COMMISSION ON ACCREDITATION FOR CORRECTIONS

STANDARDS COMPLIANCE REACCREDITATION AUDIT

Arkansas Division of Correction Delta Regional Unit Dermott, AR

March 14-16 2023

VISITING COMMITTEE MEMBERS

Gregory Knowlin, Chairperson ACA Auditor

> Ronald Embry ACA Auditor

Brenda Boyd-Lyles ACA Auditor

A. Introduction

The audit of the Delta Regional Unit, Dermott, Arkansas was conducted on March 14-16, 2023, by the following team: Gregory T. Knowlin, Chairperson; Brenda Boyd-Lyles, Member; and Ronald Embry, Member.

B. Facility Demographics

Rated Capacity:	625
Actual Population:	622
Average Daily Population for the last 12 months:	610
Average Length of Stay:	2 years, 2 months, 5 days
Security/Custody	Level: 219 Maximum, 200
	Medium, 199 Minimum
Age Range of Offenders:	18-72
Gender:	Male
Full-Time Staff:	166
127 Security Staff, 21 Non-Security Staff, 5 Program Edu	cation, 13 Wellpath Contracted
Staff	

C. Facility Description

Delta Regional Unit is a minimum/medium/maximum male adult correctional facility located in Chicot County on Highway 165 South, Dermott, Arkansas, which is in the extreme southeast corner of the state. The unit is located in the Delta Region of the state 10 miles from the Mississippi River and 40 miles north of the Louisiana line. In relation to larger cities in the region, we are approximately 72 miles south of Pine Bluff, Arkansas, 113 miles south of the State Capitol, Little Rock, Arkansas, and 201 miles south of Memphis, Tennessee. The physical plant is 108,000 square feet on 97.9 acres, with a portion of the facility designated as a Regional Jail with a 4-bed capacity.

The total capacity of the correctional facility is 625. There are approximately 150 full time security staff, 28 non-security, 5 in education, and 12 contract (medical) staff employed at Delta Regional Unit.

Delta Regional Unit was established in May 1990, with a designed capacity of 400 inmates. Due to emergency housing, the population was increased to 625. New additions since the original construction of the facility have been the school building, (new office area and a covered exercise pavilion that is completely enclosed, janitorial products building located outside the perimeter fence, single-man exercise units for the maximum-security area, a records storage building and the armory building. An addition was made to the school building since our audit in 2011 that includes a computer lab, additional office space, and storage.

Inmate population on this date March 2, 2023, is 622, a total count of 618.

Inmates are housed in eight (8) open barracks, 1 - 7 barracks with a capacity of 67 inmates, consisting of two tiers (1804 sq. ft.) for the living area and a dayroom (1416 sq. ft.) immediately adjacent to the living area. One barracks, eight (8), with a capacity of 66, is designated as the handicapped barracks, providing a lift and bathroom facilities to accommodate their needs. There is also a shower area located in the laundry area providing an additional 24 shower heads. Dayrooms are equipped with two televisions, benches located in the television viewing area, two table units for writing surfaces or to play games, and complete restroom facilities. Television viewing is controlled, consisting mainly of sports and movies. Sound from the sets may be monitored by either headphone plugged into sockets in the bench area, or through Walkman radios tuned to designated frequencies.

Delta Regional Unit has ten (10) maximum-security isolation cells. Each cell is 8' x 10' and includes a stainless-steel toilet and lavatory unit. There is also a dayroom (170 square feet) in the maximum-security area that is used for out-of-cell exercise when weather does not permit outdoor exercise.

There are six (6) pods located in the East Wing that were originally designated for county jail detainees. These pods have been modified to house both ADC inmates. Inmates housed in that area are assigned to the Reentry/Think Legacy Program, PALS Program, Restrictive Housing and Protective Custody.

State Plumbing Codes require that showers, toilets and lavatories be available to inmates at 1 per 15. Listed below are the ratios for Delta Regional Unit:

622 inmates / 61 Showers = 10.19

622 Inmates / 105 Wash Basins = 5.92

622 Inmates / 140 Toilets and Urinals (17 urinals) = 4.42

The outdoor recreation area for general population covers a total area of 62,520 square feet and an enclosed gymnasium that is 5,980 square feet with both heating and cooling units. Also included in the recreation area is a softball field and volleyball area.

Delta Regional Unit consists of the following buildings:

- 1. Main compound
- 2. School
- 3. Entrance Building
- 4. Gym
- 5. Sallyport
- 6. Four (4) towers
- 7. Armory Building*
- 8. Horse barn*
- 9. ICC Garage*
- 10. Janitorial Products*

11. Records Storage*

* Buildings are located outside of the main compound fence.

It is the mission of the Delta Regional Unit to carry out the intentions of the Governor, Legislature, and the Director of the Department of Correction to create a model corrections system by complying with the intentions of the state statutes: state and federal court orders; state, federal and local fire and safety codes; Arkansas Department of Correction Administrative Regulations, Directives, and Policies.

Provide a safe, humane environment for staff and inmates, strengthen the work ethic through teaching of good habits, and provide opportunities for inmates to improve spiritually, mentally, and physically.

D. Pre-Audit Meeting

The team met on March 13, 2023, in McGhee, Arkansas, to discuss the information provided by the Association staff and the officials from Delta Regional Unit.

The chairperson divided standards into the following groups:

Standards # 5-ACI- 1A-01 to 5-ACI-2G-03 to Gregory T. Knowlin (Chairperson) Standards # 5-ACI-3A-01 to 5-ACI-5F-08 to Ronald Embry (Member) Standards # 5-ACI-6A-01 to 5-ACI-7F-08 to Brenda Boyd-Lyles (Member)

E. The Audit Process

1. Transportation

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

2. Entrance Interview

The audit team proceeded to the office of Chris Budnik, Warden. The team expressed the appreciation of the Association for the opportunity to be involved with Delta Regional Unit in the accreditation process.

The audit team discussed with the Facility Administrator the following questions. Is there anything that has happened or that is currently going on that we should know about that would jeopardize the accreditation process? Was there anyone from the public, staff, or inmates that requested to visit with the team as a result of the audit posting? Were (are) there any lawsuits during the audit cycle that had (have) an adverse judgment against the facility or its employees? Are there any notices or non-compliance with local, state, or federal laws or regulations?

The Warden answered no to all the questions asked. The audit Team advised the Warden, if anything happens during the audit we will get out of the way and will review the incident reports afterwards.

Pamela Burke, Accreditation Specialist escorted the team to the Visitation Room where the formal entry meeting was held.

The following persons were in attendance:

Deputy Director, Institutions
Chief -Deputy Director
Classification Assignment Officer
Institutional Records Supervisor
Mailroom Supervisor
Regional Manager Well-path
Medical Services Mgr. Well-path
H.S.A. Well-path
Program Coordinator -Medical Services
Think Legacy Program Specialist
Inmate Grievance Coordinator
Computer Support Technician
Construction Maintenance Coordinator
Fire Safety Sanitation Officer
Industry Administrator
School Principal
Agency Fire / Safety Coordinator
Agency ACA Manager
Maintenance Coordinator
Maintenance Coordinator
Unit ACA Specialist

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

It is through the accreditation process that you are able to maintain a balance between protecting the public and providing an environment that is safe for both staff and inmates.

The goal of the Team is to be as helpful and as non-intrusive as possible during the audit. Please do not change any of your normal facility schedules or operations. We want to be able to see you under normal conditions.

No new policy or procedures are to be created during the audit. We will hold the facility accountable to high standards.

We are the eyes and ears of the Commission and over the next $2\frac{1}{2}$ days the audit team will be reviewing your compliance levels with the ACA standards and making a recommendation to the Commission.

3. Facility Tour

The team toured the entire facility from 8:55am to 12:20pm. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Chris Budnick	Warden
Mike Mosely	Key Control
William Freeman	Chief Security Officer-Major
William Straughn	Director
Dale Reed	Deputy Director
Courtney Stults	Field Sergeant
Lynn King	Unit Training Instructor
Kimberly Lum	Field Operations Captain
Shelly Byers	Program Coordinator, Medical Services
Byron Brown	Agency Fire & Safety Coordinator

Facility notices were posted throughout the facility.

4. Conditions of Confinement/Quality of Life

During the tour, the team evaluated the conditions of confinement at the facility. The following narrative description of the relevant programmatic services and functional areas summarizes the findings regarding the quality of life.

Security:

Delta Regional Unit is enclosed by double fences. There are approximately 151 interior cameras and 48 exterior cameras. Recording for the cameras is maintained for 45 days and records for 24 hours a day and is monitored by officers working in the Main Control center. The camera system was recently purchased through Motorola, which is the Avigilon Camera System. This system has algorithms that identify normal traffic, and normal operations. The system is set up to alert staff and management depending on the options that are chosen. The unit is also equipped with panic alarms located in the school, medical, and mental health areas and a Simplex fire system.

Four towers, manned 24-hours a day, provide security in and around the compound, along with a rover vehicle operating outside the main compound 12-hours a day during the nighttime.

The rover is equipped with a 12-guage shotgun with 5 rounds of ammunition. The perimeter road is approximately .6 miles and is gravel.

Employees and visitors enter through a main entrance building manned by one security officer. Located immediately beside the entrance building is the North Tower that is manned by security 24 hours a day. All staff and visitors must pass through the metal detector as well as pat searches. A biometric identification system is in place for inmates and staff. There is also a main sally port located on the south side of the facility, and an additional sally port located at the East Wing.

DRU Armory is located next to the entrance building. The Armorer is a full-time officer. The Firing Range is located southeast of the unit. The armory has a steel re-enforced door and cinder blocked building and surrounded by fencing with razor wire, a gate, and a peep hole in the door. All weapons and equipment were clean and properly inventoried and checked monthly. Expiration dates were on all non-lethal munitions. Expired munitions are used for training or turned over to Central Armory (authorized by Warden). DRU has an Emergency Response Team with eleven (11) members assigned. There is a mini-Armory located at the base of the West tower.

The Main Control Center stores security equipment. There are 161keys, 24 handcuffs, 10 leg irons, 2 belly chains and a suicide knife. All equipment was checked daily and appropriately logged in/out. The Control room officer monitors cameras, fire alarm panels, hallways, and main gates. The officer also monitors the radio and telephones.

DRU has a full-time locksmith. The Key/Lock shop is located inside the Armory. Blank/replacement keys and key cutting machine is available. A key to lock system is used at the facility. Keyboards are in the Armory, Master Control, and East Wing Control. In use emergency keys are in the Main Control and backup emergency keys are in North Tower. There are two sets of keys for every lock in the Unit. Getting keys from the Armory can only be authorized by the Warden.

