

COMMISSION ON ACCREDITATION FOR CORRECTIONS
STANDARDS COMPLIANCE REACCREDITATION AUDIT

Arkansas Department of Corrections
Tucker Unit
Tucker, Arkansas

October 4-6, 2022

VISITING COMMITTEE MEMBERS

Tim Schuetzle, Chairperson
ACA Auditor

Randy Cross
ACA Auditor

Jason Hall
ACA Auditor

A. Introduction

The audit of the Tucker Unit of the Arkansas Department of Corrections (ADC) was conducted on October 4-6, 2022, by the following team: Tim Schuetzle, Chairperson; Jason Hall, Member and Randy Cross, Member.

The audit was conducted using the manual Standard for Adult Correctional Institutions 5th Edition.

B. Facility Demographics

Rated Capacity:	612
Actual Population:	604
Average Daily Population for the last 12 months:	638
Average Length of Stay:	2 years, 8 months, 9 days
Security/Custody Level:	Maximum, Medium, Minimum
Age Range of Offenders:	20-71 years of age
Gender:	Male
Full-Time Staff:	239 authorized positions with 131 filled and 108 positions vacant 16 Administrative positions, all filled; 11 Support with one vacant; 18 Program positions with 3 vacant; 194 Security positions, with 104 vacant.

C. Facility Description

The Tucker Unit was established in 1916, making it the second oldest prison in continuous operation in Arkansas. There are approximately 632 inmates and currently employs 131 staff.



Tucker Unit

The facility is located twenty-five miles northeast of Pine Bluff on 4,420 acres of land. 3,800 acres is used for growing rice, soybeans and winter wheat as cash crops. A large hay crop feeds cattle at the nearby Wrightsville Unit, and vegetables are grown for inmate consumption. Lower custody inmates leave the facility daily to work the crop land, supervised by armed correctional officers on horseback.

Inmate programs include farming, prison industry, vocational training, a maintenance shop and regional maintenance program, a therapeutic community and substance abuse program, tracking dogs, and *Paws in Prison*, where they accept dogs from a nearby animal shelter and train them to be good pets who are adopted by loving families. *Think Legacy* is their most recent program and is designed to motivate and provide opportunities for offenders to prepare for successful reentry into society.

Tucker's inmate population decreased about 350 residents since the last audit, and three housing units, including the 200 bed *10 dorm*, have been temporarily closed. The Tucker unit did not have employees available to keep these units safely staffed. Inmates currently live in either one of six, barracks-style dormitories (Dorms 1A, 1B, 3A, 3B, 4A, or 4B) or six pods consisting of two-person cells surrounding a large day room area (Dorms 5A, 5B, 6A, 6B, 7A and 7B). The barracks style dorms are located in the oldest building on grounds (circa 1916), while the pods are in a building built in the mid-1970's. The housing units allow officers to have direct supervision of offenders and enhances staff/inmate communication.

In addition to the housing units, a separate Restrictive Housing unit houses up to 30 inmates in single occupancy cells. Other structures within the confines of the fence hold the administrative offices, food service, medical/mental health, the gymnasium and academic/vocational complex, a chapel, commissary, warehouse, prison industries, laundry and visitation.

There are 12 structures located outside of the perimeter fence, including the P.B.X. (main entrance building), the farm garage, a building for the utility crew, a horse barn, armory/key, staff training building and a canine kennel.

Tucker has a rich and vibrant history within the Arkansas Department of Corrections (ADC). Although it was known for many years as the prison where death row and the execution chamber were located, other monumental prison events have occurred here. The ADC's first GED students graduated at the unit in 1974. The notorious Tucker Telephone became nationally known through the movie *Brubaker* in 1980. The unit was chosen as the filmmaking location of the 1973 movie *White Lighting*. Correctional officers were hired for small roles in the movie.

Mission Statement

The mission of the Arkansas Department of Corrections, Tucker Unit, is:

To protect society by providing incarceration as a deterrent to the commission of crime

To ensure the safety and security on inmates, employees and visitors at the Tucker Unit

To provide programs including drug treatment, self-improvement training, academic and vocational education to rehabilitate inmates.

D. Pre-Audit Meeting

The team met approximately 5:40 p.m. on October 3, 2022, at the Holiday Inn Express in White Hall, AR to discuss the information provided by the Association staff and the officials from the Tucker Unit.

The chairperson divided standards into the following groups:

Chair Schuetzle: Standards #5-ACI-1A-01 to 3A-21
Security Auditor Hall: Standards #5-ACI-3A-22 to 5D-15
Medical Auditor Cross: Standards #5-ACI -5F-01 to 7F-08

The audit team then proceeded to a nearby steakhouse for a pre-audit dinner meeting with Warden R. Todd Ball, Deputy Warden Antwon Emsweller and members of the Tucker Unit management team.

E. The Audit Process

1. Transportation

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

2. Entrance Interview

After a thorough entrance screening process, the audit team proceeded to the office of Warden Ball. On the walk to the administration building, the team noticed the large *Welcome ACA Auditors* banner, and notices that the facility was undergoing the ACA audit. The chair expressed the appreciation of the Association for the opportunity to be involved with Tucker Unit’s reaccreditation process. The Warden was asked whether there was anything the audit team needed to be aware of that had occurred or was occurring that could jeopardize the audit. Warden Ball informed the team that nothing of that nature had occurred or was occurring. We discussed the schedule for the day, and that we had planned to stay until approximately 7:00 p.m. so we could observe the 5:45 shift change briefing, and to spend time with members of the second shift.

