

COMMISSION ON ACCREDITATION FOR CORRECTIONS
STANDARDS COMPLIANCE REACCREDITATION AUDIT

Arkansas Department of Corrections
Wrightsville Complex
Wrightsville, Arkansas

September 23 - 25, 2019

VISITING COMMITTEE MEMBERS

Tim Schuetzle, CCE, Chairperson
ACA Auditor

Kenneth Valentine
ACA Auditor

Catherine P. Thomas
ACA Auditor

A. Introduction

The audit of the Wrightsville Complex in Wrightsville, AR was conducted on September 23-25, 2019 by Tim Schuetzle, Chairperson, Ken Valentine, Member, and Catherine Thomas, Member. The complex is operated by the State of Arkansas Department of Corrections (ADC) and consists of two facilities, the Wrightsville Unit and the Hawkins Unit.

B.1 Wrightsville Unit Demographics

Rated Capacity: 850

Actual Population: 838

Average Daily Population for the last 12 months: 851

Average Length of Stay: 3 years, 3 months, 25 days

Security/Custody Level: Medium and Minimum

Age Range of Offenders: 18 to 75

Gender: Male

Full-Time Staff: 254; 12 Administrative, 16 Support, 11 Program, 155 Security, 27 Other

B.2 Hawkins Unit Demographics

Rated Capacity: 456/ 400*

Actual Population: 199 males, 197 females = 396

Average Daily Population for the last 12 months: 427

Average Length of Stay: 3 years, 2 months, 11 days

Security/Custody Level: Medium and Minimum

Age Range of Offenders: 19 to 74

Gender: Male and female

Full-Time Staff: 110; 8 Administrative, 9 Support, 5 Program, 57 Security, 31 Other.

* The Department decreased the bed capacity in the women's area from 256 to 200 beds in April 2019.

C. Facility Description

The Wrightsville Complex is located in Wrightsville, AR about ten miles South of Little Rock in Pulaski County. The complex consists of the Wrightsville Unit which houses 850 adult male offenders, and the Hawkins Unit which houses 200 adult male offenders, and 200 adult female offenders. The complex sits on +4,000 acres which is used primarily for grazing horses, cattle and hay production. State housing is provided for the Warden, Deputy Wardens, Building and Field Security Chiefs, Maintenance Supervisor, and Livestock Administrators. There is a mobile home park, swimming pool, and a lake for fishing, all which are available for staff and their families to use.

The Wrightsville Unit has 17 separate offender living areas, constructed of wood frame and brick dating back to 1965 when it was originally established to house juvenile male offenders.

With the exception of a segregation unit all of the housing units are open “barracks” style with capacities ranging from 40 to 60 offenders. Barracks Nine and Ten are double-bunked, the rest are single-bunked. The segregation unit is a combination of 4 single and 8 double cells for a total capacity of 20 offenders.

Other buildings include administration, various staff offices, gym, kitchen/dining facility, maintenance, medical, and two prison industries buildings; one for graphic arts, and another for the furniture factory.

The Hawkins Unit is located approximately 300 yards from the Wrightsville facility and houses both males and female offenders. The unit was designed with a ten foot tall concrete wall running down the middle to separate the genders, with a pedestrian gate allowing foot traffic between the two sides. The unit was opened in 2006 and construction is of pre-fabricated metal.

The male side of the facility houses 200 offenders in three open “barracks” who participate in the faith-based, Pathways to Freedom program. The kitchen/dining facility for the Hawkins Unit is located on the male side and is also used to feed and employ the female offenders. All male offenders are removed from the area prior to the female population entering the male side. The female side of the facility houses 200 offenders in four open barracks, and also has a 12 bed segregation unit.

D. Pre-Audit Meeting

The team met on September 22, 2019 in Little Rock, to discuss the information provided by the Association staff and the officials from the Wrightsville Complex. We were also pleased to meet with key staff from the Wrightsville complex later that evening for dinner and introductions. The chairperson divided standards into the following groups:

Standards #4-4001 to #4-4169 to Member Valentine
Standards #4-4171 to #4-4343 to Chair Schuetzle
Standards # 4-4344 to #4-4530 to Member Thomas

E. The Audit Process

1. Transportation

The team was escorted to the facility by Sandra Kennedy, Accreditation Manager for ADC, arriving at 7:50 a.m. on the 23rd.

2. Entrance Interview

The audit team proceeded to the office of Superintendent Randy Watson for a quick meeting prior to the entrance conference. The team expressed the appreciation of the Association for the opportunity to be involved with the Wrightsville complex in the accreditation process.

Superintendent Watson informed us the facility had a quiet evening and that there were no emergent or security reasons that would prevent us from completing our audit. We explained the entrance conference agenda. The chair informed him that the team would like to see those areas he was particularly proud of and wanted to recognize the hard work by his staff in preparing for this audit. The team promised to keep him posted throughout the day of our findings, and that we would like to debrief with him at day's end.

Superintendent Watson then escorted the team to the visiting room where the formal entry meeting was held, beginning at 8:10 a.m.

The following persons were in attendance:

Dexter Payne, Director, ADC
Dale Reed, Chief Deputy Director, ADC
William Straughn, Assistant Director, ADC
Sandra Kennedy, State Accreditation, ADC
Byron Brown, Fire Safety Lt., ADC
Randy Watson, Superintendent Wrightsville Complex
Claudia Harris, Deputy Warden, Wrightsville
Billy Inman, Deputy Warden, Hawkins
Michael Lowe, CSO Wrightsville Unit
Maxie Foote, Field Major
Mary Cobbs, CSO Hawkins Unit
Cyndi Vent, Complex Accreditation
Teresa James, Business Manager
Jalisa Brown, Armory
Chantel Coleman
Kapri Robinson
Michelle Glover
Lanata Long
Donald Turntine
Randy Harper
Johnnie Harris
David King
Jason Martin
Frankie Brooks
Thomas Jones
Rebekah Davis
Vesta Blanks
Mitchell Johnson
Quartia Bradley

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 thanked the staff of the complex for their willingness to be involved in the accreditation process and praised the Arkansas Department of Corrections for their long-term commitment to the ACA accreditation process and their desire to meet the professional standards on how prisons should be operated.

The team introduced themselves and gave a short history of their work and auditing experience. The chair explained the goals the team had for the day and the schedule we would hope to follow. He cautioned that no two audit teams were alike, and it was likely the results would be different than prior audits. He guaranteed a thorough, but fair audit.

3. Facility Tour

The team toured the entire facility from 8:25 to 12:00 when we broke for lunch. The auditors began going through the mandatory files, and individual auditors toured areas specific to those files later in the afternoon. Facility notices announcing this audit were posted throughout both facilities.

The group toured Barracks 12, 13, the Substance Abuse Treatment Program barracks, the Isolation Unit and the infirmary. The audit team separated, with Ms. Thomas staying in the Infirmary, while Mr. Schuetzle and Mr. Valentine went to Kitchen. While in the Kitchen, Mr. Schuetzle went to inspect the dish tank, tools and chemical storage areas. Mr. Valentine went to a dry storage room, coolers and freezers, along with the dry storage areas. The auditors continued to Barrack 3 which houses the Principle Application Life Skills (PALS) program, Maintenance, Industry, Barracks 1, and chemical room in Barracks 1. The grounds were spacious and orderly, with flowers planted along the covered walkways.

We tour moved to the Hawkins Unit, starting with the Kitchen, the Pathways to Freedom units and computer lab (male offenders). The team went to the Men's Infirmary, where Ms. Thomas remained, while the other auditors went through the wall to the Women's side of the Hawkins Unit. On the Women's side we visited the Think Legacy barracks, Lactation room, Law Library, Shift Supervisor office, School classroom, Women's Infirmary, Segregation and Chaplain's office.

The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Wrightsville Unit

Dale Reed, Chief Deputy Director
Sandra Kennedy, State Accreditation
Byron Brown, Central Office
Randy Watson, Superintendent
Claudia Harris, Deputy Warden
Randy Harper, Captain

Jalisa Brown, Sergeant
Thomas Jones, Sergeant
Lanata Long, Sergeant
DeAundrea Lewis
Teresa James
Cyndi Vent, Complex Accreditation

Hawkins Unit

Dale Reed, Chief Deputy Director
Sandra Kennedy, State Accreditation
Byron Brown, Central Office
Randy Watson, Superintendent
Billy Inman, Deputy Warden
Mary Cobbs, CSO
Mitchell Johnson, Captain
Chantel Coleman, Corporal
Kapri Robinson, Corporal
Lanata Long, Sergeant
DeAundrea Lewis
Teresa James
Cyndi Vent, Complex Accreditation

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 Wrightsville Unit (850 male offenders)

The facility perimeter is surrounded by two 12 foot chain link fences which are equipped with a combination of motion sensors, microwave, and razor ribbon. There are thirteen zones. An officer walks the perimeter three times each shift to test the Sen-Star (motion) system. There are three breeches in this perimeter; the visitor and staff gatehouse, a vehicle sallyport, and the offender checkout at the rear of the facility.

Staff and visitors gain access into the Wrightsville Unit through a gatehouse on the perimeter's east side. They are required to walk through a metal detector, a cell phone detection tower, and submit to a pat search. Staff is identified by their fingerprints using a bio-metric system. This entrance building includes restrooms and lockers for public use.

One then proceeds out the gatehouse on a covered sidewalk into the administration building to the Master Control Center.

This control room grants access/egress in and out of the secure facility and is manned 24 hours/day, seven days/week. Master Control is accountable for controlling keys, restraints, and emergency equipment. The officer monitors the facility fire alarm system, perimeter fence and various cameras. This post announces compound movement. Security equipment including radios, keys, chemical agents, and restraints are stored and issued from this location.