Tools are in several areas: Maintenance shops, food service, industries, medical, armory/Lock shop, ICC, and Horse Barn. Tools are categorized as either Class A or Class B. Shadow boards are used, and tool numbers are etched into every tool. Sign out/in sheets are used to keep up with who is using the tool. All flammables were observed to be stored properly, shadow boards were neat and organized, tools were signed out properly.

There are "Main Line" stations on the hallways to help improve communication between staff and inmates. This station is manned periodically daily and allows inmates the opportunity to discuss their concerns with staff without going through the chain of command. This process provides transparency, contributes positively to a safe environment and reduces grievances. Delta Regional Unit has 31 security vacancies and one non-security vacancy. During the audit ADOC is under a Statewide hiring freeze for non-security staff.

Special Management and Restrictive Housing

Delta Regional Unit operates a Restrictive Housing Unit (RHU) consisting of 12 single cell beds (ten Maximum beds and two isolation beds) and fourteen (14) single cell punitive/investigation unit. There are seven cells Special Management Unit (SMU) for Protective Custody. DRU does not participate in the Extended Restrictive Housing program. All inmates in RHU are offered yard every day for one (1) hour. Inmates assigned to Maximum security are there for Investigation, disciplinary review, pre-disciplinary, and court review. The East Wing houses inmates on RHU status, P.C., Think Legacy, PALS program, Trustees, and dormitory workers.

Inmates assigned to RHU and Maximum security have access to health care and basic personal items. Inmates were provided with appropriate clothing, bedding and linen. Inmates receive the same services provided to the general population. Documentation is maintained on activities and behavior and changes in services, including cell checks. Inmates have access to visitation, legal services/material, telephone privileges, educational services, commissary, library services, social services, religious services, and recreational services. There are 20 recreational cages available for inmates in RHU. Meals are delivered to the inmates.

Environmental Conditions:

DRU was observed to be very clean throughout the facility grounds and the interior. The lighting, airflow, and temperature controls were within the appropriate levels during the audit cycle. The facility is under central air and heat. The facility has one generator that is tested once a week on Tuesdays. The generator is also load tested monthly. Water and Sewage is under the City of Dermott.

Noise levels were very low throughout the facility. Adequate toilets and washbasins were available and meet the appropriate ratios. Water temperatures were within the required levels. Audit team members physically checked water temperatures throughout the inmate living areas.

Sanitation:

DRU maintains a housekeeping plan that the staff and inmates adhere to aggressively. The facility was very clean and orderly. There were no signs of clutter or dust buildup observed throughout the facility. Staff conduct weekly safety and sanitation inspections and document all inspections appropriately. All chemicals were controlled and appropriate SDS sheets/manuals available.

There are inmates assigned to clean the outside areas of the facility, such as sidewalks and the inner perimeter. All hallway floors were extremely clean and waxed throughout the facility. There were no signs of vermin or pests observed at the facility. DRU has a contract with Get Rid of Waste Management and All State Pest Solutions, Inc. DRU is on public water and sewage.

Fire Safety:

Delta Regional Unit has a certified Fire and Safety Officer on staff. Weekly fire safety inspections are conducted by qualified staff with monthly inspections being conducted by the Fire and Safety Officer. Annual fire and safety inspections are conducted by Arkansas State Fire Marshall. There are 106 fire extinguishers located in various areas inside and outside of the facility, with eight (8) replacements available. Eight (8) SCBA tanks are located in the Barracks area and East Wing. A Simplex Fire Alarm System has been installed that tie into the automatic sprinkler system and the smoke and heat detectors; the Food Service area has been equipped with a new Ansul Fire Suppression System in the kitchen area and staff dining area. The last Fire Marshall Inspection was conducted June 2022. Fire Marshall Inspections were conducted and reviewed for the audit cycle. The Hood Suppression System was last inspected in October 2022. There are six (6) Fire Hydrants located at the facility. The Dermott Fire Department (Volunteer) is responsible for responding to emergencies, they are approximately 1 ¹/₂ miles from the facility. There is an area away from the facility for staff to smoke.

Food Service:

The Food Service Department is under the supervision of ADC staff. The Food Service Department has a Captain who has four (4) Food Production Supervisors and 88vinmate workers assigned. Al Food Service staff are ServSafe certified. The inmate workers are assigned to three shifts: 1:30am, 9:00am, and 2:30pm. All inmates are medically cleared and receive Pre-Assignment training prior to working in the kitchen.

Three meals a day are provided that are nutritionally adequate, properly prepared and served in pleasant surroundings. Menus are provided by the Department Dietician. Therapeutic diets are prescribed by the physician or dentist. Religious diets are approved by the Chaplain. Meal serving times are as follows: Breakfast 3:00am - 4:30am, Lunch 10:00am - 11:30am, and Dinner 3:00pm - 5:00pm.

The food service area comprised of a kitchen, food preparation area, dry storage area, cooler and freezer space and a dining hall which has an inmate capacity of 85, and a blind serving line. Inmates are allowed approximately 20 minutes to eat. It was recommended by the audit team that the dining hall document when the barracks enter and exit the dining hall. The Main Control Room was logging when the barracks depart and return from chow. Temperature checks were properly documented for the refrigerator, freezer, cooler, and dry storage.

All areas of the kitchen were very clean and orderly. There were no signs of clutter or vermin. It was recommended by the audit team that items stored in dry storage should be moved from against the wall and to be consistent with logging the dates of when items were placed in the dry storage. There were a few items that did not have dates on them of when they were first stored. There is also a separate dining room for staff that is available 24 hours. Staff eat the same meals as the population. The meals are free to the staff, and they are allowed to eat more than one meal per day.

The audit team sampled the lunch meal on the second day of the audit. The meal consisted of hamburger patty with noodles, pinto beans, steamed tomatoes, roll, diet baked cinnamon apples, and choice of low-fat milk, Kool-Aid, or tea. The meal was well prepared and tasty, seasoned properly and appropriately portioned.

Medical Care:

Delta Unit houses detainees of various security levels of and ages. The facility normal average daily population (ADP) reported during the initial visit was reduced significantly due to the ongoing recovery from the COVID pandemic and other operational concerns.

The medical personnel are onsite 24 hours per day. The personnel staffing matrix is unchanged per the Clinical Director. A facility Physician on call schedule was provided for medical issues/concerned needs after hours.

Medical Services and clinical activities provided were observed by the Auditor. The health care clinic is clean with exam rooms, and trauma rooms with an exam table for emergencies. The dental services are conducted off-site. The health care staff provide these and other tasks:

- One-on-one counseling
- Patient teaching
- Discharge planning, and medication administration
- Wound management, triage, and emergency care as needed.
- Treat sprains/strains
- Eye irrigations
- Glucose testing
- Monitoring vital signs
- Venipuncture

Medical staff complete admission assessments, work-ups, and observations. Continuous assessments related to the need for special housing assignments, suicide watch, screening for sick call, continuous monitoring of high risk inmates, infection control are conducted and documented. The detainees are seen in the medical unit and segregation management unit (SMU) or others specialty units for sick call or routine complaints. Delta uses on-site and off-site specialty clinics, (via tele-health and/or specialty clinics). Specialty Services include Physical Therapy, Orthopedic, Optometry, Ophthalmology, Gastroenterology, Cardiology, Immunity and Psychiatry.

Most of the specialty care continues to be done by contracted services which are utilized for emergency purposes and treatment. Ambulance services are provided through the 911 call service and security.

Pharmacy: Medications are provided to the facility nurses for distribution.

Discharge planning for offenders is coordinated through the appropriate intake medical and behavioral health staff. Paroles and discharges are managed closely to ensure adequate follow-up care is available. The Clinical Director of Nursing addresses all informal complaints, grievances, attends required meetings and completes necessary reports monthly. Current staffing is adequate to meet the needs of the offenders housed the facility.

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

There are AEDs and numerous first aid kits throughout the facility. Medical staff respond to emergencies with an emergency bag, AED, oxygen, and supplies appropriate to care for the level of emergencies encountered. Emergency equipment is located within the facility with adequate documentation in logs. Inmates requiring emergency care are sent to a local hospital emergency room.

The nurses use published nursing protocols to address inmate health concerns and refer to the nurse practitioner or physician for inmates with health concerns out of their scope of practice. There is not a co-pay for Medical initiated sick call visits or those unscheduled inmate initiated sick call visits. Therefore, no one is denied care based on inability to pay for Chronic Care, Emergencies, Mental health or follow-up appointments. Additionally, the nurses visit the housing units and document the visits daily.

The nurses conduct sick call and the chronic care clinic Monday through Friday and refer any health concerns out of their scope of practice to the physician for follow up care. There is a list of community providers that are used for care outside of the scope of practice of the facility providers. There is an excellent relationship with the Health Department. The Health Services Unit is clean and spacious and well equipped to care for the inmates in a private and professional environment. There is a waiting area for inmates with access to water and a restroom. The clinic was very clean and well organized. All sharps and critical tools were properly secured and inventoried. Medications were secured, properly inventoried and current. All inventories were accurate.

Medication is distributed during morning and evening medication pass.

A Registered Nurse sees the inmate within fourteen days of incarceration and places a TB test and completes a physical assessment including a review of the receiving screening and new set of vital signs and dental examination as needed.

The physical assessments done by the Registered Nurse are reviewed and signed by the Physician/designee. All medical documentation is done electronically through an electronic medical record and paper pharmacy record.

Inmates access sick call by submitting a written sick call request and placing it in the secured medical box or given to officer on the units. Nurses receive and triage the sick call requests daily. Sick call is conducted five days a week with emergency sick call being available as needed for Chronic Care, Emergencies, Mental health and follow-up appointments. Additionally, the nurses visit the segregation housing unit and documents the visits daily.

There is a list of community providers that are used for care outside of the scope of practice of the facility providers. The Nurse Practitioner and physician conduct the chronic care clinic.

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

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

There is a lab contract in place for routine laboratory tests. When laboratory tests need to be done immediately, results are received via web services.

The radiology services are provided on-site and offenders completing the necessary intake screening have a chest x-ray as needed. The radiology examination is completed in digital format and sent to a radiologist for review.

There is an Infectious Disease program. TB screening and annual TB testing is

done. Sexually transmitted diseases are screened for by the health department and treated by the medical staff. The tracking of communicable illness and statistics is shared in quarterly meetings held in conjunction with the Quality Improvement Meeting.

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

Medical staff training is primarily done annually on-site. All staff receive a minimum of 40 hours of e-learning at the time of employment in addition to CPR and First Aide training. All training is repeated annually. The training includes correctional orientation specific to use of the radio, responding to emergencies etc.

A review of the Significant Incident Summary also is exceptional for the fact that there have been no grievances substantiated in the facility regarding food, medical, commissary, mail etc. during the time period reviewed during the audit cycle.