Warden Ball escorted the team to the Chapel where the formal entry meeting was held. The following persons were in attendance:

Todd Ball	Tucker Unit Warden
Antwon Emsweller	Tucker Unit Deputy Warden
Debra Barnes	Tucker Unit HR Coordinator
Amanda Pasley	Tucker Unit ACA Manager
Angela King	Delta Unit Training Supervisor
William Pearson	Tucker Unit Chaplain
Jaron Furgerson	Wellpath Health Services Administrator
Mary Carter	Wellpath

Shelly Byers	ADC Health Services Program Coordinator
Jeffery Deen	Tucker Unit Field Major
Kim Rosenthal	Wellpath Medical Services Manager
Antonio Johnson	Tucker Unit Building Major
Camilla Haywood	Tucker Unit Fire & Safety
Garry Jenkins	Tucker Unit Kitchen Captain
Unita Reeves	Tucker Unit Mailroom Supervisor
Charles Daniel	Industry Supervisor
Kenric Williams	Tucker Unit TC Program
Lajoya Norman	Tucker Unit Lieutenant
Gregg Moore	Tucker Unit Tool Control
Cassandra Wade	Mental Health Licensed Social Worker
Tina Deen	Max Unit Business Manager
DeAnne Taylor	Tucker Unit Classification
Cara Lennox	Tucker Unit Warden's Secretary
Robyn Hawkins	Tucker Unit Records Supervisor
Andrew Isom	Tucker Unit Training Supervisor
Allen Gibson	Tucker Unit Maintenance Supervisor
Ron Chism	Tucker Unit TC Program Supervisor
Joe Alexander	TC Program
Hosea Washington	Tucker Unit School Principal
Nick Donaldson	Central Office Computer Support Technician
Austin Dancy	Tucker Unit Lieutenant
Natasha Penn	Tucker Unit Restrictive Housing Supervisor
Johnnie Harris	Tucker Unit TC Program
Taylor Landers	Tucker Unit Key Control
James Macalla	Tucker Unit EPC
Paula Coleman	Tucker Unit Program Specialist
Yvette Young	Tucker Unit Business Manager
Audrey Wilkins	Tucker Unit Captain
Solomon Graves	Secretary of Department of Corrections
Dexter Payne	Director of Division of Correction
Dale Reed	Chief Deputy Director, Division of Correction
William Straughn	Deputy Director Division of Correction
Aundrea Culclager	Deputy Director, Division of Corrections
Gaylon Lay	Superintendent Central Office
Richard Cooper	Asst. Deputy Director Construction/Maintenance
Eddie Powell	Industry Administrator Division of Correction
Shelly Lawrence	Internal Auditor/Accreditation Manager, ADC
Byron Brown	Lt./Agency Fire & Safety Coordinator

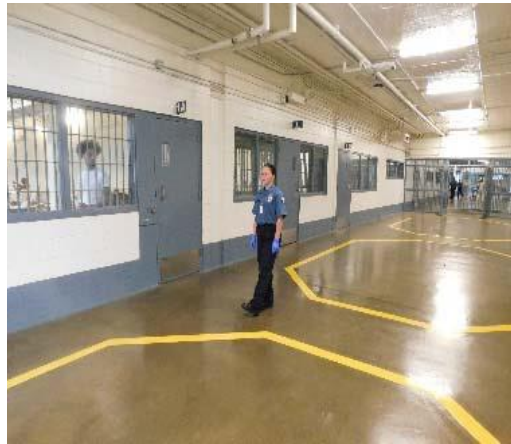
The chair recognized the large number of staff from the ADC Central Office, including the Secretary of Corrections Mr. Graves and Mr. Payne, the Director of the Department. He thanked them for the support demonstrated for the Tucker staff through their presence. It was explained that the goal of the 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.

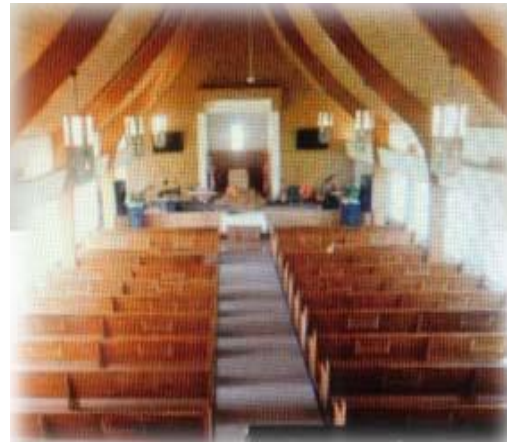
Each team member gave a brief synopsis of their experience in corrections and with the accreditation process. The chair advised the audience that they were going to conduct a thorough, but fair audit of the facility. He went on to explain that no two audit teams are alike, and that it would not be unusual to find different results. He ended by discussing the audit schedule and their goals for the first day.

3. Facility Tour

Upon conclusion of the entrance meeting, the team toured the interior of the facility from 8:05 a.m. to 11:50 a.m. Exterior buildings within the fences were toured later in the afternoon, and buildings and grounds outside the perimeter were examined over the course of the next two days of the audit.



Tucker's Major Hallway



Island of Hope Chapel

The morning tour was led by Major Antonio Johnson and began with the long walk to the end of the major hallway where we toured the Restricted Housing unit before coming back the other direction, hitting the various housing units and program areas on the return walk. The medical auditor stopped along the way to spend more time with the medical staff. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Warden Ball

Deputy Warden Emsweller

Chief of Security Major Johnson

Chief of Field Security Major Deen

Accreditation Specialist Amanda Pasley

Classification Supervisor and Scribe for the Chair, Deanne Taylor

Human Resources Coordinator and scribe for the Medical Auditor Debra Barnes

Warden's Assistant and scribe for the Security Auditor Cara Lennox

Emergency Preparedness Coordinator Lt. Macalla

Key Control Sgt. Landers
Tool Control Sgt. Moore
Maintenance Supervisor Allen Gibson
Unit Trainer Andrew Isom
Internal Auditor/Accreditation Manager ADC Shelly Lawrence
Byron Brown, ADC Fire and Safety Coordinator
A number of people from Central Office participated in parts of the tour, including Director Payne, Chief Deputy Director Reid, Deputy Director Straughn, and Deputy Director Culclager,

Facility notices of this audit were posted throughout the facility, and conversations with offenders verified they knew why we were on site. .