Walkway from Gatehouse into facility



Hawkins Entry Gates

The second breach in the perimeter is a single vehicle sallyport that controls large vehicle access into the yard. The sallyport has two rows of razor ribbon and is staffed around the clock. It is equipped with cameras, undercarriage mirrors and an Advanced Vehicle Interrogation and Notification (AVIAN) system, which detects human heartbeats of anyone hiding inside a vehicle.

The third entrance/exit from the secure perimeter is the field turnout gate on the west side of the facility. Offenders working the adjacent agricultural plots leave through this gate daily. Four towers, each armed with AR-15 rifles, are placed on each side of the rectangle that makes up the secured perimeter. Armed patrols may be established during emergency situations or very heavy fog.

The facility has 22 exterior cameras and 36 interior cameras. All cameras are digital with pan/tilt/zoom functions and are recorded. Recordings are maintained for forty-five days.

Inmate movement within the facility is controlled by staff. Mass movements to work, programs and services are at the direction of Master Control Officer at under the supervision of the Shift Supervisor.

These movements are based on work and program rosters, and pre-approved “lay-ins”. The Shift Supervisor authorizes the beginning and ending of all unscheduled offender movements through verbal commands or the use of hand held radios.

There are 12 formal counts each day; beginning at 5:30 a.m., 6:30 a.m. 8:00 a.m., 1:00 p.m., 5:30 p.m., 6:30 p.m. and then six occurring every hour between 10:00 p.m. and 3:00 a.m. Counts are coordinated from the Shift Lieutenant’s office, and an auditor observed the count process.

The facility employs an assortment of search tactics in order to detect and interdict contraband. These include pat searches of staff, offenders, and their belongings, searches of living areas, common areas and facility grounds, strip searches of offenders, and the use of hand-held and walk-through metal detectors. K-9 units may also be used in a random/as needed manner.

Keys, tools restraints, weapons and chemical agents are all stored, issued, and accounted for in a secure fashion. All correctional staff carries personal OC spray as part of their duty belt, but interviews with staff indicated that they are actually used very seldom.

Chemical control was observed and determined to be in keeping with good correctional practice.

ADC policy specifies Class A tools as those that could be used as weapons or to facilitate escapes and both Units were properly controlling these types of tools. Control of Class B tools was performed through a shadow board system. Auditors noticed one area where the Class B tool shadow board needed to be brought up to date and the correction was completed that same day. Tool inventories were done whenever offenders left the program, (shift change or lunch in the kitchen or Industries) or at a minimum at days end in other areas. There is an effective procedure in place to account for broken tools, or those that are out for repair.

The facility employs a robust drug free workplace program for staff and offenders alike, and gang activity is tracked and monitored to prevent gang grouping.

According to information provided by the facility, 11 different gangs are represented at the Wrightsville Unit with a total of 245 actual members.

Security Hawkins Unit (200 male and 200 female offenders)

The facility perimeter has two, twelve foot high fences, similar to that at the Wrightsville Unit, but there are no towers at Hawkins. There are two access points through this perimeter. Staff and visitors enter through a gatehouse building where they go through a metal detector and are subject to search. There is no bio-metric technology for staff entering the Hawkins Unit. Once through the gatehouse, there are separate locked gates into each of the two facilities.

The male section is on the left and the females live on the right side of the unit. Access into the gender specific areas is controlled electronically by Master Control.

There is also a vehicle sally port that allows large vehicles into the yard at the back of the facility.

In lieu of towers, Hawkins employs an armed, perimeter security mobile patrol round the clock, seven days each week. Officers rotate into a facility post every six hours. They are required to call into Master Control every 30 minutes via radio.

The facility has nineteen, pan, tilt and zoom exterior digital cameras and seventy-eight interior cameras. All cameras are monitored from Master Control. Recordings are kept for 45 days. Security equipment including keys, chemical agents and restraints are stored and issued from Master Control, which is located in the female section of the facility.

The Hawkins Unit has eleven formal counts daily, beginning at 6:30 a.m. and continuing at 9:45, 1:00 p.m., 5:00, 6:30, and then every hour from 10:00 p.m. through 3:00 a.m. Random, informal counts are conducted to verify offenders are present throughout the day.

Keys, tools, restraints, weapons and chemical agents are all stored, issued and accounted for in an appropriate manner at the Hawkins Unit. All correctional staff carries personal OC spray as part of their duty belt. Chemical agents are rarely used.

A sharpened hook that is used to cut down inmates attempting suicide by hanging was locked in a plastic tote inside the locked master control room. It could be argued that this was a Class A tool requiring storage behind two locks, but in a situation where seconds matter, it was suggested that this device be hung on the wall in Master Control, so it is more readily available. A second device should be centrally located in the male section of the facility as well.

Chemical control at Hawkins was observed and procedures and practice deemed appropriate.

Like the Wrightsville Unit, the facility employs a typical drug free workplace program staff and offenders consisting of pre-employment, post-accident, random, and probable cause/reasonable suspicion testing, as well as a variety of search procedures to assist in interdicting and locating contraband.

Security: (Shared Security for Entire Wrightsville Complex)

There is centralized armory and key room for both Units just outside the Gatehouse at the Wrightsville Unit. Entry into the armory is controlled by the tower officer. The Armory was exceptionally clean and well organized.

It is equipped with the necessary lethal and non-lethal weaponry necessary to carry out routine duties as well as responding to emergency situations. Weapons utilized include the AR-15 rifles in the towers, Glock handguns for inmate transports; Remington 12 gauge shot guns for field operations, and a 37mm to propel less lethal rubber pellets. The supplies were stored appropriately, and the inventory counts were accurate and verified monthly. Weapons clearing barrels are in place outside the armory, and vehicle sallyports.



Wrightsville Complex Armory

Wrightsville Complex Key Control

The key control area was also well organized, to accountability for all keys is ensured through a monthly key inventory. Key blanks are safely secured behind three locks, and key hubs are color coded; red for emergency keys, blue for restricted and black for take-home keys. Procedures were in place for reporting and timely replacement of broken keys.

Prison staff uses the State Police range on grounds for weapons training and qualification.

There is an eight member emergency response team to respond to emergencies in both units. Officers receive 16 hours annual training in emergency response operations.

Overall, the auditors found security though the complex to be commensurate with the custody level and mission of the complex. There are appropriate numbers of officers to cover necessary posts. Security staff is familiar with routine and emergency procedures and interacted well with each other and the offender population. Officer posts are located immediately adjacent to offender living areas, which allowing the officers to observe and respond in a rapid manner.

Offender's housing assignments are determined using an objective classification system which groups them according to records and needs. Frequent reviews help to keep track with offender progress in meeting established goals.

Environmental Conditions:

According to the documentation in the files and direct observation both Units meet all the standards pertaining to environmental conditions. There is adequate natural light into all buildings and the temperatures were in acceptable ranges. The dorms were quiet with proper ventilation and adequate space for each offender. The numbers of toilets, sinks and showers allow each offender to maintain their hygiene, and the water temperature is kept at a safe but comfortable level.

The facility employs generators, which will automatically kick-in in the event of a power failure. The system is load tested monthly.

Sanitation:

Both Units were clean and sanitary. Cleaning products come into the facility in concentrated form, but staff dilutes them, so they are safe to be used by offender porters without direct staff observation. Auditors observed this process and checked the inventory control of these full strength chemicals. The inventories were accurate, and safety equipment was used during dilution.

The housekeeping plan includes an issue of cleaning supplies and equipment to assigned offenders at least once during each twelve hour shift. Inspections and observations during required security rounds assist in maintaining a clean facility on an ongoing basis. The team detected no unpleasant odors or excess clutter during our walks around the facility. Sanitation inspections are completed weekly by facility staff and monthly sanitation inspections by qualified staff ensure that the spirit and intent of the housekeeping plan is being implemented in a consistent manner.

Fire Safety:

Unless specifically noted, the fire safety procedures and equipment is the same for both units. Automatic detection systems are connected to annunciation control panels in each Master Control Center and monitored around the clock. The Hawkins Unit is fully sprinkled, but the Wrightsville building is not.

The Complex has documented inspections by the local Fire Marshall for each of the past three years. The few deficiencies noted were corrected quickly. Fixed and portable fire suppression equipment is provided as required by NFPA standards.

Portable fire extinguishers are appropriately located throughout each of the facilities each was current with the inspection and found to be fully charged. Ansul hood suppression systems are present in both kitchens and passed the required inspections. Cans for oily rags were seen in the maintenance and Industries areas.

Pull stations, fire exits, and evacuation routes were properly located in all areas of the facilities. Fire drills in all areas are completed quarterly and a on both shifts as documented in their files and through conversations with offenders. Policy requires that staff complete weekly safety inspections, and deficiencies are corrected in a timely manner. There is also a monthly inspection completed by staff with safety training.

Emergency fire response if needed is available through several local municipal fire departments with which the complex has written agreements.

For the most part, hazardous materials including flammable, toxic and caustics are properly stored, used and accounted for with Safety Data Sheets (SDS) and eye wash stations readily available and accessible. There was a missing SDS in the Wrightsville Unit Kitchen for dishwashing detergent. The SDS was in place the following day. Two spray cans of a flammable material were secured in the Laundry Office. A suggestion was made that these needed to be placed in a Hazardous Material Storage Cabinet, and the suggestion was implemented the following day.

