers as possible between an offender and the pursuit of his or her education.

Because of this commitment, there are teachers who go beyond the standard classroom and go onto death row at Varner Super Max Unit to work with death row offenders. There are teachers who go into protective custody barracks and administrative segregation barracks to work with offenders who cannot or will not function in the regular prison population.

If an offender refuses to do assigned work, he or she is capable of doing, the teacher may take disciplinary action against the offender. Offenders are placed in classes with other offenders who function on the same level based on their score on a standardized achievement test. Most units' place offender based on their reading level, since success is most subjects is contingent on reading skills. A variety of instructional methods is used in self-contained classrooms. An in instruct normally teaches all subject to a group of students who are functioning on approximately the same academic level. Computer assisted instruction provides a good supplement classroom instruction.

Prison educators are finding that offenders respond well to computers because offenders perceive computers as non-judgmental and non-intimidating. The Correctional Education Association Standards Commission for Correctional Education Programs recognizes Varner Super Max Unit for the attainment of excellence in the operation of education programs. Accreditation was awarded for the period of July 1, 2018, through June 30, 2021.

The Riverside Vocational Technical School is governed by the Arkansas Board of Corrections and regulated by the Department of Workforce Education and is part of the Arkansas Corrections School System. Programs and courses are determined through testing and evaluation of the students. Vocational Staff includes one supervisor, two full time administrative staff, four part-time administrative staff, and seven instructors.

Students learn entry level skills and develop employability skills. They become more marketable upon release. The following courses are offered: Cabinet Making, Welding, Culinary Arts, Heating, Ventilation & A/C, Plumbing, Residential Carpentry, Residential Electricity, Small Engine Repair. The academic department is accredited by Corrections Education Association (CEA) and the enrollment is 100 per month. When offenders earn their GED or complete a Vocational Education Program, they get 180 days of meritorious good time. There is also a graduation ceremony and reception where offenders wear caps and gowns and can invite family to attend.

### **Social Services:**

The mission of the Alcohol and drug Treatment Program is to provide treatment of the Arkansas Department of Correction. Therapeutic treatment is to enable offenders to become better equipped to live as clean, sober, and crime free members of society.

Each offender is an individual case and the program will provide information and education in conjunction with a structured therapeutic treatment model for incarcerated offenders with assessed alcohol or drug problems.

### **Visitation:**

There is a large visitation room for the general population at the Varner Unit. The visitation room has vending machines and an area for children. Special visits by attorneys, clergy and family are approved on a case-by-case basis.

The Super Max has 20 non-contact visiting rooms available for offender visitation. There are vending machines where visitors can purchase items and security will take the item to the offender to consume during the visiting time.

### **Library Services:**

The Varner Unit meets the ACA guidelines for offender access to courts through the use of a law library. The law library provides all the necessary federal and state law books and many other legal materials, supplies and documents appropriate and necessary.

The general library is a recreational reading library with Inter Library Loan service available through the local library systems. The general library has over 3500 books. Magazines and periodicals are also available for viewing. The book collections are reviewed annually, and new volumes are added on an ongoing basis

### **Laundry:**

Laundry Services are available six days a week. All laundry is picked up from all living areas at the beginning of the shift and returned to all living areas prior to the close of the laundry each day.

The laundry Supervisor also receives all offenders newly admitted to Varner Unit during the receiving process. This area will issue the offender his allowed state property along with the Varner Unit Orientation Manual prior to these offenders being medically assessed and classification assigning them to their barracks.

The laundry is equipped with four commercial washers, three commercial dryers and six ironing machines. The laundry has two employees and seven to ten offender workers. The staff issues chemicals as needed for the washers with excellent accountability. Offenders are issued three complete sets of clothing upon arrival.

## **F. Examination of Records**

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

Files reviewed were well documented. Contents were appropriate. Well written policies and detailed procedures. Documents are both paper and electronic. They are in a well secured area.

### **1. Litigation**

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

### **2. Significant Incidents**

The incident summary provided by the facility was unremarkable in either the number or type of incidents for a facility of this size and mission.

### **Outcome Measures**

The team review the medical outcome measures and discussed with the medical personnel. All documentation was intact.

3. Departmental Visits

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

<u>Department Visited</u>	<u>Person(s) Contacted</u>
Super Max	Lt. Cheryl Johnson Capt. James Plummer Annette Pierce, MH Lt. Rodney Brown Sgt. Gloria Thompson
SM Master Control	Sgt. Latasha Williams Lt. Mary Lloyd
Chapel	Dexter McDonnell, Chaplain
Food Service	Joyce Jackson, Food Production Supervisor
Commissary	Lacey Hoyt, Supervisor
Operations	Lt. Douglas Boultinghouse Cpl. Jhayla McFarley Sgt. Tarence Whaley Cpl. Erica Brown Cpl. Damien Reams
Fire & Safety	Lt. McKinzy Dunn
Veg. Processing Plant	William Parker Ray Lenderman
Hobby Craft	Charlotte Jones, Supervisor
Horse Barn	Lt. Chaz Jones Sgt. Carlton Burchfield
Free Line Lawn	Sgt. John Cartwright

4. Shifts

a. Day Shift

The team was present at the facility during the day shift from 8:00 a.m. to 6:00 p.m. The first day was on tour and reviewing accreditation files. The team sampled the mid-day meal and found the food tasty and the presentation attractive.