Dental

The dental area consist of one-chair that is staffed with one full-time and one parttime Dentists and two full-time Dental assistants. There is no Hygienist, but a Dentist will do cleanings. A dental screening is conducted as part of the medical intake screening with full dental exams being performed within 14 days, well within the 30-day standard requirement. The dental unit does not have any waiting list for services as all patients are seen very quickly. There is no co-pay for any dental services.

The dental unit operates from 7:00 a.m. through 5:30 p.m. The very experienced Dentist(s) perform extractions, root canals, fillings, and cleanings. Targeted and panoramic digital x-rays are completed on-site. Only the most extreme cases would be referred to an off-site oral surgeon for treatment. Due to the short-term retention of detainees, time constraints prevent initiating any dentures or partials. Detainees who arrive with dentures or partials that may need adjustment or repair may present their needs at dental sick call. Dental instruments are sterilized and packaged after each use. A review of the dental instruments and their inventory was conducted with no discrepancies. The members of the dental staff were delightful to engage with. Their small space was very clean and well organized, making use of every inch of space. Their positive demeanors reflected well on their working environment.

Mental Health:

Mental Health Services are provided on-site and Telehealth.. Initial mental health screening, mental health evaluations, individual therapy, medication follow-ups, suicide prevention, and PREA assessments are evaluated upon arrival to the facility. The offenders may be referred to outside hospital for Crisis Management or other behavioral health emergent needs.

There are Case Managers as a part of evolving inmate re-entry program. The Case Manager addresses housing, employment, linkage to medical and mental health, and substance use programs that might be available for the inmate upon his release. The goal is to begin the inmate's community re-entry plan at the time of admission to the facility and reunification with their families.

The mental health programs includes mental health individual counseling, case management services, crisis intervention, adjustment to incarceration, cognitive behavioral restructuring, sex offender screening and group sessions PREA, reentry, anger management and post trauma staff support.

Each inmate is assigned to a behavioral provider and seen as deemed necessary by the inmates psychological grade. If the inmate needs to speak with Mental Health staff between scheduled visits, an inmate request can be submitted. When mental health emergencies are declared, the inmate is seen immediately.

Recreation:

Recreation at Delta Regional Unit is under the supervision of an Activity Supervisor and two inmate workers. Inmates in the general population are allowed outdoor exercise, weather permitting. An enclosed gymnasium with a basketball court is provided, along with a volleyball and softball area. Total outdoor recreation space for the general population is 68,500 square feet. Single-man recreation units are provided for inmates in the maximum-security area. The gym has a basketball court, handball, volleyball, and pull up stations. Recreation is conducted seven days a week during three segments. Barracks 1 & 3 alternate daily between second- and third-yard call; Barracks 2 & 4 alternate daily between second- and third-yard call; Barracks 5 through 8 First yard call; and A, B, C, D, G, H Pod and Dorm First yard call. Additional yard calls are conducted during the evening hours of daylight-saving time as coordinated by the Activity Supervisor.

Special recreation events as coordinated by the Activity Supervisor can include the following: Winter season: dominos, chess, checkers, basketball, handball, and ping pong tournaments. Summer season: basketball, softball, homerun derby, horseshoes, sack races, team relay, and 50 and over tournaments.

An area is provided for Class I inmates who are eligible to make leather goods, wood products and other handmade items. Workcraft hours are from 5:00p.m. to 10:00p.m. There are 15 inmates that participate in the workcraft program.

Religious Programming:

DRU has a full time Chaplain that provides religious services for the inmate population. The Chapel is small in size and has a seating capacity of 25. Religious services are provided in the visitation room for large services. The Chaplain has a religious library. Religious materials are donated by volunteers and local religious groups. The Chaplain visits the Barracks once every week and visits the inmates on P.C. status three times a month. The Chapel has a Baptismal pool.

Religious services are conducted as follows:

Sunday Service/Chaplain Compton	7:00 a.m. – 8:00 a.m.
Tuesday Night Free World Service	7:00 p.m. – 8:30 p.m.
Thursday Service/Denominational Studies	7:00 p.m. – 8:30 p.m.
Friday/Jumu'ah Prayer	1:00 p.m. – 2:00 p.m.

Free-world volunteers from various faiths conduct most services, with special services being conducted throughout the year as requested and approved. Services include: Church of Christ, Baptist, Nondenominational, Pentecostal, Faith Fellowship, Victory Prison Ministry, Presbyterian, Church of God in Christ, African Methodist Episcapol, Baptist, Taleen Classes, Jumah Prayer, and Bikers for Jesus. The chaplaincy program hosts two revivals per year, one of which is the Bikers for Jesus Motorcycle Rodeo which is scheduled in the spring, beginning on Friday evening and ending on Sunday. A small chapel located in the main hall, however, free-world services are conducted in the visitation area with approximately 100 participants.

The PAL Program focuses on incarcerated individuals as holistic individuals who have psychological, educational, physical, and spiritual needs. The PAL Program seeks to address, through educational and group sessions, all of these elements from a faith based perspective Principals and Applications for Life (PAL) Program is being conducted by a three free-world volunteers as well as the Chaplain three half-days a week with approximately 12 participants.

Literacy is supervised by the Chaplain with approximately seven inmate tutors working one-on-one with seven inmate students.

Offender Work Programs:

Inmates assigned to Delta Regional Unit are paid \$10.00 a year by Arkansas DOC. The facility provides basic work opportunities for the majority of the inmates assigned to the facility.

The jobs include the following:

<u>Regional Maintenance</u>: An inmate work force operating in the surrounding communities and counties aiding in clearing ditches, cleaning up over-grown cemeteries, picking up trash after events and along highways, and demolishing buildings. These crews are highly praised and cherished by the local communities because of the manpower they provide. The inmates benefit from the exercise and the meals that are provided to the crew when they work.

<u>Utility/Landscape</u>: An inmate work force operating in and around the compound to maintain grounds, pick up litter, maintain ditches, and provide an opportunity for the inmates to get out of the building and benefit the unit while getting some exercise.

<u>Vegetable Garden</u>: An inmate work force prepares the garden by tilling soil, planting vegetable seeds, weeding the garden and finally harvesting the produce for consumption of our unit inmates.

<u>Maintenance</u>: An inmate work force operating in and around the compound to provide upkeep and repair of the unit's physical plant and surrounding buildings, supervised by two maintenance employees and one security officer. Inmates assigned to Maintenance normally have some mechanical, electrical or construction skills.

<u>Horse Barn</u>: An inmate work crew that maintains the Field Officers' horses and tack. Work consists of shoeing horses to stack hay/feed in the barn and cleaning the stalls.

<u>ICC Garage</u>: Consist of one Correctional Officer and experienced inmate in the maintenance of vehicles and equipment. These people are vital in keeping the unit's equipment from lawn mowers to trucks maintained and operable.

<u>Domestic</u>: An inmate work force operating the unit compound in performing various skilled services for the unit and on-post housing facilities assigned to unit administrators.

<u>Food Service</u>: The food service work crews range from cooks to bottle washers, providing a quality meal in a clean environment. Cooking for over 600 inmates each meal gives the inmates working in the area a valuable trade that can be transferred to a free-world job.

<u>Laundry</u>: Delta Regional Unit utilizes a central laundry facility. Jobs in the laundry go from the sorting of clothes to washing, to pressing, to sewing torn garments. The unit's clothes are dispensed from the area. Inventory control and issuance for over 625 inmates is a large task for the inmates to learn and do. There are currently twenty (20) inmates assigned in this area.

Laundry is picked up, laundered, and returned to the barracks daily. Linens are laundered weekly. An officer always supervises the laundry.

<u>Inside Utility</u>: An inmate work force operating within the unit in performing various custodial services for the unit (majority of inmates assigned to this classification have some medical disabilities).

<u>All Porters</u>: Inmate work force operating within the unit performing various custodial/janitorial services for the unit.

<u>Librarian</u>: A work force operating within the unit in performing various library operations, book inventories and assistance to inmates wishing both recreational and legal literature.

<u>Barbers</u>: While some inmates come into the Department with these skills, some are trained at the Vo-Tech and come back to hone their abilities.

<u>Industrial Janitorial Supply</u>: An inmate work force that manufactures cleaning supplies providing inmates with the opportunity of on-the-job training in a manufacturing environment which provides them with a certificate of their learned skills. Products manufactured are provided for all State of Arkansas institutions, as well as other agencies. There are currently ten (10) inmates assigned to Janitorial Supply. Janitorial Supply, as well as all the industry programs included in Arkansas Correctional Industries, was accredited by the American Correctional Associate August 6, 2022.

Delta Regional Unit operates with four 12-hour shifts from 6:00 a.m. to 6:00 p.m., and 6:00 p.m. to 6:00 a.m.; each shift working two days on and three offs, three on and two off, allowing a three-day weekend every other week. Special assignment officers work five eight-hour days a week, i.e., Laundry, Fire & Safety, Key/Weapons Control, Field/Utility, etc.

Academic and Vocational Education:

Delta Regional Unit education program is accredited by the Correctional Education Association for the audit cycle. The school is staffed with a principal and three full-time certified teachers. There are four classrooms, a resource room, and a computer lab, additional office space and storage. The classrooms were equipped with smart boards. The school utilizes the Wide Range Achievement Test (WRAT). Inmates with a GED are automatically enrolled in educational programming and students with special needs are individually assisted by instructors. The school offers a GED program, that had 19 GED's for 2022 school year. The principal is the GED site Coordinator for the facility. The school does not offer any vocation courses.

The school offers correspondence college courses offered though Shorter College and Arkansas State University. Students who wish to take the correspondence courses are allowed to do so with the approval of the Warden at their expense. Students can also apply for a Second Chance Grant in order to fund their course work.

Social Services:

Delta Regional Unit has a PAL Program that focuses on incarcerated individuals as holistic individuals who have psychological, educational, physical, and spiritual needs. In addition, there is the "Think Legacy" Program to help reduce recidivism by promoting social skills development, job readiness skills, and awareness of community resources, and connection to free world mentors for a successful and permanent reentry into the community.

DRU also has a Think Legacy Program that helps reduce recidivism by promoting social skills development, job readiness skills and awareness of community resources, and connection to the free world mentors that will aid participants in achieving successful and permanent reentry to communities across the state of Arkansas.

Social services include guidance and counseling services, and comprised of Mental Health Professional to provide individual psychotherapy, case management, developing individualized service plans, psychological evaluations, substance abuse, alcoholics anonymous discharge planning and reentry classes that are character and faith based.

Delta Regional Unit is part of the Securus Secure View Tablet Program, which is a low-cost monthly subscription service that gives friends and family members the opportunity to lease a tablet device for their loved one. Inmates can use the tablet to listen to music, read books, play games, and even search for a job. They can also utilize the tablet to place phone calls.