The last Visiting Committee Report noted that due to the vestibule design Segregation Unit cells at the Wrightsville Unit it requires two keys to open both doors into the cells. These locks are mechanical (not electric). This creates a potentially cumbersome situation in the event of an emergency evacuation from the unit. Because of the security concern with the offenders housed there, the fire drills practiced in that area the past three years have been table top simulation exercises only. It was suggested the facility conduct at least one live fire drill in this area with the use of self contained breathing apparatus for responding officers. Security concerns could be mitigated by calling in additional staff or use the Emergency Response Team (it could count towards part of their annual training). Other facilities that have practiced live Segregation unit fire drills have discovered numerous tips that make the evacuation process faster and safer for both staff and offenders. Being able to document the facility has practiced live drills will decrease your liability should a real fire in that unit ever occur.

Food Service:

The auditors found full service, centralized kitchen and dining facilities at both units and were impressed with the cleanliness and pace of production. Everywhere we looked both staff and offenders were busy, either with meal preparation or cleaning. This attention to cleanliness is reflected in their annual inspection reports, which listed very few deficiencies. Those that were listed were remedied quickly.

The size of the kitchens and dining chairs were adequate to produce quality meals for the offender population and provides ample time to eat each meal. Hawkins Unit breakfast begins at 5:00 a.m., lunch 10:00 a.m. and dinner at 3:00 p.m. Because Wrightsville Unit offenders work outside the facility, meals times are 30 minutes earlier. There is less than fourteen hours between meals. Religious and therapeutic diets are ordered and served to offenders when indicated. The menu is on a rotating cycle and approved by a registered dietician. Fresh, ADC grown produce is substituted for canned vegetables when available. The 2018 meal cost was calculated at \$1.26.



Wrightsville Dining Hall



Wrightsville Laundry

Coolers, freezers, and dry storage temperatures were checked along with recent documentation and found to be within the recommended ranges. Dry goods are rotated on a first in, first out basis to ensure foods are used prior to their expiration date. The dish tank temperatures were in the appropriate ranges for cleaning and sanitizing trays. Pots and pans were being washed in a three compartment sink with a bleach solution added to the third sink for sterilization.

The audit team sampled a meal consisting of tuna casserole, pinto beans, boiled okra, pear halves, corn on the cob and two buns. The okra and corn were raised by the ADC agricultural operation. There were ample portions, the tray was hot, and the food tasty. There were few inmate grievances filed regarding the food service operation, conversations with inmates revealed there was enough food provided for them, but that the meals lacked variety. When asked whether they filed a grievance or reported this on their food survey, inmates replied they are not asked for their suggestions and filing grievances doesn't work. Standard #4-4314 requires the facility have a written policy, procedure and practice specifying the determination of, and responsiveness to inmate eating preferences.

Their policy states they will conduct annual food surveys with the offender population, but these were not completed over the audit period.

Medical Care:

Wellpath Medical provides healthcare services to Wrightsville Complex (Wrightsville and Hawkins Units). The contract began in 2014 as Correct Care Solutions and transitioned into Wellpath in November 2018. Wellpath's regional office is located in Pine Bluff.

The staffing pattern consists of one Health Authority, a Director of Nursing for each facility, RNs, Licensed Practical Nurses, Certified Nursing Assistants, Medical Directors, Nurse Practitioners and Administrative Assistants. The departments are staffed 24 hours per day seven days a week. Shifts for clinical staff are eight, ten and twelve hours.

Both the Wrightsville Unit and Hawkins Unit have on-site licensed infirmaries and housing units equipped to accommodate handicap offenders. The facilities are able to care for inmates with various disease processes to include pregnant inmates. Inmates are processed through Arkansas' diagnostic prisons

Licenses for all medical staff are current. Medical and security personnel are CPR certified and trained to administer first aid. There are five first aid kits throughout the units; the contents are clearly labeled.

All medical and select security supervisors are trained to use the AED. AEDs are strategically placed in two common areas and one in each medical department. Emergencies are responded to within a four-minute time line with the use of appropriate medical equipment. The Metropolitan Emergency Medical Services (MEMS) responds when 911 is called. Offenders are transported to the nearest emergency departments at either the University of Arkansas Medical Services (UAMS) or St. Vincent's Hospital.

Inmates received into the facility are screened upon arrival by nursing staff. Orientation is completed at that time to inform the offender how to access health services. I was able to observe the Hawkins Unit intake process, the nurses informed the new arriving inmates orally and in writing of how to access all aspects of health care, the co-payment and grievance processes. A history is taken, and inmates have initial assessments completed. Any acute or chronic condition(s) are identified, and referrals made as needed.

Nurse sick call is conducted five days per week Monday - Friday starting at 6:00. Inmates complete a sick call request in a kiosk (located in the dorm). The night shift nurse triages the information to ensure all are non-emergent complaints and are seen within 72 hours. Inmates are instructed to alert their dorm officers when they have a matter that cannot wait for routine sick call.

Hawkins inmates also have the option for walk-in sick call 24/7. Licensed Practical Nurses perform sick call using nursing protocols. When over-the-counter meds are dispensed the note is co-signed by a provider. The protocols are designed to alert the nurse when another review is required. Referrals to a practitioner would be completed with seven days for routine care. Arkansas Department of Corrections has a co-pay system for routine non-emergent healthcare encounters. No offender is denied access to care due to the inability to pay.

Both facilities have licensed medical beds for male and females. Licenses are current from Jan 2019-Dec 2019 by the Arkansas Department of Health. Inmates are in sight and sound of staff. Mobile-X provides radiological services and reports can be available within a few hours. Lab Corp processes lab orders after nurses collect blood samples. Telemedicine is available for Chronic Viral Illness (CVI). Local community providers and other Arkansas Department of Corrections facilities provide care for the inmates when the need extends beyond the facility walls. Utilization Management is done for routine approvals. Consults are forwarded to the Wellpath Regional Office within one day. The clinics provided on site include optometry, Physical Therapy, IV Therapy and orthopedics. Chronic Care patients are seen for infectious diseases, respiratory, hypertension, diabetes, asthma, and cardio just to name a few.

Hawkins Unit has specialty clinics for female healthcare, including gynecological exams, mammograms, fetal non-stress testing and ultrasounds.

Patients' chronic care appointments for inmates who are stable are scheduled four times a year with one visit to the Medical Director and others with the Nurse Practitioner. Regular visits promote healthcare and prevention of complications.

The mental health staff are employees of the Arkansas Department of Corrections and consist of one licensed Social Worker and one licensed Mental Health Advisor at the Wrightsville Unit. The Hawkins Unit has one psychologist and a part-time Mental Health Advisor. Mental health services are onsite on weekdays with on call service available 24/7. Initial mental health screenings start on intake and are continued throughout the inmate's stay with routine and emergent needs met. Risk assessments are performed to show levels of treatment need. Routine complaints (seen within five-days of referral) are done through the kiosk, non-routine complaints are processed in an expeditious manner by inmates speaking with officers/staff or by observation of the inmates by staff. Inmates assigned to Restrictive Housing have an initial pre-lock up mental health screen followed by a review by mental health staff. Routine rounds are made three times weekly. There is one safety cell located at Wrightsville and two at Hawkins. When identified patients will be put on watches under the direction of mental health staff to include recommendations of garments and referrals to a higher acuity level. Patients on psychotropic medications will be seen by a psychiatrist at least every 90 days. Patients are seen by Telehealth and in person.

There are full dental clinics on both facilities. Wrightsville operates 40 hours per week Monday through Thursday and Hawkins operates every Wednesday and more often when needed. Dental staff are Arkansas Department of Corrections employees - one dentist, one assistant and part-time hygienist. Basic dental services include fillings, extractions, prophylaxis and urgent care referrals. Replacement of missing teeth is done only if the teeth are removed as part of the treatment plan while in the ADC. Instruments are maintained in an orderly manner making it easy to perform counts. Sharps inventories are completed prior to the dental staff leaving for the day. The Arkansas Department of Health certifies the radiological equipment.

Perpetual inventories for sharps are completed during shift changes in medical (twice daily for medical and once for dental when patient are seen). A sharps count was observed, and the inventories were accurate.

Diamond Pharmacy provides medications; they are secured in the medical departments. Orders are faxed to the pharmacy and processed quickly; if scripts are faxed by 3:00 p.m., meds can be received the following day (delivered by FedEx ground services to the front entry of both facilities). The department has a formulary of approved medications (off formulary meds are approved within 24-hours). Stock meds are maintained on site. When needed Walgreen and Arch Street Pharmacy are the local back-up pharmacies. One nurse is responsible for the operation of the pharmacy per shift and controls the keys to the pharmacy. There are three pill lines per day. A medication line was observed. Inmates showed identifications prior to getting meds and the officer stationed at the line ensured ingestion. Self-administration medications or On Person Meds (OPM) can be given to non-mental health patients. The inmates are instructed on the rules to follow to include when to return for re-ordering (a 30-day supply is given). Expired medications are either returned to the pharmacy for credit or placed in the Drug Buster. An inventory is maintained when this occurs. There are controlled substances, which are documented accordingly, inventoried on count sheets when signed out of storage, and administered to patients. Stock narcotics are destroyed on site and patient specific narcotics are sent to the ADH for destruction. There is also a limited amount of over-the-counter medications available for purchase in the commissary. Discharged inmates are given a 30-day supply of medications and follow-ups with community providers are recommended. Officers do not administer any medications.

Wrightsville and Hawkins units have infection control plans. Staff receive blood borne pathogen information and training on exposures. All staff with offender contact are offered the Hepatitis B Series. Documentation of tuberculin skin tests are reviewed on intake. Officers receive a screen/test prior to beginning their assignments. Both inmates and staff screens will be completed annually thereafter. A batch report comes out monthly to review TB screens by the last digits of the inmate number.