During the balance of the audit, files were reviewed; re-visits to select areas and staff/offender interviews were completed. Due to COVID-19 protocols, programs and activities that offenders would normally be engaged in were curtailed or just being reinstated.

b. Evening/ Night Shift

The team was present at the facility during the evening shift from 6:00 p.m. to 7:30 p.m.

Team members were present at shift change briefing and were able to talk with the oncoming staff. On all shifts, the staff was found to be friendly, professional and knowledgeable of their role in the overall mission of the facility. Staff were aware of post orders and effective in monitoring and control of inmate movements. Communication between staff and inmates was found to be respectful

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:

**Standard 5-ACI-1C-05**

The Warden/Superintendent can document that the overall vacancy rate among the staff position authorized for working directly with offenders does not exceed 10 percent for any 18-month period.

**FINDINGS:**

This expected practice was again found to be non-compliant at the time of this review. The vacancy rate for the facility continued to exceed 10% for the review period.

**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 interviewed inmates awaiting treatment in Medical, working in Food Service and on Custodial assignments, and participating at leisure activities on the living units. Most indicated that they felt safe at the facility and that staff care about their wellbeing and safety.

The inmates interviewed were desirous of returning to a regular recreation and programming scheduling but were also well aware of the reasons for the need to abbreviate the services. Many expressed concerns for not being able to earn credits for court ordered programs

## 2. Staff Interviews

A large selection of security, program, administration, and contract employees were interviewed during the audit. At shift briefing, the audit team found staff excited to start their shift and responded well to supervisory direction. Supervisors indicated a strong desire to ensure that new staff was groomed to be effective and knowledgeable team members.

## H. Exit Discussion

The exit interview was held at 12:00 p.m. in the Chapel with the Warden James Gibson and 80 staff in attendance.

The following persons were also in attendance:

Dexter Payne, Director –	Central Office
Dale Reed, Chief Deputy Director –	Central Office
William Straughn, Deputy Director Institutions	Central Office
Rory Griffin, Deputy Director Health –	Central Office
Richard Cooper, Assistant Director	Construction & Maintenance – CO
Shelley Lawrence, Agency Accreditation Manager	Central Office
Bryon Brown, Agency Fire and Safety Coordinator	Central Office
Kim Rosenthal, Regional Director of Operations-	Well Path
Cindy Murphy, Communications Director –	Central Office
Nicholas Stewart, Human Resource Administrator	Central Office
Andrea Culclager, Superintendent	Work Release/Programs
James Shipman, Warden	Maximum Security
Mary Ann Allen, Accreditation Manager	Cummins Unit

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

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

AMERICAN CORRECTIONAL ASSOCIATION  
AND THE  
COMMISSION ON ACCREDITATION FOR CORRECTIONS

**COMPLIANCE TALLY**

<b>Manual Type</b>	Adult Correctional Institutions, 5 <sup>th</sup> Edition
<b>Supplement</b>	Not Applicable
<b>Facility/Program</b>	Varner Unit
<b>Audit Dates</b>	October 5-7, 2021
<b>Auditor(s)</b>	James H Ball, Chairperson Brenda Boyd, Member Donnis Chatman-Harris, Member

	<b>MANDATORY</b>	<b>NON-MANDATORY</b>
Number of Standards in Manual	64	509
Number Not Applicable	2	73
Number Applicable	62	436
Number Non-Compliance	0	3
Number in Compliance	62	433
Percentage (%) of Compliance	100%	99.3%
! Number of Standards <i>minus</i> Number of Not Applicable <i>equals</i> Number Applicable ! Number Applicable <i>minus</i> Number Non-Compliance <i>equals</i> Number Compliance ! Number Compliance <i>divided by</i> Number Applicable <i>equals</i> Percentage of Compliance		



COMMISSION ON ACCREDITATION FOR CORRECTIONS

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

**Standard 5-ACI-1C-05**

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

FINDINGS:

The facility advised that the vacancy rate exceeds 10%.