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:

A 12-foot double perimeter fence surrounds the facility. The bottom is secured in concrete, and there are three rows of razor wire on the top of both perimeter fence. The area between the fences is secured with a microwave system which detects motion. The perimeter is checked twice daily at shift change. There are three breaks in the perimeter: two for pedestrians entering at the front and rear of the prison, and a vehicle sally port. All breaks in the perimeter fencing are monitored by cameras and armed officers in towers.

The three towers are staffed around the clock every day of the week. A mobile patrol officer encircles the perimeter road during the second (night) shift and carries a 12-gauge shotgun. Tower officers have AR-15 rifles and 12-gauge shotguns. The tower and mobile patrol officers communicate via radio and must report into Master Control each half hour of their shift.

A female sergeant is assigned to the front entrance, designated as the PBX building, Monday through Friday, 5:00 a.m. to 6:00 p.m. After hours and on weekends, the PBX is monitored by one of the female captains on duty. Staff and visitors undergo the same screening process each time they enter the facility. They remove their shoes, belts, jewelry, jackets, etc. and place all items in a plastic bin, which moves via a belt through an x-ray machine similar to those used by airport security. All people then turn in front of the cell phone sensor, walk through the metal detector and step up onto the moving platform which moves the person through the body scanner. After clearing these steps, the staff/visitor is pat searched by the officer on duty. Visitors sign into a visiting log and enter the facility. Staff and approved volunteers are identified by their ADC-issued ID card and must go through the biometric process (currently an iris scan) every time they enter/exit the Unit.

The Vehicle Sally Port is staffed from 6:00 a.m. to 4:00 p.m. Lift gates are utilized.

The exterior gate is reinforced steel (crash gate); the inner gate has razor wire on top. Officers assigned to sally port use an undercarriage mirror to search under vehicles. There is razor wire all around the top portion of the fences, as well as the roof line of sally port.

Tucker uses 35 perimeter cameras and 106 interior cameras; All cameras can be monitored from Master Control, the Surveillance Room, and Warden's office. Recordings are maintained for a year. Only ranks of Lieutenant and above have access to the surveillance room.

The perimeter has 58 florescent lights on 14-foot poles, 112 LED lights on taller telephone poles, and 45 LED wall packs. Inside the fence there are 14 LED lights on telephone poles and 70 LED wall packs and interior fences and buildings.

The Master Control room is located at the east end of the main hallway. The one officer assigned each shift is responsible for all inmate call outs, issuing keys, operating the 17 electronic doors/gates, and monitoring the perimeter microwave system and the facility cameras. It is equipped with a radio, camera monitors, fire alarm panel, microwave system, and necessary tools. There is no toilet, so staff request a relief officer to utilize the restroom.

Tucker does well in controlling the various tools throughout the facility. Tools are on shadow boards, classified by risk, and inventories are accurately maintained. Tool control was observed in all maintenance buildings, laundry, master control, industries, and the armory.

The Armory is located outside the secure perimeter next to the PBX entrance. The cinderblock building is surrounded by a fence with razor wire; visual security provided by the officer assigned to the tower. There is a restricted access list maintained for those allowed to enter unescorted. All people entering must sign in and out of the entry log. At this time, Tucker doesn't have a full-time armorer, so the Emergency Preparedness Coordinator (EPC Lieutenant) assumes these duties.

Secured in the armory are Core AR-15 rifles, Remington 870 shotguns, and Glock 22 pistols, all with corresponding ammunition rounds. Chemical agents include spray canisters of OC and CS and direct impact 40mm rounds. There was a flammable storage cabinet which contained gun cleaning chemicals and a metal, covered waste can for disposing oily rags. Monthly inventories are performed, and various spot checks by the auditors verified these were accurate. SDS are present for chemicals.

Staff qualify at the firing range next door at the Maximum-Security Unit.

The key control shop is located in the same building. A master key inventory is maintained there, along with pattern key blanks and machines necessary to make replacement keys as needed. The Key Control Sargent has received appropriate training. Operational, emergency, and restricted keys are all utilized. The key system is color coded by area as well as by key type. Keys for fire egress doors are notched, as are the corresponding door locks so staff are able to identify the proper key in low-light, emergency situations. Certain administrative and non-security staff are allowed to keep keys to their areas on person.

Clearing barrels are present at all three towers. Department transportation officers store weapons in tower while entering sally port. Law enforcement transport officers secure their firearms in their vehicle trunk before entering or exiting with inmates.

Currently the Tucker Unit has 6 certified members of their Emergency Response Team (ERT). This team is activated when deemed necessary by the warden/duty warden of the unit. Members are required to complete an additional 40-hours of specialized training to be certified. This training includes less than lethal weapon training (40mm launchers), less than lethal shotguns, tasers, different variations of OC spray, CS and hand tossed grenades. The team meets monthly for training.

Weekday counts are scheduled at 6:00 a.m., 9:00 a.m., 1:00 p.m., 5:00 p.m., 6:00 p.m., 9:00 p.m., and every hour from midnight through 5:00 a.m. Weekend counts commence at 6:00 a.m., 9:00 a.m., 11:00 a.m., 4:00 p.m., 5:00 p.m., 6:00 p.m., 9:00 p.m., and every hour from midnight through 5:00 a.m. The auditors observed the taking of count at 6:00 p.m. the first day of the audit. The shift supervisor is responsible for clearing the counts. All inmates inside the facility must be at their bunks until the count is cleared.

Tucker has a canine unit with 2 staff handlers; one trained in both leash and pack, the other learning how to work pack. Both handlers have law enforcement certification with authority for arrest and to carry lethal firearms. There are 6 inmates assigned to the canine unit. These inmates live comfortably in a small barracks outside the prison fence and care for the 22 adult dogs and ten puppies. The dogs are a mix of healer and bloodhounds. The Unit is called out to search for inmates who have escaped from ADC custody, but most frequently to assist local law enforcement with their search efforts.



Canine Unit



Canine Unit Inmate Barracks Kitchen

Inmates leaving or entering the prison housing units are subject to a pat-search by barracks officers and all inmates exiting the dining hall are similarly searched. In addition, there are three metal detectors in the main hallway that must be cleared when coming in from work or programs outside the barracks buildings, but inside the facility perimeter. Area searches are performed every search, as assigned by the shift supervisor.

