COMMISSION ON ACCREDITATION FOR CORRECTIONS STANDARDS COMPLIANCE REACCREDITATION AUDIT

Arkansas Department of Corrections East Arkansas Regional Unit Brickeys, Arkansas

May 8-10, 2023

VISITING COMMITTEE MEMBERS

Robbin Bell, Chairperson ACA Auditor

> Brian Gage ACA Auditor

William Gallaher ACA Auditor

A. Introduction

The audit of the Arkansas Department of Corrections, East Arkansas Regional Unit, Brickeys, Arkansas was conducted on May 8-10, 2023, by the following team: Robbin Bell, Chairperson; Brian Gage, Member; and William Gallaher, Member.

B. Facility Demographics

Rated Capacity: 1496
Actual Population: 1617
Average Daily Population for the last 12 months: 1583

Average Length of Stay: 1 year/5 months/ 17 days

Security/Custody Level: Multi-Security

(Maximum/Medium/Minimum)

Age Range of Offenders: 19 - 76 years of age

Gender: Male

Full-Time Staff: 358 (Vacancies – 178) Administrative - 34, Support - 14, Program - 9, Security - 301, Other – 59

C. Facility Description

The East Arkansas Regional Unit, (EARU), 326 Lee #601 is situated in the town of Brickeys, Arkansas. Often recognized as the "Jewel of the Delta", it is seated in Lee County, along U.S. Route 79, approximately 11 miles northeast of Marianna, Arkansas. The town is surrounded by diverse landscaping which enables its climate to produce a wide variety of agricultural products such as farmland, livestock, hay and crops to name a few. Geographically located 97 miles from the city of Little Rock, Arkansas and 50 miles from Memphis, Tennessee, bounded on its east by the Mississippi River, this small agricultural community maintains a population of approximately 1,539. Established in 1990, the Arkansas Department of Corrections purchased 2,949 acres of land in Brickeys, Arkansas, to build what is now the East Arkansas Regional Unit (EARU). The doors were opened in 1992 with the capacity of 200. In 1993, an additional 400 beds were added, and an Isolation Wing was also built. In 1995, the Lee County Jail was completed, housing both male and female detainees. In 1996, after raising more than \$185,000 in donations, a new Chapel was opened at the East Arkansas Regional Unit under the guidance of Chaplain Don Yancey. In 1997, another expansion and 400 more beds were added to the Unit. In 1998, the Maximum-Security Unit was opened with an additional 500 beds and two more Isolation Wings.

In 2012, Corporal Barbara Ester was fatally stabbed (January 20, 2012) by an inmate at East Arkansas Regional Unit. In that same year the EARU Employee Corporation founded the Barbara Ester Scholarship in memory of Corporal Ester's ultimate sacrifice. East Arkansas Regional Unit serves as a parent unit for the state of Arkansas. Once sentenced to the Arkansas Department of Corrections (ADC), EARU inmates are received from all 75 counties of the state.

The ADC classifies all inmates who are housed at EARU according to their security risk. This process considers behavior and other objective factors that are available and relevant when assessing an inmate's institutional custody and internal risk level. The classification system is a component of the inmates" Corrections Plan", which provides the inmate an individualized "program road map" which ensures inmates are positively engaged in positive activities to their greatest extent possible. As it stands, EARU has the ability to house inmates classified to a varied custody score of C-2; which is a short term, conforming, able to get along with other inmates and staff with minimal likelihood of escape all the way up to an inmate with a custody score of a C-5; long-term, non-conforming and/or an extreme escape/violence risk. Inmates received at EARU often have program referrals. After completion of the inmates 60 days, they are enrolled in programs and services all in accordance with classification committee standards and guidelines.

The East Arkansas Regional Unit currently has the capacity to house 1700 inmates, which includes 500 beds in the Maximum-Security Unit. Housing accommodations include 470 single cells and 20 dormitories. The Lee County Jail, a separate building structure (not within the facility's perimeter) located on EARU's outside acreage maintains a rated capacity of 32 male detainees from Lee County, Arkansas. The Lee County Jail is not included as a part of this audit. EARU's Medical Infirmary housing Unit also provides: two (2) maximum unit single cells and one (1) six-person general population room (bay/dorm-style). The East Arkansas Regional Unit complex is seated on approximately 2500 acres of land of which 40 acres is enclosed within the facility's secured perimeter interior. A total of eight (8) buildings are maintained within the facility's perimeter, with nineteen (19) buildings maintained outside of the perimeter. The units are under the supervision of a unit management team. Each inmate has access to a built-in storage area within their bed. Dayrooms within each Unit provide space for television viewing, telephone use, video visitation and camera monitoring. The two-level Units offer table seating for writing activities. Security staff conduct rounds throughout the units with an adjacent satellite Control Center which accommodates a visual of all inside housing unit movement and/or activities. Secured individual inmate mail/facility correspondence, and grievance mailboxes are stationed and secured in the central movement corridor adjacent to each units/wing entrance. Commissary requests are now provided on kiosk stations located within the housing units. Tablets are provided to offenders accessing inhouse correspondence, music, free books, games, and other authorized programs. The RHU/Extended RHU/Step-Down Program and Medical Infirmary Units also provides access to telephones, writing space, television area, and dayroom space.

The food service, dining room area, library, visitation and Industry services are all located within the complex. Inmate movement is controlled by a Master Control Center which is manned 24 hours a day. Additional departmental space provided includes: Intake processing, mental and medical health services, indoor and outdoor recreation, religious services, academic/vocational programming, social services programming, commissary services, maintenance, laundry, mailroom, security, administrative, and other related supportive services.

Some of the programming offered to the inmates housed at EARU include: Horse Barn, Dog Kennel, Inmate Council, P.A.L.S., Reentry "Think Legacy Program", Vo-Tech/Industry, Vegetable Production, and Cognitive Restructuring. Additions to EARU's programming and/or facility revisions implemented within this accreditation period include: an onsite four (4) year degree offered by Philander Smith College, a Veterans Program, upgraded kiosk system (includes commissary ordering, banking options and medical sick call requests), an additional onsite generator to better assist with power outages, a Biometric System Tablet for the Entrance Building, additional security surveillance cameras for the Entrance Building, an additional greenhouse on the Southeast end of the compound, Inmate Tablets, renovation of the RHU recreation area, and the installation of the Sallyports "Human Presence Detection" and "Body Scanner ADANI" systems. It is to also to be noted during the time of this audit EARU honored all of their security staff (all 3 shifts) during the National Correctional Officers Week with a facility wide breakfast/lunch celebration.

The mission of the East Arkansas Regional Unit is, "to protect, educate, and train male inmates who are minimum, medium, and maximum custody level so they can be released to become law-abiding citizens. The Unit shall have the following agricultural operations: row crops, garden, field, and edible crops. Special Operations are to consist of at least: S.A.E., Educational services, Chaplaincy services, Infirmary, and Regional Maintenance".

D. Pre-Audit Meeting

The team met on Sunday, May 7, 2023, in Forrest City, Arkansas, to discuss the information provided by the Association staff and the officials from the East Arkansas Regional Unit.

The chairperson divided standards into the following groups:

William Gallaher (Team Member)

Standards #5-ACI-1A-01 to 5-ACI-2A-02, 5-ACI-2B-01 to 5-ACI-2G-03, 5-ACI-7A-01 to 5-ACI-7F-08

Brian Gage (Team Member)

Standards # 5-ACI-3A-01 to 5-ACI-4A-09, 5-ACI-4A-11 to 5-ACI-4A-14, 5-ACI-4A-16 to 5-ACI-4B-09, 5-ACI-4B-11 to 5-ACI-4B-27, 5-ACI-4B-29, 5-ACI-4B-31 to 5-ACI-5D-15

Robbin Bell (Chairperson/Medical Auditor)

Standards # 5-ACI-2A-03, 5-ACI-4A-01, 5-ACI-4A-10, 5-ACI-4A-15, 5-ACI-4B-10, 5-ACI-4B-28, 5-ACI-4B-30, 5-ACI-5E-01 to 5-ACI-6E-05

E. The Audit Process

1. Transportation

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

2. Entrance Interview

The audit team proceeded to the office of Moses Jackson III, Superintendent. The team expressed the appreciation of the Association for the opportunity to be involved with East Arkansas Regional Unit in their accreditation process. The Superintendent provided a brief overview of the current facility operations, COVID/19 precautions, along with recent agency highlights and revisions.

Superintendent Jackson escorted the team to the facility Chapel where the formal entry meeting was held.

The following persons were in attendance:

Moses Jackson III Superintendent

Dexter Payne Director/Central Office

William Straughn Deputy Director/Central Office

Gaylon Lay Work Release Superintendent/Central Office Shelly Byers Assistant Medical Administrator/Central Office

Shelly Lawrence Agency ACA Manager/Central Office

Michael Buford Construction Project Supervisor/Construction
Brian Drost Maintenance Construction Coordinator/ Pine Bluff

Byron Brown Fire Safety Coordinator/CJ

Sophia Henry Unit Accreditation Manager/EARU

Mary Carter Regional Manager/Wellpath

Kim Resenthal Regional Director of Operations/Wellpath

Tryphena Jackson Administrative Assistant/Wellpath

Emma Hatchett Health Service Administrator/Wellpath-EARU
Jason Palmer Assistant Health Service Administrator/Wellpath-

EARU

Timothy Owen Mental Health Coordinator/Wellpath-EARU

Candace Woods
Shalice Burns
Linda Davis
Geneva Jones

Deputy Warden Secretary/EARU
Administrative Assistant I/EARU
Administrative Assistant I/EARU
Administrative Assistant II/EARU

Albert McKinney Chaplain/EARU Tiantha Westbrook Sergeant/EARU

Tashor Kelly Administrative Review Officer/EARU

Valerie Westbrook
Angela Beard
Michael Richardson
Christopher Johnson
Classification/EARU
School Principal/EARU
Deputy Warden/EARU
Deputy Warden, EARU

Scott Taylor Major/EARU

Douglas Swiney Captain, EARU

Krissie Sweatman Assistant Maintenance Director/EARU

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

The audit team then offered information about their respective professional backgrounds as well as experience with the standards and accreditation process.

3. Facility Tour

The team toured the entire facility from 9:16am to 11:30am. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Moses Jackson III Superintendent

Dexter Payne Director

William Straughn Deputy Director

Gaylon Lay Work Release Superintendent

Michael Richardson Deputy Warden Christopher Johnson Deputy Warden

Sophia Henry Unit Accreditation Specialist

Kim Rosenthal Director/Wellpath

Tryphena Jackson Administrative Assistant/Wellpath

Byron Brown Fire Safety Coordinator/CJ

Scott Taylor Major
Tyrone Allision Major
Douglas Swiney Captain
Latosha Davis Lieutenant
Tiantha Westbrook Sergeant
Brandon Armstrong Sergeant
Valerie Westbrook Sergeant

Tashor Kelly Administrative Review Officer

ACA notifications were strategically posted throughout various areas of the facility.

4. Conditions of Confinement/Quality of Life

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

Security:

East Arkansas Regional Unit is a multi-security facility which provides housing for inmates classified to minimum, medium, and maximum custody levels. The facility is safeguarded by a double perimeter fence extending approximately a mile and a half in distance. The 12-foot outer chain-link fence is reinforced with two rolls of razor wire on both the inner and outer layers. Each section of the fence is numbered, facilitating rapid response to fence alarms. A lethal fence encircles the facility, and an armed staff member patrols the perimeter in a utility vehicle during each shift.

The facility employs 20 exterior cameras, 266 interior cameras, and maintains video recordings for 45 days. The program for the cameras system has been updated, but most of the cameras were new to the building in 1994. With few exceptions, these cameras are stationary. There are a total of eighty (80) lighting fixtures/poles that provide ample lighting (1000 w) used to illuminate EARU's perimeter during hours of darkness.

Most recently surveillance cameras have been added to the Entrance Building to show the east and west views of the parking lot and cameras were added to the inside of the Entrance Building to help monitor the activities of everyone that enters and leaves the facility.

EARU's vehicle fleet is comprised of one (1) regional bus, one (1) rover vehicle and ten (10) trucks. EARU's armed rover vehicle provides continual rotating surveillance 24 hours, 7 days per week to the facility's perimeter. First aid kits are stationed in all EARU vehicles. There are four (4) towers located on the facility compound. At the time of review only two (2) were in operation, with security staff supervising pedestrian and vehicle access through the main sallyport gates. A smaller access gate is used by security staff to enter the sallyport. The other two (2) towers are manned during construction and/or during instances of emergency. Although the facility does not maintain a helicopter pad, ample space is available when and if needed. Perimeter foot patrol is conducted twice per shift.

EARU has 3 points of egress into the facility. The Administration building serves as the facilities main entrance and pedestrian gate through which staff, visitors, volunteers and contractors enter. The second point of egress services authorized inmate transportation traffic. A third point of egress services all other food service and other related traffic.

Entrance and exit into the compound are by way of the front Administration building.

Identification is checked, with log entry on each individual entering the building. This includes staff, offenders, volunteers, contractors, and other authorized personnel. Visitor names are documented in a registration log by the Security Officers, which are identified through a biometric program.

Upon entry, volunteers, contractors, and other authorized personnel must pass through a body scanner, a cell phone detector, and have their belongings scanned by an x-ray machine. In some instances, additional personal "pat down" searches are required. If and when individuals are confirmed as all clear, entry is granted. At this point, there are two (2) separate entrance ways that require additional processing for inmate visitation. A separate area is designated for General Population visits, with a second area designated for Maximum/RHU population visits.

Offsite law enforcement probation/parole, and other authorized personnel, are notified they must secure their weapons in their vehicle or in the secured gun barrel stationed located at EARU's front entrance. All EARU's security and specially designated staff are donned with radios and cuffs. Non-security staff including medical and mental health carry radios. Personnel authorized radios assist in the monitoring of offender movement and communication.

EARU's has one (1) Superintendent and two (2) Deputy Warden of Operations who oversees the facility security department. At the time of review there were a total of 225 assigned Corporal positions with 76 Corporal positions filled. To this date a total of 149 Corporal positions remains vacant. In addition, there were a total of 54 assigned Sergeants positions with 31 positions filled of which a total of 23 Sergeant positions remains vacant. There were also 14 assigned Lieutenant positions with 8 Lieutenant positions filled, and a total of 6 Lieutenant positions which remain vacant. There was also a total of 6 assigned Captain positions of which all are filled, 2 Major positions of which all are filled, and 9 assigned Food Service Security positions of which 1 remains vacant.

Security Shift coverage consists of two (2) 12-hour shifts: 6:00am to 6:00pm and 6:00pm to 6:00am.

EARU's maintains Master Control Center along with smaller satellite Control Rooms overlooking the varied housing units. The Master Control Center operations is responsible for the monitoring of all facility security systems. Its functions include gate access, telephone operation, and distribution of keys and equipment. A Camera room within the Master Control Center is staffed by a team member who monitors the facility's cameras on day shift. Master Control staff interviewed were very knowledgeable and understood their role as being the nerve center of the facility. Inmate movement in and out of each barrack/wing housing unit is controlled by the housing unit satellite control center. All control centers are manned 24 hours per day, seven days a week for supervision and movement of inmates in and out of their cells.

Written post orders have been established for all security posts, and staff can produce and explain these orders upon request. There was a total of 78 positions including general security, recreation, laundry, mailroom, dog kennel, field security, disciplinary process, horse barn supervisor, and video camera operations. Radios are issued to each officer, but they do not have a "man down" or "panic" alarm feature. All officers certified in chemical agent use carry "OC" canisters.

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

The facility has a multi-faceted system of tool control. Tools are classified based on their potential risk for use as a weapon or the likelihood the tool could be utilized to facilitate escape. The highest risk tools are designated and stored in a double locked caged area which is restricted to staff members only. The less risky tools are also specially designated and stored in a locked cage but may be used by inmates under close monitoring and staff supervision. Tools are etched and stored by means of a shadow board storage system in a locked cage which is used in conjunction with a check-in and check-out logbook. All tools are inventoried daily. There is a system in place which requires that new tools be added to the master inventory prior to being placed in service. Broken equipment or tools are promptly removed from the main compound in an effort to prevent them from being fashioned into weapons or other contraband. During the course of the tour, several tools were checked to ensure inventory and issuance records were accurate. Food service tools and medical and dental sharps were also checked during the tour. All were noted as orderly, properly inventoried and compliant.

All facility cells are searched a minimum of twice every 60 days. Areas searches of facility grounds are conducted at a minimum monthly. Common areas are searched daily on the night shift. Each shift conducts random mass movement searches of ten (10) inmates or more. Searches are conducted on offenders as they depart and return from varied work assignments. Inmate movement is controlled, and offender searches are conducted randomly in key areas within the facility. Within a 24-hour period there are a total of nine (9) official inmate counts: 6:00am, 8:00am, 10:00am, 1:00pm, 5:00pm, 6:00pm, 12midnight, 2:00am, and 5:00am. Additional intermittent wellness counts are conducted throughout the day and during the evening hours.