AGENCY'S RESPONSE

Plan of Action

We will challenge all staff at the Varner Unit to recruit prospective employees. The AR-DOC Recruiter (1-888-ADC-JOBS) continually recruits for all AR-DOC units; the recruiter remains vigilant in conducting weekly and monthly job fairs in all communities within the State of Arkansas. The Arkansas Division of Corrections has a website ([www.state.ar.us/doc](http://www.state.ar.us/doc)) that list all available jobs and an on-line application process to aid all interested parties in seeking employment at the AR-Division of Correction. The job openings for the Varner Unit are advertised weekly on the Radio Stations and various community job fairs are held. The Work Force Centers have Push Cards, which contain direct information about this unit that is handed out during hiring events. The AR-DOC Recruiter or the Unit Human Resource Manager have placed Yard Signs which are in multiple areas in our communities with the Varner Unit information for public viewing. The Workforce Centers in the surrounding area have applications as well as all available job openings and pay scale for potential applicants.

In the order of anticipated completion dates, list the tasks necessary to achieve compliance, the responsible agency (including parent agency), and assigned staff member.

Task

- a. Retain staff
- b. Process available applicants

- c. Mentor all staff in developing the skills needed for a career with the AR-DOC

Responsible Agency

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

Assigned Staff

- a. ADC Recruiter
- b. Human Resource Administration Staff
- c. Unit Human Resource Manager

Anticipated Completion Date

- a. By the next ACA Audit or sooner

AUDITORS RESPONSE

The Visiting Committee supports the Plan of Action submitted by the agency for this expected practice.

**Standard 5-ACI-2C-04**

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

FINDINGS:

After careful review of randomly selected Dayrooms, it was determined that this expected practice was non-compliant at the time of this review. The unencumbered space of the 1<sup>st</sup> two dayrooms was 10.6 and 16.6 square-feet, respectively. The 3<sup>rd</sup> dayroom measured 29.9 square-feet. However, there was no detailed activity schedule indicating how many offenders would be occupying the space at any given time.

## AGENCY'S RESPONSE

### Plan of Action

The Varner Unit was constructed in 1987. Since then, there have been changes made to enhance the quality of life for the offender population at Varner Unit. During the hours of 7:00 a.m. (wake-up) to 4:30 p.m. (end of workday), the dayroom is only utilized with the minimum number of offenders many of the offenders spending the evening hours on their respective beds reading, writing letters or visiting with one another.

May it be noted, a good majority of the offenders who are physically able to work, go out each day to their respective jobs. Dayrooms with space for varied offender activities include playing board games, writing letters, reading and watching television. As in the past some offenders can sit on their beds and view one of the two televisions in the barracks with upgrades in equipment offenders now can listen to the television with their headphones during viewing hours.

For those who cannot work, leisure activities outside of their barracks include, church call, gym call, yard call, library/law library call, commissary call, and school. With changes in unit bed counts dayrooms space has become an issue, to try to come into compliance with this standard would be cost prohibitive. For this reason, we are requesting a waiver for standard 5-ACI-2C-04 (ref.4-4135).

## AUDITORS RESPONSE

The Visiting Committee supports the Waiver Request submitted by the agency for this expected practice.

### **Standard 5-ACI-6B-09**

FIRST AID KITS ARE AVAILABLE IN DESIGNATED AREAS OF THE FACILITY BASED ON NEED AND AN AUTOMATIC EXTERNAL DEFIBRILLATOR IS AVAILABLE FOR USE AT THE FACILITY. THE HEALTH AUTHORITY APPROVES THE CONTENTS, NUMBER, LOCATION, AND PROCEDURES FOR MONTHLY INSPECTION OF THE KITS(S) AND DEVELOPS WRITTEN PROCEDURES FOR THE USE OF THE KITS BY NONMEDICAL STAFF.

### FINDINGS:

There was not complete detail related to first aid kit documentation for monitoring monthly status reports. Additionally, it was not documented in the facility policy.

## AGENCY'S RESPONSE

### Plan of Action

I (James Gibson, Superintendent) have discussed with Sondra Parker, Health Services Administrator, the plan to correct this deficiency. I have ordered new first aid kits have given Ms. Parker and Sgt. M. Dunn the listed areas that will have the kits in monthly all first aid kits will be brought into the Sally Port Gate here at Varner Unit. Sgt. M. Dunn or assigned Fire Safety Officer will be responsible to pick them up then take them to Medical Services to be reviewed for any needed materials. I have identified 9 (nine) areas that will have these kits. I will request the Medical Services Administrator review the form attached to HS OPP 308.00 Standard First Aid Kits for revision to include a tag number on their form.

### Task

- a. Order new first aid kits
- b. Provide list of assignment to Medical Services
- c. Submit request to revise the form attached to HS OPP 308

### Responsible Agency

- a. Division of Corrections Varner Unit

### Assigned Staff

- a. James Gibson
- b. Sondra Parker

### Anticipated Completion Date

- a. October 29, 2021

## AUDITORS RESPONSE

The Visiting Committee supports the Plan of Action submitted by the agency for this expected practice.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Visiting Committee Findings

Mandatory Standards

Not Applicable

**Standard 5-ACI-5B-12**

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

FINDINGS:

The Varner Unit does not house delinquent offenders or juveniles.