Visitation:

Currently under COVID restriction guidelines. Contact visitation for the general population is Saturday and Sunday from 12:00 noon until 4:00 p.m. Class I inmates may visit every Saturday or Sunday and Class II through IV inmates may visit every other Saturday or Sunday. Inmates on punitive status are permitted no-contact visitation for two (2) hours once a month (calendar). Protective Custody visitation is held from 7:30 a.m. to 11:30 a.m. Four visitors are allowed during any one visit, including children. Children 12 years of age or younger may be allowed to visit only when accompanied by an adult. There is an area in the visitation room that provides refreshments and snacks. Special visits may be approved in advance for those traveling from out of the local area.

Non-contact visits are available for those inmates in the RHU. There are nine non-contact visitation rooms.

Inmates are strip-searched before and after visits to prevent contraband from entering and exiting visitation. Inmates receive a different set of clothing before visiting.

Library Services:

Delta Regional Unit does not have a Librarian assigned to the facility. There is a Central Office Librarian that visits the facility when needed and provides support for the facility and population. The library has two inmate workers assigned that are trained and receive certificates in order to work in the library. The library has approximately 7,900 library books, 15 magazines, and one newspaper. There is also one computer for the library. The library utilizes an Inter library Loan System.

Inmates may come to the library during assigned days. Barracks 1-4 on Monday, Wednesday, and Friday from 7:30am-9:30am, 12:30pm-2:30pm, 7:30pm-9:30pm, and Sunday from 7:00am-9:30am. East Wing and Barracks 5-8 Tuesday-Thursday from 7:30am-9:30am, 12:30pm-2:30pm, 7:30pm-9:30pm, and Saturday from 7:00am-9:30am. Protective Custody Tuesday and Thursday after 8:00pm count. Requests are to be turned in by Friday. Inmates in general population can check out books for 14 days and two books at a time. Inmates can donate their books to the library. Inmates housed in Maximum security can submit a Request for Interview for books to be checked out. The library clerks will pull the books requested and deliver them to the Maximum-security inmates.

The Law Library has two inmate law clerks assigned that are trained and certified. The Law library utilizes the West Law program and also has law books for all Arkansas and Federal rulings. There are three computers for the law library. Inmates are able to check out one (1) legal book that the Law library has more than one copy of and take it back to the barracks, but the book must be returned in three (3) days.

Laundry:

Delta Regional Unit has a centralized laundry that has three (3) large dryers with 70-pound load capacity, one (1) small dryer, three (3) large washers, and four (4) steam pressers. The pressers are for inmates that are assigned to certain jobs that want their work uniforms pressed. Laundry is picked up and laundered and returned to the barracks daily. Linens are laundered weekly. The laundry services are supervised by a Sergeant and approximately ten to 12 inmate workers. Inmates wanting to replace clothing and/or have repairs done to clothing must submit a "Request for Interview" The laundry utilizes powdered chemical.

The chemicals were properly inventoried as required. SDS manual was on hand for staff and inmates. The laundry storeroom was very clean and organized and stocked accordingly. The laundry also has a sewing machine with needles. The needles were inventoried and stored appropriately.

It was observed by the audit team that one of the lint traps for the dryer had not been cleaned in a while. It was recommended that the lint traps be cleaned every day at the close of business.

F. Examination of Records

Following the facility tour, the team proceeded to the Warden's Conference Room to review the accreditation electronic files and evaluate compliance levels of the policies and procedures. The facility has zero notices of non-compliance with local, state, or federal laws or regulations.

1. Litigation

Over the last three years, the facility has had zero consent decrees, class action lawsuits or adverse judgments.

2. Significant Incidents/Outcome Measures

Based on the audit team's professional judgment and experience and what the audit team observed at the facility, the numbers reflected in the Significant Incident Summary were consistent with the overall mission and security level of the facility. The Health Outcome Measures were reviewed and discussed in medical section of the VCR.

3. Departmental Visits

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

Department Visited	Person(s) Contacted
Recreation	Keitrich Wade, Activity Supervisor
Chapel	John Compton, Chaplain
Library	Derrick Jones, Captain
Count Room	Andre Williams, Captain
Training	Lynn King, Training Supervisor
Administration	Chris Budnik, Warden
North Tower	Brionna Slater, Corporal
South Tower	Angela Woods, Corporal
Maintenance	Tarrell Jones, Maintenance Supervisor
Armory	Tommy Blevins, Sergeant

	Mike Mosely, Lieutenant
Disciplinary	Serena McCoy, Corporal
RHU	Chuck Webb, Corporal
	Gregory Miller, Sergeant
Kitchen	Martha Block, FPM Captain
STG	Kevin McFadden, Sergeant
Human Resource	Sondra Milholland, Human Resource Manager
Mailroom	Vertis Sykes, Mailroom Manager
Medical	Kimberly Snow, Health Service Administrator
	Mary Carter, Regional Director
Horse Barn	Kimberly Lum, Field Captain
	Clint Stanley, Lieutenant
	Keedren King, Sergeant
ICC Garage	Kenneth McMickle, Sergeant
-	

- 4. Shifts
 - a. Day Shift (6:00am 6:00pm)

The team was present at the facility during the day shift from 8:00am to 6:30pm. The audit team met with the Warden and his leadership staff. The audit team toured the facility and interviewed staff and inmates. Staff were observed performing their duties. Inmates were observed performing their duties and participating in programs. The audit team observed shift briefing of the evening shift. The audit team introduced themselves and advised the shift of the audit process. The audit team reviewed the standards for compliance levels.

b. Evening Shift (6:00pm - 6:00am)

The team was present at the facility during the evening shift from 6:45am to 7:00pm. The audit team observed shift changes between the evening shift and the day shift. The audit team observed the inmate population eating the lunch meal in the dining hall. The Warden was observed participating in the Main Line during the lunch meal. The audit team visited the areas of the facility that were outside of the perimeter fence. Inmate workers assigned to the outside perimeter were observed performing their duties at the Horse Barn and ICC garage.

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

The team reviewed the status of standards previously found non-compliant, for which a waiver was not granted, and found the following: There were no standards found non-compliant.

G. Interviews

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

1. Offender Interviews

The audit team interviewed approximately 95 inmates throughout the facility. Inmates generally stated that they felt safe at the facility. Inmates felt staff were approachable and attended to their overall needs. There were a few inmates who had some concerns about their dental needs. The healthcare auditor addressed the concerns with the Dentist. Inmates appeared to have a good rapport with staff. There did not appear to be any tension at the facility.

2. Staff Interviews

The audit team interviewed approximately 75 staff members. Staff stated they felt very safe. Staff appeared to enjoy working together and providing the required services to the inmate population. Staff at DRU were tenured employees that worked as a team. The Warden and his executive staff appeared very approachable to staff and inmates. Staff were very approachable and did not mind talking with the auditors. Staff were very knowledgeable of the policy and procedures of the facility and agency. Staff felt they received the necessary training to perform their duties.

H. Exit Discussion

The exit interview was held at 11:00a.m. in the Visitation room with Chris Budnick, Warden and 62 staff in attendance.

The following persons were also in attendance:

Shelly Lawrence	Agency Accreditation Manager
Richard Cooper	Assistant Director-Construction
Ronald Martin	Construction Maintenance Coordinator
Dean Shields	Construction Maintenance Coordinator
Kelly Beatty	Unit Accreditation Specialist-Varner Unit
Mary Allen	Unit Accreditation Specialist-Cummins Unit
Dale Reed	Chief Deputy Director
William Straughn	Deputy Director Institutions
Eddie Powell	Industry Administrator
Kim Rosenthal	Wellpath-Regional Manager
Michell Griswold-Davis	Wellpath Health Service Provider
Melissa Moore	Medical Administrator-Central Office
Mary Carter	Wellpath-Medical Service-Central Office

Donald Compton	Rehab Program Manager (Mental Health)	Varner
	Unit	
Manda Bass	Communications/Social Media	
Byron Brown	Agency Fire/Safety Coordinator	

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

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

AMERICAN CORRECTIONAL ASSOCIATION

AND THE

COMMISSION ON ACCREDITATION FOR CORRECTIONS

COMPLIANCE TALLY

Manual Type	Adult Correctional Institutions, 5 th Edition	
Supplement	Not Applicable	
Facility/Program	Delta Regional Unit	
Audit Dates	March 14-16, 2023	
Auditor(s)	Gregory T. Knowlin, Chairperson Ronald Embry Brenda Boyd-Lyles	
	MANDATORY	NON-MANDATORY
Number of Standards in Manual	64	509
Number Not Applicable	5	54
Number Applicable	59	455
Number Non-Compliance	0	1
Number in Compliance	59	454
Percentage (%) of Compliance	100%	99.7%

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

- Number Applicable *minus* Number Non-Compliance *equals* Number Compliance
- Number Compliance *divided by* Number Applicable *equals* Percentage of Compliance

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Correction Delta Regional Unit Dermott, Arkansas

March 14-16, 2023

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

Standard#5-ACI-1C-05

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

FINDINGS:

DRU did not meet the 10% vacancy rate for any 18-month period for the vacancy rate. DRU vacancy rate for an 18-month period was 11.67%.

AGENCY RESPONSE:

Plan of Action

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

<u>Task</u>

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

Responsible Agency

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

Assigned Staff

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

Anticipated Completion Date

a. ACA Audit 2026 or sooner

b.

С.

AUDITOR'S RESPONSE:

The audit team supports the Agency's Plan of Action for the vacancy rate.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Correction Delta Regional Unit Dermott, Arkansas

March 14-16, 2023

Visiting Committee Findings

Mandatory Standards

Not Applicable

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

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

FINDINGS:

Youthful Offenders are not confined at the Delta Regional Unit.

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

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

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

FINDINGS:

Delta Regional Unit does not house female offenders.