EARU's arsenal is located outside of the facility's perimeter adjacent to the East Tower houses weapons, chemical agents, ammunitions, and emergency equipment. A firing range is also available on the facility grounds.

Weapons are regularly cleaned and inspected, while ammunition and chemical munitions are inventoried monthly. The facility maintains one full time Arsenal Supervisor. The restricted key is kept in the main Control Center and may be signed out by the authorized Arsenal Supervisor, Control Center Lieutenant and the Chief of Security. There are lock boxes for weapons in the Superintendents vehicles and in the Regional Maintenance truck. There are a total of 28 handheld metal detectors and 53 batons. There are no lethal weapons kept inside the facility's perimeter. There are four (4) 40mm less lethal launchers secured inside the facility.

A random check of keys, emergency equipment weapons, chemicals and tools were found to be in properly inventoried, compliant and in order. Staff assigned to the Emergency/Disturbance Response team are trained in special disturbance/control and response tactics.

A Canine Unit and horse team are utilized for tracking and work detail security. The highly trained unit has received numerous awards and accolades for its performance. Six (6) inmates, some serving life sentences, live outside the facility and care for the canines and horses.

EARU security staff are provided grievance training, 40 hours of recertification training. Inspection found training area clean, and well organized. There are two (2) facility training officer positions. Documentation notes both staff have completed a 40 hour "Train the Trainer" course. They are responsible for the coordination and supervision of the annual unit training plan which was developed in June 2022. Initial staff training is provided at the department's Training Academy and includes 240 hours of class and hands-on activity. The facility has a "Training Advisory Committee" which includes 10 members and meets quarterly to address training plans, budgets, and curriculum.

Inspection of the facility Warehouse and ICC Garage was found very clean, well-organized, with all of its processes of accountability in order. Supplies are delivered weekly.

Special Management and Restrictive Housing

EARU's maintains a 550 bed Restrictive Housing Unit (RHU) equipped with comprehensive video surveillance and communication systems. This unit accommodates inmates who have demonstrated difficulty adapting to general population due to various reasons, including the need for protective custody, administrative detention, disciplinary detention status, and mental health monitoring. Inmates classified to the Extended RHU and Step-Down Program are also housed in this area. These cells are provided with toilet and sink combinations.

EARU's RHU/Extended RHU/Step-Down Program areas are supervised by a Sergeant, Monday through Sunday with the assistance of security shift staff seven (7) days per week/24 hours per day. EARU does not house offenders under the age of 18.

EARU's RHU/Extended RHU/Step-Down exercise areas are comprised of individual covered yard modules. Recently constructed these yard modules consist of 180 square feet of unencumbered space. At the time of tour, inspection found sanitation in the RHU/Extended RHU/Step-Down Program, its cells and recreational areas were good.

Tour observation noted that inmates housed in EARU's RHU/Extended RHU/Step-Down Program and other "segregated" areas of confinement had not been provided the required minimum one (1) hour of exercise outside of their cells, five (5) days per week.

Reasoning provided addressed mitigating circumstances surrounding recent RHU recreation module construction in conjunction with critical staffing shortages.

Documentation of security cell to cell observation rounds were found in compliance. These rounds are conducted in 30 minutes intervals. Daily rounds conducted by the Senior Security Supervisor and medical/mental health staff rounds were logged in all of these segregated confined areas. Weekly programming staff rounds are also conducted in these unit. All staff assigned and/or entering into the RHU/Extended RHU/Step-Down Program at a minimum are donned in protective security vests, cuffs, radio, eyeglasses or safety goggles. Upon entering into the unit, the announcement of female staff is presented.

Barbering are provided inhouse to inmates housed in these units. An inmate barber provides barbering services to inmates housed in RHU/Extended RHU/Step-Down Program and other segregated confined housing units. This is in accordance with the in-house shower and hygiene schedules.

RHU/Extended RHU/Step-Down Program and other segregated confined unit visits are provided as noncontact and/or video visitation. Documentation reviewed reflect RHU/Extended RHU/Step-Down Program inmates are afforded telephone privileges with administrative approval.

Library and law library services are offered to inmates housed in these units. Inmates submit written requests (library request form) which is available through the unit team staff. Requests are processed by the librarian. If authorized, requested items are forwarded to the RHU/Extended RHU/Step-Down Program or other segregated confined units, items are inspected by security staff prior to and upon exiting. Weekly rounds are conducted by the facility Chaplain. Additional religious requests or services are provided by the Chaplain in accordance with provisions noted by security.

Documentation review reflects laundry, mail, and other related services are provided to inmates housed in these units in accordance with the same schedule as inmates housed in general population, unless otherwise dictated by security. Documentation reviewed reflects new inmates assigned directly to RHU receive written orientation and/or translations in their language. When a literacy problem exists, a staff member assists the inmate in understanding material. EARU's telephone system is comprised of language line services.

Medical and mental health services are provided to all offenders housed in RHU/Extended RHU/Step-Down Program and other segregated confinement units. Inmates housed in these units requesting medical care/assistance submit paper requests to nursing staff during daily cell to cell rounds. Documentation reflects required screenings are reviewed promptly in accordance with health care protocols. Medical staff nurses conduct medication pass (with security escort) twice daily or more often as required. Nursing staff also conduct wellness rounds at once per shift. Mental health staff conduct rounds at a minimum of three (3) times per week. EARU rarely participates in the use of progressive restraints.

Meals are transported from Food Service to the RHU/Extended RHU/Step-Down Program and other segregated confined areas in food service carts. Inmates housed are provided the same meal and content, at the same time as inmates housed in general population. In the instance that it is officially documented that an inmate's voluntary or involuntary action warrants an alternate meal, review and approval can only be authorized by the Superintendent/designee and Health Authority/designee.

EARU does not maintain Special Management housing status. Gloves and other related sanitizing and personal protective equipment were observed readily available for staff usage.

Environmental Conditions:

EARU is a smoke-free environment. The grounds were well maintained with no evidence of smoking or smoking paraphernalia. Review of facility inspection reports reflect compliance with applicable standards relating to environmental conditions. EARU maintains its on onsite water and sewage services. Gas/power inspection and services are provided by local vendors.

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

The ratio of showers, washbasins, and toilets to offenders are in compliance with state statutes and ACA standard guidelines.

The facility has a preventative maintenance program that is ongoing. In the event the facility loses power, a total of six (6) generators are in place servicing the facility operations. These generators are inspected weekly and tested quarterly at a minimum. An outside vendor service is provided twice per year. Vendor servicing also includes annual full load tests. Additional emergency equipment systems are inspected and tested weekly.

EARU recycling services include recycling of cardboard, wood pallets and other miscellaneous materials. Recycle dumpsters are provided onsite (Waste Management). The disposal of EARU's bio-hazard material is serviced by Stericycle.

Sanitation:

Sanitation throughout the facility was excellent. Weekly sanitation inspections are conducted by the assigned area housekeeping. Plans were reviewed throughout the facility. The team observed inmates cleaning in various areas of the facility. Inmates were found to be clean, beds were made, property stored, and shoes properly placed. Housing unit furnishings were found to be clean and in good order.

Chemicals/cleaning supplies used throughout the facility are inventoried and dispensed from the chemical/cleaning supply room. Chemicals/cleaning supplies are dispensed on a daily basis in diluted format and provided to assigned staff for use throughout assigned areas. Data Sheets and safety equipment are stationed in close proximity to storage areas. Cleaning supplies located in the unit were minimal. Janitorial closets with sinks and cleaning supplies were found accessible to all housing units and activity areas.

Institutional grounds were well maintained and groomed with no evidence of dumping or improper material disposal. A contract is in place for monthly recycling, and bio-hazard waste services (Stericycle). All EARU staff are trained in the proper control and handling of biohazard/blood spills. Black Pest Control, Inc. provides monthly insect and vermin control to the facility or more often as needed. A maintenance plan is in place ensuring follow-up with an organized system of check and balances. Trash Pickup is provided weekly or more often if needed.

Fire Safety:

EARU is protected with a hard wire smoke detection system that is monitored 24 hours a day by the Master Control. Both populated and non-populated areas are checked systematically.

The fire protection system contains wet sprinkler heads ready to respond to a heat build-up. EARU's food service area is protected with sprinkler hoods over each cooking area, pilot alarm system for gas appliances and an emergency cutoff system. Outside vendor inspections are conducted every six (6) months.

The alarm system is monitored from a central control panel (Simplex System) located in Master Control and in the Control Center in the Max Unit. All buildings located within the interior of the facility compound maintain individual enunciator panels. Sites are equipped with smoke detectors, duct detectors, pull stations, water flow alarms, horn/strobe detectors, strobe, and 27-ABC fire extinguishers, and 6-K fire extinguishers, 35 fire hoses, and 4 SCBA packs all strategically located throughout the facility. Designed buildings within the facility are tested by an automatic sprinkler system which is maintained and tested quarterly. Facility fire evacuation routes are clearly and strategically posted throughout the facility.

Security staff are regularly trained in the use of all fire equipment. Fire extinguishers have been strategically placed throughout the facility. The facility contracts with a local vendor to provide quarterly service on all of the fire extinguishers. Facility staff was knowledgeable of the procedures for evacuating inmates from locked areas such as within the general population housing unit, the RHU and other segregated areas of confinement. Additional training is provided in evacuation procedures. One (1) fire drill is conducted per shift, per area, per quarter. Means of egress were properly identified and unobstructed.

Flammables are stored outside the perimeter in fire cabinets located in the farm shop, maintenance building and horse barn. Chemicals are carried into barracks by porters and taken out daily. Flammables, toxic chemical were found properly stored and inventoried. Diluted products which have been pre-mixed are utilized for routine cleaning. A review of the facility cleaning supply inventories Safety Data Sheets and safety equipment were found to be organized, properly labeled, inventoried and stored. Red oily rag cans are stationed in appropriate areas of the facility. These cans are emptied daily.

There are three (3) AED's strategically located throughout the facility. Eye wash stations located on the facility compound were found operational, easily accessible and in good order.

EARU's most recent Annual Fire & Safety inspection was conducted on June 22, 2022 (State Fire Marshall). Fire Services are provided by the Lee County Fire Department with a response time of 15 minutes. Pafford Ambulatory Inc. provides emergency services to the facility with a response time of 20 minutes.

Food Service:

EARU's Food Service department is under the authority of Arkansas Department of Corrections. Supervision of this food service operation is under the direction of one (1) Food Service Production Manager, and six (6) civilian Food Service Supervisors. Although EARU maintains two (2) separate dining halls only one (1) was in use at the time of audit. There are six (6) Security officers assigned in food service to provide additional security coverage. Shifts are from 6:00am to 6:00pm, 6:00pm to 6:00am, 6:00am to 4:00pm, and 8:00am to 6:00pm. Supervision within the department is enhanced by 17 cameras strategically located throughout the area.

Documentation confirms all food service civilian staff workers are Servsave certified. There is a total of 124 inmates assigned as food service workers. The Food Service Production Manager provide inmate workers orientation and handson food service safety/sanitation training. Medical clearance is obtained on all food service inmate workers prior to being placed on assignment.

Monday through Sunday offenders housed at EARU are provided three (3) hot meals. Hours of meal service are: 3:00am, 9:00am, and 2:30pm. Meals served in RHU, or other segregated areas of confinement are provided in-house/in-cell. Satellite meals are also provided to the Lee County Jail (Unit). Meals are transported to these areas in temperature-controlled food carts. Bag lunches (138) are prepared each day for outside work details.

With exception of few food service tools and equipment, all remaining items were found secured and properly inventoried. Inspection of chemical/cleaning supplies found items organized and properly inventoried. Restroom facilities for both offenders and staff were in close proximity to all workstations. An outside vendor conducts hood suppression inspections every six (6) months. Eyewash stations were found operational and easily accessible.

A certified dietitian reviews and approves the master menu system. EARU's food service department provides the inmate with an average daily caloric count of 2400. Cost of offender meal per day is \$4.26. Both general and medical diets have a four (4) week rotating menu cycle. Medical and religious diets are provided upon review and administrative approval. At the time of the audit there were a total of 20 religious diets and 100 medical/special diets served each day. EARU maintains its own Kosher kitchen area.

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

Commissary services are provided to inmates housed at EARU under the services of one (1) Arkansas Department of Corrections civilian staff. There are a total of eleven (11) inmate workers assigned in this area.

The facility maintains two (2) commissary operations. One located in the North Hall, and one located in the South Hall. Each commissary is under the supervision of one (1) Security officer. The processing of inmate commissary is inmate generated by way of kiosk service stations located within the housing barracks/wings. Inmate commissary hours are scheduled in accordance with individual barrack/wing activities. Inmates can spend up to \$100.00 per week once per week. Inmates housed within the Max Units can request up to \$10.00 per order once per week. Indigent inmates, defined as having less than \$10.00 on their account for the preceding month can order supplies once per month. Items allowed for purchase are limited and must be selected off of the Commissary Indigent list.

Inmates pickup pre-prepared, bagged items at the commissary window. There were four (4) freezers utilized by commissary staff. All freezer temperature checks were found compliant. Inspection found areas clean, organized and in good order. All items sold in the commissary stores are reviewed and approved by the Superintendent.

Medical Care:

East Arkansas Regional Unit's medical and mental health services are provided under the contractual services of Wellpath, Inc. Its medical unit receive transfers of inmates throughout the State of Arkansas with history of high-risk behaviors, compounded by lack of medical care and/or mental health treatment, and are more likely to have chronic illnesses and infectious diseases.

The agency maintains a multi-disciplinary staffing complement of 59, consisting of full, part time, and prn. The medical clinic operates 24 hours per day, 7 days per week, and provides after-hours on-call physician coverage.

Although not included as part of East Arkansas Regional Unit, Wellpath's medical/mental health staff provide daily sick call services, daily medication pass, along with emergent medical care to detainees housed at the Lee County Jail.

EARU's medical/mental health services are provided by the following fulltime staff: one (1) Medical Director (MD), one (1) Director of Nursing (DON), one (1) Health Service Administrator (HSA), sixteen (16) Licensed Practical Nurse (LPN), one (1) ICN/CC Licensed Practical Nurse (LPN), one (1) Licensed Practical Nurse/Pharmacy (LPN), two (2) Advance Practical Nurse (APN), one (1) Dentist, one (1) Dental Assistant, one (1) Dental Hygienist, three (3) Registered Nurses (RN), two (2) Certified Nurse Assistant/Medical Records Clerk (CNA), and one (1) Administrative Assistant (AA).

Three (3) Certified Nurse Assistants (CNA), one (1) Certified Nurse Assistant/Lab (CNA), one (1) Mental Health Program Manager, one (1) Mental Health Administrative Assistant, one (1) Mental Health Psychologist, one (1) Licensed Professional Counselor, one (1) Licensed Associate Counselor, one (1) Licensed Master Social Worker, six (6) Mental Health Technician, one (1) Licensed Social Worker.

There is one Security Corporal assigned to oversee security operations in the Main Medical Clinic, 24 hours per day, 7 days per week. Shift hours are from: 6:00am to 6:00pm, and 6:00pm to 6:00am.

EARU's Main Medical Clinic consist of the following: one Security Officer station, an inmate bathroom with sink and wash basin, an inmate waiting area (seats 6), a lab room, a staff break room, bathroom accommodations for Infirmary inmates (tub/shower with ADA bench and chair), a Bulk Stock room, a Medical Records office, a Bio-Hazard room, Pharmacy/Bulk Stock storage room, a janitorial/chemical closet, a Dental Suite, examination/treatment rooms, a Nurses station, a Provider office, DON/HSA office space, Infectious Disease office space, and storage space for durable medical equipment. Cameras (3) are strategically located throughout the medical clinic.

An Infirmary is located in the rear of EARU's Main Medical Clinic. Two (2) Maximum unit single cells are located in this area. This Infirmary area also house one (1) 6-person dormitory style room. Additional EARU medical services included within the facility are: two (2) Dental Clinics (Main Dental Clinic and the Max Dental Clinic), and three (3) Pill Call service locations (South Pill Call Window, North Pill Call Window, and Max Pill Cart/Room). It is to be noted, that EARU's Eastside Hall Wing(barracks) do not house a medical clinic, nor are medical services provided in this area. Inmates housed in the Eastside Wing (GP-barracks) use the facility Main Medical Clinic for medical services and the North Pill Call Window for medication pass.

EARU's medical services/supplies consists of the following: three (3) AED's (secured and inspected), vital sign monitoring, suction, privacy screens, one (1) EKG (secured and inspected), one (1) jump bag (secured and inspected), emergency stretchers with straps (secured and inspected), TeleMed equipment, medical carts, a transport gurney, mobility assistant devices, refrigerators (for flu, TB solutions, etc.) refrigerator (for specimens), portable oxygen, and one oxygen cylinder. The facility "emergency response bag" is checked at shift change by nurses to make sure the seal is still on and not tampered with. Contents of bag is checked daily. Wheelchairs, crutches, and walking canes are stored in the medical clinic for temporary use.