Inmates re-entering the prison from outside work squads undergo an unclothed search, and then are placed in the body scanner before entry into the facility.

Four cell/bunk searches must be completed by officers assigned to each housing unit during each shift. Cell searches in the Restrictive Housing Unit are performed when inmates are removed for shower or recreation

Urinalysis testing are randomly assigned to all inmates. Participants in the Therapeutic Community are screened once monthly. Every inmate that is placed in restrictive housing is also screened.

Special Management and Restrictive Housing

The Tucker Unit has a Restrictive Housing Unit (RHU), but not a Special Management Unit. As a result, all of the 5th Edition standards in section 4A are non-applicable.

Entry into Restrictive Housing is through a secure sally port. It appears that the cells were originally designed to be one-person cells, as there is one concrete bunk platform with one concrete block table at the foot of the platform. A metal bunk rack was hanging higher on the wall opposite the concrete bed platform, which does not look like the original design. It does indicate that at some point, RHU could have been double bunked. A toilet/sink unit fills out the cell furnishing.

The vast majority of inmates in RHU are there to serve disciplinary sanctions after being adjudication at the Disciplinary Committee. Inmates can serve a continuous, 30-day stint before being given a 48-hour break. Inmates receive one hour of recreation out of their cells 3 days weekly. Showers are offered 5 days each week. Outdoor recreation is offered in eight, 180 square foot spaces. These secure rectangular areas have chain link wire on all four sides and ceiling.

There are 30 cells in the RHU, with approximately 20 of them occupied. None were doubled bunked during the audit.

Administrative and Medical staff tour the unit daily. Mental health staff and the Chaplain are there at least weekly.

Environmental Conditions:

Tucker boasts some of the oldest buildings within the ADC, and there has not been any new construction or renovation since the late 1980's; nonetheless, the facility has been well maintained. The entry walkway is bordered by plants and pavers, and the grass areas between the sidewalks are well manicured. Gates and walls have been freshly painted. Floors sparkle and shine.

Inmate crews provide the maintenance manpower under the direct supervision of staff. Outside maintenance professionals are brought in on those rare occasions when Tucker maintenance staff and inmate crews need assistance.

The Maintenance Building was clean and well-organized. They have preventive maintenance plans in place and demonstrate excellent control over tools. Tucker employs two classes of tools, dependent on the likelihood that tool could be used to damage property, facilitate an escape, or cause injuries to others. Class A tools are more dangerous, and they are always under lock and key, and only used by staff, or an inmate under direct staff supervision. Shadow boards are used throughout the facility, making it readily visible to detect when a tool is missing.

The facility exceeds the standards for natural daylight in the hallways, program buildings and housing units; light levels at desktops; air circulation; and noise levels, where the average decibel reading is only 30 dBA. Temperatures in the buildings were comfortable, as Tucker both heats and air-conditions all interiors, dependent upon the season.

Potable water for the facility comes from a well on grounds, and the water is treated by their water treatment plant. Sewage is also treated on site. Tucker keeps contracts with local vendors for fire prevention, solid waste disposal, and pest control. The facility's recycling program help both the environment, and to keep waste disposal costs low. Tucker just recently added a compost area for all organic waste generated at the prison. Soil produced is spread on their agriculture fields.

Electrical power during an emergency is accomplished by ten generators, providing 930 KW of power. Generators are load tested monthly, fluid levels are checked weekly, and are on a monthly preventive maintenance plan.

Sanitation:

This facility was exceptionally clean. Auditors observed inmate porters actively cleaning in just about every area while on our tours.

Cleaning supplies are issued from Dorm 2, the former death row barracks no longer used for any inmate housing. Chemical cleaners, brooms, water buckets and mops are picked up daily by porters assigned to clean the dorms, hallways, and program spaces. Concentrated cleaners are safely diluted by staff in a secure building using a siphon system. It was recommended that the facility verify that the syphon pump was still diluting to the proper ratio as it had been years since the chemical supplier had been to the facility (COVID period), and many facilities test them semi-annually. The cleaning chemicals are diluted so that the health hazard ratings are zero and are transferred to quart spray bottles before being distributed to porters.

Chemical control was evident through their inventory records. Inventory history could not be determined in a few places because they fill out a new inventory sheet each month. October's sheet had only a few days, and staff had already submitted the September 2022 inventory sheets to storage. It is recommended that the facility could save staff time by using one sheet until it was full, even if it had multiple months of data. They should also keep all sheets for the calendar year in the binder.

There are flammable/hazardous chemical storage lockers in use in all but one location. The Farm Shop and ICC Garage, outside the perimeter fence, was storing many petroleum based products and solvents in a metal mesh (open to the air) locker. Most of the products did not require storage in a Flammable storage cabinet, but there were a few solvents with flammable warnings, so the suggestion was made to get those moved to the approved cabinet.



Regional Maintenance Crew



Industries

Fire Safety:

Tucker has a Fire and Safety Sergeant, who is responsible for the fire safety program at the facility. There is a Fire Panel in the Control Room to alert staff to fires anywhere within the facility. The buildings have sprinkler systems, smoke alarms, emergency lighting and the numerous fire extinguishers are inspected monthly.

Annual, semi-annual, quarterly, and monthly inspections of all fire equipment is documented Johnson Controls inspects the fire panel alarm system annually, Fire Extinguisher Sales services the extinguishers.

Auditors noted evacuation routes were posted in every room and hallway. Fire drills are conducted quarterly in housing units, offices, and program spaces. Tucker does not practice fire drills in Restrictive Housing but performs tabletop exercises to simulate fire evacuation. Primary fire egress from the rest of the housing and program space is through the main hallway and out to the recreation yard. Should the main hallway be unpassable, the secondary exit is through fire doors in the back of the dormitories which lead to the outside, where inmates are then routed away from the buildings to the recreation yards.