Standard#5-ACI-6A-25 (MANDATORY)

A COMPREHENSIVE HEALTH APPRAISAL FOR EACH OFFENDER, EXCLUDING INTRASYSTEM 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. HEALTH APPRAISALS INCLUDES THE FOLLOWING:

WITHIN 14 DAYS AFTER ARRIVAL AT THE FACILITY:

- REVIEW OF THE EARLIER RECEIVING SCREEN
- COLLECTION OF ADDITIONAL DATA TO COMPLETE THE MEDICAL, DENTAL, MENTAL HEALTH, AND IMMUNIZATION HISTORIES
- LABORATORY OR DIAGNOSTIC TESTS TO DETECT COMMUNICABLE DISEASE, INCLUDING SEXUALLY TRANSMITTED DISEASES AND TUBERCULOSIS
- RECORD OF HEIGHT, WEIGHT, PULSE, BLOOD PRESSURE, AND TEMPERATURE
- OTHER TESTS AND EXAMINATIONS AS APPROPRIATE

WITHIN 14 DAYS AFTER ARRIVAL FOR INMATES WITH IDENTIFIED SIGNIFICANT HEALTH CARE PROBLEMS:

- MEDICAL EXAMINATION, INCLUDING REVIEW OF MENTAL AND DENTAL STATUS (FOR THOSE INMATES WITH SIGNIFICANT HEALTH PROBLEMS DISCOVERED ON EARLIER SCREENING SUCH AS CARDIAC PROBLEMS, DIABETES, COMMUNICABLE DISEASES, AND SO FORTH)
- REVIEW OF THE RESULTS OF THE MEDICAL EXAMINATION, TESTS, AND IDENTIFICATION OF PROBLEMS BY A HEALTH CARE PRACTITIONER OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, IF SUCH IS AUTHORIZED IN THE MEDICAL PRACTICE ACT
- INITIATION OF THERAPY, WHEN APPROPRIATE
- DEVELOPMENT AND IMPLEMENTATION OF A TREATMENT PLAN, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION

WITHIN 30 DAYS AFTER ARRIVAL FOR INMATES WITHOUT SIGNIFICANT HEALTH CARE PROBLEMS:

- MEDICAL EXAMINATION, INCLUDING REVIEW OF MENTAL AND DENTAL STATUS (FOR THOSE INMATES WITHOUT SIGNIFICANT HEALTH CARE CONCERNS IDENTIFIED DURING EARLIER SCREENING-NO IDENTIFIED ACUTE OR CHRONIC DISEASE, NO IDENTIFIED COMMUNICABLE DISEASES, AND SO FORTH)
- REVIEW OF THE RESULTS OF THE MEDICAL EXAMINATION, TESTS, AND IDENTIFICATION OF PROBLEMS BY A HEALTH CARE PRACTITIONER OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, IF SUCH IS AUTHORIZED IN THE MEDICAL PRACTICE ACT
- INITIATION OF THERAPY, WHEN APPROPRIATE
- DEVELOPMENT AND IMPLEMENTATION OF A TREATMENT PLAN, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION

FINDINGS:

Delta Regional Unit is not an Intake Facility.

Standard#5-ACI-6A-32 (MANDATORY) Revised August 2019

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

- REVIEW OF AVAILABLE HISTORICAL RECORDS OF INPATIENT AND OUTPATIENT PSYCHIATRIC TREATMENT
- REVIEW OF HISTORY OF TREATMENT WITH PSYCHOTROPIC MEDICATION
- REVIEW OF HISTORY OF PSYCHOTHERAPY, PSYCHO-EDUCATIONAL GROUPS AND CLASSES OR SUPPORT GROUPS
- REVIEW OF HISTORY OF SUBSTANCE USE AND TREATMENT
- REVIEW OF EDUCATIONAL AND SPECIAL EDUCATION HISTORY
- REVIEW OF HISTORY OF SEXUAL OR PHYSICAL ABUSE-
- VICTIMIZATION AND PREDATORY BEHAVIOR AND/OR SEXUAL OFFENSES
- REVIEW OF HISTORY OF SUICIDAL OR VIOLENT BEHAVIOR
- REVIEW OF HISTORY OF CEREBRAL TRAUMA OR SEIZURES
- ASSESSMENT OF CURRENT MENTAL STATUS, SYMPTOMS, CONDITION, AND RESPONSE TO INCARCERATION
- ASSESSMENT OF CURRENT SUICIDAL POTENTIAL AND PERSON-

SPECIFIC CIRCUMSTANCES THAT INCREASE SUICIDE POTENTIAL

- ASSESSMENT OF VIOLENCE POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT INCREASE VIOLENCE POTENTIAL
- ASSESSMENT OF DRUG AND ALCOHOL USE AND/OR ADDICTION
- USE OF ADDITIONAL ASSESSMENT TOOLS, AS INDICATED
- REFERRAL TO TREATMENT, AS INDICATED
- DEVELOPMENT AND IMPLEMENTATION OF A TREATMENT PLAN, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION

FINDINGS:

Delta Regional Unit is an Intake unit only.

Standard#5-ACI-6C-09 (MANDATORY)

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:

Delta Regional Unit does not participate in any experimental practices.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Correction Delta Regional Unit Dermott, Arkansas

March 14-16, 2023

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

Standard#5-ACI-1B-24

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

FINDINGS:

Not applicable per ACT 1262 of 1997, the ADC is not responsible. Restitution is addressed in Arkansas Code Annotated 5-4-205, ACT 817-1997, Arkansas Crime Victims Repartitions Act.

Standard#5-ACI-1C-12

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

FINDINGS:

ADC employees are not covered by Merit systems, Civil service regulations or union Contract.

Standard#5-ACI-2B-01

(RENOVATION, NEW CONSTRUCTION ONLY AFTER JANUARY 1, 1990). THE PHYSICAL PLANT DESIGN FACILITATES PERSONAL CONTACT AND INTERACTION BETWEEN STAFF AND INMATES.

FINDINGS:

DRU was not constructed after January 1, 1990.

Standard#5-ACI-2B-04

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

FINDINGS:

Delta Regional Unit is not new construction.

Standard#5-ACI-2C-06

(NEW CONSTRUCTION AFTER JUNE 2014). INMATES HAVE ACCESS TO TOILETS AND HAND-WASHING FACILITIES 24-HOURS PER DAY AND ARE ABLE TO USE TOILET FACILITIES WITHOUT STAFF ASSISTANCE WHEN THEY ARE CONFINED IN THEIR CELLS/SLEEPING AREAS.

TOILETS ARE PROVIDED AT A MINIMUM RATIO OF 1 FOR EVERY 12 INMATES IN MALE FACILITIES AND 1 FOR EVERY 8 INMATES IN FEMALE FACILITIES. URINALS MAY BE SUBSTITUTED FOR UP TO ONE-HALF OF THE TOILETS IN MALE FACILITIES. ALL HOUSING UNITS WITH THREE OR MORE INMATES HAVE A MINIMUM OF TWO TOILETS. THESE RATIOS APPLY UNLESS ANY APPLICABLE BUILDING OR HEALTH CODES REQUIRE ADDITIONAL FIXTURES.

FINDINGS:

Delta Regional Unit was established in 1990.

Standard#5-ACI-2C-08

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

FINDINGS:

Delta Regional Unit has had no new construction after June 2014.

Standard#5-ACI-2C-10

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

FINDINGS:

Delta Regional Unit was newly built in 1990. There has been no new construction built after 2014.

Standard#5-ACI-2C-12

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

FINDINGS:

DRU is not designated to house inmates who cannot perform basic life functions.

Standard#5-ACI-2C-13

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE EDUCATION, EQUIPMENT AND FACILITIES, AND THE SUPPORT NECESSARY FOR INMATES WITH DISABILITIES TO PERFORM SELF-CARE AND PERSONAL HYGIENE IN A REASONABLY PRIVATE ENVIRONMENT.

FINDINGS:

DRU does not house inmates whose disabilities are such that a private environment is required to perform self-care and personal hygiene.

Standard#5-ACI-2D-04

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

FINDINGS:

DRU has had no renovation, addition or new construction in the inmate living areas.

Standard#5-ACI-2D-05

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

FINDINGS:

DRU is not new construction. DRU was built in 1990.

Standard#5-ACI-2D-06

(NEW CONSTRUCTION ONLY AFTER JANUARY 1, 1990). EACH DAYROOM PROVIDES INMATES WITH ACCESS TO NATURAL LIGHT BY MEANS OF AT LEAST 12 SQUARE FEET OF TRANSPARENT GLAZING IN THE DAYROOM, PLUS TWO ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER INMATE WHOSE ROOM/CELL IS DEPENDENT ON ACCESS TO NATURAL LIGHT THROUGH THE DAYROOM.

FINDINGS:

DRU is not new construction. DRU was built prior to 1990.

Standard#5-ACI-2D-08

(RENOVATION, NEW CONSTRUCTION ONLY AFTER JANUARY 1, 1990). CIRCULATION IS AT LEAST 15 CUBIC FEET OF OUTSIDE OR RECIRCULATED FILTERED AIR PER MINUTE PER OCCUPANT FOR CELLS/ROOMS, OFFICER STATIONS, AND DINING AREAS, AS DOCUMENTED BY A QUALIFIED TECHNICIAN AND SHOULD BE CHECKED NOT LESS THAN ONCE EVERY 3-YEAR ACCREDITATION CYCLE.

FINDINGS:

DRU is not a new construction. DRU was built in 1990.

Standard#5-ACI-3A-07

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

FINDINGS:

DRU does not house female inmates.

Standard#5-ACI-3A-17

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

FINDINGS:

DRU does not house female offenders.

Standard#5-ACI-3A-43

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

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

FINDINGS:

DRU does not have a canine unit.

Standard#5-ACI-3A-44

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

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

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

FINDINGS:

DRU does not have a canine unit.

Standard#5-ACI-3A-45

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

FINDINGS:

DRU does not have a canine unit.

Standard#5-ACI-3D-05

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

DRU is a male only facility.

Standard#5-ACI-4B-27 NEW August 2018

(*EFFECTIVE NLT OCTOBER 1, 2020*) WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT NEW INMATES ASSIGNED DIRECTLY TO RESTRICTIVE HOUSING RECEIVE WRITTEN ORIENTATION MATERIALS AND/OR TRANSLATIONS IN THEIR OWN LANGUAGE. 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:

Inmates assigned to RHU during Intake are not housed at DRU.

Standard#5-ACI-4B-31 NEW August 2018

(*EFFECTIVE NLT OCTOBER 1, 2020*) WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE THAT STEP DOWN PROGRAMS ARE OFFERED TO EXTENDED RESTRICTIVE HOUSING INMATES TO FACILITATE THE REINTEGRATION OF THE INMATE INTO GENERAL POPULATION OR THE COMMUNITY. THESE PROGRAMS SHALL INCLUDE, AT A MINIMUM, THE FOLLOWING:

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

*SEE DEFINITION FOR MULTIDISCIPLINARY SERVICES TEAM AND MULTIDISCIPLINARY TREATMENT TEAMS

**DEFINITION OF STEP-DOWN PROGRAM: A PROGRAM THAT INCLUDES A SYSTEM OF REVIEW AND ESTABLISHES CRITERIA TO

PREPARE AN INMATE FOR TRANSITION TO GENERAL POPULATION OR THE COMMUNITY. INDIVIDUALIZED PROGRAMS INVOLVE A COORDINATED, MULTIDISCIPLINARY TEAM APPROACH THAT INCLUDES MENTAL HEALTH, CASE MANAGEMENT, AND SECURITY PRACTITIONERS. MEDICAL PERSONNEL WILL BE PART OF THE MULTIDISCIPLINARY TEAM WHEN INMATES WHO HAVE CHRONIC CARE OR OTHER SIGNIFICANT MEDICAL ACCOMMODATION NEEDS PARTICIPATE IN THIS PROGRAM.