**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 OFFENDER
- POSTPARTUM FOLLOW UP
- UNLESS MANDATED BY STATE LAW, BIRTH CERTIFICATES/REGISTRY DOES NOT LIST A CORRECTIONAL FACILITY AS THE PLACE OF BIRTH

FINDINGS:

The Vander Unit does not house female offenders.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

**Standard 5-ACI-2C-06 (NEW CONSTRUCTION AFTER JUNE 2014).**

OFFENDERS HAVE ACCESS TO TOILETS AND HAND-WASHING FACILITIES 24-HOURS PER DAY AND ARE ABLE TO USE TOILET FACILITIES WITHOUT STAFF ASSISTANCE WHEN THEY ARE CONFINED IN THEIR CELLS/SLEEPING AREAS. TOILETS ARE PROVIDED AT A MINIMUM RATIO OF ONE FOR EVERY 12 OFFENDERS IN MALE FACILITIES AND ONE FOR EVERY EIGHT OFFENDERS IN FEMALE FACILITIES. URINALS MAY BE SUBSTITUTED FOR UP TO ONE-HALF OF THE TOILETS IN MALE FACILITIES. ALL HOUSING UNITS WITH THREE OR MORE OFFENDERS HAVE A MINIMUM OF TWO TOILETS. THESE RATIOS APPLY UNLESS ANY APPLICABLE BUILDING OR HEALTH CODES REQUIRE ADDITIONAL FIXTURES.

FINDINGS:

The Varner Unit is not new construction after June 2014.

**Standard 5-ACI-2C-08 (NEW CONSTRUCTION AFTER JUNE 2014).**

OFFENDERS HAVE ACCESS TO OPERABLE WASHBASINS WITH HOT AND COLD RUNNING WATER IN THE HOUSING UNITS AT A MINIMUM RATIO OF ONE BASIN FOR EVERY 12 OCCUPANTS. THESE RATIOS APPLY UNLESS ANY APPLICABLE BUILDING OR HEALTH CODES REQUIRE ADDITIONAL FIXTURES.

FINDINGS:

The Varner is not new construction after June 2014

**Standard 5-ACI-2C-10 (NEW CONSTRUCTION AFTER JUNE 2014).**

OFFENDERS HAVE ACCESS TO OPERABLE SHOWERS WITH TEMPERATURE-CONTROLLED HOT AND COLD RUNNING WATER, AT A MINIMUM RATIO OF ONE SHOWER FOR EVERY TWELVE OFFENDERS, UNLESS APPLICABLE CODES REQUIRE ADDITIONAL FIXTURES. WATER FOR SHOWERS IS THERMOSTATICALLY CONTROLLED TO TEMPERATURES RANGING FROM

100 DEGREES FAHRENHEIT TO 120 DEGREES FAHRENHEIT TO ENSURE THE SAFETY OF OFFENDERS AND PROMOTE HYGIENIC PRACTICES.

FINDINGS:

The Varner Unit is not new construction after June 2014.

**Standard 5-ACI-2C-12**

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

FINDINGS:

The Varner Unit does not house offenders who cannot perform basic life functions.

**Standard 5-ACI-2D-04 (RENOVATION, NEW CONSTRUCTION AFTER JUNE 1, 2008).**

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

FINDINGS:

The Varner Unit is not new construction after June 1, 2008.

**Standard 5-ACI-2D-05 (NEW CONSTRUCTION OR RENOVATION AFTER JUNE 1, 2014).**

EACH DORMITORY PROVIDES OFFENDERS WITH ACCESS TO NATURAL LIGHT BY MEANS OF AT LEAST 12 SQUARE FEET, PLUS TWO ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER OFFENDER IN THE DORMITORY

FINDINGS:

The Varner Unit is not new construction after June 1, 2014.

**Standard 5-ACI-2E-02**

SPECIAL MANAGEMENT HOUSING UNITS HAVE EITHER OUTDOOR UNCOVERED OR OUTDOOR COVERED EXERCISE AREAS. THE MINIMUM SPACE REQUIREMENTS FOR OUTDOOR EXERCISE AREA FOR SPECIAL MANAGEMENT UNITS ARE AS FOLLOWS:

- B-1 GROUP YARD AREA: 330-SQUARE FEET OF UNENCUMBERED SPACE CAN ACCOMMODATE TWO OFFENDERS. FOR EACH ADDITIONAL 150 SQUARE FEET OF UNENCUMBERED SPACE, AN ADDITIONAL OFFENDER MAY USE THE EXERCISE AREA SIMULTANEOUSLY. (FORMULA: FOR EACH 150-SQUARE FEET OF UNENCUMBERED SPACE EXCEEDING THE BASE REQUIREMENT OF 180-SQUARE FEET FOR THE FIRST OFFENDER, EQUALS THE MAXIMUM NUMBER OF OFFENDERS WHO MAY USE THE RECREATION AREA SPACE SIMULTANEOUSLY).
- B-2 INDIVIDUAL YARD AREAS: 1890-SQUARE FEET OF UNENCUMBERED SPACE.