EARU's medical unit was found to be exceptionally clean, spacious and well equipped to care for the offenders in a private and professional environment. Safety Data Sheets are maintained on all chemicals.

All were found to be organized, accurate, and properly secured. Sanitation is provided by inmate workers with the assistance of medical staff. All medical and mental health offender movement (scheduled and unscheduled) were found to be orderly and conducted in a secure manner. Refrigerators were observed clean and in order with records of temperature check logs monitored daily. Evidence of regular equipment checks for accuracy and calibration were well documented. An inspection of EARU's emergency equipment contents found items to be properly inventoried (weekly), well organized, and readily available for emergent situations. EARU's medical unit is serviced by one (1) of six (6) generators which is available for service during instances of emergency.

Routine medical provider visits are conducted weekly in the RHU/Extended RHU/Step-Down Program and other segregated areas of confinement. Inmates requiring additional medical services are escorted to the medical clinic.

EARU's medical clinic hours of operation are Monday – Sunday 7:00am – 3:00pm. Nursing shift hours are scheduled Monday – Sunday. LPN/RN hours are 7:00am – 7:00pm and 7:00pm – 7:00am., 8:00am – 4:00pm, 7:00pm – 3:00pm, and 6:00am – 2:00pm. Medical provider hours are scheduled Monday – Friday, 7:00am – 3:00pm. Mental health staff hours are scheduled Monday – Friday, 7:00am – 3:30pm, and on call.

When it is determined that an inmate requires a higher level of care or emergency services are not provided at the facility, the offender is transported to Forrest City Hospital, which is approximately 30 minutes from the facility.

EARUs fire services are provided by Lee County Fire Department. Response time to the facility is approximately fifteen (15) minutes. Ambulatory services are conducted by Pafford Ambulatory Services. Distance is approximately twenty (20) minutes from the facility. EARU's medical staff are trained annually in CPR, AED, First Aid and are considered "First Responders". EARU conducts quarterly simulated drills to test the facilities medical emergency response. Documentation confirms emergency response as under 4 minutes.

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

All offenders access sick call by submitting sick call requests via kiosk stations located in the barracks/wings or in the secured sick call boxes located in the housing units. Sick call slips are collected and triaged nightly, by the designated nurse using nursing protocol/guidelines. Sick call hours are conducted seven (7) days a week from 7:00am up until last patient has been serviced. Urgent requests are seen within 24 hours of submission, and routine requests are seen within 72 hours. Medical rounds are conducted at a minimum twice daily, in the RHU/Extended RHU/Step-Down Program, in the Infirmary, and in other

segregated areas of confinement. Inmates are charged medical co-pays fees at a cost of \$3.00 each initial visit. Routine and annual medical services are provided at no cost to the offender. Medical provider and medical follow up visits are at no cost to the offender. EARU medical clinic receives approximately 40 - 50 sick call requests daily.

EARU med pass "pill pass" is conducted in three (3) separate locations, the South Pill Call Window, the North Pill Call Window, and in the Max Unit. Medication call "pill pass" is conducted four (4) times per day. In addition, diabetic call for blood sugar checks is at 1:30pm, followed by insulin call at 9:00am, 1:30pm, and at 9:00pm. There is a special designated time for inmates requiring services. During med pass hours there is one security officer station at the window providing confirmation of identity of offender prior to issuance of medication. During Pill call there are two (2) nurses on duty that administers medication, diabetic sticks and insulin. Medications are administered as direct observation therapy. All no shows or refusals to medications are documented and/or referred for further medical review and assessment. Offenders are permitted Keep on Person (KOP) medications. KOP's are "self-administered". There is a limited supply of Over the Counter (OTC) medication available in the Commissary for purchase by the offender. During daily Pill call, there is an average of 1200 inmates authorized medication. At the time of this audit there was one (1) inmate authorized narcotics. A designated nurse (with security escort) conducts med pass to the inmates housed RHU/Extended RHU/Step-Down Program and other segregated areas of confinement. Morning pill call lines were observed and found to be secure, concise, and orderly.

Upon release, offenders are provided a 7-day supply and prescriptions for a 30-day supply. Inmates on mental health medication are released with a 30-day supply which gives them time to follow up with mental health on the outside.

EARU's inmates are screened and treated on a variety of chronic illnesses and are provided with education related to their illness during each chronic disease visit. Onsite Chronic Care clinics include services for the following: Diabetes, Hypertension, Seizures, Cholesterol, and Asthma. Onsite Special Care Clinics include services for the following: HIV, Hep C, Oncology, Nephrology, and Ophthalmology. At the time of the audit the monthly average of onsite Chronic Care consults was 200, and the monthly average of onsite Specialty Care consults were 10.

At the time of audit all scheduled offsite Chronic Care consults were conducted via TeleMed. The monthly average of offsite Chronic Care consults conducted via TeleMed were 100. Offsite Specialty Care clinics include services for the following: Oncology, GI, Hematolgy, and Dermatology. At the time of the audit the monthly average of Offsite Specialty Care consults was 64.

EARU's Dental Clinic operations is under the supervision of one (1) Dentist and one (1) certified Dental Hygienist and one (1) certified Dental Assistant. Dental services are provided and triaged through the medical sick call process. EARU's Dental operations is comprised of one (1) "Main" Dental Clinic which services General Population and one (1) satellite "Max Unit" Dental Clinic located in the Restrictive Housing wing.

The Main Dental suite is comprised of one main room. Room provides ample space for all dental services. Space provided contains two (2) dental bays, two (2) dental chairs with attached lights and two (2) delivery dental units. There is one (1) long lab counter with two (2) sinks; six (6) locked drawers containing sharps and tools; and three (3) locked cabinet units containing supplies and sharps. There are four (4) overhead cabinet units containing supplies. There is one (1) autoclave sterilizer, one (1) biohazard container, one (1) oxygen tank, one (1) locked flammable storage containing one (1) torch for adjusting dentures, one (1) wall mounted sharps container, one (1) wall mounted x-ray unit. There is also one (1) locked medical cart containing all of EARU's Maximum Security Unit sharps and tools. EARU's General Population Unit sharps and tools are kept in locked drawers in the Dental Clinic. There are three (3) staff desks and chairs, two (2) computers and one (1) cabinet for staff with extra supplies, archive documents, etc.

EARU's Max Unit satellite Dental Clinic contains one (1) dental bay, one (1) dental chair, one (1) one autoclave, one (1) x-ray machine, one staff desk and chair. There are no sharps, tools, flammables, nor any other items stored in this room. Equipment and/or dental items are transported over from the Main Dental Clinic in the secured Max Unit dental medical cart each time service is provided.

The average number of dental requests received (both GP and Max Units) on a monthly basis is 60 to 75.

Dental services are provided five (5) days per week during the hours of 6:00am – 2:00pm. Alternate dental hours are scheduled for inmates housed in the Max Unit. Some of the dental services provided are: fillings, dental screening, hygiene education, routine x-rays, dentures, cleaning and emergency care. A check of all dental tools and sharps were conducted. A log/booklet is maintained with photos identifying all dental tools. The inventories were found to be accurate and up to date. Spore tests are performed weekly and there is a corresponding log as well as results on file. Broken tools are documented and disposed of by facility maintenance. Sterilization procedures are monitored twice daily and were found compliant with state and federal standards.

EARU meets necessary American Disability Act (ADA) standards, including accessible paths of travel, ramps, and TTY (Text Telephones) phones. Unit telephones with volume controls, and Language line access are provided in various areas of the facility as well as in the housing units.

Although not an accreditation PREA site, instructions/informational and instructional signs were observed posted in various locations within the facility.

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

EARU's Pharmacy operations are located within an area contained behind a secured locked door. Access to facility medication supply room keys is restricted to the designated medical staff only.

Prescribed medications are ordered through Diamond Pharmacy and delivered within 24 to 48 hours. The backup pharmacy is through the local Deans Pharmacy. The Pharmacy and medical bulk stock inventory are counted and verified monthly. Narcotics are stored in the secured pharmacy area behind a second locked closet area. They are sent to the Arkansas Department of Health for destruction. Full count medication cards that have not left the pharmacy are returned for credit. The COVID freezer temperature is monitored and checked twice daily. A review of the proper disposal of expired medication were found to be accurate and in order. Routine quarterly audits are conducted. There is a process of a two (2) party nursing team sharp count conducted, with the daily updated information reflected on the inventory log. When a nurse arrives for or leaves a shift, a count of all area sharps are completed by the first nurse with a second recount by the second nurse. Sharps in the Main medical clinic, the South Infirmary, the Bulk Stock Room, the Lab, the South Pharmacy, and in the Main Dental suite are counted twice daily. Sharps are always locked up while not in use. Review of a number of sharp counts found all to be properly inventoried and in order. The facility emergency drug kit located in the sharps room was found to be inventoried and in order. The auditor reviewed the Medical Appraisal and Revalidation System (MARS) for appropriate signatures and missed doses. All documents were found accurate and in order.

Medical complaints and grievances are submitted using the grievance process. The Grievance Coordinator responds to all grievances through the HSA. Step I grievances are addressed by the EARU team of Healthcare Administrative staff, Step II grievances are addressed by EARU's HSA, Step III grievances are addressed and responded to by the Regional ADC Healthcare Administrative staff. The average number of monthly grievances received is 3.

EARU's medical records are provided electronically (EOMIS). Medications distributed at pill calls are documented by scanning the item into the electronic medical records. The electronic inmate list of medications are provided through the M.A.R.S. system. A sample review of EARU's inmate medical records found documents concise, accurate, and well organized. A sample review of EARU's medical license, registrations, and random inventory of sharps and instruments found all inspected to be accurate. EARU inhouse pharmacy license maintains expiration date of 12/31/2024.

Express Mobile provides onsite MRI, X-Ray, and Ultrasound services. Services are scheduled as needed. All EARU nurses draw labs. Hours of operation are from 6:00am to 2:30pm. LabCorp provide courier services. The LabCorp courier box is located in the front house administrative area (PBX). Restricted keys are located in Master Control. There is a dedicated printer for lab results which are processed and received the next day. STAT labs are processed via email or fax as soon as possible.

EARU's medical has a plan for the management of communication diseases including education on prevention, diagnosis, and isolation. Communicable disease and outbreaks are investigated and managed on-site, and reports are provided to the health department. MRSA and COVID precautions are in place. When the needs of the inmates are beyond the capabilities of the facility, referrals are made to a contracted hospital. Blood borne pathogen kits are stored in the medical clinic. Inmate workers assigned to provide laundering services have been trained to take precautions to control or prevent the spread of infectious diseases. Inmates are provided annual TB tests and flu injections at no cost. TB tests and flu injections are also offered to Inmates and staff at no cost. EARU flu injections are not mandatory. Infectious control training is provided to all medical staff annually.

EARU's medical and mental health staff receive annual CPR, First Aid, and routine fire drill training. EARU's medical department oversees the contents, restocking, inventory and control of the facility AED, Blood-spill and First aid kits. Narcan kits are strategically located at designated areas of the facility. Inspections found items properly stored in a secured location and noted within expiration period. There are three (3) AEDs located in the facility. Fire extinguishers are strategically located throughout the facility proper and satellite areas.

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

State of Arizona Department of Correction MQRS audits are conducted quarterly.

State of Arizona Department of Corrections – Audit Operation Divisional audits are conducted annually. The Arkansas State Board of Pharmacy audits EARU's pharmacy operations annually. At the time of review the facility was not certified in PREA operations. MQRS conducts on-site audit sannually.

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

Medical/Therapeutic diets allow for inmates to develop good eating habits. Requests for Medical/Therapeutic diets are processed through the medical department. Available medical diets include clear liquid, full liquid, pureed, mechanical soft, diabetic, calorie counts (various), bland, high-fiber, low fat, high protein, renal, low sodium and allergy. All requests are reviewed by the assigned facility Dietitian and forwarded to the HSA for approval.

Inmates access mental health services through the medical sick call kite/kiosk process. Inmates can also be referred by facility staff and/or shift supervisors. Inmates are provided service within 24 to 48 hours from the date of kite submission.

Mental health services are conducted at the end of the facility's main corridor. This office space includes: one (1) officer station, seven (7) private offices/interview rooms, three (3) large classrooms, a staff break room, staff and inmate restrooms, an administrative office, and a large inmate waiting room.

EARU provides Tele-Psych services. Emergency mental health problems are addressed by on-call staff 24 hours per day/7 days per week. The on-call staff will conduct a risk assessment, and if deemed necessary, the inmate will be placed on a "mental health status" and transferred to the facility's suicide/observation holding cells. A total of fifteen (14) Mental Health staff assist in providing services to inmates housed at the facility. Average mental health case load is 34 inmates per clinician.

If an inmate states that he will harm himself during regular business hours, he is seen by the Mental Health staff, when mental health staff arrive on grounds, medical will evaluate inmate using established mental health crisis protocol. If placed on "mental health" status the level of observation is constant, unless otherwise ordered by the Mental Health provider.

EARU Observation cells are designated as the first 2 cells in each of the Isolation Wings (barracks). Connected vents have been installed in each Observation cells allowing back and forth voice communication with the inmate and staff (audible). Cameras are also stationed in each of the Observation cells. All orders are received by Mental Health. Observations are security/medical/mental health counselors staff rounds and documentation noted in the "Watch log".

Under strict mental health instructions inmates are provided a safety shroud, one (1) safety pillow, one (1) safety mattress. Reading material, and other safety provisions may be authorized/ordered depending on the situation. Inmates are temporarily housed on this status until a determination is made that either inmate is to return back to general population or that an immediate transfer is needed which will be coordinated through the Mental Health Supervisor.

Mental health staff at EARU provides a comprehensive range of mental health services to the throughout the facility. These services include evaluation and assessment, case management, counseling, crisis management, psychiatric care, monitoring of medication compliance, psychological testing, and follow up for inmates in the RHU/Extended RHU/Step-Down Program and other segregated areas of confinement.

Additional mental health programs offered are: Crisis Intervention, Group Counseling, Dual Diagnosis, Multi-Disciplinary programming, and Individual Treatment plans. Substance Abuse programming is provided to EARU's inmates through contractual services. Tele-psych services are provided at EARU as needed. Mental health staff conduct rounds in the Restrictive Housing Units weekly. Inmates requiring mental health services are seen by a physician once every three (3) months or more often as needed. The psychiatrist meets with every inmate on psychotropic medications at least every 90 days, or more often as needed. The average number of inmate "contacts" (routine caseload/emergent/referrals, etc) by Mental Health per month is 240. The total number of inmates on psychotropic medication is 237.

All EARU's employees receive annual suicide prevention training. EARU Regional medical staff provides annual medical training. Training is conducted both onsite and online. New hires receive the required 40 hours of facility wide training, additional staff receive additional medical training based on position.

Recreation:

EARU's recreational department is under the supervision of one (1) Recreational Supervisor. There are two (2) inmates assigned as recreational workers. As in most activities, security officers provide assistance to the facility recreational programs. There is a minimum of one (1) security officer that is assigned as a "floater" overseeing the entire recreation yard when in operation. Recreation schedules are posted throughout the housing units.

Documentation lists recreation hours and are provided seven days per week. Inmate recreation is scheduled in one hour block increments, Monday through Friday from 9:00am to 8:00pm.

EARU indoor recreational activities include: an indoor gymnasium, a basketball court, volleyball, and exercise equipment.

Additional indoor activities available in the housing units include: television viewing, tablets (video games, movies, music and books) puzzles, card games, dominoes and chess games. Movie nights are also provided. The facility hobby craft program provides inmates with the opportunity to work on leather and woodworking projects, which are sold to staff and the community. In accordance with unit guidelines inmates in the Maximum Unit may access the gymnasium with designated individual outdoor recreational space.

The facility outdoor recreational activities include: a large spacious outdoor recreational field, a walking/running area, a basketball court, volleyball, and soccer. Facility outdoor recreational area provide protective awnings for inclement weather.

Recreation schedules are posted throughout the housing units. It is listed that recreation hours are provided 7 days per week. Inmates housed in the Maximum and General Population Units receive a minimum of one (1) hour of recreation per day.

At the time of review, documentation reflects inmates housed in EARU's RHU/Extended RHU/Step-Down Program and other segregation areas of confinement had not been provided the required minimum one (1) hour of exercise outside of their cells per day. Reasoning noted is due to (temporary) mitigating circumstances surrounding the facility's most recent RHU recreation module construction along with critical staffing shortages.

Religious Programming:

EARU provides a variety of religious programs, which are supervised by the facility Senior Chaplain. The Senior Chaplain, a licensed, ordained clergy member, also serves as the facility Volunteer Coordinator. Three (3) Chaplains also assist in providing religious services. There are four (4) assigned inmate clerks sanitation and other related religious clerical duties. At the time of this review there was a total of 32 volunteers assisting in providing religious services to this facility. Some of the volunteer clergy and community leaders include a variety of Catholic, Jewish and Protestant faith spiritual advisors.