A symptoms screen is performed for those who are past positive. When an inmate converts to positive, a T-Spot lab is drawn and provider's orders, as well as the ADH protocols, are followed. If a negative pressure room is needed the patient would be transferred to Ouachita Regional Correctional Unit which is their Special Needs Unit (SNU with a 28-bed hospital). Stericycle picks up biohazard waste very two weeks

The Wrightsville Unit operates 20 restrictive housing cells, and the Hawkins Unit has 12. Inmates assigned to restrictive housing get a medical screen prior to lock-up. The medical staff are making rounds for medication administration and sick call rounds three times per day seven days a week. Nurses indicate they are stopping at each cell at all of these rounds. Wrightsville cells are not open directly to passing staff (cells are enclosed with a barrier to prevent direct contact); staff are cautioned to ensure they are engaging each inmate during rounds. Security staff escorts nurses and there is a sheet on each cell door to document rounds with date, time and signature of nurse. Officers are picking up sick call slips and placing them in a sick call box. Staff was advised that this should not be occurring. Nurses making sick call rounds would check for routine sick call complaints and urgent complaints should go directly to officers. Medical staff was also cautioned to be consistent in signing the restrictive housing logs to document these rounds. The females living in the Hawkins Unit are rarely placed in restrictive housing, and the unit was empty on the days of the audit.

Arkansas DOC does utilize the Electronic Offender Medical Information System (EOMIS) for documenting protected health information. Some paper files still exist and are being placed into EOMIS. If an inmate has a paper file and leaves the facilities this file would be picked up by the Arkansas Parole Management. Those health records are filed separately and secured behind a locked door. The Health Authority controls access to all health records.

After interviewing numerous inmates there were no complaints related to medical care. A handicap offender at Wrightsville indicated it was difficult for him to maneuver from his housing unit to other buildings due to the uneven walkways and holds in the pavement. It is evident that offenders with in wheelchairs, walkers, braces etc. could have some challenges going from one place to the next independently on the Wrightsville compound. This was expressed to the Warden.

Recreation:

The Wrightsville Complex had a full-time, qualified recreation program supervisor up until a month before the audit to supervise the delivery of recreational services to the offender population at both facilities. That position is now vacant, but the facility expects it will be filled quickly. The Wrightsville Unit has a large gymnasium with a variety of exercise equipment available to the offenders. There is an expansive outdoor recreation area where inmates can participate in basketball, volleyball, horseshoes and walking.

The Hawkins Unit also has outdoor and indoor recreation areas as well, but the indoor recreation is actually the Visiting Building which does not meet the 18 foot ceiling height requirement to be in compliance with ACA 4-4154.

Access to all recreation areas throughout the complex are available at some level seven days each week including most of the day on weekends. There are also passive recreational opportunities within the Barracks, including board games and televisions for offender enjoyment. A hobby craft program instills creativity. The prisons allows offenders to sell items to staff.

This recreation program supervisor has a representative at Hawkins who is to oversee the Hawkins unit recreation program in conjunction with her other full time duties in the women's facility. Proof was not provided that there is a full time recreation program specialist at the Hawkins unit even though it houses more than 100 offenders.

Religious Programming:

The complex has two full-time chaplains who faith-based programs. Both Units have space designated for church services and use numerous approved volunteers to assist in providing each offender with an opportunity to practice his/her chosen faith. Catholic, Protestant and Islamic services are conducted on a regular basis, and denominational specific volunteers lead bible studies.

All religious volunteers, referred to as Certified Religious Assistants (CRA's) receive specialized training to serve as the chaplain's right hand. These CRA's are devoted to their roles within the facilities, as they must serve a minimum of eight hours a week at the complex. The audit team was able to sit in on one of the CRA's classes. The volunteer chaplains are included in the chaplain's on-call schedule.

The Wrightsville Unit offers the Principles and Applications for Life (PAL) Program for male offenders and the Hawkins Unit has the Advanced Principle Application Life Skills (APALS) program for 30 female residents. These programs seek to address through educational and group sessions the spiritual element of a person's life. The curriculum is based on the principles taught in the Bible and is open to all Christian faiths.

Offender Work Programs:

The Wrightsville complex strives to keep every inmate involved in programming each day, and for many this includes a work assignment. Perhaps the largest opportunity is through the agricultural program, where 150 offenders leave the Wrightsville unit each morning to work the 1600 head of cattle. New offenders are typically assigned to "field duty" where they must demonstrate willingness to work and behave before being considered for a job/program assignment inside the fence.

Of course, there are some cherished jobs where offenders can use and/or learn skills such as horseshoeing, horsemanship, and beef production. Other agricultural programs available include tending to approximately 100 horses, beekeeping, or in the expansive garden. Unfortunately, rain and wet fields prevented the auditors from observing this in action during our time in Wrightsville.

The Furniture Factory and Graphic Arts Industries programs also employ a large percentage of the offender population. The hardwood office furniture was both attractive and well built. Both shops did a good job of controlling tools and chemicals. Approximately 62 offenders work in the furniture program on two shifts, and 48 on two shifts in Graphic Arts.

Other offender job assignments include barracks porters, floor crews, kitchen and laundry workers, clerks, recreation workers, maintenance and construction. The facility has a program where Braille and large print books are produced for the Arkansas School for the Blind.



Horse Operation & Furniture Factory



Academic and Vocational Education

Education is another method the Wrightsville complex uses to keep offenders productive during their incarceration. Offenders assigned to the education program spend an average of twenty hours each week in school, in either the GED program, or taking college classes, in addition to holding a job assignment.

Every offender entering the custody of the ADC who doesn't have a high school diploma or GED is required to participate in an ABE/GED program. These inmates are evaluated and placed in one of four levels offered; Adult Basic Education, Intermediate, Pre-GED, or GED classes, based on their specific needs. Classes are offered at both facilities, and approximately eight to ten percent of the offender population earn their GED annually.

Graduation celebrations are held for all graduates as a reward for their hard work.

The complex employs six teachers, who are supervised by the Principal.

The Second Chance Pell Pilot Program passed by Congress in 2015 restored the ability for incarcerated persons to be able to afford college classes. Shorter college operates classes which can lead to completing the Associate of Arts (A.A) degree. There were 25 offenders in the first graduating class in November of 2018. Shorter College also provides assistance to discharging offenders who have started but not completed the course at Wrightsville by helping them identify another school to attend.

Social Services:

The Wrightsville Complex offers a number of treatment programs to assist offenders in developing the skills needed to reduce their chances of re-offending.

The largest program is for all 200 male offenders at the Hawkins Unit. The Pathway to Freedom (PTF) is funded and staffed through private donations. The goal is to address the transformation of offender's lives through an 18 month faith based, pre-release program. The best part of this is that the program continues for an additional 12 months after discharge by offering mentoring and other services through local churches and trained volunteers. This investment in transitioning offenders from prison is considered one of the best practices to reduce recidivism.

Female inmates at the Hawkins Unit may participate in the Paws in Prison program which rescues homeless dogs and trains them to follow commands and simple rules in order to make them more adoptable. Other programs for the women include Substance Abuse Education, Anger Management, as well as parenting and re-entry classes through the University of Arkansas at Little Rock which uses a diverse group of volunteers from the community to actually come to the unit and teach classes. A lactation program was started in June. Mothers are able to use a breast pump to provide breast milk for their babies off grounds. Thus far, three inmates have taken advantage of the program.

The Wrightsville Unit has a six to nine month Substance Abuse Treatment Program (SATP) and a six to twelve month Therapeutic Community (TC) program. These addiction therapy programs are staffed by a supervisor, four counselors in-training, and four certified counselors. The program also has positions for up to eight offenders who must go through the "in-training" program also before being certified. They incorporate cognitive restructuring into these addiction programs, which has been shown to increase the likelihood of success for prison populations.

Mental health staff as well as chaplains and CRA's (trained volunteers) are also available for individual counseling and crisis intervention.

Visitation:

Contact visitation is available at both units on weekends from 12:00 p.m. until 4:00 p.m. in spacious, well decorated visiting rooms. There are a number of vending machines and microwaves available to those visiting and well as a photo concession administered by the units' Inmate Council. Private cubicles are available for clergy and attorney visits.

Specials visits may be scheduled Monday through Friday from 8:00 a.m. to 4:00 p.m. and must be pre-arranged and approved by the Superintendent. Typically, special visits are approved for visitors who must travel extremely long distances. Criminal history checks are conducted on all visitors prior to approval.

Library Services:

Inmates at both facilities have access to the courts through the use of law libraries. Trained inmate law clerks assist offenders by giving them the proper forms to complete, suggesting which of the numerous law books might help them with research, or shepherding them through the West Law computer program. Law clerks also will type for offenders with cases pending.

The supervising librarian for the complex is appropriately trained and has a degree in library science.

Leisure libraries are located in both units, and offer a large variety of materials including books, magazines, and newspapers. Books and newspapers are available in Spanish. Donations of books come from local churches and private citizens, and the library has the ability to order books from local public libraries to enhance their inventory. A review of available fiction and non-fiction books revealed a number of recent releases are available to check out.



Wrightsville Library



Hawkins Visiting and Indoor Rec.

Laundry:

Both units have their own laundry suitable in size and equipment to provide the offender population with clean clothing on a daily basis. There are sewing machines to hem and mend uniforms and there is a schedule for replacing clothing items when needed. The Laundries also serve as the reception area for new arrivals, where they receive their inmate property, orientation facility handbook, and their general issue of clothing and bedding. Linens are exchanged weekly and winter coats are made available on a seasonal basis. There is sufficient stock of clothing and bedding to maintain hygiene should the laundry be forced to close for a few days.