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

**FINDINGS:**

The Varner Unit does not have a Special Management Unit.

**5-ACI-3A-07**

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

**FINDINGS:**

The Varner does not house female offenders.



**Standard 5-ACI-3A-17**

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

FINDINGS:

The Varner Unit does not house female offenders.

**Standard 5-ACI-3A-43**

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

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

FINDINGS:

The Varner Unit does not have a Canine Unit.

**Standard 5-ACI-3A-44**

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

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

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

FINDINGS:

The Vander Unit does not have a Canine Unit.

**Standard 5-ACI-3A-45**

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

FINDINGS:

The Varner Unit does not have a Canine Unit.

**Standard 5-ACI-3D-05**

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

FINDINGS:

The Varner Unit does not house female offenders.

**Standard 5-ACI-4A-02**

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

FINDINGS:

The Varner Unit does not have a Special Management Unit.

**Standard 5-ACI-4A-03**

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

## FINDINGS

The Varner Unit does not have Special Management Housing.

### **Standard 5-ACI-4A-04**

WHEN SPECIAL MANAGEMENT HOUSING UNITS EXIST, WRITTEN POLICY AND PRODEDURE GOVERN THEIR OPERATION FOR THE SUPERVISION OF OFFENDERS UNDER ADMINISTRATIVE STATUS, PROTECTIVE CUSTODY, AND DISCIPLINAREY DETENTION.

#### FINDINGS:

The Varner Unit does not have a Special Management Housing Unit.

### **Standard 5-ACI-4A-08**

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

#### FINDINGS:

The Varner Unit does not have Special Management programs.

### **Standard 5-ACI -4A-09**

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

#### FINDINGS:

The Varner Unit does not have a Special Management Housing Unit.

### **Standard 5-ACI -4A-10**

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT A QUALIFIED MENTAL HEALTH PROFESSIONAL PERSONNALLYH INTERVIEWS AND PREPARES A WRITTEN REPORT ON ANY OFFENDER REMAINING IN SPECIAL MANAGEMENT HOUSING FOR MORRE THAN 30 DAYS. IF CONFINEMENT CONTINUES BEYOND 30 DAYS, A MENTAL HEALTH

ASSESSMENT BY A QUALIFIED MENTAL HEALTH PROFESSIONAL IS MADE AT LEAST EVERY 30 DAYS FOR OFFENDERS WHO HAVE AN IDENTIFIED MENTAL HEALTH NEED AND EVERY THREE MONTHS FOR ALL OTHER OFFENDERS – MORE FREQUENTLY IF PRESCRIBED BY THE CHIEF MEDICAL AUTHORITY.

FINDINGS:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-11**

WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE THAT ALL SPECIAL MANAGEMENT OFFENDERS ARE PERSONALLY OBSERVED BY A CORRECTIONAL OFFICER TWICE PER HOUR, BUT NO MORE THAN 40 MINUTES APART, ON AN IRREGULAR, SCHEDULE. OFFENDERS WHO ARE VIOLENT OR MENTALLY DISORDERED OR WHO DEMONSTRATE UNUSUAL OR BIZARRE BEHAVIOR RECEIVE MORE FREQUENT OBSERVATION; SUICIDAL OFFENDERS ARE UNDER CONTINUING OR CONTINUOUS OBSERVATION.

FINDINGS:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-12**

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

FINDINGS:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI-4A-13**

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

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-14**

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

FINDINGS:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-15**

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

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-16**

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

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-17**

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

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-18**

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

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-19**

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

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-20**

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

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-21**

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

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-22**

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDETHAT OFFENDERS IN SPECIAL MANAGEMENT HOUSING HAVE ACCESS TO LEGAL MATERIALS.

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-23**

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

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-24**

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE RECEIVE A MINIMUM OF OUNE HOUR OF EXERCISE PER DAY OUTSIDE THEIR CELL, FIVE DAYS PER WEEK, UNLESS SECURITY OR SAFETY CONSIDERATIONS DICTATE OTHWISE.

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-25**

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

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI -4A-26**

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

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

**Standard 5-ACI-4A-27**

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

FINDING:

The Varner Unit does not have a Special Management Housing Unit.

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

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

FINDINGS:

The Varner Unit does not house female offenders.



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

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

FINDINGS:

The Varner unit does not house youthful offenders.