Some of the EARU's religious programming services include: Mennonite, Protestants, Catholics, Jewish, Muslims, Latter-Day Saints, Jehovah's Witnesses and Kairos. A certification program allows inmates to earn theology credits and access religious materials. Many positive comments were received regarding the EARU's "Faith Based" housing unit. P.A.L.S. a religious based program that assists the inmates in improving self-discipline, awareness and self-motivation before re-entering the community.

Think Legacy is a program designed to reduce recidivism by prompting social skill development, job readiness skills, awareness of community resources and connection to free world mentors that will aid participants in achieving successful reentry into communities across Arkansas is coordinated through the Chaplains office.

Religious schedules were observed posted in the housing units and in the library area. Weekly rounds are conducted in RHU and other segregated areas of confinement by the assigned facility Chaplain and/or Volunteer clergy.

Additional responsibilities of the Chaplain include: individual counseling, premarital counseling, coordination of marital ceremonies, coordination of religious baptisms, bereavement interventions and the coordination of the facility's volunteer schedules and activities. The Chaplain also provides religious literature and resource material to offenders housed at EARU upon request. Resources include: audio-video equipment, DVD's, headphones, books, magazines, prayer rugs, prayer beads, rosaries, religious medallions, and copies of the Bible, Koran, and other related material.

The Chapel also maintains a baptismal and lectern. Communion is regularly held. During the month of March (2023) there was a total of ten (10) baptisms conducted.

All areas designated for religious services were found clean and organized with ample space.

Offender Work Programs:

Some inmates arrive with technical and vocational skills that make them employable in routine institutional operations. Hands on experience assists them in learning marketable skills transferrable to the community.

Routine work assignments at EARU include the usual found in correctional settings such as sanitation, garden squad, barbershop, food service, commissary, laundry, clerks, educational tutors, field squads, vegetable production worker, landscape, library aides, canine units, recreation, maintenance and regional maintenance.

EARU maintains approximately 60 acres of land specifically designated for harvesting items used to feed the facility's population. Some of the vegetables grown include: cucumbers, white potatoes and squash.

All EARU work assignments are on a voluntary basis. The Arkansas Department of Corrections do not pay wages to inmates, but a Good Time system has been used for incentives.

Barbering services provided to inmates housed are in accordance with coordinated housing schedules. All haircuts are by scheduled appointment only. Signup sheets are available for inmates within all of the housing units. Inspection of tools and barbering equipment were found to be properly inventoried, organized, sanitized and clean. Inmate barbers are provided safety and sanitization training. Barbering services are also providing to EARU staff. EARU have provided a separate barbering area for these services.

Academic and Vocational Education:

EARU's academic/vocational programming provides comprehensive educational training for offenders which enables them to be employed upon release from prison. EARU's academic/vocational departmental staff are contractual employees of the Arkansas School District. Staffing consists of one (1) School Principal, four (4) Academic and three (3) Voc-Tech instructors. There are two (2) assigned Security Officers, one (1) assigned to the Academic Program and assigned to the Voc-Tech Program. Their Academic/Voc-Tech Program utilizes three (3) inmates as Tutors and as an Inmate Interpreter.

General academic/vocational classroom hours are: 7:00 am to 3:15pm. With security precautions in mind, there are a number of educational opportunities provided to offenders housed in RHU. Individual sessions are conducted in the housing unit with the assigned Instructor. The Academic/Voc-Tech program department is comprised of one (1) security station, seven (7) classrooms, one computer lab with 19 computer terminals, two (2) staff offices, staff and inmate restrooms, a water fountain, audio-visual equipment, storage rooms, and a staff break room.

At the beginning of the 1997/1998 school year, academic education became mandatory for all inmates housed within the Arkansas Department of Corrections who did not have a high school diploma or GED. At the time of review the following academic programming offered at EARU included: ABE, AIE (Intermediate), Pre-GED, GED, and ESL courses. Inmates earn 30 days of meritorious good time for participation and 180 days for completion of a GED course.

Educational courses offered through Philander Smith College include: a Criminal Justice—Bachelor of Science Degree, a Liberal Studies-Bachelor of Arts Degree, and Philosophy and Religion-Bachelor of Arts degree. Other educational courses offered include: Principles and Applications for Life and Think Legacy.

EARU's vocational programming is comprised of several technical certification courses. Job skills are managed and developed through classroom instructional and hands-on training. At the current time, vocational programming includes the following courses:

- A 600-hour Welding and Fabrication course with the opportunity to become certified by the American Welding Society.
- A 600-hour HVAC course that covers general maintenance required to complete design and installation of air conditioning equipment. Students also have the opportunity to earn an EPS 608 License which allows them to purchase, transport and work with refrigerants and air conditioning equipment
- A 600-hour Building and Grounds Maintenance course is available that covers general facility maintenance such as basic electrical, HVAC, roofing and masonry.
- A 225-hour short course of Building and Ground Maintenance which covers general facility maintenance.

The listed vocational courses include Financial Literacy and Workplace Readiness components, are safety oriented and follow the National Center for Construction Education and Research (NCCER) curriculum.

At the time of review there were a total of 230 inmates enrolled in EARU's academic/vocational programming of which 50 are enrolled in Voc-Tech, and 40 enrolled in College Certification program.

The Correctional Education Association (CEA) has a current Memorandum of Understanding (MOU) with EARU's Education Department. CEA accreditation is current for the period July 1, 2022 through June 30, 2025.

Social Services:

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

Two of the EARU's primary social service programs offered include:

- P.A.L.S. a religious based program that assists the inmates in improving self-discipline, awareness and self-motivation before re-entering the community. EARU utilize Barracks/Wing #23 as the PALS housing unit.
- Think Legacy, a program designed to reduce recidivism by prompting social skill development, job readiness skills, awareness of community resources and connection to free world mentors that will aid participants in achieving successful reentry into communities across Arkansas. Inmates approved for this program must be within 12-18 months of release or discharge date.

There is a handbook provided which contains self-study and group chapters on topics such as: parole, transfer, early release, community corrections settings, various rights such as voting, obligations such as child support, driver records and licenses, health and human services agencies, department of workforce services, and social security benefits. EARU utilized Barracks/Wing #20 as the Reentry housing unit.

Additional social service programs offered are: Domestic Violence Awareness Prevention, Stress Management, Thinking Errors, Communication Skills, and Parenting Skills. At the time of review EARU did not provide a formal substance Abuse treatment program.

Visitation:

EARU provides both onsite (face to face) and video visitation (kiosk stations). Visitation hours include: 11:30am to 1:30pm and 2:00pm to 4:00pm, Saturdays and Sundays for inmates housed in general population and 11:00am to 1:00pm and 2:00pm to 4:00pm on Tuesdays for inmates housed in the maximum and or other areas of segregated confinement.

All special visits (long distance, prospective employer law enforcement, etc) must have prior approval in writing by the Administrative staff. Attorney visits are also accommodated upon prior administrative authorization. Video visits are scheduled by the visitor online via website.

All visits (video and face-to-face) are subject to recording and monitoring and can be used to preserve facility safety and security, to collect evidence in disciplinary proceedings, and/or advance criminal investigations and prosecutions.

EARU's main onsite visitation room is designed to facilitate both contact and noncontact visits. The visiting room consists of a large spacious area. There are restrooms, and informational bulletin board accessible to visitors. Vending machines are available and visitors are allowed to bring in money to purchase items during the visits. Visitor lockers are not available. The facility provides a small separate children's play space in this area. The facility does not provide outdoor visitation.

There is a second onsite visitation room located in the facility Max Unit area. The area is comprised of sixteen (16) separate visiting modules. Inmates and or visitors have the option to conduct visits by way of noncontact and/ or by video. The area also provides two (2) separate attorney room that are used in accordance with administrative approval. Visits for inmates housed in RHU are conducted in this noncontact visitation area. Hours of visitation are on Tuesdays and Thursdays from 11:00am to 2:00pm. Max unit visits are up to two (2) hours once a month and must be scheduled 24 hours in advance. The Superintendent must approve all of these visits.

Security staff with camera surveillance provide onsite coverage during visitation hours. The Max Unit Master Control Center provides additional security coverage to the Max Visitation room. Each visitation room has a separate visitor's entrance, and visitors are properly identified using a biometric system.

Inmates are provided access to institutional inmate telephones in each housing unit area. The Securas Technologies company contracts with the Arkansas Department of Corrections at a rate of \$.21 per minute. J-Pay services are also included in this service. Telephone usage systems for inmates are provided in accordance with the set unit activity schedule. All inmate telephones have "language line" access. Emergency phone calls are also permitted upon Administrative approval. Telephone calls are subject to monitoring and recording at any time by departmental staff, unless prior special arrangements. Third party calls are not permitted. A facility TTY machine is onsite and available upon request. EARU staff interpreters provide assistance to non/limited English-speaking offenders.

Unless security and/or safety precautions preclude action, all EARU inmates are provided tablets for use. Tablets are issued to inmates providing access to the following facility services: calls, inmate handbook, PREA information, authorized games, books, religious books, Lexis/Nexis or Case Maker Law Library, along with an authorized banking app. Tablets are under constant monitoring with strict surveillance protocols in place.

EARU's mailroom procedures are comprised of four (4) authorized delivery components: general correspondence and packages, Inter-Unit Correspondence, privileged correspondence, and publications.

EARU's mailroom operational services provide a six (6) day per week schedule. Each of the six (6) days, inmates receive incoming mail and are afforded the opportunity to send out mail. There are a total of three (3) staff that oversee mailroom operations.

Approximately 2,500+ pieces of inmate mail are received daily. With the exception of legal mail, all incoming mail is opened and screened prior to issuance to inmate. All mail is screened with an X-ray to detect contraband. Personal Protection Equipment is present in the mailroom to handle and contain suspicious items.

With the exception of legal mail all outgoing mail is forwarded and processed, unsealed prior to mailing. Legal mail is distributed by a Lieutenant and documented. Provisions are made for the processing of legal mail which is logged and opened in the presence of the inmate. Logs are maintained for the various types of mail processed.

Secured offender mail, grievance boxes were observed secured and easily accessible.

Library Services:

EARU's library services are conducted under the supervision of the Assistant Librarian. There are a total of four (4) inmate library clerks assigned to assist with general library services. The four trained inmate library clerks are supervised by a Masters' degree Librarian from the Arkansas Department of Corrections Central Office and the Associate degree Assistant Librarian. The Assistant Librarian provides training to the library clerks. There is a Security staff assigned in the adjacent hallway by library during open hours of operation.

EARU's General library services are provided seven (7) days per week. Hours of operation rotates between inmate housing units with morning and evening hours. The library schedule is posted throughout the housing units. EARU's Law library hours are scheduled Monday, Tuesday, Thursday, Friday, Saturday, and Sunday from 10:00am to 10:00pm. The Law Library is closed on Wednesdays for inventory and classification. Inmates are able to go to the library a minimum of twice per week. Inmates are able to access the library during recreation hours. Inmates housed in General Population may check out up to five (5) books per week for a two-week period.

Inmates requesting access to general/law library services shall do so by utilizing a library request form, which is available through the unit staff, by the law library, or during RHU/Extended RHU/Step-Down Program or other segregated confined unit library staffing rounds. These requests can include request for book loans for leisure reading; law book or material loans; notary services, request for copies; etc.

Special library accommodations are provided to inmates housed in RHU/Extended RHU/Step-Down Program and other segregated confined areas. These special accommodations are reviewed and screened by library and administrative security staff prior to approval. Rounds are conducted on a weekly basis. The Assistant Librarian pickup and deliver books and loaned materials to offenders in RHU/Extended RHU/Step-Down Program or other segregated confined areas weekly, and as needed for notary services. Inmates in RHU/Extended RHU/Step-Down Program and other segregated confined units may request a total of up to three (3) paperback books once per week.

Housing unit staff will inspect all library material for contraband prior to delivery and upon exiting from these units.

A legal reference section is located in the office of the library. Inmates may request to sign legal reference books out, one book out at a time. These books are forwarded by Central Office. An offsite ADOC - Paralegal is assigned to the facility to oversee and provide legal services to inmates housed at EARU.

Onsite visits are conducted once per month, or by special request. Law library (legal) services include: printing of legal documents; copying legal documents; legal research; legal forms; addresses for legal mail; notary services; and book loans. Westlaw legal library materials are available on computers, and three (3) computer terminals and one (1) printer is provided. Due to current COVID restrictions, the EARU's library does not participate in the Inter-library loan book program.

Inmates may read magazines while in the library. Library material and booklets are available for inmates having limited English-speaking capabilities. Books on tape and braille materials are available, and library carts are not provided for use in RHU/Extended RHU/Step-Down Program and other segregated confined units at this time due to staffing shortages. EARU's library has approximately 4,151 books, and 6 monthly magazines.

With the exception of security restrictions all inmates are provided tablets. Legal research, and other related activity conducted on inmate tablets are monitored by assigned facility staff.

Laundry:

EARU's maintains one main centralized institutional laundry operation which services the entire facility complex. Laundry services are under the supervision of one (1) civilian Laundry Supervisor, fourteen (14) inmate laundry workers and one (1) inmate tailor position. Inmate work assignments are divided up in accordance with three (3) shifts.

EARU's centralized institutional laundry operation is comprised of four (4) industrial washers and three (3) industrial dryers, a sewing machine and four (4) steam press tables. Maintenance conducts weekly equipment temperature checks. Chemicals are automatically dispensed into the machines. Inspection of inventory and issuance logs were found accurate and in order. Items containing bio-hazard waste are properly secured and placed in the facilities designated bio-hazard container for proper disposal.

Inmates housed at EARU are issued: - 3 sets of state issued clothing, 3 sets of undergarments, and 3 pairs of socks. The undergarments are inventoried and exchanged every 3 to 6 months. State clothing, personal laundry bags, towels, and wash cloths are washed and/or exchanged three times per week. Linen, pillowcases, and blankets are washed and/or exchanged weekly. Whites and shoes are exchanged every 6 months. Additional laundering services provided consists of kitchen whites, mops and barber shop/facility cleaning rags.

During intake, inmates are provided indigent packets as well as clothing allotment and bedding.

Each inmate is provided with an orientation packet and Inmate Handbook for reference. Handbooks and orientation packets are provided in both English and Spanish.

Inmate workers providing laundering services are trained to take precautions to control or prevent the spread of infectious disease. All EARU staff are trained in the proper handling and disposal of biohazards. Red biohazard and water-soluble bags are available for use. Biohazard material is stored in the medical bio-hazard room and then transported to the designated biohazard area for pickup. Bio-hazard material is picked up monthly or more often as needed. Inspection of lint traps and exhaust vents found areas clean and free from debris.

The laundry services provide indigent packages to inmates classified as indigent monthly. Cleaning and sanitizing of mattresses are conducted in the Intake area.

Inmate property is managed by a Property Control Officer. There is one (1) inmate worker assigned to assist with this operation. Personal property is processed upon Intake in the presence of the inmate. A receipt is completed and placed in the vinyl storage bag and a copy is issued to the inmate. Property is stored in the main building.

F. Examination of Records

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

1. Litigation

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

2. Significant Incidents/Outcome Measures

The Significant Incident Summary and Outcome Measures were reviewed for the past reporting period with the Healthcare Administrative Team. Documentation appears to be consistent with a facility of this size and nature.

Additional information requested for clarification:

Significant Incident Summaries:

1st Year (5/1/2020 - 4/30/2021)

Significant Incident Summary

• Sexual Violence (9)
Facility Response - documentation forwarded for PREA investigation

(confidential)

Suicides – (4)
 <u>Facility Response</u> – all result of hangings

Outcome Measures

- 6D (1) Number of problems identified by quality assurance program that were corrected during a twelve (12) month period divided by the number of problems identified by quality assurance program during a twelve (12) month period. (4)
 - <u>Facility Response</u> The problem corrected through the quality assurance program was for the regarding 1) Improve the number of consults updated to the status of "Consult Completed-Report Received" within 120 days of date consult was generated by 10%, 2) Increase Controlled Medication Log 9 Redbook documentation to 100% Compliance, 3) Documentation for medication used to treat infections will reflect the completion of the prescription written, goal of 90% compliance, 4) Improve the number of consults seen within the required time frame.
- 6D (3) Number of offender suicide attempts in the past twelve (12) months divided by the average daily population. (6)

 Facility Response There were 6 attempts in this year, 2 hanging attempts, one attempted overdose, and 3 attempts were done in the form of lacerations.
- 6D (4) Number of offender suicides in the past twelve (12) months divided by the average daily population. (5)
 <u>Facility Response</u> The number of completed suicides were all in the form of hangings.
- 6D (5) Number of unexpected natural deaths in the past twelve (12) months divided by the total number of deaths in the same reporting period. (10).

 $\underline{\text{Facility Response}}$ – The unexpected death was from Hepatocellular Cancer.