F. Examination of Records

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

1. Litigation

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

2. Significant Incidents/Outcome Measures

The audit team reviewed the final year’s Outcome Measures and Significant Incident Summary and found them to be consistent with the characteristics of their offender population’ our observations of the staffing and security measures in place, and the quality of the Medical care the offenders receive.

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>
Wrightsville Unit Kitchen	Capt. King, Food Service Mgr.
Auditor returned to the Kitchen to verify the SDS sheet for the dishwashing detergent was in the SDS book and to observe the lunch meal.	
Hawkins Infirmary	Astanacia Ganaway Dental Assistant

The medical auditor went to the Hawkins infirmary to conduct a count of the dental tools, and to observe the new offender intake process.

Wrightsville Armory

Armorer Sgt. Jalisa Brown
Key Control Sgt. Thomas Jones

The Armory and Key Control area were one of the cleanest and best organized the chair has seen. The above staff knew their operations and were quite helpful in describing their jobs.

Wrightsville Laundry

Laundry Supervisor Cpl. Jodie Mathews

On the first visit the auditor found two small bottles of flammable liquids secured in the office, but not within a flammable storage cabinet. Wrightsville staff had properly stored these chemicals and had a sound plan in place to add a small cabinet within the laundry office.

4. Shifts

a. Day Shift

The first shift runs twelve hours, from 6:00 a.m. to 6:00 p.m. The team was present at the facility during the day shift from 7:45 a.m. to 6:00 p.m. the first two days of the audit.

We covered all areas of the complex during this shift and spoke with approximately fifty staff while on the facility tour. Our observations made during the three days are covered in other sections of this report.

We were able to observe the shift briefing held for the second shift at 5:45 p.m. on Tuesday evening. There were four senior staff supervising fifteen officers coming on shift. Events of the prior shift were read, and a uniform inspection was completed by Sgt. Thomas.

b. Evening Shift

The second shift runs twelve hours, from 6:00 p.m. to 6:00 a.m. The team was present at the facility from 6:00 p.m. until approximately 8:00 p.m. on Tuesday evening.

When the briefing ended, the auditors split up and went with various staff into three different barracks to observe the process of post change. Auditor Valentine went to Barracks 7, Auditor Thomas to Barracks 1.

Staff coming off shift hand the keys to their replacement and give an oral briefing of any problems encountered in their unit. They also give the count in the unit, highlighting to location of any offenders not present in the unit. The chair went with Cpl. Pillcrom to the Segregation Unit. After relieving the Segregation Officer and competing the post change process described above, Cpl. Pillcrom's first task was to verify the unit count by making around and speaking with the inmates in segregation. Cpl. Pillcrom has been employed at Wrightsville for three years and was very professional in his demeanor and dress.

Approximately 6:25 the chair went to Barracks 2 and met Cpl. Arianna Clements, who has been employed only three months. She followed the same post change procedure and had verified the count in the unit. I observed her making her initial rounds. It was obvious that she had a professional rapport with the offenders and there was no tension between them. She directed me to those inmates in the unit who had jobs off the facility so I could have a private discussion with them. Cpl. Clements says she is very happy here and loves her job.

At 7:45 p.m., Superintendent Watson drove the audit team around the complex to observe the exterior lighting around the perimeter and inside the facilities. The exterior lighting was more than adequate, with ninety-two LED lights twenty-two feet high surrounding the perimeter at Wrightsville, and 56 LED perimeter lights at Hawkins at the same height. Both facilities are changing from halide and incandescent bulbs to LED lighting.

The south perimeter of the Wrightsville Unit tower lights had malfunctioned the prior weekend, but the maintenance staff had installed temporary electrical lights running off a generator until repairs could be made later in the week. Although not as tall, the temporary lights were raised and effectively lit the area. We observed the Hawkins perimeter patrol vehicle making rounds during this time as well.

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

The 2016 audit team found only Standard #4-4154 in non-compliance, pertaining to the height of the covered/enclosed recreation space for use in inclement weather for the offenders in the Hawkins Unit.

Standard #4-4154

BOTH OUTDOOR AND COVERED/ENCLOSED EXERCISE AREAS FOR GENERAL POPULATION INMATES ARE PROVIDED IN SUFFICIENT NUMBER TO ENSURE THAT EACH INMATE IS OFFERED AT LEAST ONE HOUR OF ACCESS DAILY.

USE OF OUTDOOR AREAS IS PREFERRED BUT COVERED/ENCLOSED AREAS MUST BE AVAILABLE FOR USE IN INCLEMENT WEATHER.

COVERED/ENCLOSED EXERCISE AREAS CAN BE DESIGNED FOR MULTIPLE USES AS LONG AS THE DESIGN AND FURNISHINGS DO NOT INTERFERE WITH SCHEDULED EXERCISE ACTIVITIES. THE MINIMUM SPACE REQUIREMENTS FOR EXERCISE AREAS ARE AS FOLLOWS:

- OUTDOOR EXERCISE AREAS IN FACILITIES WHERE 100 OR MORE INMATES UTILIZE ONE RECREATION AREA - 15 SQUARE FEET PER INMATE FOR THE MAXIMUM NUMBER OF INMATES EXPECTED TO USE THE SPACE AT ONE TIME, BUT NOT LESS THAN 1,500 SQUARE FEET OF UNENCUMBERED SPACE.
- OUTDOOR EXERCISE AREAS IN FACILITIES WHERE LESS THAN 100 INMATES HAVE UNLIMITED ACCESS TO AN INDIVIDUAL RECREATION AREA - 15 SQUARE FEET PER INMATE FOR THE MAXIMUM NUMBER OF INMATES EXPECTED TO USE THE SPACE AT ONE TIME, BUT NOT LESS THAN 750 SQUARE FEET OF UNENCUMBERED SPACE.
- COVERED/ENCLOSED EXERCISE AREAS IN FACILITIES WHERE 100 OR MORE INMATES UTILIZE ONE RECREATION AREA - 15 SQUARE FEET PER INMATE FOR THE MAXIMUM NUMBER OF INMATES EXPECTED TO USE THE SPACE AT ONE TIME, WITH A MINIMUM CEILING HEIGHT OF 18 FEET, BUT NOT LESS THAN 1,000 SQUARE FEET OF UNENCUMBERED SPACE.
- COVERED/ENCLOSED EXERCISE AREAS IN FACILITIES WHERE LESS THAN 100 INMATES UTILIZE ONE RECREATION AREA - 15 SQUARE FEET PER INMATE FOR THE MAXIMUM NUMBER OF INMATES EXPECTED TO USE THE SPACE AT ONE TIME, WITH A MINIMUM CEILING HEIGHT OF 18 FEET, BUT NOT LESS THAN 500 SQUARE FEET OF UNENCUMBERED SPACE.

Plan of Action

The agency submitted a plan of action to request funding from the State to build an eighteen foot high covered pavilion over existing recreation area at the Hawkins Unit. The agency set a completion date of July 15, 2017.

Commission Action

The Commission on Accreditation approved this plan of action at the facility's panel hearing on January 21, 2017.

Current Status

Unfortunately, the ADC did not receive funding from the Legislature to complete this capital project, and the covered pavilion has not been completed. The agency is requesting funds for this project again this budget cycle.

2019 Auditor's Findings

The Wrightsville complex remains in non-compliance with this standard. We reviewed the outdoor recreation spaces available, as well as the indoor recreation that is utilized during inclement weather. Currently the visitation center and classrooms at the Hawkins Women's Unit are available when weather prevents offenders from going outside. The audit team observed a large indoor space that provides opportunities for the women to conduct yoga classes, aerobic exercise, and walking. Classrooms on the male side are opened up to provide indoor recreation for the men to walk, do floor exercises, lift weight bags, etc.

The ceiling height in these areas appeared to be 12 feet and would allow for most physical activity with the possible exception of Basketball and Volleyball. Given that they average only two days where it snows each year, and that they provide coats to the offenders to wear during the winter months, our team believes the complex is proactively mitigating the effects that occur as a result of not having an eighteen foot, covered outdoor recreation space.

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

There were two letters from offenders requesting to speak with the auditors, but both were written in 2016, shortly after the previous reaccreditation audit, and neither offender remained incarcerated in Wrightsville. The team spoke with approximately 70 offenders over the course of the three days. Inmates reported they felt safe in the facility, knew who the warden and management team members were because they stood in at main line and answered questions from the population. Most knew how the grievance system worked; however, none had admitted ever writing a grievance during their time here.

The only suggestion expressed came from an inmate in a wheel chair who said it was difficult to wheel over many of the "paved" roads he needed to traverse to get to the dining hall. The pavement was uneven from years of potholes and attempts to patch these spots. The administration is aware of this problem and had requested funding for new pavement last biennium. Unfortunately, that request did not receive funding.

The team did observe an inmate's wheelchair being pushed on this road during inmate movement to lunch.

2. Staff Interviews

Team members met and spoke with over 55 staff on both shifts. Staff morale appeared high. The second shift staff was particularly impressive, despite having less experience than most of first shift, answering questions about their duties, policies and post orders.