**5-ACI-5B-13**

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

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

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

FINDINGS:

The Varner unit does not house youthful offenders.

**Standard 5-ACI-5B-14**

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

FINDINGS:

The Varner Unit does not house youthful offenders.

**Standard 5-ACI-5B-15**

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

FINDINGS:

The Varner Unit does not house youthful offenders.

**Standard 5-ACI-5B-16**

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

FINDINGS:

The Varner Unit 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 AREAS OF THE FACILITY. ANY OTHER SIGHT OR SOUND CONTACT IS MINIMIZED, BRIEF, AND IN CONFORMANCE WITH APPLICABLE LEGAL REQUIREMENTS.

FINDINGS:

The Varner Unit does not house youthful offenders.

**Standard 5-ACI-5B-18**

WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE THAT PROGRAM PERSONNEL WHO WORK WITH YOUTHFUL OFFENDERS FROM THE SPECIALIZED UNIT BE TRAINED IN THE DEVELOPMENTAL, SAFETY, AND OTHER SPECIFIC NEEDS OF YOUTHFUL OFFENDERS. WRITTEN JOB DESCRIPTIONS AND QUALIFICATIONS

REQUIRE TRAINING FOR STAFF SPECIFICALLY ASSIGNED TO THE UNIT OR STAFF THAT IS RESPONSIBLE FOR PROGRAMMING OF YOUTHFUL OFFENDERS IN THE SPECIALIZED UNIT BEFORE BEING ASSIGNED TO WORK WITH YOUTHFUL OFFENDERS. THE TRAINING SHOULD INCLUDE BUT NOT BE LIMITED TO THE FOLLOWING AREAS:

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

FINDINGS:

The Varner Unit 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 DESIRE IN PLANNING FOR THEIR UNBORN CHILDREN.

FINDINGS:

The Varner Unit does not house female offenders

**Standard 5-ACI-5E-11**

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR SUBSTANCEABUSE PROGRAS, TO INCLUDE MONITORING, DRUG TESTING AND USE EDUCATION PROGRAMS FOR OFFENDERS WITH DRUGH AND ALCOHOL ADDICTION PROBLEMS.

FINDINGS:

The Varner Unit does not have a substance abuse program.

**Standard 5-ACI-5E-12**

WHERE A SUBSTANCE USE DISORDER TREATMENT PROGRAM EXISTS, WRITTEN POLICY, PROCEDURE, 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 Varner Unit does not have a substance abuse program.

**Standard 5-ACI-5E-13**

WHERE A SUBSTANCE USE DISORDER TREATMENT PROGRAM EXISTS, WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR AN APPROPRIATE RANGE OF PRIMARY TREATMENT SERVICES FOR ALCOHOL AND OTHER DRUG ABUSING OFFENDERS THAT INCLUDE, AT A MINIMUM THE FOLLOWING:

- B-1 OFFENDER DIAGNOSIS
- B-2 IDENTIFIED PROBLEM AREAS
- B-3 INDIVIDUAL TREATMENT OBJECTIVES
- B-4 TREATMENT GOALS
- B-5 COUNSELING NEEDS
- B-6 DRUG EDUCATION PLAN
- B-7 RELAPSE PREVENTION AND MANAGEMENT
- B-8 CULTURALLY SENSITIVE TREATMENT OBJECTIVES, AS APPROPRIATE
- B-9 THE PROVISION OF SELF-HELP GROUPS AS AN ADJUNCT TO TREATMENT
- B-10 PRERELEASE AND TRANSITIONAL SERVICE NEEDS
- B-11 COORDINATION EFFORTS WITH COMMUNITY SUPERVISION AND TREATMENT STAFF DURING THE PRERELEASE PHASE TO ENSURE A CONTINUUM OF SUPERVISION AND TREATMENT

FINDINGS:

The Varner Unit does not have a substance use disorder treatment program.5-ACI-6B-10

**Standard 5-ACI-5E-14**

WHERE A SUBSTANCE USE DISORDER TREATMENT PROGRAM EXISTS, WRITTEN POLICY, PROCEDURE, 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 Varner Unit does not have a substance use disorder treatment program.

**Standard 5-ACI-5E-15**

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

FINDINGS:

The Varner Unit does not have a substance use disorder treatment program.

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

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

FINDINGS:

There is no victim/offender dialogue program in place at this facility.

**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 Varner Unit does not house female offenders.

**Standard 5-ACI-6A-23**

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR EARLY IDENTIFICATION AND TREATMENT OF OFFENDERS WITH ALCOHOL AND DRUG ABUSE PROBLEMS THROUGH A STANDARDIZED BATTERY ASSESSMENT. THE BATTERY SHALL BE DOCUMENTED AND INCLUDE, AT A MINIMUM, THE FOLLOWING:

- B-1 SCREENING AND SORTING
- B-2 CLINICAL ASSESSMENT AND REASSESSMENT
- B-3 MEDICAL ASSESSMENT FOR APPROPRIATE DRUG AND ALCOHOL PROGRAM ASSIGNMENT TO THE NEEDS OF THE INDIVIDUAL OFFENDERS
- REFERRALS

FINDINGS:

The Varner Unit does not have a substance abuse program.