The facility has medical staff who are trained to respond as necessary to medical emergencies. In addition to the equipment maintained by medical staff, the facility has First Aid kits and AED's located throughout the facility. The AEDs and First Aid kits are checked monthly insuring they are working, properly stocked and sealed.

Food Service:

We entered the Kitchen/Dining area through the loading dock to a flurry of activity. Lunch was being served but inmates continued cooking more food in the steam kettles, while others were cleaning floors or washing pans and cooking trays. A review of the temperature logs verified what we observed on the thermometers while walking into the freezer, coolers, and dry storage areas. The dish tank had stopped working earlier that day, so food was being served on styro-foam plates and with plastic utensils. The recorded, paper history of the wash and rinse cycle temperatures were within sanitation range to satisfy any concern that the dishes weren't being properly cleaned and sanitized.



Sample Tray



Inmate Dining

The tools were being controlled; the only Class A tool checked out from the locked shadow board (a thermometer) was quickly found out on the floor from the tool check-out inventory sheet. The thermometer was being used by the officer on the serving line. The kitchen bakes their own bread, buns, and deserts. Yeast and sugar are kept secured, and inventories are accounted for by staff.

The Arkansas Department of Health and Environmental Services performs the required Food Service inspections. Any deficiencies found during the past three years had been corrected in a timely manner. The Ansul air exhaust hood was clean and is also inspected annually by an outside source.

Tucker employs a four-week meal rotation system. The team did not receive any complaints regarding food services. A certified dietitian approves all meals.

For a working kitchen, sanitation was very good. There is a toilet and wash basin nearby for kitchen workers to use, with signs posted that hands be washed before returning to work. Inmate workers receive a daily cleanliness inspection at the start of each shift.

Inmates receive food trays through a small window in the block wall between the serving line and the dining hall.

Temperatures taken of the food on the line were in the appropriate range >155 degrees. The meal being served was colorful and the serving size was ample.

On the second day of the audit, the chair pulled a blind tray from the serving line and brought it back for the auditors to sample. Once again, the food was colorful and appealing. The cheesy spaghetti had large chunks of chicken interspersed, the carrots were buttery with a touch of cinnamon, and the pinto beans added extra protein. It was easily one of the top five trays of food the chair had ever eaten during his 85 plus audits. By utilizing prison grown produce, the Tucker Unit was able to keep the cost per meal an average of \$2.28 during the past three years.

Medical Care:

The medical area for the Tucker unit was rather small but well laid out for the care of the patients. The medical unit consisted of a waiting area for patients with seating for six people and a bathroom was available. There were also educational materials available to patients in the waiting area.

Rooms in the medical unit consisted of a supply room, a holding cell, a pharmacy with a window that opened to the yard, a lab office, an office for the infection control nurse, an office for the Director of Nursing, a provider's office, an area for the certified nursing assistants, a nursing treatment room, a room for emergency equipment, a dental suite, an office for the health services administrator and a break room.

Emergencies were treated in the nursing treatment room, which was a sizeable area in the facility. Emergency equipment, stored in a separate area, included a crash bag, an AED, a gurney and emergency medication (Narcan). The crash bag was secured and contained an inventory of all items stocked in the bag. The inventories were reviewed and found to be accurate. There were first aid kits located in strategic areas of the Tucker complex. There was no infirmary or medical housing in the unit. All areas in the medical unit were well organized and displayed a high level of sanitation.

Medical care was provided by contract with Wellpath Care. The Tucker medical unit was staffed 24/7, with a skeleton crew for the overnight shift. Staffing consisted of a .6 FTE physician/Medical Director, a full time Director of Nursing, a .5 FTE nurse practitioner, a full-time health services administrator, 10 full-time license practical nurses, 5 PRN license practical nurses, 3 full-time certified nursing assistants, 2 PRN certified nursing assistants, one full-time clerk and one full-time records clerk.

Professional credentials were reviewed and found to be current. Yearly TB tests were conducted on staff members.

Orientation for new arrivals was given by a nurse. The orientation was given in the treatment room within two hours of arrival of the new inmate. Sick call was conducted Monday through Friday 8:00 a.m. through 5:00 p.m.

Sick call was not scheduled on weekends, but requests for sick call were triaged to ensure there were no emergent issues.

Sick call was initiated by an electronic request via kiosks located in housing areas. Persons in restricted housing requested sick call by a written request given to nursing staff during daily rounds. Sick call requests were triaged periodically through the day and appointments were scheduled with appropriate nursing staff or providers. The wait time to be seen was normally next day but no longer than 72 hours. Emergent issues were seen immediately.

Nursing staff conducted daily rounds in the restricted housing area. They administered medications during these rounds and picked up any requests for sick call.

Labs were drawn on site, spun and sent out for analysis to a private laboratory, LabCorp. Results were normally received within 24 hours, except for specimens that had to be cultured. Results were received electronically, and the ordering provider was notified of the results. STAT labs were processed by the local hospital, Jefferson Regional.

Radiology services were provided on-site by Express Diagnostics, as needed. Readings were received within 24 to 48 hours; were transmitted electronically, and the provider who ordered the test was notified.

Emergencies were transported to the University of Arkansas Medical Sciences in Little Rock or Jefferson Regional Hospital in Pine Bluff, depending on the nature of the emergency. If the emergency required life-support, the transportation was provided by EASI ambulance, which had a response time of about 20 minutes. CPR training was current for all medical staff and the medical staff practiced a 4- minute response training.

The facility had a pharmacy that was supplied by Diamond Pharmacy Services. Diamond conducted inspections every three months. Security of the medications was found to be excellent where they were stored in a locked, dedicated room and with limited access. The medications were stored in the dedicated room and in a locked cart or in locked cabinets. Medications were administered through a window that opened to the yard where patients reported at the designated time. Auditors observed the distribution of medications.

Controlled Substances were stored separately in a locked cabinet. The controlled substances were inventoried on a paper record. The inventory was reviewed and found to be complete and accurate. The remaining medications were inventoried by an electronic Medication Administration Record (MAR), which was also used for administration of the prescriptions.