H. Exit Discussion

The exit interview was held at 12:00 p.m. in the Visitation Building with the Superintendent Watson and 60 staff and eleven outside guests present. The following guests in attendance included:

Dexter Payne, Agency Director
Dale Reed, Agency Chief Deputy Director
Rory Griffin, Agency Medical Deputy Director
William Straughn, Assistant Director
Dina Tyler, Division Communications Director
Rebekah Davis, Wellpath Regional Director
Sandra Kennedy, State Accreditation
Byron Brown, Central Office
Tammy Robertson, Accreditation Manager-Pine Bluff Complex
Kelly Beatty-Accreditation Manager, Varner Unit
Mary Ann Allen-Accreditation Manager, Cummins Unit

The auditors expressed their pleasure with various aspects of the facility they found particularly impressive before the chairperson discussed the compliance levels of the mandatory and non-mandatory standards. He gave them their overall score and explained the procedures that would follow the audit.

The chairperson expressed appreciation for the cooperation of everyone concerned and congratulated the facility team for the progress made. He reminded them that receiving accreditation is a process and not an event, and that the work towards their next reaccreditation begins tomorrow.

AMERICAN CORRECTIONAL ASSOCIATION
AND THE
COMMISSION ON ACCREDITATION FOR CORRECTIONS

COMPLIANCE TALLY

Manual Type	Adult Correctional Institutions, 4 th Edition	
Supplement	2016 Standards Supplement	
Facility/Program	Wrightsville/Hawkins Complex	
Audit Dates	September 23 - 25, 2019	
Auditor(s)	Tim Schuetzle, Chairperson Ken Valentine, Member Catherine Thomas, Member	
	MANDATORY	NON-MANDATORY
Number of Standards in Manual	62	465
Number Not Applicable	6	29
Number Applicable	56	436
Number Non-Compliance	0	3
Number in Compliance	56	433
Percentage (%) of Compliance	100%	99.3%
<ul style="list-style-type: none"> ● Number of Standards <i>minus</i> Number of Not Applicable <i>equals</i> Number Applicable ● Number Applicable <i>minus</i> Number Non-Compliance <i>equals</i> Number Compliance ● Number Compliance <i>divided by</i> Number Applicable <i>equals</i> Percentage of Compliance 		

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections
Wrightsville Complex
Wrightsville, Arkansas

September 23 - 25, 2019

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

Standard #4-4154

BOTH OUTDOOR AND COVERED/ENCLOSED EXERCISE AREAS FOR GENERAL POPULATION INMATES ARE PROVIDED IN SUFFICIENT NUMBER TO ENSURE THAT EACH INMATE IS OFFERED AT LEAST ONE HOUR OF ACCESS DAILY. USE OF OUTDOOR AREAS IS PREFERRED BUT COVERED/ENCLOSED AREAS MUST BE AVAILABLE FOR USE IN INCLEMENT WEATHER. COVERED/ENCLOSED EXERCISE AREAS CAN BE DESIGNED FOR MULTIPLE USES AS LONG AS THE DESIGN AND FURNISHINGS DO NOT INTERFERE WITH SCHEDULED EXERCISE ACTIVITIES. THE MINIMUM SPACE REQUIREMENTS FOR EXERCISE AREAS ARE AS FOLLOWS:

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FINDINGS:

The Hawkins Unit does not have an indoor/covered recreation area with a minimum ceiling height of eighteen (18) feet.

AGENCY RESPONSE:

Plan of Action

Request funding from parent agency to provide a covered pavilion existing recreation area at the Hawkins Unit. Currently the visitation center at the Hawkins Women's Unit is utilized during inclement weather and provides the opportunity for the women to conduct yoga classes, aerobic exercise, and walking. Classrooms are opened up to provide a recreational are for the men to walk, do floor exercises, and lift weight.

AUDITOR'S RESPONSE:

The visiting committee supports the Plan of Action to add a covered pavilion provided that it meets the height requirement and provides covered recreation space for both the male and female inmates at the Hawkins Unit. The visiting committee also believes this request should be made in the next budget cycle.

Standard #4-4314

WRITTEN POLICY, PROCEDURE, AND PRACTICE SPECIFY THE FOOD SERVICE BUDGETING, PURCHASING, AND ACCOUNTING PRACTICES INCLUDING, BUT NOT LIMITED TO, THE FOLLOWING SYSTEMS:

- FOOD EXPENDITURE COST ACCOUNTING DESIGNED TO DETERMINE COST PER MEAL PER INMATE
- ESTIMATION OF FOOD SERVICE REQUIREMENTS
- PURCHASE OF SUPPLIES AT WHOLESALE AND OTHER FAVORABLE PRICES AND CONDITIONS, WHEN POSSIBLE
- DETERMINATION OF AND RESPONSIVENESS TO INMATE EATING PREFERENCES
- REFRIGERATION OF FOOD, WITH SPECIFIC STORAGE PERIODS

FINDINGS:

Wrightsville Complex could not document how they determine and are responsive to inmate eating preferences. Their policy states they will conduct food surveys with the inmate population, but these have not been completed during this audit period.

AGENCY RESPONSE:

Plan of Action

The Food Service Manager will develop a process to determine the eating preferences for the inmate population through observation and available food choices that are approved by the Agency Registered Dietician Nutritionist. The Unit Accreditation Specialist along with the Food Service Manager revised policy to state the Food Service Department would be responsive to the eating preferences of the inmates without the survey process.

Task

- a. Develop a process to document the response to inmate eating preferences.
- b. During meal service observe the consumption of various foods being served.
- c. Write an assessment/memo concerning the reception of the meals planned and served.

Responsible Agency

- a. Agency Dietician
- b. Deputy Warden of the Unit
- c. Agency Food Service Manager

Assigned Staff

- a. Unit- Food Service Manager
- b. Food Service Supervisors

Anticipated Completion Date

October 18, 2019

AUDITOR'S RESPONSE:

There are a number of ways to meet this standard. Most facilities do this through a simple survey usually given annually to the offenders asking for suggestions or feedback about the meals. The audit team is concerned how often you plan to take this assessment of the prepared meals (i.e. will it be completed annually or once during the audit cycle?), so we will defer the decision on the plan of action to the Commission on Accreditation.

Standard #4-4482

THE EDUCATION AND EXPERIENCE OF THE RECREATION PROGRAM SUPERVISOR ARE TAKEN INTO CONSIDERATION BY THE APPOINTING AUTHORITY IN DETERMINING APPOINTMENT TO THE POSITION.

THESE INCLUDE EDUCATION, CORRECTIONAL EXPERIENCE, TRAINING IN RECREATION AND/OR LEISURE ACTIVITIES AND THE ABILITY TO SUPERVISE THE PROGRAM. IN INSTITUTIONS WITH MORE THAN 100 INMATES, THE POSITION IS FULL-TIME.

FINDINGS:

There is one recreation program supervisor for the Wrightsville and Hawkins institutions. The position is full time. The recreation program supervisor has a representative at the Hawkins Unit who oversees the recreation activities there as a shared portion of her job duties. Proof was not provided that the recreation program supervisor was actively involved in developing, modifying, or participating in the recreation/leisure activities at Hawkins. This standard has not been met due to the limited availability of the full time recreation program supervisor at the Hawkins Unit. Documentation illustrating the dates and times when any Wrightsville Complex staff have entered the Hawkins Unit shows the recreation program supervisor was in Hawkins only once during this audit period. Hawkins Unit has 400 offenders and has not had a full time recreation supervisor.

AGENCY RESPONSE:

Plan of Action

During regular staff meetings and through observation of the unit, I (Superintendent Randy Watson) am reminding staff to record all persons in their area as well as continuing to log in/out through the Bio-Metric System to maintain a record of presence at any unit and/or activities being conducted

I have given instruction to all security and non-security supervisors to instruct their staff when they are conducting Mainline Activities or just visiting an area which they are supervising to document on the Security Log of that area or at the Main Control Center of each unit.

Task

- a. Conduct staff meetings starting in November 2019 to reiterate the need for documenting staffs and recreation program supervisors work related activities
- b. Review with staff and recreation program manager the need for documenting in logs and using Bio-Metrics in/out of units during meetings with each unit executive level staff.
- c. Mentor all staff in developing skills needed for a career with ADC

Responsible Agency

Unit Staff

Assigned Staff

- a. Recreation Program Supervisor and Assistant Leaders
- b. Area Correctional Officers
- c. Warden, Deputy Wardens, and Chief Security Officers

Anticipated Completion Date

December 2019

AUDITOR'S RESPONSE:

There are many ways to document this standard is being met. Some facilities require the recreation program supervisor to submit periodic (monthly/quarterly) reports to the management team describing program accomplishments, goals for the coming months, management/supervision issues, budget/fiscal matters and any problems, needs or recommendations in the recreation program. The audit team agrees this plan of action would help to document the recreation program supervisor had gone into the Hawkins unit, but may not clearly document that they had the ability or were supervising recreation there. The team will defer the decision on the plan of action to the Commission on Accreditation.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections
Wrightsville Complex
Wrightsville, Arkansas

September 23 - 25, 2019

Visiting Committee Findings

Mandatory Standards

Six Not Applicable

Standard #4-4306

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 Wrightsville Complex does not house youthful offenders.