**Standard 5-ACI-6A-24**

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

FINDINGS:

In-transit offenders are not received at this facility.

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

INPATIENT CARE UNIT IS FOR THOSE WHO ARE IN NEED OF INPATIENT MENTAL HEALTH TREATMENT. THESE UNITS SHOULD HAVE 24 HOUR SERVICES SUCH AS NURSING AND AVAILABILITY OF A QMIIP, 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 OFFENDERS IN THE PROGRAM, HOUSING TO MEET THE THERAPEUTIC NEEDS OF THE OFFENDER AND TRANSITION PLAN UPON DISCHARGE FROM THE INPATIENT CARE UNIT.

FINDINGS:

The Varner Unit is not an inpatient psychiatric unit.

**Standard 5-ACI-6A-42**

OFFENDERS HAVE ACCESS TO SUBSTANCE DISORDER INFORMATION, EDUCATION, AND/OR TREATMENT PROGRAMS FOR SUBSTANCE USE DISORDERS. WHEN A SUBSTANCE USE DISORDER TREATMENT PROGRAM EXISTS, THE CLINICAL MANAGEMENT OF PROGRAM PARTICIPANTS INCLUDES, AT QA MINIMUM, THE FOLLOWINGS

- B-1 A STANDARDIZED NEEDS ASSESSMENT ADMINISTERED TO DETERMINE THE LEVEL OF SUBSTANCE USE TREATMENT NEEDS AND CRIMINOGENIC RISKS/NEEDS
- B-2 AN INDIVIDUALIZED TREATMENT PLAN DEVELOPED AND IMPLEMENTED BY A CLINICIAN OR MULTIDISCIPLINARY TEAM WITH APPROPRIATE TRAINING, AND CERTIFICATION OR LICENSURE (WHERE REQUIRED BY STATUTE), IN SUBSTANCE USE DISORDERS TREATMENT
- B-3 PRE-RELEASE EDUCATION RELATED TO THE RISK OF RETURN TO SUBSTANCE USE
- B-4 PROGRAM PARTICIPANT INVOLVEMENT IN AFTERCARE DISCHARGE PLANS.

FINDINGS:

The Varner Unit does not have a substance abuse program.

**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 Varner Unit has full time qualified health trained personnel

**Standard 5-ACI-6B-10**

IF VOLUNTEERS ARE USED IN THE DELIVERY OF HEALTH CARE, THERE IS A DOCUMENTED SYSTEM FOR SELECTION, TRAINING, STAFF SUPERVISION, FACILITY ORIENTATION, AND DEFINITION OF TASKS, RESPONSIBILITIES AND AUTHORITY THAT IS APPROVED BY THE HEALTH AUTHORITY. 38 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 Varner Unit does not utilize volunteers in the delivery of health care.

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

ANY STUDENTS, INTERNS, OR RESIDENTS DELIVERING HEALTH CARE IN THE FACILITY, AS PART OF A FORMAL TRAINING PROGRAM, WORK UNDER STAFF SUPERVISION, COMMENSURATE WITH THEIR LEVEL OF TRAINING. THERE IS A WRITTEN AGREEMENT BETWEEN 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 Varner Unit Infirmary does not use students or interns to deliver health care.

**Standard 5-ACI-6E-02**

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

**FINDINGS:**

The Varner Unit does not have a medical housing unit.



**Standard 5-ACI-6E-03**

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

FINDINGS:

The Varner Unit does not have a medical housing unit.

**Standard 5-ACI-6E-04**

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

FINDINGS:

The Varner Unit does not have a medical housing unit.

**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 Varner Unit does not have an Industries 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 Varner Unit does not have an Industries Program.

**Standard 5-ACI-7A-10**

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

FINDINGS:

The Varner Unit does not have an Industries Program.

**Standard 5-ACI-7A-11**

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

FINDINGS:

The Varner Unit does not have an Industries 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 Varner Unit does not have an Industries Program.

**Standard 5-ACI-7A-14**

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

FINDINGS:

There are no private industries operating on the grounds of the Varner Unit

**Standard 5-ACI-7A-15**

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT OFFENDERS 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. OFFENDERS RECEIVING SUCH COMPENSATION REIMBURSE THE JURISDICTION FOR A REASONABLE SHARE OF ITS COST IN MAINTAINING THEM.

FINDINGS:

The Varner Unit does not have offenders employed in the community.