2nd Year (5/1/2021 – 4/30/22)

Significant Incident Summary

- Sexual Violence (1)
 <u>Facility Response</u> documentation forwarded for PREA investigation (confidential)
- Suicides (2)
 <u>Facility Response</u> all result of hangings

Outcome Measures

• 6D (1) – Number of problems identified by quality assurance program that were corrected during a twelve (12) month period divided by the number of problems identified by quality assurance program during a twelve (12) month period. (1)

- <u>Facility Response</u> The problem corrected through the quality assurance program was for the study regarding HIV. The question was "If consented, did the patient receive the influenza vaccine in the past year?"
- 6D (2) Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period. (1)

 Facility Response The problem(s) identified through the quality assurance program was the Scheduled and Unscheduled Care specifically the following questions: "If the patient was sent to the hospital as a result of a complication of a chronic illness, does the review of the 2 previous CC notes indicate appropriate or other diagnostic tests order? If the patient was sent to the hospital as a result of a complication of a chronic illness, the degree of a control is documented at each follow up visit for the previous 2 visits? Was the patient seen by an HCP on the day of return or the next day the HCP was on site after return from ER or inpatient admission?"
- 6D (3) Number of offender suicide attempts in the past twelve (12) months divided by the average daily population. (4)
 <u>Facility Response</u> There were 4 attempts in this year, all in the form of hangings.
- 6D (4) Number of offender suicides in the past twelve (12) months divided by the average daily population. (3)
 <u>Facility Response</u> The number of completed suicides were 2 and they were all in the form of hangings.
- 6D (5) Number of unexpected natural deaths in the past twelve (12) months divided by the total number of deaths in the same reporting period. (1).

<u>Facility Response</u> – One death was from Acute Liver Failure, Hypertensive Disease, Cardiovascular Disease and CHF, another from Acute Myocardial infarction, and last death was Metastatic Small Cell Carcinoma

3rd Year (5/1/2022 – 4/30/23)

Significant Incident Summary

- Escape (1)
 <u>Facility</u> Response August 2023 inmate escape from assigned work detail
 (CSC Lifer Samuel Hartman). At time of review still at large.
- Sexual Violence (1)
 <u>Facility Response</u> documentation forwarded for PREA investigation (confidential)
- Suicides (2)
 Facility Response all hangings
- Unnatural Deaths (1)
 <u>Facility Response</u> strangulation by cellmate

Outcome Measures

- 6D (3) Number of offender suicide attempts in the past twelve (12) months divided by the average daily population. (7)

 <u>Facility Response</u> This year had seven attempts all in the form of hangings.
- 6D (4) Number of offender suicides in the past twelve (12) months divided by the average daily population. (2)

 <u>Facility Response</u> There were 2 completed suicides and they both were in the form of hangings.
- 6D (5) Number of unexpected natural deaths in the past twelve (12) months divided by the total number of deaths in the same reporting period. (3)

<u>Facility Response</u> – This year had 3 unexpected deaths due to natural causes. They are from Colon Cancer, Hypertensive Atherosclerotic Cardiovascular Disease and 2 from Acute Myocardial Infarction due ot Atherosclerotic Heart Disease.

3. Departmental Visits

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

Department Visited	Person(s) Contacted
Chapel Visitation Food Service	Albert McKinney, Senior Chaplain Superintendent Jackson Sgt. Bell/ Captain Bell
North Hall (Minimum Housing Unit) Barracks (13-16) Barracks (17 – 20) Control Booth	Latosha Davis, Lieutenant/Scott Taylor, Population Bldg. Major/Deputy Warden Richardson/Deputy Warden Johnson
Mental Health	Timothy Owen, Mental Health Coordinator
East Hall Barracks (9 – 12)	Scott Taylor, Population Bldg. Major/Deputy Warden Richardson, Deputy Warden Johnson
South Hall Barracks (1 – 8)	
Isolation (1 – 7) Restrictive Housing Unit	
Max (1 – 7)	Tyrone Allison, Max Bldg. Major

School Angela Beard, School Principal/Trawandra Wright,

Yard/Gymnasium Recreation Staff

Library (General/Law) April Allison, Library Assistant

Medical Clinic/Infirmary Emma Hatchet, HSA/Jason Palmer, AHSA/Nurse

White

Central Laundry Tiantha Westbrook, Laundry Supervisor

Property Room Angela White, Sergeant

Mailroom Linda Southern, Mailroom Supervisor

Maintenance Michael Buford, Director of Maintenance/Krissie

Sweatman, Maintenance Staff

Warehouse

Key/Tool Control Rolland Geror, Lieutenant

Arsenal

Count Room Brenda Foreman, Sergeant

Central Control Sallyport/Towers

North/South Commissary

ICC Garage Michael Bean, Sergeant

Canine/Field Unit Douglas Swiney, Field Captain/Eddie

Hamilton, Canine Unit

4. Shifts

a. Morning/Afternoon Shift (6:00am – 6:00pm)

The team was present at the facility during the day shift from 8:00am to 6:00pm on the first day of the audit, from 6:00am to 5:50pm on the second day of the audit, and from 8:50am to 12:30am on the third day of the audit.

During this time, the audit team participated in the Entrance Session, toured the facility, reviewed the accreditation files, observed medication pass, and conducted staff and offender interviews. Also, during this time period the audit team participated in the Closing Session. The audit team observed offenders during recreational and academic classroom sessions. Throughout the day and evening offender workers were observed cleaning in various areas throughout the facility. The audit team observed the operations of security metal detection machines, and sallyport operations. Facility operations were busy but ran smoothly.

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

The team was present at the facility during the evening shift from 6:00pm to 6:15pm on the first day of the audit.

During this time period, the audit team tested a sample meal tray. The meal was warm, palatable, colorful and the content did appear to meet all nutritional requirements. Also, during this time period the audit team observed both security and medical shift change, observed security perimeter operations, reviewed the accreditation files, and conducted staff and offender interviews. The audit team observed offenders actively participating in social service programming. Staff interviewed were very knowledgeable of their job responsibilities and conducted themselves in a very professional manner.

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:

At the Commission on Accreditation for Corrections Panel Hearing conducted on Saturday, August 14, 2021 in Nashville, Tennessee, it was listed that an updated Plan of Action for Standard #5-ACI-1C-05was to be submitted to ACA within 30 days. It was also listed that approval would be granted upon receipt of this revised Plan of Action.

As of this date this audit team finds that standard #5-ACI-1C-05 remains 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 team interviewed a total of 45 offenders during this reporting period. Most offenders interviewed stated that they feel safe at the facility. Most offenders voiced positive comments regarding access to medical care. Offenders interviewed stated that most of the time medical care is taken care of in a timely manner.

With the exception of a few inmates, interviews provided positive feedback as to the use of tablets, library and religious services, along with other facility programming provided. It is to be noted that there was a larger than normal negative response as to the lack of outdoor recreation provided. Interviews with ESL inmates noted that access to the language line as well as staff interpreters are readily available to any and all requesting assistance. Inmates interviewed stated that they do participate in routine fire and safety drills. When questioned offenders stated during emergent instances staff are available to address issues confidentially.

The audit team had the opportunity to interview two (2) representatives from the facility's Inmate Counsel. Inmates expressed positive comments regarding staff and the facilities operations. The representatives explain to this auditor how their roles provided assistance and clarification to the offender population within the facility. Discussion with inmate Counsel members explained the facility's universal information system and the process and input which it provides daily (via screen) to the prison population.

Status of additional requested personal offender interview via correspondence complaints/concerns sent to ACA:

• C. Sanders #113737 – Auditor attempted to personally interview inmate currently housed at EARU. Inmate refused to meet with auditor. Status of refusal witnessed by facility Sgt.

2. Staff Interviews

The team interviewed a total of 42 staff during the course of this audit. Staff interviewed expressed that they do feel safe working at the facility. Staff stated they do receive their 40 hours of annual training and are versed in fire safety and suicide prevention protocols. All staff were friendly and knowledgeable of their job duties. Staff expressed that they are afforded access to supervisory staff to address critical and/or confidential matters. Most staff interviewed stated that they are provided the opportunity to work towards advancement. Staff stated they do receive adequate training to perform their required duties.

H. Exit Discussion

The exit interview was held at 12:20pm in the facility Chapel with Superintendent Jackson and 31 staff in attendance.

The following persons were also in attendance:

Dexter Payne Director

Richard Cooper Assistant Director

Gaylon Lay Work Release Superintendent/Central Office

Michael Buford Construction Supervisor

Brian Drost Maintenance Construction Coordinator/Pine Bluff

Byron Brown Fire Safety Coordinator/Central Office

Dona Gordon RVP/Wellpath

Mary Carter Regional Manager/Wellpath
Kim Rosenthal Director of Operations/Wellpath

Shelly Byers Assistant Medical Administrator/Central Office

Lateris Willis ACA/Tucker Max Unit

Shelly Lawrence Agency ACA Manager/Central Office

Andrea Culclager Deputy Director Health Services/Central Office

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 Institution, 5 th Edition							
Supplement	Not Applicable							
Facility/Program	Arkansas Department of Corrections East Arkansas Regional Unit							
Audit Dates	March 8 -10, 2023							
Auditor(s)	Robbin Bell, Chairperson; Brian Gage, Member William Gallaher, Member							
	MANDATORY	NON-MANDATORY						
Number of Standards in Manual	64	509						
Number Not Applicable	5	55						
Number Applicable	59	454						
Number Non-Compliance	0	1						
Number in Compliance	59	453						
Percentage (%) of Compliance	100%	99.8%						

- 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

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

Standard #5-ACI-1C-05

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

FINDING:

It was determined that CACRF was Not Compliant with this standard as its staff vacancy rate (61.33% to 49.34%) exceeded 10% during the 18-month period.

Agency Response:

Plan of Action

We will challenge all staff at the East Arkansas Regional Unit to recruit prospective employees. The AR-DOC Recruiter (1-88-ADC Jobs) continually recruits for all AR-DOC units; the recruiter remains vigilant in conducting weekly and monthly job fairs in all communities within the State of Arkansas. The Arkansas Division of Correction's has a website (www.state.ar.us/doc) that lists all available jobs and an on-line application process to aid all interested parties in seeking employment at the AR-Division of Correction. The job openings for the East Arkansas Regional Unit are advertised weekly on the radio stations, social media and various community job fairs are held. The Work Force Centers have Push Cards, which contain direct information about this unit that is handed out during hiring events. The AR-Doc Recruiter or the Unit Human Resource Manager have placed yard signs which are in multiple areas in our communities with the East Arkansas Regional Unit information for public viewing. The Workforce Centers in the surrounding area have applications as well as all available job openings and pay scale for potential applicants. The East Arkansas Regional Unit has implemented a pilot program that allows for new hires to go directly into the unit to begin on-boarding training.

In the past new hires had to wait for the next BCOT class to start and complete the class prior to assignment, with the new program staff are able to begin working immediately after being hired. Because of this they can start earning paychecks sooner which will help with new hire retention.

Task

- a. Retain Staff
- b. Process available candidates
- c. Mentor all staff in developing the skills needed for a career with AR-DOC

Responsible Agency

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

Assigned Staff

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

Anticipated Completion Date

a. March 30, 2026

AUDITOR'S RESPONSE:

It was determined that CACRF was Not Compliant with this standard as its staff vacancy rate (61.33% to 49.34%) exceeded 10% during the 18-month period.

In concluding, the audit team supports the Plan of Action submitted to present this agency into compliance with the expected practices outlined in given standard (5-ACI-1C-05).

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Visiting Committee Findings

Mandatory Standards

Not Applicable

Standard #5-ACI-4A-01

WHEN AN OFFENDER IS TRANSFERRED TO SPECIAL MANAGEMENT HOUSING, HEALTH CARE STAFF WILL BE INFORMED IMMEDIATELY AND WILL PROVIDE A SCREENING AND REVIEW, AS INDICATED BY THE PROTOCOLS ESTABLISHED BY THE HEALTH AUTHORITY. UNLESS MEDICAL ATTENTION IS NEEDED MORE FREQUENTLY, EACH OFFENDER IN SPECIAL MANAGEMENT HOUSING RECEIVES A DAILY VISIT FROM A QUALIFIED HEALTH CARE PROFESSSSIONAL. THE VISIT ENSURES THAT OFFENDERS HAVE ACCESS TO THE HEALTH CARE SYSTEM. THE PRESENCE OF A HEALTH CARE PROVIDER IN SPECIAL MANAGEMENT HOUSING IS ANNOUNCED AND RECORDED. THE FREQUENCY OF PHYSICIAN VISITS TO SPECIAL MANAGEMENT HOUSING IS DETERMINED BY THE HEALTH AUTHORITY.

FINDINGS:

EARU does not maintain Special Management Housing Units.

Standard #5-ACI-6A-10

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

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

FINDINGS:

EARU does not house female offenders.

Standard #5-ACI-6A-21

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

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

OBSERVATION OF THE FOLLOWING:

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

MEDICAL DISPOSITION OF THE OFFENDER:

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

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

FINDINGS:

EARU only receives intra-system transfers.

Standard #5-ACI-6A-25

A COMPREHENSIVE HEALTH APPRAISAL FOR EACH INMATE, EXCLUDING INTRA-SYSTEM TRANSFERS, IS COMPLETED BY QUALIFIED HEALTH CARE PERSONNEL WITHIN 14 DAYS AFTER ARRIVAL AT THE FACILITY. IF THERE IS DOCUMENTED EVIDENCE OF A HEALTH APPRAISAL AND EVIDENCE OF REVIEW BY QUALIFIED STAFF WITHIN THE PREVIOUS NINETYY (90) DAYS, A NEW HEALTH APPRAISAL IS NOT REQUIRED, EXCEPT AS DETERMINED BY THE DESIGNATEED HEALTH AUTHORITY. HEALTH APPRAISAL DATA COLLLECTION AND RECORDING INCLUDES THE FOLLOWING:

- 1. A UNIFORM PROCESS AS DETERMINED BY THE HEALTH AUTHORITY
- 2. DOCUMENTTION OF REVIEW OF THE EARLIR RECEIVING SCREENING
- 3. RECORDING OF HEIGHT, WEIGHT, PULSE, BLOOD PRESSURE, AND TEMPERATURE BY HEALTH-TRAINED OR QUALIFIED HEALTH PERSONNEL
- 4. COLLECTION OF ADDITIONAL DATA TO COMPLETE THE MEDICAL, DENTAL, MENTAL HEALTH, AND IMMUNIZATION HISTORIES BY HEALTH-TRAINED OR QUALIFIED HEALTH PERSONNEL
- 5. MEDICAL EXAMINATION, INCLUDING REVIEW OF MENTAL AND DENTAL STATUS BY QUALIFIED HEALTH PERSONNEL
- 6. LABORATORY AND/OR DIAGNOSTIC TESTS TO DETECT COMMUNICABLE DISEASE, INCLUDING VENEREAL DISEASE AND TUBERCULOSIS
- 7. OTHER TESTS AND EXAMINATIONS AS APPROPRIATE
- 8. DEVELOPMENT AND IMPLEMENTATION OF TREATMENT PLAN, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION
- 9. INITIATION OF THERAPY, WHEN APPROPRIATE

10. REVIEW OF THE RESULTS OF THE MEDICAL EXAMINATION, TESTS, AND IDENTIFICATION OF PROBLEMS BY A PHYSICIAN OR MED-LEVEL PRACTITIONER, AS ALLOWED BY LAW

FINDINGS:

EARU only accepts intra-system transfers.

Standard #5-ACI-6A-32

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
- 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 may 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:

EARU only receives Intra-System transfers.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

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 (3) OR MORE INMATES HAVE A MINIMUM OF TWO (2) TOILETS. THESE RATIOS APPLY UNLESS ANY APPLICABLE BUILDING OR HEALTH CODES REQUIRE ADDITIONAL FIXTURES.

FINDINGS:

EARU has had no new construction after June 2014.

Standard #5-ACI-2C-08

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

FINDINGS:

EARU 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 (1) 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:

EARU has had no new construction after June 2014.

Standard #5-ACI-2C-12

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

FINDINGS:

EARU does not house disabled offenders who cannot otherwise perform basic life functions.

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:

EARU has not had any renovation, nor new constructions of inmate rooms/cells (after June 1, 2008).

Standard #5-ACI-2D-05

(New Construction or Renovation after June 1, 2014) EACH DORMITORY PROVIDES INMATES WITH ACCESS TO NATURAL LIGHT BY MEANS OF AT LEAST 12 SQUARE FEET, PLUS TWO ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER INMATE IN THE DORMITORY.

FINDINGS:

EARU, by definition, is not new construction, nor has there been any renovations (after June 1, 2014).

Standard #5-ACI-3A-07

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

FINDINGS:

EARU does not house female offenders.

Standard #5-ACI-3A-17

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

FINDINGS:

EARU does not house female offenders.

Standard #5-ACI-3D-05

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

FINDINGS:

EARU does not house female offenders.

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

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-03

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

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-04

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

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-05

WHEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT AN INMATE IS ADMITTED TO THE SPECIAL MANAGEMENT HOUSING UNIT FOR PROTECTIVE CUSTODY ONLY WHEN THRE IS DOCUMENTATION THAT PROTECTIVE CUSTODY IS WARRANTED AND NO REASONABLE ALTERNATIVES ARE AVAILABLE.