Medication administration times were 2:00 a.m., 9:00 a.m. and 1:00 p.m. Medications were obtained through Diamond Pharmacy electronically by the MAR. If ordered by 2:00 p.m. the medications were received the following day.

The facility allowed Keep On Person (KOP) medications and Over The Counter (OTC) medications were available through the commissary.

An inventory review for sharps, syringes and instruments was conducted during the audit and found to be complete, accurate and well documented.

Chronic care was provided as needed for patients. The clinics included such care as diabetes, thyroid, HIV, cardiac care and hypertension. Outside consultations were scheduled with a specialist depending on the condition presented. The wait time to be seen for an outside consultation depended also on the condition being treated. Consultation reports were received by the ordering provider.

The medical unit utilized an electronic medical record that was integrated with the MAR, Diamond Pharmacy and LabCorp. The electronic record appeared to be very user friendly and allowed for the interaction with contracted providers.

All inmates in the facility were provided with an annual TB test. Patients had to pay a three- dollar co-pay for medical services. Chronic care and emergency cases were not charged a co-pay.

The facility had a quality assurance team in the form of Continuous Quality Improvement (CQI), which met once a month. This exceeded the standard that required quarterly meetings. The CQI developed specific goals and objectives. These were monitored and evaluated monthly.

Grievances were handled by the Health Services Administrator. An informal grievance required a response within three days. If not resolved that grievance turned into a formal grievance where the HSA had 30 days to respond. If still not resolved the grievance could be appealed to the Regional Health Manager.

There were two deaths in the facility during the three-year audit time period. The first patient suffered cardiac arrest in his housing unit. CPR was initiated and a heartbeat was restored but the patient again suffered cardiac arrest at the hospital and was declared dead. The second patient had a long history of respiratory distress and died in the hospital.

The health outcome measures were discussed with the health services administrator and the regional manager. It was difficult to determine any deviation in the outcomes due to the change in the population caused by the COVID pandemic. The outcome measures appeared to be rather static with the population change.

The dental unit was contained within the healthcare area. The suite had one chair in the main room and another room for processing x-rays and storing equipment. The dental suite presented a high level of sanitation and cleanliness.

The dental unit was staffed with a full-time dentist Monday through Thursday, one full-time dental assistant and a dental hygienist on Fridays. Staffing allowed the dental clinic to be open Monday through Friday 7:00 a.m.to 4:00 p.m.

Care provided by the dental staff included: basic dentistry, prophylaxis, fillings, extractions, cleaning, cancer screening, patient education, dentures, partials and silver fluoride treatment. Dental staff also had available bitewing x-rays as well as panoramic.

Patients requesting to be seen were scheduled the following day. This exceeded the standard that required a patient to be seen within seven days. Oral surgery, to include root canals and jaw injuries, were sent to outside providers.

The dental staff utilized universal precautions and necessary supplies were available. An autoclave was used for sterilization of instruments. Spore counts were taken weekly, and records were kept on each spore count test. The staff practiced excellent security for sharps and instruments. A review of the inventory for sharps and instruments was found to be accurate and well documented.

Dental emergencies were handled by nursing staff during off hours of the clinic. Nurses within would then contact the dentist on call for instructions on how to treat the emergency.

The mental health unit was staffed Monday through Friday from 8:00 a.m. to 4:45 p.m. Staffing included a psychiatrist (via tele-med), two psychologists, one license social worker and one mid-level provider.

Mental health assessments for persons new to the facility were normally done by the license social worker. General population patients accessed mental health care by use of the kiosk in the housing area. The mental health staff would also utilize history from prior units or the intake facility. Inmates in restricted housing were seen during rounds Monday through Friday by mental health staff and could request an appointment at that time.

Patients were normally seen after making a request or by referral the same day. Mental health emergencies were handled by staff on site during normal hours and by on-call staff when the emergency is outside normal operating hours.

Any suicidal patient was referred to the on-call worker, who was normally notified by security staff. Suicidal patients were housed in the restricted housing area where observation was provided in 15-minute increments, 5-minute increments or continuous observation as needed. The observation was provided by security staff and documented on the security log. A suicidal patient was provided with a mattress and suicide garments as indicated. The garments included a paper gown or a suicide smock.

Psychotropic medications were prescribed for patients who required them. At the time of the audit there were approximately 68 patients on psychotropic medications. Patients on psychotropics were evaluated at least every 90 days by the prescribing provider.

Recreation:

All inmates are given the opportunity to exercise. Tucker offers expansive recreation yards, with basketball courts, soccer area, and a softball field. The large gymnasium provides recreational activities during inclement weather.

One fulltime employee coordinates recreational activities for the population. Typical turn out for recreation averages 252 inmates per day. Inmates are encouraged to participate in activities such as walking, jogging in place, basketball, softball, and isometrics.

Within dayrooms, inmates have access to television viewing, table games, and other forms of passive recreation. The recreation department also offers different intramural sport leagues throughout the year. There is a basketball & summer softball tournament, where inmates coach the teams and referee the games.

Another program offered for passive recreation is in Hobby/Craft. This area is located above the gymnasium, and the program is available to a pre-determined number of participants. Participants must meet eligibility requirements to be selected. Each cardholder can purchase pre-approved wood and leather products along with the tools used to make items to sell to employees and visitors through a hobby/craft contract.

Religious Programming:

A full-time chaplain works with community volunteers, including volunteer chaplains, to provide worship services, religious materials, counseling, and crisis ministry. COVID impacted the services which were normally offered to the inmate population as many of these volunteers were not able to enter the facility, however, they began coming back the last year of this audit period.

Tucker is privileged to have a beautiful chapel on grounds to hold religious services for all denominations. The Island of Hope Chapel was renovated in 2011, to its former glory. The Chapel is believed to be the first free standing prison chapel in the south.

Typical religious activities include baptisms, Bible study course/classes, cell group ministry, KAIROS prison ministry, worship services, revivals and one-on-one ministry in the RHU. Marriage counseling, pre-marriage counseling and weddings are also services provided by the chaplains.