FINDINGS:

DRU does not have a step-down Program.

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

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

FINDINGS:

DRU does not house female inmates.

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

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

FINDINGS:

DRU does not house youthful offenders.

Standard#5-ACI-5A-01

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

- DETERMINING THAT THE INMATE IS LEGALLY COMMITTED TO THE INSTITUTION
- THOROUGH SEARCHING OF THE INDIVIDUAL AND POSSESSIONS
- DISPOSING OF PERSONAL PROPERTY
- SHOWERING AND HAIR CARE, IF NECESSARY
- ISSUING OF CLEAN, LAUNDERED CLOTHING AS NEEDED

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

DRU is not a reception center for new admissions.

Standard#5-ACI-5A-02

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

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

FINDINGS:

DRU is not a reception center for new admissions.

Standard#5-ACI-5A-03

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:

DRU is not a reception center for new admissions.

Standard#5-ACI-5B-13

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

- A VIOLENT, PREDATORY YOUTHFUL OFFENDER POSES AN UNDUE RISK OF HARM TO OTHERS WITHIN THE SPECIALIZED UNIT; AND/OR
- A QUALIFIED MEDICAL OR MENTAL-HEALTH 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:

DRU does not house youthful offenders.

Standard#5-ACI-5B-14

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR THE DIRECT SUPERVISION OF YOUTHFUL OFFENDERS HOUSED IN THE SPECIALIZED UNIT TO ENSURE SAFETY AND SECURITY. FINDINGS: DRU does not house youthful offenders.

Standard#5-ACI-5B-15

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

FINDINGS:

DRU does not house youthful offenders.

Standard#5-ACI-5B-16

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

FINDINGS:

DRU does not house youthful offenders.

Standard#5-ACI-5B-17

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

FINDINGS:

DRU does not house youthful offenders.

Standard#5-ACI-5B-18

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

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

FINDINGS:

DRU does not house youthful offenders.

Standard#5-ACI-5E-10

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

FINDINGS:

DRU does not house female offenders.

Standard#5-ACI-5E-11

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

FINDINGS:

DRU does not provide an SATP program.

Standard#5-ACI-5E-12

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

FINDINGS:

DRU does not provide the SATP program.

Standard#5-ACI-5E-13

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

- INMATE DIAGNOSIS
- IDENTIFIED PROBLEM AREAS
- INDIVIDUAL TREATMENT OBJECTIVES
- TREATMENT GOALS
- COUNSELING NEEDS
- DRUG EDUCATION PLAN
- RELAPSE PREVENTION AND MANAGEMENT
- CULTURALLY SENSITIVE TREATMENT OBJECTIVES, AS APPROPRIATE
- THE PROVISION OF SELF-HELP GROUPS AS AN ADJUNCT TO TREATMENT
- PRERELEASE AND TRANSITIONAL SERVICE NEEDS

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

FINDINGS:

DRU doe does not provide SATP program.

Standard#5-ACI-5E-14

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

FINDINGS:

DRU does not have SATP Programs.

Standard#5-ACI-5E-15

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

FINDINGS:

DRU does not have a Therapeutic Community/SATP programs.

Standard#5-ACI-5F-07

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

- SPECIFIC SERVICES AVAILABLE TO CRIME VICTIMS
- CHANGES IN LAWS IMPACTING VICTIMS
- WAY(S) OF GAINING ACCESS TO THE SERVICES
- CONFIDENTIALITY OF VICTIM INFORMATION
- WAY(S) FOR VICTIMS TO COMMUNICATE COMPLAINTS AND OTHER CONCERNS

• PROGRAM-EVALUATION MEASURES, WHICH INCLUDE VICTIM INPUT REGARDING THE EFFECTIVENESS OF SERVICES AN WAYS FOR THEM TO MAKE SUGGESTIONS REGARDING AGENCY POLICIES AND PRACTICES INTENDED TO ASSIST CRIME VICTIMS

FINDINGS:

The Arkansas Crime Victims Reparations Program coordinates victim's programs.

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

(*EFFECTIVE NLT OCTOBER 1, 2020*) WHERE A FACILITATED VICTIM OFFENDER DIALOGUE PROGRAM EXISTS, WRITTEN POLICY, PROCEDURE AND PRACTICE PROVIDE THAT THERE IS A PROGRAM INITIATED AND REQUESTED ONLY BY A VICTIM OR VICTIM/SURVIVOR THAT PROVIDES AN OPPORTUNITY FOR SUCH VICTIMS OR SURVIVORS TO MEET FACE-TO-FACE OR BY OTHER MEANS WITH THE INMATE RESPONSIBLE FOR THEIR VICTIMIZATION IN A SAFE, SECURE, AND CONFIDENTIAL SETTING AFTER THOROUGH PREPARATION WITH, AND WITH THE ASSISTANCE OF A PROPERLY TRAINED FACILITATOR.

FINDINGS:

The Arkansas Crime Victims Reparations Program coordinates victim's programs.

Standard#5-ACI-6A-09

OFFENDERS ARE PROVIDED ACCESS TO INFIRMARY CARE EITHER WITHIN THE CORRECTIONAL SETTING OR OFF SITE. IF INFIRMARY CARE IS PROVIDED ONSITE, IT INCLUDES, AT A MINIMUM, THE FOLLOWING:

- DEFINITION OF THE SCOPE OF INFIRMARY CARE SERVICES AVAILABLE
- A PHYSICIAN ON CALL OR AVAILABLE 24 HOURS PER DAY
- HEALTH CARE PERSONNEL WITH ACCESS TO A PHYSICIAN OR A REGISTERED NURSE AND ARE ON DUTY 24 HOURS PER DAY WHEN PATIENTS ARE PRESENT
- ALL OFFENDERS/PATIENTS ARE WITHIN SIGHT OR SOUND OF A STAFF MEMBER
- AN INFIRMARY CARE MANUAL THAT INCLUDES NURSING CARE PROCEDURES
- COMPLIANCE WITH APPLICABLE STATE STATUTES AND LOCAL LICENSING REQUIREMENTS

DRU does not have an infirmary.

Standard#5-ACI-6A-11

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

FINDINGS:

DRU does not house female offenders.

Standard#5-ACI-6A-19 Revised January 2020

ROUTINE AND EMERGENCY DENTAL CARE IS PROVIDED TO EACH OFFENDER UNDER THE DIRECTION AND SUPERVISION OF A LICENSED DENTIST. THERE IS A DEFINED SCOPE OF AVAILABLE DENTAL SERVICES, INCLUDING EMERGENCY DENTAL CARE, WHICH INCLUDES THE FOLLOWING:

- A DENTAL SCREENING (EXCLUDING INTRA-SYSTEM TRANSFERS) UPON ADMISSION BY A QUALIFIED HEALTH CARE PROFESSIONAL OR HEALTH TRAINED PERSONNEL
- A FULL DENTAL EXAMINATION (EXCLUDING INTRA-SYSTEM TRANSFERS) BY A DENTIST WITHIN 30 DAYS
- ORAL HYGIENE, ORAL DISEASE EDUCATION, AND SELF-CARE INSTRUCTION ARE PROVIDED BY A QUALIFIED HEALTH CARE PROVIDER WITHIN 30 DAYS
- A DEFINED DENTAL TOOTH AND HYGIENE CHARTING SYSTEM THAT IDENTIFIES THE ORAL HEALTH CONDITION AND SPECIFIES THE PRIORITIES FOR TREATMENT BY CATEGORY IS COMPLETED
- CONSULTATION AND REFERRAL TO DENTAL SPECIALISTS, INCLUDING ORAL SURGERY IS PROVIDED, WHEN NECESSARY

FINDINGS:

DRU is not an Intake Facility.

Standard#5-ACI-6A-24

ALL IN-TRANSIT OFFENDERS RECEIVE A HEALTH SCREENING BY HEALTH-TRAINED OR QUALIFIED HEALTH CARE PERSONNEL ON ENTRY INTO THE AGENCY SYSTEM. FINDINGS ARE RECORDED ON A SCREENING FORM THAT WILL ACCOMPANY THE OFFENDER TO ALL SUBSEQUENT FACILITIES UNTIL THE OFFENDER REACHES HIS 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:

DRU is not an Intake Facility.

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

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

FINDINGS:

The Arkansas Department of Correction does not have an in-patient psychiatric unit; therefore, there is no documentation to provide for this standard.

Standard#5-ACI-6A-42

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

• A STANDARDIZED NEEDS ASSESSMENT ADMINISTERED TO DETERMINE THE LEVEL OF SUBSTANCE USE TREATMENT NEEDS AND CRIMINOGENIC RISKS/NEEDS

- AN INDIVIDUALIZED TREATMENT PLAN DEVELOPED AND IMPLEMENTED BY A CLINICIAN OR MULTIDISCIPLINARY TEAM WITH APPROPRIATE TRAINING, AND CERTIFICATION OR LICENSURE (WHERE REQUIRED BY STATUTE), IN SUBSTANCE USE DISORDERS TREATMENT
- PRE-RELEASE EDUCATION RELATED TO THE RISK OF RETURN TO SUBSTANCE USE
- PROGRAM PARTICIPANT INVOLVEMENT IN AFTERCARE
 DISCHARGE PLANS

DRU does not offer a drug treatment program.

Standard#5-ACI-6B-10

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

FINDINGS:

DRU does not utilize volunteers in the delivery of medical services to the patient population.

Standard#5-ACI-6B-11

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

FINDINGS:

DRU does not utilize residents, students, or interns to provide medical services to the patient population.

Standard#5-ACI-6B-12

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

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

OFFENDERS ARE NOT TO BE USED FOR THE FOLLOWING DUTIES:

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

FINDINGS:

Inmates are not utilized at DRU to perform familial duties in either health care or mental health care.

Standard#5-ACI-6B-13

(EFFECTIVE NLT OCTOBER 1, 2020) ALL MENTAL HEALTH STAFF RECEIVES 12 HOURS OF CONTINUING PROFESSIONAL EDUCATION OR STAFF DEVELOPMENT IN CLINICAL SKILLS ANNUALLY IN SUCH AREAS AS, FOR EXAMPLE:

- MENTAL HEALTH NEEDS OF INMATE POPULATION (SPECIAL NEEDS)
- BEHAVIOR MANAGEMENT TECHNIQUES
- MENTAL HEALTH ISSUES WITH FEMALE POPULATION
- AGING/PALLIATIVE CARE
- TRAUMA-INFORMED CARE
- CONFIDENTIALITY OF MENTAL HEALTH RECORD
- SUICIDE/SELF-INJURY PREVENTION
- SIGNS AND SYMPTOMS OF MENTAL ILLNESS, SUBSTANCE ABUSE/RELAPSE AND NEURO-COGNITIVE DISORDERS/NEURODEVELOPMENTAL DISABILITIES
- ASSESSMENT AND DIAGNOSIS OF MENTAL DISORDERS
- CRISIS INTERVENTION

Inmates are not utilized at DRU to perform familial duties in either health care or mental health care.