FINDINGS:

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR A REVIEW OF THE STATUS OF INMATES IN SPECIAL MANAGEMENT HOUUSING BY THE CLASSIFICATION COMMITTEE OR OTHER AUTHORIZED STAFF GROUP EVERY SEVEN DAYS FOR THE FIRST TWO MONTHS AND AT LEAST EVERY 30 DAYS THEREAFTER.

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-10

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT A QUALIFIED MENTAL HEALTH PROFESSIONAL PERSONALLY INTERVIEWS AND PREPARES A WRITTEN REPORT ON ANY INMATE REMAINING IN SPECIAL MANAGEMENT HOUSING FOR MORE THAN 30 DAYS. IF CONFINEMENT CONTINUES BEYOND 30 DAYS, A MENTAL HEALTH ASSESSMENT BY A QUALIFIED MENTAL HEALTH PROFESSIONAL IS MADE AT LEAST EVERY 30 DAYS FOR INMATES WHO HAVE AN IDENTIFIED MENTAL HEALTH NEED, AND EVERY THREE MONTHS FOR ALL OTHER INMATES MORE FREQUENTLY IF PRESCRIBED BY THE CHIEF MEDICAL AUTHORITY.

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-11

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

FINDINGS:

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

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-13

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

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-14

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

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-15

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

FINDINGS:

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

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-17

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

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-18

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

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-19

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT WHENEVER AN INMATE IN SPECIAL MANAGEMENT HOUSING IS DEPRIVED OF ANY USUALLY AUTHORIZED ITEM OR ACTIVITY, A REPORT OF THE ACTION IS

FILED IN THE INMATE'S CASE RECORD AND FORWARDED TO THE CHIEF SECURIY OFFICER.

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-20

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

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-21

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

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-22

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES SPECIAL MANAGEMENT HOUSING HAVE ACCESS TO LEGAL MATERIALS.

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4A-23

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

FINDINGS:

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING RECEIVE A MINIMUM OF ONE HOUR OF EXERCISE PER DAY OUTSIDE THEIR CELLS, FIVE DAYS PER WEEK, UNLESS SECURITY OR SAFETY CONSIDERATIONS DICTATE OTHERWISE.

FINDINGS:

EARU does not utilize Special Management Housing Units.

Standard #5-ACI-4B-32

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

FINDINGS:

EARU does not house female offenders.

Standard #5-ACI-4B-33

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

FINDINGS:

EARU does not utilize Extended Restrictive Housing.

Standard #5-ACI-5A-01

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

- DETERMINATION THAT THE INMATE IS LEGALLY COMMITTED TO THE INSTITUTION
- THOROUGH SEARCHING OF THE INDIVIDUAL AND POSSESSIONS
- DISPOSING OF PERSONAL PROPERTY
- SHOWER AND HAIR CARE, IF NECESSARY
- ISSUE OF CLEAN, LAUNDERED CLOTHING AS NEEDED
- PHOTOGRAPHING AND FINGERPRINTING, INCLUDING NOTATION OF IDENTIFYING MARKS OR OTHER UNUSUAL PHYSICAL CHARACTERISTICS
- MEDICAL, DENTAL, AND MENTAL HEALTH SCREENING
- ASSIGNING TO HOUSING UNIT

- RECORDING BASIC PERSONAL DATA AND INFORMATION TO BE USED FOR MAIL AND VISITING LIST
- EXPLAINING MAIL AND VISITING PROCEDURES
- ASSISTING INMATES IN NOTIFYING THEIR NEXT OF KIN AND FAMILIES OF ADMISSION
- ASSIGNING OF REGISTERED NUMBER TO THE INMATE
- GIVING WRITTEN ORIENTATION MATERIALS TO THE INMATE
- DOCUMENTING ANY RECEPTION AND ORIENTATION PROCEDURE COMPLETED AT A CENTRAL RECEPTION FACILITY

FINDINGS:

EARU is not a reception center and therefore does not admit inmates new into the system.

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
- PRE-INSTITUTIONAL ASSESSMENT INFORMATION

FINDINGS:

EARU is not a reception center and therefore does not admit inmates new into the system.

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:

EARU is not a reception center and therefore does not admit inmates new into the system.

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 OT THE UNIT. THE STATEMENT OF REASONS AND CASE-MANAGEMENT PLAN MUST BE APPROVED BY THE WARDEN OR HIS OR HER DESIGNEE. CASES AER 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:

EARU 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:

EARU does not house youthful offenders.

Standard #5-ACI-5B-15

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

FINDINGS:

EARU 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-OREINTED ACTIVITIES.

FINDINGS:

EARU does not house youthful offenders.

Standard #5-ACI-5B-17

YOUTHFUL OFFENDERS SHALL NOT HAVE PHYSICAL CONTACT WIH ANY ADULT INMATE THROUHG 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:

EARU 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 YOUTH 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:

EARU does not house youthful offenders.

Standard #5-ACI-5D-11

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

FINDINGS:

EARU does not receive or store personal property.

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:

EARU does not house pregnant inmates.

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:

EARU does not maintain a Substance Abuse program.

Standard #5-ACI-5E-12

WHERE A SUBSTANCE USE DISORDER TREATMENT PROGRAM EXITS, WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT THE PROGRAM HAS A WRITTEN TREATMENT PHILOOPHY WITHIN THE CONTET OF THE TOTAL CORRECTIONS SYSTEM, AS WELL AS GOALS AND MEASUREABLE OBJECTIVES. THESE DOCUMENTS ARE REVIEWED AT LEAST ANNUALLY AND UPDATED, AS NEEDED.

FINDINGS:

EARU does not have a Substance Abuse Use Disorder Treatment program.

Standard #5-ACI-5E-13

WHERE A SUBSTANCE USE DISORDER TREATMENT PROGRAM EXITS, 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
- PRE-RELEASE AND TRANSITIONAL SERVICE NEEDS
- COORDINATION EFFORTS WITHIN COMMUNITY SUPERVISION AND TREATEMENT STAFF DURING THE PRE-RELEASE PHASE TO ENSURE A CONTNUM OF SUPERVISION AND TREATMENT.

FINDINGS:

EARU does not have a Substance Use Disorder Treatment 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:

EARU does not have a Substance Use Disorder Treatment program.

Standard #5-ACI-5E-15

WHERE A DRUG AND ALCOHOL 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:

EARU does not provide a drug and alcohol treatment program.

Standard #5-ACI-6A-11

WHEN 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:

EARU does not house female offenders nor nursing infants.

Standard #5-ACI-6A-24

ALL IN-TRANSIT OFFENDERS RECEIVED 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:

EARU is not a reception center. These services are conducted at the Reception Center prior to arrival at this facility.

Standard #5-ACI-6A-38

A MENTAL HEALTH RESIDENTIAL TREATMENT UNIT IS AVAILABLE FOR THOSE INMATES WITH IMPAIRMENT IN BEHAVIORAL FUNCTIONING ASSOCIATED WITH A SERIOUS MENTAL ILLNESS AND/OR IMPAIRMENT IN COGNITIVE FUNCTIONING. THE SEVERITY OF THE IMPAIRMENT DOES NOT REQUIRE INPATIENT LEVEL OF CARE, BUT THE INMATE DEMONSTRATES A HISTORICAL AND CURRENT INABILITY TO FUNCTION ADEQUATELY IN THE GENERAL POPULATION. THERE SHOULD BE A SPECIFIC MISSION/GOAL OF THE PROGRAM, SUFFICIENT QUALIFIED STAFF TO MEET NEEDS OF PROGRAM, SCREENING PROCESS FOR THE PROGRAM, INDIVIDUAL TREATMENT PLANS FOR INMATES IN THE PROGRAM, SAFE HOUSING TO MEET THE THERAPEUTIC NEEDS OF THE INMATE AND TRANSITION PLAN UPON DISCHARGE FROM THE RESIDENTIAL TREATMENT UNIT.

FINDINGS:

EARU does not house inmates with serious mental illness and/or impairment in cognitive functioning.

Standard #5-ACI-6A-39

INPATIENT CARE 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 CONTACS 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:

EARU does not operate an Inpatient Mental Health Treatment Unit.

Standard #5-ACI-6B-04

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

EARU has qualified health care staff and health trained personnel.

Standard #5-ACI-6B-10

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

FINDINGS:

EARU does not utilize health care volunteers.

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:

EARU does not maintain a private industry on the institutional grounds.

Standard #5-ACI-7A-15

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

FINDINGS:

EARU does not permit offenders to be employed in the community.

Significant Incident Summary

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

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

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

Facility Name: East Arkansas Regional Unit Reporting Period: May 2022- April 2023

Incident Type	Months	May 2022	June 2022	July 2022	Aug. 2022	Sept. 2022	Oct. 2022	Nov. 2022	Dec 2022	Jan. 2023	Feb. 2023	March 2023	April 2023	Total for Reporting Period
Escapes		0	0	0	1	0	0	0	0	0	0	0	0	1
Disturbances*		0	0	0	0	0	0	0	0	0	0	0	0	0
Sexual Violence		1	0	0	0	0	0	0	0	0	0	0	0	1
	Offender Victim	0	0	1	0	0	0	0	0	0	0	0	0	1
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
	Offender / Offende	0	0	0	0	0	0	0	0	0	0	0	0	0
Assaults	Offender / Staff	0	0	0	0	0	0	0	0	0	0	0	0	0
Suicide		1	0	0	0	0	0	0	1	0	0	0	0	2
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	1	0	0	0	0	0	0	1
Other*		0	0	0	0	0	0	0	0	0	0	0	0	0

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



Significant Incident Summary Glossary

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

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

Escape: As defined by the jurisdiction reporting.

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

Homicide: As defined by the jurisdiction reporting.

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

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

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

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

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

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

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

American Corre		al Association: Adult Cor			reditation
Performance Standards	N	Manual - 5th Edition Outc EARU Outcome Measures	ome Measur Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 1 May 1, 2022, thru April 30, 2023
	_	ent: Administer and manage the faci	ility in a profession	nal and responsib	le manner,
consistent with statutory	require				
1A: Facility Administration - The facility is administered efficiently and responsibly. Performance is based on	1A-1	Number of Plans of Action completed in the past 12 months divided by the number of Plans of Action approved by the Commission on Accreditation.	0	0	0
goals, objective, and standard operating procedures and a system of regular review.	1A-2	Number of expected practices in compliance divided by the number of applicable expected practices.	514	515	99.8
1B: Fiscal Management - The facility utilizes appropriate fiscal planning, budgeting, and accounting procedures and provides for a system of regular review.		Compliance verified through expected practice files. No outcome measure required.			
1C: Personnel - The facility promotes diversity and competency through employee staffing,	1C-1	The average offender population in the past 12 months divided by the average number of filled full time positions in the past 12 months.	1583	89	17.787
recruitment, promotions, benefit allocations and performance reviews.	1C-2	The number of staff who left employment for any reason in the past 12 months divided by the average number of filled full time positions in the past 12 months.	90	85	1.059
	1C-3	The number of verified employee violations in the past 12 months divided by the average number of filled full time staff positions in the past 12 months.	70	85	.823
	1C-4	The number of staff terminated for conduct violations in the past 12 months divided by the average number of filled full time staff positions in the past 12 months.	1	85	.012
	1C-5	The number of performance reviews rated acceptable or higher in the past 12 months divided by the total number of performance reviews conducted in the past 12 months.	134	178	.752
	1C-6	Average number of security staff positions filled per month for the past 12 months divided by the total number of authorized security positions.	25	310	.081
	1C-7	Number of security staff who left employment in the past 12 months divided by the total number of authorized security positions.	79	310	.255
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		Compliance verified through expected practice files. No outcome measure			
for the maintenance of operational effectiveness and		required.			
research capability. 1G: Citizen Involvement & Volunteers - The facility is a		The total number of hours of volunteer			
responsible member of the	1G-1	service delivered by members of the community in the past 12 months divided by the greeness delivered by the greeness deli	1334.84	1583	.843
community, supporting citizen involvement and volunteer initiatives as well		by the average daily population in the past 12 months. The total number of hours of community			
as other community interaction.	1G-2	service work delivered by offenders in the past 12 months divided by 12.	9528	12	794
	cilities'	physical plant is designed, equipped	and maintained i	n a manner that n	romotes safety.
program function and ac		physical plane is acoigned, equipped		r u mumer tmut p	romotes surcey,
2A: Building and Safety		Number of worker's compensation			
Codes - The facility complies with professional building and fire safety codes to help	2A-1	claims filed in the past 12 months divided by the average number of filled full-time staff positions in the past 12 months.	15	85	.176
ensure the safety of all		Number of sanitation or health-code			•
persons within the facility.	2A-2	violations identified by external agencies in the past 12 months.			0
	2A-3	The number of fire and safe code violations identified by the governing jurisdiction in the past 12 months.			0
2B: Size & Organization - Facility capacity and					
functional design promote	2B-1	Number of days facility population exceeded the operational capacity in the	0	365	0
safety, an acceptable quality of life and operational innovation.		past 12 months divided by 365.			
2C: Inmate Housing - Inmate housing areas are the					
foundation of institutional		Compliance verified through expected practice files. No outcome measure			
living and promote the safety and well-being of both		required.			
inmates and staff 2D: Environmental					
Conditions - Environmental					
conditions significantly influence the overall					
effectiveness of institutional		Compliance verified through expected			
operations. Lighting, air quality, temperature and		practice files. No outcome measure required.			
noise levels are designed to		,			
preserve the health and well being of inmates and staff					
members.					
2E: Program and Service Areas - Adequate space is					
provided for the various		Compliance verified through expected			
program and service functions conducted within		practice files. No outcome measure			
the institution. Spatial		required.			
requirements reflect functional need.					
2F: Administrative and Staff					
Areas - All levels of staff are provided with adequate space		Compliance verified through expected			
to carry out their		practice files. No outcome measure required.			
responsibilities safely and effectively.		requireu.			
2G: Security - The physical plan supports the orderly		Compliance verified through expected			
and secure functioning of the		practice files. No outcome measure required.			
institution. 3. Institutional Operatio	ns: The	e facility protects the community, the	e staff, the offende	rs, and others fro	m harm while

3. Institutional Operations: The facility protects the community, the staff, the offenders, and others from harm while maintaining an orderly environment with clear expectations of behavior and systems of accountability.

3A: Security and Control - The facility utilizes a combination of supervision, inspection, accountability,	3A-1	The number of incidents in which force, as defined by the agency, was used in the past 12 months divided by the average daily population in the past 12 months.	0	1583	0
and measured force response to promote safe and orderly operations.	3A-2	Number of seizures of contraband, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	0	1583	0
	3A-3	The number of escapes, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	1	1583	.0006
	3A-4	The number of disturbances, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	0	1583	0
	3A-5	The number of acts of sexual violence, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	1	1583	.003
	3A-6	The number of homicides as defined in the Significant Incident Summary, in the past 12 months, divided by the average daily population in the past 12 months.	1	1583	.0006
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 - The institution's rules of conduct and sanctions and procedures for violations are	3C-1	The total number of major disciplinary reports, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	1970	1583	1.245
communicated to all inmates and staff. The disciplinary process respects due process.	3C-2	The total number of minor disciplinary reports, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	1792	1583	1.132
	3C-3	Number of offender on offender assaults, as defined in the SIS form, in the past 12 months divided by the average daily population in the past 12 months.	13	1583	.008
	3C-4	Number of offender on staff assaults, as defined in the SIS form, in the past 12 months divided by the average daily population in the past 12 months.	14	1583	.009
3D: Inmate Rights - The facility protects the constitutional rights of offenders and seeks a balance between the expression of protected liberties and the preservation of institutional order.	3D-1	Number of grievances found in an inmate's favor divided by the number of grievances filed in the 12 month period.	74	2924	.03

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

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 12 months divided by the average daily population in the past 12 months.	0	1583	0	
4B: Restrictive Housing - Inmates who pose a direct and clear threat to the safety of persons or a clear threat to	4B-1	Average number of offenders in Restricted Housing per month over the past 12 months divided by the average daily population in the past 12 months.	58	1583	.037	
the safe and secure operation of the facility are separated from general population and placed in restrictive housing units / cells for periods of time 22 hours per day or greater.	4B-2	Average number of offenders in Extended Restricted Housing per month over the past 12 months divided by the average daily population in the past 12 months.	441	1583	.279	
	4B-3	Number of offenders released from Restrictive Housing by the appropriate authority within 24-hours in the past 12 months divided by the total placed in Restrictive Housing in the past 12 months.	49	728	.067	
	4B-4	Number of offenders in Extended Restrictive Housing that were released directly into the community from either Restrictive Housing or Extended Restrictive Housing within the past 12 months divided by the total number of offenders released in the past 12 months.	40	290	.138	
5. Institutional Services: Internal assignment to housing and program services should meet the basic needs of the						
		operation of the facility and should	prepare the offend	ler for successful	reintegration	
into society upon release a	as appr	opriate.				