Standard #4-4362

INTAKE MEDICAL SCREENING FOR OFFENDER TRANSFERS, EXCLUDING INTRA-SYSTEM, COMMENCES UPON THE OFFENDER'S ARRIVAL AT THE FACILITY AND IS PERFORMED BY HEALTH-TRAINED OR QUALIFIED HEALTH CARE PERSONNEL. ALL FINDINGS ARE RECORDED ON A SCREENING FORM APPROVED BY THE HEALTH AUTHORITY. THE SCREENING INCLUDES AT LEAST THE FOLLOWING:

INQUIRY INTO:

- ANY PAST HISTORY OF SERIOUS INFECTIOUS OR COMMUNICABLE ILLNESS, AND ANY TREATMENT OR SYMPTOMS (FOR EXAMPLE, A CHRONIC COUGH, HEMOPTYSIS, LETHARGY, WEAKNESS, WEIGHT LOSS, LOSS OF APPETITE, FEVER, NIGHT SWEATS THAT ARE SUGGESTIVE OF SUCH ILLNESS), AND MEDICATIONS
- CURRENT ILLNESS AND HEALTH PROBLEMS, INCLUDING COMMUNICABLE DISEASES
- DENTAL PROBLEMS

- USE OF ALCOHOL AND OTHER DRUGS, INCLUDING TYPE(S) OF DRUGS USED, MODE OF USE, AMOUNTS USED, FREQUENCY USED, DATE OR TIME OF LAST USE, AND HISTORY OF ANY PROBLEMS THAT MAY HAVE OCCURRED AFTER CEASING USE (FOR EXAMPLE, CONVULSIONS)
- THE POSSIBILITY OF PREGNANCY AND HISTORY OF PROBLEMS (FEMALE ONLY); AND OTHER HEALTH PROBLEMS DESIGNATED BY THE RESPONSIBLE PHYSICIAN

OBSERVATION OF THE FOLLOWING:

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

MEDICAL DISPOSITION OF THE OFFENDER:

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

OFFENDERS, WHO ARE UNCONSCIOUS, SEMICONSCIOUS, BLEEDING, OR OTHERWISE OBVIOUSLY IN NEED OF IMMEDIATE MEDICAL ATTENTION, ARE REFERRED. WHEN THEY ARE REFERRED TO AN EMERGENCY DEPARTMENT, THEIR ADMISSION OR RETURN TO THE FACILITY IS PREDICATED ON WRITTEN MEDICAL CLEARANCE. WHEN SCREENING IS CONDUCTED BY TRAINED CUSTODY STAFF, PROCEDURES WILL REQUIRE A SUBSEQUENT REVIEW OF POSITIVE FINDINGS BY THE LICENSED HEALTH CARE STAFF. WRITTEN PROCEDURES AND SCREENING PROTOCOLS ARE ESTABLISHED BY THE RESPONSIBLE PHYSICIAN IN COOPERATION WITH THE FACILITY MANAGER. INMATES CONFINED WITHIN A CORRECTIONAL COMPLEX WITH CONSOLIDATED MEDICAL SERVICES DO NOT REQUIRE HEALTH SCREENING FOR INTRA-SYSTEM TRANSFERS.

FINDINGS:

The Wrightsville Complex is not a reception center.

Standard #4-4365 (MANDATORY) (Revised January 2006)

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

FINDINGS:

The Wrightsville Complex is not a reception facility.

Standard #4-4371 (MANDATORY) (revised January 2006)

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

1. REVIEW OF AVAILABLE HISTORICAL RECORDS OF INPATIENT AND OUTPATIENT PSYCHIATRIC TREATMENT
2. REVIEW OF HISTORY OF TREATMENT WITH PSYCHOTROPIC MEDICATION
3. REVIEW OF HISTORY OF PSYCHOTHERAPY, PSYCHO-EDUCATIONAL GROUPS, AND CLASSES OR SUPPORT GROUPS
4. REVIEW OF HISTORY OF DRUG AND ALCOHOL TREATMENT
5. REVIEW OF EDUCATIONAL HISTORY
6. REVIEW OF HISTORY OF SEXUAL ABUSE-VICTIMIZATION AND PREDATORY BEHAVIOR
7. ASSESSMENT OF CURRENT MENTAL STATUS
8. ASSESSMENT OF CURRENT SUICIDAL POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT INCREASE SUICIDE POTENTIAL
9. ASSESSMENT OF VIOLENCE POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT INCREASE VIOLENCE POTENTIAL
10. ASSESSMENT OF DRUG OR ALCOHOL ABUSE OR ADDICTION
11. USE OF ADDITIONAL ASSESSMENT TOOLS AS INDICATED
12. REFERRAL TO TREATMENT AS INDICATED
13. DEVELOPMENT AND IMPLEMENTATION OF A TREATMENT PLAN

FINDINGS:

The Wrightsville Complex only receives intra-system transfers.

Standard #4-4376 (MANDATORY) (Revised January 2006)

DETOXIFICATION IS DONE ONLY UNDER MEDICAL SUPERVISION IN ACCORDANCE WITH LOCAL, STATE AND FEDERAL LAWS.

DETOXIFICATION FROM ALCOHOL, OPIATES, HYPNOTICS, OTHER STIMULANTS, AND SEDATIVE HYPNOTIC DRUGS IS CONDUCTED UNDER MEDICAL SUPERVISOR WHEN PERFORMED AT THE FACILITY OR IS CONDUCTED IN A HOSPITAL OR COMMUNITY DETOXIFICATION CENTER.

SPECIFIC GUIDELINES ARE FOLLOWED FOR THE TREATMENT AND OBSERVATION OF INDIVIDUALS MANIFESTING MILD OR MODERATE SYMPTOMS OF INTOXICATION OR WITHDRAWAL FROM ALCOHOL OR OTHER DRUGS.

FINDINGS:

The Wrightsville Complex does not detoxify inmates on site. Offenders requiring detoxification are transferred to a community hospital or detoxification center.

Standard #4-4402 (MANDATORY) (Revised January 2015)

WRITTEN AGENCY POLICY PERMITS INMATE PARTICIPATION IN MEDICAL OR PHARMACEUTICAL RESEARCH. FACILITIES ELECTING TO PERFORM SUCH BIOMEDICAL RESEARCH WILL BE IN COMPLIANCE WITH ALL STATE AND FEDERAL GUIDELINES.

FINDINGS:

Arkansas Administrative regulation 854 prohibits inmate participation in medical and pharmaceutical research and experimentation.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections
Wrightsville Complex
Wrightsville, Arkansas

September 23 - 25, 2019

Visiting Committee Findings

Non-Mandatory Standards

Thirty Not Applicable

Standard #4-4128

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

FINDINGS:

There is no New Construction of single-cell living units at the Wrightsville Complex.

Standard #4-4137-1

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

FINDINGS:

There has been no New Construction at the Wrightsville Complex since June 2014.

Standard #4-4138-1 (Added January 2012) (New Construction after June 2014)

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

FINDINGS:

The Wrightsville Complex has had no New Construction since June 2014.

Standard #4-4139-1 (Added January 2012) (New Construction After June 2014).

INMATES HAVE ACCESS TO OPERABLE SHOWERS WITH TEMPERATURE-CONTROLLED HOT AND COLD RUNNING WATER, AT A MINIMUM RATIO OF ONE SHOWER FOR EVERY TWELVE INMATES, UNLESS APPLICABLE CODES REQUIRE ADDITIONAL FIXTURES. WATER FOR SHOWERS IS THERMOSTATICALLY CONTROLLED TO TEMPERATURES RANGING FROM 100 DEGREES FAHRENHEIT TO 120 DEGREES FAHRENHEIT TO ENSURE THE SAFETY OF INMATES AND PROMOTE HYGIENIC PRACTICES.

FINDINGS:

The Wrightsville Complex has had no New Construction since June 2014.

Standard #4-4143

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

FINDINGS:

Offenders who cannot perform basic life functions are not housed at the Wrightsville Complex.

Standard #4-4147-1 (Added August 2006) (Renovation, Addition, New Construction Only)

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

FINDINGS:

The Wrightsville Complex has not had any Renovation, Addition, or New Construction since June 2008.

Standard #4-4147-2 (NEW CONSTRUCTION OR RENOVATION AFTER JUNE 1, 2014).

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

FINDINGS:

The Wrightsville Complex has not had any Renovation, Addition, or New Construction since June 2014.

Standard #4-4208

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 Wrightsville Complex does not have a canine unit.

Standard #4-4209

WHERE A CANINE UNIT EXISTS, POLICY, PROCEDURE, AND PRACTICE FOR TRAINING OF HANDLERS/DOG TEAMS AND UPKEEP AND CARE OF 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 RE-CERTIFIED ANNUALLY BY A NATIONALLY RECOGNIZED ACCREDITING BODY OR A COMPARABLE INTERNAL TRAINING AND PROFICIENCY TESTING PROGRAM.

FINDINGS:

The Wrightsville Complex does not have a canine unit.

Standard #4-4210

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

FINDINGS:

The Wrightsville does not have a canine unit.

Standard #4-4273

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

FINDINGS:

The Wrightsville Complex does not house inmates in Administrative Segregation or Protective Custody. Inmates requiring this status are placed in restrictive housing pending transfer to other ADC facilities that are equipped to house inmates on that status.

Standard #4-4285

WRITTEN POLICIES AND PROCEDURES GOVERN THE ADMISSION OF INMATES NEW TO THE SYSTEM. THESE PROCEDURES INCLUDE AT A MINIMUM THE FOLLOWING:

- DETERMINATION THAT THE INMATE IS LEGALLY COMMITTED TO THE INSTITUTION
- THOROUGH SEARCHING OF THE INDIVIDUAL AND POSSESSIONS
- DISPOSING OF PERSONAL PROPERTY
- SHOWER AND HAIR CARE, IF NECESSARY

- ISSUE OF CLEAN, LAUNDERED CLOTHING AS NEEDED
- PHOTOGRAPHING AND FINGERPRINTING, INCLUDING NOTATION OF IDENTIFYING MARKS OR OTHER UNUSUAL PHYSICAL CHARACTERISTICS
- MEDICAL, DENTAL, AND MENTAL HEALTH SCREENING
- ASSIGNING TO HOUSING UNIT
- RECORDING BASIC PERSONAL DATA AND INFORMATION TO BE USED FOR MAIL AND VISITING LIST
- EXPLAINING MAIL AND VISITING PROCEDURES
- ASSISTING INMATES IN NOTIFYING THEIR NEXT OF KIN AND FAMILIES OF ADMISSION
- ASSIGNING OF REGISTERED NUMBER TO THE INMATE
- GIVING WRITTEN ORIENTATION MATERIALS TO THE INMATE
- DOCUMENTING ANY RECEPTION AND ORIENTATION PROCEDURE COMPLETED AT A CENTRAL RECEPTION FACILITY

FINDINGS:

The Wrightsville Complex is not a reception center.