**Significant Incident Summary**

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

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

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

**Facility Name: Varner Unit**  
**Reporting Period: October 2020 to September 2021**

Incident Type	Months	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	Total for Reporting Period
	→													
Escapes		0	0	0	0	0	0	0	0	0	0	0	0	0
Disturbances*		0	0	0	0	0	0	0	0	0	0	0	0	0
Sexual Violence		0	0	0	0	0	0	0	0	0	0	0	0	0
Homicide*	Offender Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Staff Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Other Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
Assaults	Offender/Offender	0	0	0	0	0	0	1	0	0	1	1	0	3
	Offender/Staff	0	0	0	0	0	0	0	0	0	0	1	0	1
Suicide		0	0	1	0	0	0	0	0	1	0	0	0	2
Non-Compliance with Mandatory Standard*		0	0	0	0	0	0	0	0	0	0	0	0	0
Fire*		0	0	0	0	0	0	0	0	0	0	0	0	0
Natural Disaster*		0	0	0	0	0	0	0	0	0	0	0	0	0
Unnatural Death		0	0	0	0	0	0	0	0	0	0	0	0	0
Other*		0	0	0	0	0	0	0	0	0	0	0	0	0

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



		<b>Health Care Outcomes</b>		
<b>Standard</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Calculated O.M.</b>
<b>1A</b>	(1)	Number of offenders diagnosed with a MRSA infection within the past twelve (12) months.		
	divided by	The average daily population.		
	(2)	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months.		
	divided by	Average daily population.		
	(3)	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months.		
	divided by	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.		
	(4)	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months.		
	divided by	Number of offenders treated for latent tuberculosis infection in the past twelve (12) months.		
	(5)	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time.		
	divided by	Total offender population at that time.		
	(6)	Number of offenders diagnosed with HIV infection at a given point in time.		
	divided by	Total offender population at that time.		
	(7)	Number of offenders with HIV infection who are being treated with highly active antiretroviral treatment (HAART) at a given point in time.		
	divided by	Total number of offenders diagnosed with HIV infection at that time.		
	(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.		

	divided by	Total number of treated offenders with HIV infection that were reviewed.		
	(9)	Number of offenders diagnosed with an Axis I disorder (excluding sole diagnosis of substance abuse) at a given point in time.		
	divided by	Total offender population at that time.		
	(10)	Number of offender admissions to off-site hospitals in the past twelve (12) months.		
	divided by	Average daily population.		
	(11)	Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months.		
	divided by	Average daily population in the past twelve (12) months.		
	(12)	Number of offender specialty consults completed during the past twelve (12) months.		
	divided by	Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.		
	(13)	Number of selected hypertensive offenders at a given point in time with a B/P reading > 140 mmHg/ >90 mm Hg.		
	divided by	Total number of offenders with hypertension who were reviewed.		
	(14)	Number of selected diabetic offenders at a given point in time who are under treatment for at least six months with a hemoglobin A1C level measuring greater than 9 percent.		
	divided by	Total number of diabetic offenders who were reviewed.		
	(15)	The number of completed dental treatment plans within the past twelve (12) months.		
	divided by	the average daily population during the reporting period.		
<b>2A</b>	(1)	Number of health care <i>staff</i> with lapsed licensure or certification during a twelve (12) month period.		
	divided by	Number of licensed or certified staff during a twelve (12) month period.		
	(2)	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job.		
	divided by	Number of new health care staff during the twelve (12) month period.		

	(3)	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months.		
	divided by	Number of employees.		
	(4)	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past twelve (12) months.		
	divided by	Number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.		
<b>3A</b>	(1)	Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months.		
	divided by	Number of evaluated offender grievances related to health care services in the past twelve (12) months.		
	(2)	Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period.		
	divided by	Number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.		
	(3)	Number of adjudicated offender lawsuits related to the delivery of health care found in favor of the offender in the past twelve (12) months.		
	divided by	Number of offender adjudicated lawsuits related to healthcare delivery in the past twelve (12) months.		
<b>4A</b>	(1)	Number of problems identified by quality assurance program that were corrected during a twelve (12) month period.		
	divided by	Number of problems identified by quality assurance program during a twelve (12) month period.		
	(2)	Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.		
	(3)	Number of offender suicide attempts in the past twelve (12) months.		
	divided by	Average daily population.		
	(4)	Number of offender suicides in the past twelve (12) months.		
	divided by	Average daily population.		
	(5)	Number of unexpected natural deaths in the past twelve (12) months.		

	divided by	Total number of deaths in the same reporting period.		
	(6)	Number of serious medication errors in the past twelve (12) months.		
<b>5A</b>	<b>None</b>			
<b>6A</b>	<b>None</b>			
<b>7A</b>	<b>None</b>			
<b>7B</b>	<b>None</b>			
<b>7C</b>	<b>None</b>			