• 1					
5A: Reception & Orientation - All incoming inmates undergo thorough screening and assessment at admission and receive a thorough orientation to the institution's procedures, rules, programs, and services.		Compliance verified through expected practice files. No outcome measure required.			
5B: Classification - Inmates are classified to the most appropriate level of custody and programming both on admission and upon review of their status.		Compliance verified through expected practice files. No outcome measure required.			
5C: Food Service - Meals are nutritionally balanced, well- planned, and prepared and served in a manner that meets established governmental health and safety codes.		Compliance verified through expected practice files. No outcome measure required.			
5D: Sanitation and Hygiene - The institution's sanitation and hygiene program protects the health and safety of staff and offenders.		Compliance verified through expected practice files. No outcome measure required.			
5E: Social Services - Professional services including individual and family counseling, family	5E-1	Where a substance use disorder treatment program exists, the number of treatment slot available divided by the average daily population in the past 12 months.	NA	NA	NA
planning and parent education; and programs for inmates with drug and alcohol addiction problems,	5E-2	Where a substance use disorder treatment program exists, the number of completers of the program divided by the average daily population in the past 12 months.	NA	NA	NA

meet the needs of identified inmates.	5E-3	Where a sex offender treatment/management program exists, the number of program slot divided by the average daily population in the past	NA	NA	NA
	5E-4	12 months. Where a sex offender treatment/management program exists, the number of completers divided by the average daily population in the past 12	NA	NA	NA
5F: Reentry - The institution provides a structured program to help inmates make a satisfactory transition upon their release from incarceration.	5F-1	months. The number of offenders who have completed their re-entry plan, as defined by the agency, in the past 12 months divided by the number of inmates released in the past 12 months.	16	14	1.143
		eceives appropriate physical and behacceptable levels of wellness.	avioral health car	e necessary to fos	ter the
6 A: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 twelve (12) months divided by the average daily population	1	1589	.0006
	6A-2	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months divided by the average daily population.	10	1589	.006
	6A-3	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the Number of offenders administered tests for TB infection in the past twelve (12) months as part of periodic or clinically-based testing, but not intake screening.	1	38	.026
	6A-4	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months divided by number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	6	27	.222
	6A-5	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time divided by Total offender population at that time.	118	1582	.75
	6A-6	Number of offenders diagnosed with HIV infection at a given point in time divided by Total offender population at that time.	11	1582	.007
	6A-7	Number of offenders with HIV infection who are being treated with highly active antiretroviral treatment (HAART) at a given point in time divided by Total number of offenders diagnosed with HIV infection at that time.	10	11	.91
	6A-8	Number of selected offenders with HIV infection at a given point in time who have been on antiretroviral therapy for at least six months with a viral load of less than 50 cps/ml total number of treated offenders with HIV infection that were reviewed	10	10	1
	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.			
	6A-10	Number of offender admissions to off-site hospitals in the past twelve (12) months divided by average daily population	27	1589	.017

		Number of offenders transported off-site			
	6A-11	for treatment of emergency health conditions in the past twelve (12) months divided by the average daily population in the past 12 months.	58	1589	.37
	6A-12	Number of offender specialty consults completed during the past twelve (12) months divided by Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.	1026	767	1.34
	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.	41	94	.436
	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.	6	21	.286
	6A-15	The number of completed dental treatment plans within the past twelve (12) months divided by the average daily population during the reporting period.	1099	1589	.692
6 B. 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 twelve (12) month period divided by Number of licensed or certified staff during a twelve (12) month period.	2	53	.38
	6B-2	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job divided by Number of new health care staff during the twelve (12) month period.	6	6	1
	6B-3	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months divided by the number of employees.	1	53	.019
	6B-4	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.	0	0	0
6 C. 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 twelve (12) months divided by number of evaluated offender grievances related to health care services in the past twelve (12) months.	1	315	.003
	6C-2	Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period divided by the number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.	0	0	0
	6C-3	Number of adjudicated offender lawsuits related to the delivery of health care found in favor of the offender in the past twelve (12) months divided by Number of offender adjudicated lawsuits related to healthcare delivery in the past twelve (12) months	0	0	0

6 D Performance Improvement Health care services are evaluated and continually improved	6D-1	Number of problems identified by quality assurance program that were corrected during a twelve (12) month period divided by the number of problems identified by quality assurance program during a twelve (12) month period.	0	0	0
	6D-2	Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.	0	0	0
	6D-3	Number of offender suicide attempts in the past twelve (12) months divided by average daily population	7	1589	.004
	6D-4	Number of offender suicides in the past twelve (12) divided by average daily population.	4	1589	.003
	6D-5	Number of unexpected natural deaths in the past twelve (12) months divided by Total number of deaths in the same reporting period.	3	7	.429
	6D-6	Number of serious medication errors in the past twelve (12) months	0	0	0
6 E Safety, Sanitation and Offender Hygiene The facility or program is safe and sanitary. Appropriate services and supplies are provided to promote the maintenance of acceptable levels of offender hygiene.		Compliance verified through expected practice files. No outcome measure required.			
	e instit	ution's programs for inmates provid	e meaningful worl	k, educational, an	d recreational
	ilitate a	stable institutional environment an	d the inmate's sub	sequent reentry i	nto the
community.	T				T
7A: Work and Correctional Industries - Work and correctional industries programs incorporate work conditions that reflect jobs in	7A-1	The number of academic/vocational educational program slots available in the past 12 months divided by the average daily population in the past 12 months.	104	1583	.066
equivalent work categories outside of the institution.	7A-2	The average number of offenders with full time work/program assignments in the past 12 months divided by the average number of offenders eligible for work assignment in the past 12 months.	1583	1583	1
7B: Academic and Vocational Education - The facilities academic and	7B-1	The number of academic/vocational slots available divided by the average daily population in the past 12 months.	40	1583	.025
vocational 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 12 months divided by the average daily population in the last 12 months.	10	1583	.006
promote staff professional certification, incorporate community resources and participate in internal and external peer review.	7B-3	The number of academic/vocational competency certificates issued in the past 12 months divided by the number of program slots available in the past 12 months.	38	104	.37
7C: Recreation and Activities: Recreation and similar leisure activities are provided to reduce idleness, provide opportunities for skill acquisition, promote healthy activities and foster positive group interaction		Compliance verified through expected practice files. No outcome measure required.			

7D: Mail, Telephone & Visiting - The maintenance of family and community ties through the provision of comprehensive mail, telephone and visiting services is critical to stable institutional adjustment and improves opportunities for successful reintegration.		Compliance verified through expected practice files. No outcome measure required.			
7E: Library - The facility should provide library services that support educational programs, promote reading skills, enhance leisure activities and maintain awareness of circumstances in the community at large.		Compliance verified through expected practice files. No outcome measure required.			
7F: Religious Programs - The offender population should have the opportunity to participate in the practices of their faith group as enhanced through the supplemental contributions of community resources.	7F-1	The number of regular participants as defined by the agency, in structured religious programming in the past 12 months divided by the average daily population in the past 12 months.	4486	1583	2.834

American Correctional Association: Adult Correctional Institutions Accreditation Manual - 5th Edition Outcome Measures Performance Standards EARU Outcome Measures Year 2 Year 2 Denominator May 1, 2021, thru April 30, 2022

Performance Standards		EARU Outcome Measures	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 1 May 1, 2021, thru April 30, 2022					
1. Administration & Management: Administer and manage the facility in a professional and responsible manner,										
consistent with statutory	require									
1A: Facility Administration - The facility is administered efficiently and responsibly. Performance is based on	1A-1	Number of Plans of Action completed in the past 12 months divided by the number of Plans of Action approved by the Commission on Accreditation.	0	0	0					
goals, objective, and standard operating procedures and a system of regular review.	1A-2	Number of expected practices in compliance divided by the number of applicable expected practices.	514	515	99.8					
1B: Fiscal Management - The facility utilizes appropriate fiscal planning, budgeting, and accounting procedures and provides for a system of regular review.		Compliance verified through expected practice files. No outcome measure required.								
1C: Personnel - The facility promotes diversity and competency through employee staffing,	1C-1	The average offender population in the past 12 months divided by the average number of filled full time positions in the past 12 months.	1504	89	16.89					
recruitment, promotions, benefit allocations and performance reviews.	1C-2	The number of staff who left employment for any reason in the past 12 months divided by the average number of filled full time positions in the past 12 months.	88	75	1.173					
	1C-3	The number of verified employee violations in the past 12 months divided by the average number of filled full time staff positions in the past 12 months.	78	75	1.04					
	1C-4	The number of staff terminated for conduct violations in the past 12 months divided by the average number of filled full time staff positions in the past 12 months.	1	75	.013					
	1C-5	The number of performance reviews rated acceptable or higher in the past 12 months divided by the total number of performance reviews conducted in the past 12 months.	134	178	.752					
	1C-6	Average number of security staff positions filled per month for the past 12 months divided by the total number of authorized security positions.	9	310	.029					
	1C-7	Number of security staff who left employment in the past 12 months divided by the total number of authorized security positions.	85	310	.274					
1D: Training & Development - The facility conducts pre-service, inservice, 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: Citizen Involvement & Volunteers - The facility is a responsible member of the community, supporting citizen involvement and	1G-1	The total number of hours of volunteer service delivered by members of the community in the past 12 months divided by the average daily population in the past 12 months.	0	1504	0
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 12 months divided by 12.	1392	12	116
•		physical plant is designed, equipped	and maintained in	n a manner that p	romotes safety,
program function and ac	cess.				
2A: Building and Safety Codes - The facility complies with professional building and fire safety codes to help	2A-1	Number of worker's compensation claims filed in the past 12 months divided by the average number of filled full-time staff positions in the past 12 months.	11	89	.124
ensure the safety of all persons within the facility.	2A-2	Number of sanitation or health-code violations identified by external agencies in the past 12 months.			3
	2A-3	The number of fire and safe code violations identified by the governing jurisdiction in the past 12 months.			3
2B: Size & Organization - Facility capacity and functional design promote safety, an acceptable quality of life and operational innovation.	2B-1	Number of days facility population exceeded the operational capacity in the past 12 months divided by 365.	0	365	0
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 operations. Lighting, air quality, temperature and noise levels are designed to preserve the health and well being of inmates and staff members.		Compliance verified through expected practice files. No outcome measure required.			
2E: Program and Service Areas - Adequate space is provided for the various program and service functions conducted within the institution. Spatial requirements reflect functional need.		Compliance verified through expected practice files. No outcome measure required.			
2F: Administrative and Staff Areas - All levels of staff are provided with adequate space to carry out their responsibilities safely and effectively.		Compliance verified through expected practice files. No outcome measure required.			
2G: Security - The physical plan supports the orderly and secure functioning of the institution.	ns: The	Compliance verified through expected practice files. No outcome measure required.	e staff, the offende	rs, and others fro	m harm while

3. Institutional Operations: The facility protects the community, the staff, the offenders, and others from harm while maintaining an orderly environment with clear expectations of behavior and systems of accountability.

3A: Security and Control - The facility utilizes a combination of supervision, inspection, accountability,	3A-1	The number of incidents in which force, as defined by the agency, was used in the past 12 months divided by the average daily population in the past 12 months.	96	1504	.06
and measured force response to promote safe and orderly operations.	3A-2	Number of seizures of contraband, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	168	1504	.11
	3A-3	The number of escapes, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	0	1504	0
	3A-4	The number of disturbances, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	1	1504	.00
	3A-5	The number of acts of sexual violence, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	1	1504	.00
	3A-6	The number of homicides as defined in the Significant Incident Summary, in the past 12 months, divided by the average daily population in the past 12 months.	0	1504	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 - The institution's rules of conduct and sanctions and procedures for violations are	3C-1	The total number of major disciplinary reports, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	1768	1504	1.18
communicated to all inmates and staff. The disciplinary process respects due process.	3C-2	The total number of minor disciplinary reports, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	2212	1504	1.5
	3C-3	Number of offender on offender assaults, as defined in the SIS form, in the past 12 months divided by the average daily population in the past 12 months.	19	1504	.01
	3C-4	Number of offender on staff assaults, as defined in the SIS form, in the past 12 months divided by the average daily population in the past 12 months.	31	1504	.02
3D: Inmate Rights - The facility protects the constitutional rights of offenders and seeks a balance between the expression of protected liberties and the preservation of institutional order.	3D-1	Number of grievances found in an inmate's favor divided by the number of grievances filed in the 12 month period.	87	3280	.03

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

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 12 months divided by the average daily population in the past 12 months.	3	1504	.002
4B: Restrictive Housing - Inmates who pose a direct and clear threat to the safety of persons or a clear threat to	4B-1	Average number of offenders in Restricted Housing per month over the past 12 months divided by the average daily population in the past 12 months.	63	1504	.042
the safe and secure operation of the facility are separated from general population and placed in restrictive housing units / cells for periods of	4B-2	Average number of offenders in Extended Restricted Housing per month over the past 12 months divided by the average daily population in the past 12 months.	465	1504	.309
time 22 hours per day or greater.	4B-3	Number of offenders released from Restrictive Housing by the appropriate authority within 24-hours in the past 12 months divided by the total placed in Restrictive Housing in the past 12 months.	29	941	.031
	4B-4	Number of offenders in Extended Restrictive Housing that were released directly into the community from either Restrictive Housing or Extended Restrictive Housing within the past 12 months divided by the total number of offenders released in the past 12 months.	57	315	.181
		al assignment to housing and progra			
offender consistent with	the safe	operation of the facility and should	prepare the offend	ler for successful	reintegration

into society upon release as appropriate.

5A: Reception & Orientation - All incoming inmates undergo thorough screening and assessment at admission and receive a thorough orientation to the institution's procedures, rules, programs, and services.		Compliance verified through expected practice files. No outcome measure required.			
5B: Classification - Inmates are classified to the most appropriate level of custody and programming both on admission and upon review of their status.		Compliance verified through expected practice files. No outcome measure required.			
5C: Food Service - Meals are nutritionally balanced, well-planned, and prepared and served in a manner that meets established governmental health and safety codes.		Compliance verified through expected practice files. No outcome measure required.			
5D: Sanitation and Hygiene - The institution's sanitation and hygiene program protects the health and safety of staff and offenders.		Compliance verified through expected practice files. No outcome measure required.			
5E: Social Services - Professional services including individual and family counseling, family	5E-1	Where a substance use disorder treatment program exists, the number of treatment slot available divided by the average daily population in the past 12 months.	0	1504	0
planning and parent education; and programs for inmates with drug and alcohol addiction problems,	5E-2	Where a substance use disorder treatment program exists, the number of completers of the program divided by the average daily population in the past 12 months.	0	1504	0

meet the needs of identified inmates.	5E-3	Where a sex offender treatment/management program exists, the number of program slot divided by the average daily population in the past 12 months.	0	1504	0
	5E-4	Where a sex offender treatment/management program exists, the number of completers divided by the average daily population in the past 12 months.	0	1504	0
5F: Reentry - The institution provides a structured program to help inmates make a satisfactory transition upon their release from incarceration.	5F-1	The number of offenders who have completed their re-entry plan, as defined by the agency, in the past 12 months divided by the number of inmates released in the past 12 months.	NA	NA	NA
		eceives appropriate physical and beh acceptable levels of wellness.	avioral health car	e necessary to fos	ter the
6 A: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 twelve (12) months divided by the average daily population	0	1571	0
unety and efficient manner.	6A-2	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months divided by the average daily population.	0	1571	0
	6A-3	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the Number of offenders administered tests for TB infection in the past twelve (12) months as part of periodic or clinically-based testing, but not intake screening.	0	21	0
	6A-4	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months divided by number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	0	0	0
	6A-5	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time divided by Total offender population at that time.	157	1540	.11
	6A-6	Number of offenders diagnosed with HIV infection at a given point in time divided by Total offender population at that time.	17	1504	.01
	6A-7	Number of offenders with HIV infection who are being treated with highly active antiretroviral treatment (HAART) at a given point in time divided by Total number of offenders diagnosed with HIV infection at that time.	13	17	.76
	6A-8	Number of selected offenders with HIV infection at a given point in time who have been on antiretroviral therapy for at least six months with a viral load of less than 50 cps/ml total number of treated offenders with HIV infection that were reviewed	4	5	.8
	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.	0	1571	0
	6A-10	Number of offender admissions to off-site hospitals in the past twelve (12) months divided by average daily population	8	1501	.005