Chaplains also assist with the PALS program offered in 5 dorm. Pals is a faith-based program which prepares inmates for their release from prison.

Offender Work Programs:

Tucker excels with their goal to have every inmate working, and the auditors observed a number of offenders working in varied job options during our tour.

Inmates with custody levels which prevent them from leaving the facility can be assigned to work in the kitchen, laundry, as porters, yard crew, law clerks, and as assistants to the inside maintenance staff, chaplain, education staff or recreation director, among others.

The largest inmate work force inside the prison is at the Correctional Industries (CI). What began in the early 1970's as the Bus Factory has now expanded into a number of trades, including upholstery, metal fabrication, welding, furniture and vehicle refurbishing and powder coating (painting). Over one hundred inmates and trainees work in the large manufacturing plant each day.

CI inmates have the ability to obtain Department of Labor (DOL) certificates by demonstrating skills in metal fabrication and welding, which can then be used to obtain a job once to released.

Perhaps the most interesting work for inmates inside the facility would be as a dog trainer in the *Paws in Prison* program operated in 7 dorm. Inmates receive shelter dogs and train them as companion dogs for people in the community. There were 16 inmate trainers and 6 dogs in the program.

Inmates with lower custody levels are allowed to leave the prison to work in the exterior building, or with the land. Tucker categorizes this as *Field Operations*, and it is managed by Major Jeff Deen.

A sizeable number are assigned to the Farm Operations *hoe crew*. Armed Officers on horseback over see these workers tending to the agricultural produce raised, including wheat, rice, soybeans, or in the vegetable garden. Depending on their skill level, inmates can earn more responsible work operating the farm machinery.

Tucker inmates may be assigned to Regional Maintenance, where they are transported to government building in the surrounding area. This an inmate workforce is for approved to work on projects for communities, counties, cities, state or federal government. These agencies gain help with their tax-funded projects, the prison enhances their relationship with the community, and the inmates earn an opportunity to repay society. Provided services include labor, maintenance, construction cleanup, storm cleanup etc.

Other Field Operation work options include positions in Facility Maintenance, Vehicle Maintenance, or the Canine Unit. Many inmates believe the Canine Unit is the best job available at Tucker. Up to 6 inmates are allowed to live in a small barracks next to the Kennels, where they care for the canine dogs and horses used for searches around the clock. This inmate crew may also assist with training the annual litter of puppies.

Inmates are not paid for working at any ADC facility.

Academic and Vocational Education:

The ADC believes that inmates entering their system without a high school diploma should work to receive the GED during their incarceration, if able.

Tucker employs four instructors (one also serves as the principal), to teach in their four classes/levels: adult basic education (level 1), intermediate (level 2), pre-GED (level 3), and GED (level 4).

Prior to being placed into the appropriate level, the students are given the test of adult basic education (TABE). The instruction staff also use the TABE quarterly, to determine the students' progress. The Tucker school averages between 50-60 graduates a year. Students are in class an average of 7.5 hours daily, four days a week. The school year starts in August and ends in May.

Tucker has eliminated all vocational programming. As stated above, inmate workers in CI may receive DOL certificates verifying their competency in certain skill areas, but, inmate workers in other institutional jobs can also earn vocational certificates after meeting the number of hours, and specified competence levels.

During this past year, Tucker implemented a college program. Contract professors come into the facility in the evenings for lectures, and much of the work is assigned on-line. One auditor briefly sat in on the college reading class.

Social Services:

The *Think Legacy* program provides a combination of education re-entry classes with social services therapy programs. The class is located in the old 10 dorm space, upon entering, the room felt *energized*; likely due to the passion displayed by the instructor. The program, designed to motivate and provide opportunities for offenders to prepare for successful reentry into society, appears to be heavily based on cognitive restructuring, which focuses on changing the offender's way of thinking while building character. One of the texts for the course is *Thinking for a Change*. Other therapy related modules include: Personal Development, Problem Solving and Decision Making, Anger Management, Substance Abuse Education Character Building, Value Clarification, Goal Setting and Achieving Victim Awareness. Traditional re-entry components include Employment Skills, Job Placement Assistance, Money Management Skills, Parenting, Parole Education, and Reentry Support Services.

Another program which combines education and social services is WAGE, also operating in 10 dorm. WAGE is a work readiness program administered by the Arkansas Department of Career Education. The program is designed to ensure that unemployed, and underemployed Arkansans have the skills necessary to be successful in the workplace. WAGE included 112 basic skills competencies based on the Secretary's Commission on Achieving Necessary Skills (SCANS). The program is self-paced so there is no set period of time for the length of the program.

6 Dorm houses the Therapeutic Community. Four staff provided a variety of programs for the inmates; all geared toward substance abuse treatment. The program is open entry and encompasses 9-12 months. Staff report a high graduation rate.

The Tucker Unit Mental Health staff provide various services to the inmate population. These services include individual counseling & self-help/self-paced group packets.

Visitation and Mail:

Mail services are provided to the inmate population six days per week. All incoming and outgoing correspondence is searched for contraband by mailroom staff. The mailroom operates according to the schedule of the local U.S. Postal Service. Inmates have full access to the same range of postal services as those in the free world including Registered Mail, Insured Mail, etc.

The administration feels that visitation is a vital part of the inmate’s adjustment to the facility and encourages families to participate as much as possible. The inmates are allowed visitation with family and/or friends who are on their approved visitation list. The facility allows four visitors per visit. Visitation takes place on weekends and is set up in the gymnasium. This visitation area has ample room for inmate families to visit comfortably. It is spacious with restroom facilities and vending machines for inmate families use. Special visits (clergy, attorney, etc.) are allowed on weekdays, with prior approval from the warden.

Visits with inmates in Restrictive Housing must be approved by the Deputy Warden and then set up by visitation clerk. These are non-contact visits are scheduled for two-hour sessions on weekdays in the non-contact visitation rooms.



Library



Gymnasium

Library Services:

The facility has an educational and law library, which are in the academic school building. Inmates have daily access and may check out two books a day for leisure reading. Most of the books have been donated from the community and are x-rays and searched for contraband before being stocked on the shelves. The library also participates in an interlibrary loan program with the local library system.