Standard#5-ACI-6E-02

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

FINDINGS:

DRU does not have a medical ward.

Standard#5-ACI-6E-03

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

FINDINGS:

DRU does not have a medical ward.

Standard#5-ACI-6E-04

OFFENDERS HAVE ACCESS TO TOILETS AND HAND-WASHING FACILITIES 24 HOURS PER DAY AND ARE ABLE TO USE TOILET FACILITIES WITHOUT STAFF ASSISTANCE WHEN THEY ARE CONFINED IN THE MEDICAL HOUSING UNIT OR IN THE INFIRMARY AREA. TOILETS ARE PROVIDED AT A MINIMUM RATIO OF 1 FOR EVERY 12 OFFENDERS IN MALE FACILITIES AND 1 FOR EVERY 8 OFFENDERS IN FEMALE FACILITIES. URINALS MAY BE SUBSTITUTED FOR UP TO ONE-HALF OF THE TOILETS IN MALE FACILITIES. ALL HOUSING UNITS WITH THREE OR MORE OFFENDERS HAVE A MINIMUM OF 2 TOILETS. THESE RATIOS APPLY UNLESS STATE OR LOCAL BUILDING OR HEALTH CODES SPECIFY A DIFFERENT RATIO.

FINDINGS:

DRU does not have a medical ward.

Standard#5-ACI-7A-14

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

FINDINGS:

There are no private industries operating at DRU.

Standard#5-ACI-7A-15

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

FINDINGS:

DRU does not have inmates who are employed in the community by public or private organizations.

Significant Incident Summary

This report is required for all residential accreditation programs.

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

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

Facinity Name: Deita Regional Unit Reporting Period: March, 2022 through February, 2025														
Incident Type	Months	March	April	May	June	July	August	Septem	Octobe	Novem	Decem	Januar	Februa	Total for
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
	Offender Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
Homicide*	Staff Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Other Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
Assaults	Offender / Offender	0	0	0	0	0	0	0	1	0	0	1	0	2
	Offender / Staff	0	0	0	0	0	0	0	0	0	0	0	0	0
Suicide		0	0	0	0	0	0	0	0	0	0	0	0	0
Non- Compliance with a Mandatory Standard*		0	0	0	0	0	0	0	0	0	0	0	0	0
Fire*		0	0	0	0	0	0	0	0	0	0	0	0	0
Natural Disaster*		0	0	0	0	0	0	0	0	0	0	0	0	0
Unnatural Death		0	0	0	0	0	0	0	0	0	0	0	0	0
Other*		0	0	0	0	0	0	0	0	0	0	0	0	0

Facility Name: Delta Regional Unit	Reporting Period: March, 2022 through February, 2023

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



American Correctional Association: Adult Correctional Institutions Accreditation M 5th Edition Outcome Measures Delta Regional Unit

Delta Regional Unit								
Performance Standards		Outcome Measures	Year 3 Numerator	Year 3 Denomin ator	Accredit ation Cycle Year 3			
1. Administration & Management: Administer and manage the facility in a professional and								
responsible manner,	consis	tent with statutory requirement	nts.	-				
1A: Facility		Number of Plans of Action						
Administration -		completed in the past 6						
The facility is	1A-	months divided by the						
administered	1	number of Plans of Action	0	0	0			
efficiently and	T	approved by the						
responsibly.		Commission on						
Performance is		Accreditation.						
based on goals,								
objective, and		Number of expected						
standard operating	1A-	practices in compliance	573	574	.998			
procedures and a	2	divided by the number of	515	574	.))0			
system of regular		applicable expected						
review.		practices.						
1B: Fiscal								
Management - The								
facility utilizes								
appropriate fiscal								
planning,		Compliance verified through						
budgeting, and		expected practice files. No						
accounting		outcome measure required.						
procedures and								
provides for a								
system of regular								
review.								
1C: Personnel -		The average offender						
The facility		population in the past 6						
promotes diversity	1C-	months divided by the	600	148	4.05			
and competency	1	average number of filled	000	140	T.UJ			
through employee		full time positions in the						
staffing,		past 6 months.						

	1	Τ			1
recruitment, promotions, benefit allocations and performance reviews.	1C- 2	The number of staff who left employment for any reason in the past 6 months divided by the average number of filled full time positions in the past 6 months.	36	148	.24
	1C- 3	The number of verified employee violations in the past 6 months divided by the average number of filled full time staff positions in the past 6 months.	31	148	.21
	1C- 4	The number of staff terminated for conduct violations in the past 6 months divided by the average number of filled full time staff positions in the past 6 months.	24	148	.16
	1C- 5	The number of performance reviews rated acceptable or higher in the past 6 months divided by the total number of performance reviews conducted in the past 6 months.	122	148	.824
	1C- 6	Average number of security staff positions filled per month for the past 6 months divided by the total number of authorized security positions.	38	153	.24
	1C- 7	Number of security staff who left employment in the past 6 months divided by the total number of authorized security positions.	48	153	.31

1D:Training &Development - The facility conducts pre-service, in- service, and specialized development programs to promote the effectiveness of staff, volunteers and other effected parties.		Compliance verified through expected practice files. No outcome measure required.			
1E: Case Records - The facility promotes appropriate security, access control, and other measures designed to assure the integrity of records entrusted to it's care.		Compliance verified through expected practice files. No outcome measure required.			
1F: Information Systems & Research - Effective systems of data and information storage and retrieval are vital for the maintenance of operational effectiveness and research capability.		Compliance verified through expected practice files. No outcome measure required.			
1G:CitizenInvolvement&Volunteers-facilityisaresponsiblememberofthecommunity,	1G- 1	The total number of hours of volunteer service delivered by members of the community in the past 6 months divided by the average daily population in the past 6 months.	620	400	.645

supporting citizen involvement and volunteer initiatives as well as other community interaction.	1G- 2	The total number of hours of community service work delivered by offenders in the past 6 months divided by 6.	32258	12	2688.16
2A: Building and Safety Codes - The facility complies with professional building and fire safety codes to help ensure the safety of	2A- 1	Number of worker's compensation claims filed in the past 6 months divided by the average number of filled full-time staff positions in the past 6 months.	15	148	.101
all persons within the facility.	2A- 2	Number of sanitation or health-code violations identified by external agencies in the past 6 months.			
	2A- 3	The number of fire and safe code violations identified by the governing jurisdiction in the past 6 months.			
2B:Size&Organization-Facilitycapacityandfunctionaldesignpromotesafety,anacceptablequalityoflifeoperationalinnovation.	2B- 1	Number of days facility population exceeded the operational capacity in the past 6 months divided by 182.5.	0	365	0
2C: Inmate Housing - Inmate housing areas are the foundation of institutional living and promote the safety and well- being of both inmates and staff		Compliance verified through expected practice files. No outcome measure required.			

2D: Environmental			
Conditions -			
Environmental			
conditions			
significantly			
influence the			
overall effectiveness			
of institutional	Compliance verified through		
operations.	expected practice files. No		
Lighting, air			
quality,	outcome measure required.		
temperature and			
noise levels are			
designed to			
preserve the health			
and well being of			
0			
inmates and staff			
members.			
2E: Program and			
Service Areas -			
Adequate space is			
provided for the			
various program			
and service	Compliance verified through		
functions	expected practice files. No		
conducted within			
	outcome measure required.		
Spatial			
requirements			
reflect functional			
need.			
2F: Administrative			
and Staff Areas -			
All levels of staff are			
provided with	Compliance verified through		
adequate space to	expected practice files. No		
carry out their	outcome measure required.		
responsibilities			
safely and			
effectively.			
2G: Security - The			
physical plan	Compliance verified through		
supports the	expected practice files. No		
orderly and secure	outcome measure required.		
functioning of the	ouicome measure requirea.		
institution.			

3A: Security and Control - The facility utilizes a combination of supervision, inspection, accountability, and	3A- 1	The number of incidents in which force, as defined by the agency, was used in the past 6 months divided by the average daily population in the past 6 months.	35	610	.057
measured force response to promote safe and orderly operations.	3A- 2	Number of seizures of contraband, as defined by the agency, in the past 6 months divided by the average daily population in the past 6 months.	54	610	.057
	3A- 3	The number of escapes, as defined in the Significant Incident Summary, in the past 6 months divided by the average daily population in the past 6 months.	0	610	0
	3A- 4	The number of disturbances, as defined in the Significant Incident Summary, in the past 6 months divided by the average daily population in the past 6 months.	0	610	0
	3A- 5	The number of acts of sexual violence, as defined in the Significant Incident Summary, in the past 6 months divided by the average daily population in the past 6 months.	0	610	0
	3A- 6	The number of homicides as defined in the Significant Incident Summary, in the past 6 months, divided by the average daily population in the past 6 months.		610	0

3B: Safety & Emergency Procedures - The number and extent of security, physical plant, environmental and other emergencies are minimized. When they occur, the response mechanism minimizes severity.		Compliance verified through expected practice files. No outcome measure required.			
3C:Rules&Discipline-Theinstitution's rules ofconductandsanctionsandproceduresforviolationsare	3C- 1	The total number of major disciplinary reports, as defined by the agency, in the past 6 months divided by the average daily population in the past 6 months.	2038	610	3.34
communicatedtoallinmatesandstaff.Thedisciplinary processrespectsdueprocess.	3C- 2	The total number of minor disciplinary reports, as defined by the agency, in the past 6 months divided by the average daily population in the past 6 months.	128	610	.209
	3C- 3	Number of offender on offender assaults, as defined in the SIS form, in the past 6 months divided by the average daily population in the past 6 months.	2	610	.003
	3C- 4	Number of offender on staff assaults, as defined in the SIS form, in the past 6 months divided by the average daily population in the past 6 months.	0	610	0

3D: Inmate Rights - The facility protects the constitutional rights of offenders and seeks a balance between the expression of protected liberties and the preservation of institutional order.	3D- 1	Number of grievances found in an inmate's favor divided by the number of grievances filed in the 6 month period.	25	676	.036
4A: Special Management - Inmates who pose a threat are separated from general population and placed in a cell in a special management unit; (defined as segregation and including administrative segregation, protective custody or disciplinary detention); for periods of time less than 22 hours per day.	4A- 1	Average number of offenders in Special Management Housing per month over the past 6 months divided by the average daily population in the past 6 months.	3	610	.004
4B: Restrictive Housing - Inmates who pose a direct and clear threat to the safety of persons or a clear threat to the safe	4B- 1	Average number of offenders in Restricted Housing per month over the past 6 months divided by the average daily population in the past 6 months.	25	610	.040
andsecureoperationoffacilityareseparatedfromgeneralpopulationandplacedinrestrictivehousing	4B- 2	AveragenumberofoffendersinExtendedRestrictedHousingpermonthoverthepast6monthsdividedbyaveragedailypopulationthepast6months.	6	610	.009

units / cells for periods of time 22		Number of offenders released from Restrictive			
hours per day or		Housing by the appropriate			
greater.	4B-	authority within 24-hours			100
8	3	in the past 6 months divided	41	297	.138
		by the total placed in			
		Restrictive Housing in the			
		past 6 months.			
		Number of offenders in			
		Extended Restrictive			
		Housing that were released			
		directly into the community from either Restrictive			
	4B-	Housing or Extended	0	209	0
	4	Restrictive Housing within	U	20)	U
		the past 6 months divided			
		by the total number of			
		offenders released in the			
		past 6 months.			
5A: Reception &					
Orientation - All					
incoming inmates					
undergo thorough screening and					
assessment at		Compliance verified through			
admission and		expected practice files. No			
receive a thorough		outcome measure required.			
orientation to the		-			
institution's					
procedures, rules,					
programs, and					
services.					
5B: Classification - Inmates are					
classified to the					
most appropriate		Compliance verified through			
level of custody and		expected practice files. No			
programming both		outcome measure required.			
on admission and		-			
upon review of their					
status.					