	6A-11	Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months divided by the average daily population in the past 12 months.	49	1501	.03
	6A-12	Number of offender specialty consults completed during the past twelve (12) months divided by Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.	1570	305	5.15
	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.	31	88	.35
	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.	7	27	.26
	6A-15	The number of completed dental treatment plans within the past twelve (12) months divided by the average daily population during the reporting period.	819	1501	.55
6 B. 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 twelve (12) month period divided by Number of licensed or certified staff during a twelve (12) month period.	0	52	0
	6B-2	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job divided by Number of new health care staff during the twelve (12) month period.	5	52	.09
	6B-3	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months divided by the number of employees.	0	52	0
	6B-4	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.	0	48	0
6 C. 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 twelve (12) months divided by number of evaluated offender grievances related to health care services in the past twelve (12) months.	102	747	.14
	6C-2	Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period divided by the number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.	4	747	.14
	6C-3	Number of adjudicated offender lawsuits related to the delivery of health care found in favor of the offender in the past twelve (12) months divided by Number of offender adjudicated lawsuits related to healthcare delivery in the past twelve (12) months	0	0	0

6 D Performance Improvement Health care services are evaluated and continually improved	6D-1	Number of problems identified by quality assurance program that were corrected during a twelve (12) month period divided by the number of problems identified by quality assurance program during a twelve (12) month period.	1	1	1
	6D-2	Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.	1	1	1
	6D-3	Number of offender suicide attempts in the past twelve (12) months divided by average daily population	4	1501	.003
	6D-4	Number of offender suicides in the past twelve (12) divided by average daily population.	3	1501	.002
	6D-5	Number of unexpected natural deaths in the past twelve (12) months divided by Total number of deaths in the same reporting period.	1	6	.17
	6D-6	Number of serious medication errors in the past twelve (12) months	0	0	0
6 E Safety, Sanitation and Offender Hygiene					
The facility or program is safe and sanitary. Appropriate services and supplies are provided to promote the maintenance of acceptable levels of offender hygiene.		Compliance verified through expected practice files. No outcome measure required.			
	e instit	ution's programs for inmates provid	e meaningful worl	k, educational, an	d recreational
	ilitate a	stable institutional environment an	d the inmate's sub	sequent reentry i	nto the
7A: Work and Correctional	I	The number of academic/vocational			
Industries - Work and correctional industries programs incorporate work conditions that reflect jobs in	7A-1	educational program slots available in the past 12 months divided by the average daily population in the past 12 months.	104	1504	.07
equivalent work categories outside of the institution.	7A-2	The average number of offenders with full time work/program assignments in the past 12 months divided by the average number of offenders eligible for work assignment in the past 12 months.	1504	1504	1
7B: Academic and Vocational Education - The facilities academic and	7B-1	The number of academic/vocational slots available divided by the average daily population in the past 12 months.	40	1504	.03
vocational 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 12 months divided by the average daily population in the last 12 months.	2	1504	.0013
promote staff professional certification, incorporate community resources and participate in internal and external peer review.	7B-3	The number of academic/vocational competency certificates issued in the past 12 months divided by the number of program slots available in the past 12 months.	20	104	.19
7C: Recreation and Activities: Recreation and similar leisure activities are provided to reduce idleness, provide opportunities for skill acquisition, promote healthy activities and foster positive group interaction		Compliance verified through expected practice files. No outcome measure required.			

7D: Mail, Telephone & Visiting - The maintenance of family and community ties through the provision of comprehensive mail, telephone and visiting services is critical to stable institutional adjustment and improves opportunities for successful reintegration.		Compliance verified through expected practice files. No outcome measure required.			
7E: Library - The facility should provide library services that support educational programs, promote reading skills, enhance leisure activities and maintain awareness of circumstances in the community at large.		Compliance verified through expected practice files. No outcome measure required.			
7F: Religious Programs - The offender population should have the opportunity to participate in the practices of their faith group as enhanced through the supplemental contributions of community resources.	7F-1	The number of regular participants as defined by the agency, in structured religious programming in the past 12 months divided by the average daily population in the past 12 months.	0	1509	0

American Correctional Association: Adult Correctional Institutions Accreditation **Manual - 5th Edition Outcome Measures** Accreditation Cycle Year 1 EARU Year 1 Year 1 Performance Standards May 1, 2020, **Outcome Measures** Numerator Denominator thru April 30, 2021 1. Administration & Management: Administer and manage the facility in a professional and responsible manner, consistent with statutory requirements. 1A: Facility Administration -Number of Plans of Action completed in The facility is administered the past 12 months divided by the 0 1A-1 0 0 number of Plans of Action approved by efficiently and responsibly. Performance is based on the Commission on Accreditation. goals, objective, and standard Number of expected practices in operating procedures and a 1A-2 compliance divided by the number of 514 515 99.8 system of regular review. applicable expected practices. 1B: Fiscal Management -The facility utilizes Compliance verified through expected appropriate fiscal planning, practice files. No outcome measure budgeting, and accounting required. procedures and provides for a system of regular review. 1C: Personnel - The facility The average offender population in the promotes diversity and past 12 months divided by the average 1C-1 228 1,509 .151 competency through number of filled full time positions in the employee staffing, past 12 months. recruitment, promotions, The number of staff who left employment benefit allocations and for any reason in the past 12 months 1C-2 163 228 .714 divided by the average number of filled performance reviews. full time positions in the past 12 months. The number of verified employee violations in the past 12 months divided 1C-3 92 228 .401 by the average number of filled full time staff positions in the past 12 months. The number of staff terminated for conduct violations in the past 12 months 1C-4 65 228 .285 divided by the average number of filled full time staff positions in the past 12 months. The number of performance reviews rated acceptable or higher in the past 12 1C-5 months divided by the total number of 155 156 .993 performance reviews conducted in the past 12 months. Average number of security staff positions filled per month for the past 12 1C-6 309 .223 months divided by the total number of authorized security positions. Number of security staff who left employment in the past 12 months 1C-7 140 309 .453 divided by the total number of authorized security positions. 1D: Training & **Development - The facility** conducts pre-service, in-Compliance verified through expected service, and specialized practice files. No outcome measure development programs to required. 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.

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: Citizen Involvement &		The total number of hours of volunteer			
Volunteers - The facility is a responsible member of the community, supporting citizen involvement and	1G-1	service delivered by members of the community in the past 12 months divided by the average daily population in the past 12 months.	0	1509	0
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 12 months divided by 12.	0	12	0
2. Physical Plant: The fa program function and ac		physical plant is designed, equipped	and maintained i	n a manner that p	romotes safety,
2A: Building and Safety Codes - The facility complies with professional building and fire safety codes to help	2A-1	Number of worker's compensation claims filed in the past 12 months divided by the average number of filled full-time staff positions in the past 12 months.	4	228	.018
ensure the safety of all persons within the facility.	2A-2	Number of sanitation or health-code violations identified by external agencies in the past 12 months.			0
	2A-3	The number of fire and safe code violations identified by the governing jurisdiction in the past 12 months.			0
2B: Size & Organization - Facility capacity and functional design promote safety, an acceptable quality of life and operational innovation.	2B-1	Number of days facility population exceeded the operational capacity in the past 12 months divided by 365.	0	365	0
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 operations. Lighting, air quality, temperature and noise levels are designed to preserve the health and well being of inmates and staff members.		Compliance verified through expected practice files. No outcome measure required.			
2E: Program and Service Areas - Adequate space is provided for the various program and service functions conducted within the institution. Spatial requirements reflect functional need.		Compliance verified through expected practice files. No outcome measure required.			
2F: Administrative and Staff Areas - All levels of staff are provided with adequate space to carry out their responsibilities safely and effectively.		Compliance verified through expected practice files. No outcome measure required.			
2G: Security - The physical plan supports the orderly and secure functioning of the institution.		Compliance verified through expected practice files. No outcome measure required.			
3. Institutional Operation		e facility protects the community, the nent with clear expectations of beha			m harm while

3A: Security and Control - The facility utilizes a combination of supervision, inspection, accountability, and measured force response to promote safe and orderly operations.	3A-1	The number of incidents in which force, as defined by the agency, was used in the past 12 months divided by the average daily population in the past 12 months.	0	1509	0
	3A-2	Number of seizures of contraband, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	0	1509	0
	3A-3	The number of escapes, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	0	1509	0
	3A-4	The number of disturbances, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	0	1509	0
	3A-5	The number of acts of sexual violence, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	5	1509	.003
	3A-6	The number of homicides as defined in the Significant Incident Summary, in the past 12 months, divided by the average daily population in the past 12 months.	0	1509	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 - The institution's rules of conduct and sanctions and procedures for violations are	3C-1	The total number of major disciplinary reports, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	811	1509	.537
communicated to all inmates and staff. The disciplinary process respects due process.	3C-2	The total number of minor disciplinary reports, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	1636	1509	1.084
	3C-3	Number of offender on offender assaults, as defined in the SIS form, in the past 12 months divided by the average daily population in the past 12 months.	8	1509	.005
	3C-4	Number of offender on staff assaults, as defined in the SIS form, in the past 12 months divided by the average daily population in the past 12 months.	35	1509	.02
3D: Inmate Rights - The facility protects the constitutional rights of offenders and seeks a balance between the expression of protected liberties and the preservation of institutional order.	3D-1	Number of grievances found in an inmate's favor divided by the number of grievances filed in the 12 month period.	80	3904	.021
management of the institution population and placed in placed into such categories.	ution, p designa	& Restrictive Housing: In general, osing a threat to others or a danger ated units. Such assignments are mareated justly, humanely, in a constitu	to themselves, are de appropriately a	removed from the and justifiably, an	e general d offenders
to less restrictive units.					

T					
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 12 months divided by the average daily population in the past 12 months.	41	1,509	.027
4B: Restrictive Housing - Inmates who pose a direct and clear threat to the safety of persons or a clear threat to	4B-1	Average number of offenders in Restricted Housing per month over the past 12 months divided by the average daily population in the past 12 months.	53	1,509	.035
the safe and secure operation of the facility are separated from general population and placed in restrictive housing units / cells for periods of	4B-2	Average number of offenders in Extended Restricted Housing per month over the past 12 months divided by the average daily population in the past 12 months.	439	1,509	.290
time 22 hours per day or greater.	4B-3	Number of offenders released from Restrictive Housing by the appropriate authority within 24-hours in the past 12 months divided by the total placed in Restrictive Housing in the past 12 months.	39	606	.064
	4B-4	Number of offenders in Extended Restrictive Housing that were released directly into the community from either Restrictive Housing or Extended Restrictive Housing within the past 12 months divided by the total number of offenders released in the past 12 months.	55	328	.167
		al assignment to housing and progra			
offender consistent with the safe operation of the facility and should prepare the offender for successful reintegration					

into society upon release as appropriate.

		~ F			
5A: Reception & Orientation - All incoming inmates undergo thorough screening and assessment at admission and receive a thorough orientation to the institution's procedures, rules, programs, and services.		Compliance verified through expected practice files. No outcome measure required.			
5B: Classification - Inmates are classified to the most appropriate level of custody and programming both on admission and upon review of their status.		Compliance verified through expected practice files. No outcome measure required.			
5C: Food Service - Meals are nutritionally balanced, well- planned, and prepared and served in a manner that meets established governmental health and safety codes.		Compliance verified through expected practice files. No outcome measure required.			
5D: Sanitation and Hygiene - The institution's sanitation and hygiene program protects the health and safety of staff and offenders.		Compliance verified through expected practice files. No outcome measure required.			
5E: Social Services - Professional services including individual and family counseling, family	5E-1	Where a substance use disorder treatment program exists, the number of treatment slot available divided by the average daily population in the past 12 months.	NA	NA	NA
planning and parent education; and programs for inmates with drug and alcohol addiction problems,	5E-2	Where a substance use disorder treatment program exists, the number of completers of the program divided by the average daily population in the past 12 months.	NA	NA	NA

meet the needs of identified inmates.	5E-3	Where a sex offender treatment/management program exists, the number of program slot divided by the average daily population in the past	NA	NA	NA
	5E-4	12 months. Where a sex offender treatment/management program exists, the number of completers divided by the average daily population in the past 12 months.	NA	NA	NA
5F: Reentry - The institution provides a structured program to help inmates make a satisfactory transition upon their release from incarceration.	5F-1	The number of offenders who have completed their re-entry plan, as defined by the agency, in the past 12 months divided by the number of inmates released in the past 12 months.	8	46	.174
		eceives appropriate physical and beh acceptable levels of wellness.	avioral health car	e necessary to fost	ter the
6 A: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 twelve (12) months divided by the average daily population	0	0	0
	6A-2	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months divided by the average daily population.	0	0	0
	6A-3	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the Number of offenders administered tests for TB infection in the past twelve (12) months as part of periodic or clinically-based testing, but not intake screening.	1	28	.035
	6A-4	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months divided by number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	0	0	0
	6A-5	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time divided by Total offender population at that time.	157	1,498	.104
	6A-6	Number of offenders diagnosed with HIV infection at a given point in time divided by Total offender population at that time.	18	1,498	.012
	6A-7	Number of offenders with HIV infection who are being treated with highly active antiretroviral treatment (HAART) at a given point in time divided by Total number of offenders diagnosed with HIV infection at that time.	15	15	1
	6A-8	Number of selected offenders with HIV infection at a given point in time who have been on antiretroviral therapy for at least six months with a viral load of less than 50 cps/ml total number of treated offenders with HIV infection that were reviewed	14	16	.875
	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.	0	0	0
	6A-10	Number of offender admissions to off-site hospitals in the past twelve (12) months divided by average daily population	93	1,505	.061

	6A-11	Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months divided by the average daily population in the past 12 months.	126	1,505	.083
	6A-12	Number of offender specialty consults completed during the past twelve (12) months divided by Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.	1,717	1,238	1.386
	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.	83	146	.568
	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.	3	32	.093
	6A-15	The number of completed dental treatment plans within the past twelve (12) months divided by the average daily population during the reporting period.	680	1,505	.451
6 B. 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 twelve (12) month period divided by Number of licensed or certified staff during a twelve (12) month period.	0	584	0
	6B-2	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job divided by Number of new health care staff during the twelve (12) month period.	13	13	1
	6B-3	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months divided by the number of employees.	2	54	.037
	6B-4	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.	0	54	0
6 C. 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 twelve (12) months divided by number of evaluated offender grievances related to health care services in the past twelve (12) months.	35	426	.082
	6C-2	Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period divided by the number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.	0	0	0
	6C-3	Number of adjudicated offender lawsuits related to the delivery of health care found in favor of the offender in the past twelve (12) months divided by Number of offender adjudicated lawsuits related to healthcare delivery in the past twelve (12) months	0	0	0

6 D Performance Improvement Health care services are evaluated and continually improved	6D-1	Number of problems identified by quality assurance program that were corrected during a twelve (12) month period divided by the number of problems identified by quality assurance program during a twelve (12) month period.	4	1	4
	6D-2	Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.	0	0	0
	6D-3	Number of offender suicide attempts in the past twelve (12) months divided by average daily population	6	1,505	.003
	6D-4	Number of offender suicides in the past twelve (12) divided by average daily population.	5	1,505	.003
	6D-5	Number of unexpected natural deaths in the past twelve (12) months divided by Total number of deaths in the same reporting period.	10	12	.883
	6D-6	Number of serious medication errors in the past twelve (12) months	0	0	0
6 E Safety, Sanitation and Offender Hygiene The facility or program is safe and sanitary. Appropriate services and supplies are provided to promote the maintenance of acceptable levels of offender hygiene.		Compliance verified through expected practice files. No outcome measure required.			
	ne instit	ution's programs for inmates provid	e meaningful worl	k, educational, an	d recreational
programs designed to fac		stable institutional environment an			
community.	ı				
7A: Work and Correctional Industries - Work and correctional industries programs incorporate work conditions that reflect jobs in	7A-1	The number of academic/vocational educational program slots available in the past 12 months divided by the average daily population in the past 12 months.	104	1509	.07
equivalent work categories outside of the institution.	7A-2	The average number of offenders with full time work/program assignments in the past 12 months divided by the average number of offenders eligible for work assignment in the past 12 months.	1509	1509	1
7B: Academic and Vocational Education - The facilities academic and	7B-1	The number of academic/vocational slots available divided by the average daily population in the past 12 months.	40	1509	.03
vocational 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 12 months divided by the average daily population in the last 12 months.	0	1509	0
promote staff professional certification, incorporate community resources and participate in internal and external peer review.	7B-3	The number of academic/vocational competency certificates issued in the past 12 months divided by the number of program slots available in the past 12 months.	6	104	.06
7C: Recreation and Activities: Recreation and similar leisure activities are provided to reduce idleness, provide opportunities for skill acquisition, promote healthy activities and foster positive group interaction		Compliance verified through expected practice files. No outcome measure required.			

7D: Mail, Telephone & Visiting - The maintenance of family and community ties through the provision of comprehensive mail, telephone and visiting services is critical to stable institutional adjustment and improves opportunities for successful reintegration.		Compliance verified through expected practice files. No outcome measure required.			
7E: Library - The facility should provide library services that support educational programs, promote reading skills, enhance leisure activities and maintain awareness of circumstances in the community at large.		Compliance verified through expected practice files. No outcome measure required.			
7F: Religious Programs - The offender population should have the opportunity to participate in the practices of their faith group as enhanced through the supplemental contributions of community resources.	7F-1	The number of regular participants as defined by the agency, in structured religious programming in the past 12 months divided by the average daily population in the past 12 months.	0	1509	0