Standard #4-4286

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

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

FINDINGS:

The Wrightsville Complex is not a reception center.

Standard #4-4287

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

FINDINGS:

The Wrightsville Complex is not a reception center.

Standard #4-4288 (Revised August 2013)

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

FINDINGS:

The Wrightsville Complex is not a reception center.

Standard #4-4307

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 Wrightsville Complex does not house youthful offenders.

Standard #4-4307

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 Wrightsville Unit does not house youthful offenders.

Standard #4-4308

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 Wrightsville Complex does not house youthful offenders.

Standard #4-4309

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 Wrightsville Complex does not house youthful offenders.

Standard #4-4310

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 Wrightsville Complex does not house youthful offenders.

Standard #4-4311

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 Wrightsville Complex does not house youthful offenders.

Standard #4-4312

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 Wrightsville Complex does not house youthful offenders.

Standard #4-4339

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

FINDINGS:

The Wrightsville Complex does not allow inmates to possess personal clothing.

Standard #4-4353-1

WHERE NURSING INFANTS ARE ALLOWED TO REMAIN WITH THEIR MOTHERS, PROVISIONS ARE MADE FOR A NURSERY, STAFFED BY QUALIFIED PERSONS, WHERE THE INFANTS ARE PLACED WHEN THEY ARE NOT IN THE CARE OF THEIR MOTHERS.

FINDINGS:

Infants are not allowed to remain with their mothers.

Standard #4-4364

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

FINDINGS:

The Wrightsville Complex does not have in transit offenders in this complex.

Standard #4-4383

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

FINDINGS:

The Wrightsville does have qualified, health-trained personnel.

Standard #4391

IF VOLUNTEERS ARE USED IN THE DELIVERY OF HEALTH CARE, THERE IS A DOCUMENTED SYSTEM FOR SELECTION, TRAINING, STAFF SUPERVISION, FACILITY ORIENTATION, AND DEFINITION OF TASKS, RESPONSIBILITIES AND AUTHORITY THAT IS APPROVED BY THE HEALTH AUTHORITY. VOLUNTEERS MAY ONLY PERFORM DUTIES CONSISTENT WITH THEIR CREDENTIALS AND TRAINING. VOLUNTEERS AGREE IN WRITING TO ABIDE BY ALL FACILITY POLICIES, INCLUDING THOSE RELATING TO THE SECURITY AND CONFIDENTIALITY OF INFORMATION.

FINDINGS:

The Wrightsville Complex does not use volunteers in the delivery of health care.

Standard # 4-4392

ANY STUDENTS, INTERNS, OR RESIDENTS DELIVERING HEALTH CARE IN THE FACILITY, AS PART OF A FORMAL TRAINING PROGRAM, WORK UNDER STAFF SUPERVISION, COMMENSURATE WITH THEIR LEVEL OF TRAINING. THERE IS A WRITTEN AGREEMENT BETWEEN FACILITY AND TRAINING OR EDUCATIONAL FACILITY THAT COVERS SCOPE OF WORK, LENGTH OF AGREEMENT, AND ANY LEGAL OR LIABILITY ISSUES. STUDENTS OR INTERNS AGREE IN WRITING TO ABIDE BY ALL FACILITY POLICIES, INCLUDING THOSE RELATING TO THE SECURITY AND CONFIDENTIALITY OF INFORMATION.

FINDINGS:

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

Standard #4-4461-1

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT, CONSISTENT WITH THE LAWS AND LEGAL PRACTICES WITHIN THE JURISDICTION, RESTITUTION IS COLLECTED AND ULTIMATELY MADE AVAILABLE TO THE VICTIMS OF CRIME AND/OR THEIR SURVIVORS. WHERE SUPPORTED BY STATUTE, AND FEASIBLE, VICTIM AWARENESS CLASSES ARE OFFERED TO HELP OFFENDERS UNDERSTAND THE IMPACT OF THEIR CRIMES ON THE VICTIMS, THEIR COMMUNITIES, AND THEIR OWN FAMILIES.

FINDINGS:

The Arkansas Department of Corrections is not responsible for the collection of restitution.

This is under the auspices of the Department of Community Corrections.

Standard #4-4462

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

FINDINGS:

The Wrightsville Complex does not have any private industries operating on site.

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: Wrightsville/Hawkins Complex

Reporting Period: 9/1/2018 - 8/30/2019

Incident Type	Months	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	Total for Reporting Period
	→													
Escapes		0	0	0	0	0	0	0	0	0	0	0	0	0
Disturbances*		0	0	0	0	0	0	0	0	0	0	0	0	0
Sexual Violence		0	0	0	0	0	0	0	0	0	0	0	0	0
Homicide*	Offender Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Staff Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Other Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
Assaults	Offender/Offender	0	0	1	0	0	0	0	0	0	0	0	0	1
	Offender/Staff	0	0	0	0	0	0	1	0	0	0	0	0	1
Suicide		0	0	0	0	0	0	0	0	0	0	0	0	0
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	1	0	0	0	1	0	0	0	0	0	2

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



**Wrightsville Complex
September 2018 – September 4, 2019**

Health Care Outcomes				
Standard	Outcome Measure	Numerator/Denominator	Value	Calculated O.M.
1A	(1)	Number of offenders diagnosed with a MRSA infection within the past twelve (12) months.	0	
	divided by	The average daily population.	1278	0
	(2)	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months.	0	
	divided by	Average daily population.	1278	0
	(3)	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months.	2	
	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.	1093	.002
	(4)	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months.	3	
	divided by	Number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	5	.6
	(5)	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time.	111	
	divided by	Total offender population at that time.	1278	.09
	(6)	Number of offenders diagnosed with HIV infection at a given point in time.	13	
	divided by	Total offender population at that time.	1278	..010
	(7)	Number of offenders with HIV infection who are being treated with highly active antiretroviral treatment (HAART) at a given point in time.	12	

	divided by	Total number of offenders diagnosed with HIV infection at that time.	13	1
	(8)	Number of selected offenders with HIV infection at a given point in time who have been on antiretroviral therapy for at least six months with a viral load of less than 50 cps/ml.	7	
	divided by	Total number of treated offenders with HIV infection that were reviewed.	7	1
	(9)	Number of offenders with an active individualized services/treatment plan for a diagnosed mental disorder (excluding sole diagnosis of substance abuse) at a given point in time.	0	
	divided by	Total offender population at that time.	0	0
	(10)	Number of offender admissions to off-site hospitals in the past twelve (12) months	52	
	divided by	Average daily population.	1278	.04
	(11)	Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months.	53	
	divided by	Average daily population in the past twelve (12) months.	1278	.041
	(12)	Number of offender specialty consults completed during the past twelve (12) months	625	
	divided by	Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.	891	.70
	(13)	Number of selected hypertensive offenders at a given point in time with a B/P reading > 140 mmHg/ >90 mm Hg	5	
	divided by	Total number of offenders with hypertension who were reviewed.	40	..125
	(14)	Number of selected diabetic offenders at a given point in time who are under treatment for at least six months with a hemoglobin A1C level measuring greater than 9 percent	4	
	divided by	Total number of diabetic offenders who were reviewed.	41	.10

	(15)	The number of completed dental treatment plans within the past twelve (12) months.	1104	
	divided by	the average daily population during the reporting period.	1278	.86
2A	(1)	Number of health care <i>staff</i> with lapsed licensure or certification during a twelve (12) month period.	0	
	divided by	Number of licensed or certified staff during a twelve (12) month period.	31.	0
	(2)	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job.	18	
	divided by	Number of new health care staff during the twelve (12) month period.	18	1
	(3)	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months.	1	
	divided by	Number of employees.	49	.02
	(4)	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past twelve (12) months.	0	
	divided by	Number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.	49	0
3A	(1)	Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months.	7	
	divided by	Number of evaluated offender grievances related to health care services in the past twelve (12) months.	106	.066
	(2)	Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period.	0	
	divided by	Number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.	0	0
	(3)	Number of adjudicated offender lawsuits related to the delivery of health care found in favor of the offender in the past twelve (12) months.	0	

	divided by	Number of offender adjudicated lawsuits related to healthcare delivery in the past twelve (12) months.	3	0
4A	(1)	Number of problems identified by quality assurance program that were corrected during a twelve (12) month period.		
	divided by	Number of problems identified by quality assurance program during a twelve (12) month period.	3	
	(2)	Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.	5	.60
	(3)	Number of offender suicide attempts in the past twelve (12) months.		
	divided by	Average daily population.	3	
	(4)	Number of offender suicides in the past twelve (12) months.	1278	.002
	divided by	Average daily population.	0	
	(5)	Number of unexpected natural deaths in the past twelve (12) months.	1278	0
	divided by	Total number of deaths in the same reporting period.	1	
	(6)	Number of serious medication errors in the past twelve (12) months.	0	0
5A	None			
6A	None			
7A	None			
7B	None			
7C	None			