5C. Food Same					
5C: Food Service - Meals are					
Meals are nutritionally					
balanced, well-					
planned, and					
prepared and		Compliance verified through			
served in a manner		expected practice files. No			
that meets		outcome measure required.			
established					
governmental					
health and safety					
codes.					
5D: Sanitation and					
Hygiene - The					
institution's					
sanitation and		Compliance verified through			
hygiene program		expected practice files. No			
protects the health		outcome measure required.			
and safety of staff					
and offenders.					
5E: Social Services		Where a substance use			
- Professional		disorder treatment			
services including		program exists, the number			
individual and	5E-	of treatment slot available	0	0	0
family counseling,	1	divided by the average daily			
family planning		population in the past 6			
and parent		months.			
education; and		Where a substance use			
programs for		disorder treatment			
inmates with drug	5 F	program exists, the number			
and alcohol	5E- 2	of completers of the	0	0	0
addiction problems,	4	program divided by the			
meet the needs of		average daily population in			
identified inmates.		the past 6 months.			
		Where a sex offender			
		treatment/management			
	5E-	program exists, the number			
	3E-	of program slot divided by	0	0	0
	5	the average daily			
		population in the past 6			
		months.			

5F: Reentry - The institution provides a structured program to help inmates make a satisfactory transition upon their release from incarceration.	5E-4 5F-1	Where a sex offender treatment/management program exists, the number of completers divided by the average daily population in the past 6 months. The number of offenders who have completed their re-entry plan, as defined by the agency, in the past 6 months divided by the number of inmates released in the past 6 months.	0	0	0
6A: Access to Services Offenders have unimpeded access to a continuum of health care services so that their health care needs, including prevention and health education, are met in a timely and efficient manner.	6A- 1	Number of offenders diagnosed with a MRSA infection within the past six (6) months divided by the average daily population	0	610	0
	6A- 2	Number of offenders diagnosed with active tuberculosis in the past six (6) months divided by the average daily population.	6	614	0
	6A- 3	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past six (6) months divided by the Number of offenders administered tests for TB infection in the past six (6) months as part of periodic or clinically-based testing, but not intake screening.	0	0	0

1					I
		Number of offenders who			
	-	completed treatment for			
		latent tuberculosis infection			
	6A-	in the past six (6) months	0	0	0
	4	divided by number of			
		offenders treated for latent			
		tuberculosis infection in the			
		past six (6) months.			
		Number of offenders			
	~ .	diagnosed with Hepatitis C			
	6A-	viral infection at a given	60	612	.10
	5	point in time divided by			
		Total offender population			
		at that time.			
		Number of offenders			
	~ .	diagnosed with HIV			
	6A-	infection at a given point in	10	612	.02
	6	time divided by Total			
		offender population at that			
		time.			
		Number of offenders with			
		HIV infection who are			
		being treated with highly			
	6A-	active antiretroviral	2		
	7	treatment (HAART) at a	8	8	1
		given point in time divided			
		by Total number of			
		offenders diagnosed with			
		HIV infection at that time.			
		Number of selected			
		offenders with HIV			
		infection at a given point in			
	6A- 8	time who have been on			
		antiretroviral therapy for at	-	-	
		least six months with a viral	5	5	1
		load of less than 50 cps/ml			
		total number of treated			
		offenders with HIV			
		infection that were			
		reviewed.			

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6A- 9	Number of offenders with an active individualized services/treatment plan for a diagnosed mental disorder (excluding sole diagnosis of substance abuse) at a given point in time divided by the total offender population at that time.	56	614	.09
6A- 10	Number of offender admissions to off-site hospitals in the past six (6) months divided by average daily population	12	610	.02
6A- 11	Number of offenders transported off-site for treatment of emergency health conditions in the past six (6) months divided by the average daily population in the past 6 months.	33	610	.05
6A- 12	Number of offender specialty consults completed during the past six (6) months divided by Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past six (6) months.	763	802	.95
6A- 13	Number of selected hypertensive offenders at a given point in time with a B/P reading > 140 mmHg/ >90 mm Hg divided by total number of offenders with hypertension who were reviewed.	6	40	.15

	1				1
	6A- 14	Number of selected diabetic offenders at a given point in time who are under treatment for at least six months with a hemoglobin A1C level measuring greater than 9 percent divided by Total number of diabetic offenders who were reviewed.	1	8	.13
	6A- 15	The number of completed dental treatment plans within the past six (6) months divided by the average daily population during the reporting period.	695	610	1.13
6B. Staff Training The provision of health services should be done in a professionally acceptable manner including the requirement that all staff be adequately trained and qualified and can demonstrate competency in their assigned duties.	6B- 1	Number of health care <i>staff</i> with lapsed licensure or certification during a six (6) month period divided by Number of licensed or certified staff during a six (6) month period.	0	18	0
	6 B - 2	Number of new health care staff during a six (6) month period that completed orientation training prior to undertaking their job divided by Number of new health care staff during the six (6) month period.	0	18	0
	6B- 3	Number of occupational exposures to blood or other potentially infectious materials in the past six (6) months divided by the number of employees.	0	18	0

	6B- 4	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past six (6) months divided by the number of direct care staff tested for TB infection in the past six (6) months during periodic or clinically indicated evaluations.	0	0	0
6C. Offender Treatment Offenders are treated humanely, fairly, and in accordance with established policy and all applicable laws.	6C- 1	Number of offender grievances related to health care services found in favor of the offender in the past six (6) months divided by number of evaluated offender grievances related to health care services in the past six (6) months.	2	30	.07
	6C- 2	Number of offender grievances related to safety or sanitation sustained during a six (6) month period divided by the number of evaluated offender grievances related to safety or sanitation during a six (6) month period.	0	0	0
	6C- 3	Number of adjudicated offender lawsuits related to the delivery of health care found in favor of the offender in the past six (6) months divided by Number of offender adjudicated lawsuits related to healthcare delivery in the past six (6) months	0	2	0

		Number of problems				
6D Performance		identified by quality				
Improvement		assurance program that				
	(D	were corrected during a six				
Health care	6D-	(6) month period divided by	12	7	1.71	
services are	1	the number of problems				
evaluated and		identified by quality				
continually		assurance program during				
improved		a six (6) month period.				
Improved						
		Number of high-risk events				
	6D-	or adverse outcomes				
	2	identified by the quality	0			
	-	assurance program during				
		a six (6) month period.				
		Number of offender suicide				
	6D-	attempts in the past six (6)	0	(10	•	
	3	months divided by average	0	610	0	
		daily population				
		Number of offender				
	6D-	suicides in the past six (6)				
	4	divided by average daily	0	610	0	
	-	• •				
		population.				
		Number of unexpected				
	6D-	natural deaths in the past				
	5		six (6) months divided by	1	1	1
		Total number of deaths in				
		the same reporting period.				
	6D-	Number of serious				
		medication errors in the	0			
	6	past six (6) months				
6E Safety,						
Sanitation and						
Offender Hygiene						
Silender Lygiene						
The facility or						
program is safe and						
		Compliance verified through				
sanitary.		Compliance verified through				
Appropriate		expected practice files. No				
services and		outcome measure required.				
supplies are						
provided to						
promote the						
maintenance of						
acceptable levels of						
offender hygiene.						

		-			
7A: Work and Correctional Industries - Work and correctional industries programs incorporate work	7A- 1	The number of academic/vocational educational program slots available in the past 6 months divided by the average daily population in the past 6 months.	120	610	5.03
conditions that reflect jobs in equivalent work categories outside of the institution.	7A- 2	The average number of offenders with full time work/program assignments in the past 6 months divided by the average number of offenders eligible for work assignment in the past 6 months.	428	610	.701
7B: Academic and Vocational Education - The facilities academic and vocational	7B- 1	The number of academic/vocational slots available divided by the average daily population in the past 6 months.	120	610	.196
education programs improve the educational levels of assigned offenders and participate in program accreditation,	7B- 2	The number of offenders who passed the General Equivalency Diploma (HI Set) exams while confined in the past 6 months divided by the average daily population in the last 6 months.	27	610	.044
promotestaffprofessional-certification,-incorporate-community-resourcesandparticipateininternalandexternalpeerreview	7B- 3	The number of academic/vocational competency certificates issued in the past 6 months divided by the number of program slots available in the past 6 months.	27	610	.044

7C: Recreation and			
Activities:			
Recreation and			
similar leisure			
activities are			
provided to reduce	Compliance verified through		
idleness, provide	expected practice files. No		
opportunities for	outcome measure required.		
skill acquisition,	-		
promote healthy			
activities and foster			
positive group			
interaction			
7D: Mail,			
Telephone &			
Visiting - The			
maintenance of			
family and			
community ties			
through the			
provision of	Compliance world's defense of		
comprehensive	Compliance verified through		
mail, telephone and	expected practice files. No		
visiting services is	outcome measure required.		
critical to stable			
institutional			
adjustment and			
improves			
opportunities for			
successful			
reintegration.			
7E: Library - The			
facility should			
provide library			
services that			
support educational			
programs, promote	Compliance verified through		
reading skills,	expected practice files. No		
enhance leisure	outcome measure required.		
activities and			
maintain awareness			
of circumstances in			
the community at			
large.			

7F: Religious Programs - The offender population should have the opportunity to participate in the practices of their faith group as enhanced through the supplemental contributions of community resources.	7F- 1	The number of regular participants as defined by the agency, in structured religious programming in the past 6 months divided by the average daily population in the past 6 months.	400	610	.065
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