The legal library is staffed by two trained inmate law clerks, A number of hardcover books are on site for research, but most of the cases are shepherded using the computerized West Law system. Standardized forms are kept in the file drawer, and the law clerks will use the word processor to type inmate's legal motions to the court.

Laundry:

The tour included a visit to the Laundry. Auditors observed 5 inmates workers waiting for the dryer to finish. All clothing, bedding and linen used at Tucker are *whites*, simplifying the wash process. The laundry uses, detergent, laundry Sour, and bleach. All chemicals are in powder form, and the Staff supervisor fills the plastic cups with the proper amount for each cycle.

The chemical and tool inventory was checked and was accurate. There was one inmate on a sewing machine making repairs to an article of clothing. The tools were a pair of scissors, and the sewing machine needle.

F. Examination of Records

Following the facility tour, the team proceeded to the Administration Conference room to review the electronic 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 was not under any new or old consent decrees, class action lawsuits or adverse judgments.

2. Significant Incidents/Outcome Measures

Audit team members reviewed the Significant Incident Summaries (SIS) and Outcome Measures (OM) for the past three years. The Outcome Measures appear to be unremarkable. They are consistent, and in line with past reports.

The SIS is concerning, particularly for the first year and one-half of the audit period. Tucker listed 109 inmate on inmate and 54 inmate of staff assaults during year one of the audit (2019-2020). The auditors believed both numbers were excessive for this custody-level facility that houses a relatively small number of inmates. A month-to-month comparison for this first year was not possible as the SIS sheet failed to delineate monthly data for assaults.

Things appear to be improving during the second year, except for an incident in May of 2021, which accounted for 13 of the 23 inmate on inmate assaults, and 7 of the 13 inmate assaults on staff the second audit year. A significant improvement over the prior year, but still relatively high.

The number dropped this past year to 7 inmate assault on other inmates, and zero inmate assaults on staff; numbers more in line with other Maximum-Security facilities the team has audited. Perhaps the high totals the first two years were coding errors (as suggested by one ranking staff) or due to more seclusion brought by colder temperatures and COVID quarantines. A better theory might be Tucker's inability to hire security officers and the corresponding increase in the inmate to staff ratio that follows, emboldened the inmate population to become more aggressive and take matters into their own hands. Once the ADC began to remove the 350 inmates Tucker has lost over the past three years, this inmate to staff ratio decreased as did these assaults.

3. Departmental Visits

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

<u>Department Visited</u>	<u>Person(s) Contacted</u>
Training Building	Andrew Isom, Staff Trainer

One auditor toured the training building and reviewed the standards pertinent to staff training. Mr. Isom is a recent hire, and during our audit he was being assisted by Ms. Angela King, the trainer at the ADC Delta Unit. Most staff training is completed on-line. The training building is outside the perimeter and is in the process of being renovated after a broken pipe flooded the building. Mr. Isom explained his plans for computer stations so staff could come to the facility for the on-line training without the need to enter the facility. Of course, classes like defensive tactics and CPR must be taught hands on, and he hopes to utilize the renovated training room for classes during the next training year. The auditor advised him to select a strong, multidisciplinary training committee to build the annual training plan; develop processes to evaluate the training classes throughout the year, and then use that feedback to develop the next year's plan.

Human Resources	Debra Barnes HR Coordinator Katrice Surrat, HR Assistant
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Tucker has closed dorms over the past three years because they could not fill correctional officer positions to safely staff those areas. The vacancy rate standard was the only non-compliant at their last audit, and Tucker won't be able to meet the standard again this audit. Lack of staff creates a forced overtime situation where officers must take two extra shifts each month. The administration is rightfully concerned about staff burnout. The auditor spoke with the HR department to determine the causes for the inability to hire officers, and strategies Tucker has employed to remedy the problem.

Tucker’s salaries and benefits are comparable to prisons in neighboring states and with local jails and law enforcement agencies. One issue could be that the ADC maximum security prison next door pays a 12% *hazardous duty pay*; 6% greater than the hazardous duty pay staff at the lower custody Tucker Unit. Another recruitment roadblock is that Tucker’s rural setting, 35 minutes from Pine Bluff, 45 minutes from the outskirts of Little Rock, is a longer commute for people in these larger cities. This is exacerbated by the fact that ADC has at least 6 other prisons closer than Tucker where potential corrections employees from these larger cities could work without the longer drive to Tucker. The HR department does well with meeting the other standards in their area. They have a well-written, informative Employee Handbook, and a fair system in place for hiring and promotions. Tucker’s Equal Employment Opportunity (EEO) numbers mirror those of their community; all employees receive an evaluation annually, and an Employee Assistance Program (EAP) is available to all staff.

Dorm 1 (A and B)

DW Emsweller, Amanda Pasley

This dorm is used to house inmates with mobility issues and the auditor wanted to inspect the lavatory accommodations there. He noted there were handrails to assist in using the toilet and in the shower. There was a sink to aid in wheelchair access. Shower chairs are available as needed.

7 Dorm

DW Emsweller, Major Johnson

The chair went back to 7 dorm to observe the *Paws in Prison* program in action.



Paws in Prison Program



Field Operation Hoe Squad

Classification Committee

Classification Committee Members

The Classification Committee met in the facility Library. The Committee was well attended by more than ten (10) staff, representing areas of Administration, Operations, Maintenance, Dietary, Vocational, Security, and Clinical/Program Services.

The auditor was impressed by the organization and involvement of each member of the Committee as they invited each individual offender into the meeting, allowing the offender to briefly explain why they believed they were prepared for a lower security level or a better job or program assignment. The Committee took the time to review the electronic file of the offender's behavior, educational, and work history prior to making a recommendation. The multidisciplinary approach allowed for open discussion among all participants to ensure the offender's behavior was review across all departments, and that the offender was properly placed.

Restrictive Housing Unit (RHU) RHU Lt. Penn

The security auditor went back to the RHU to better understand their procedures for showers, recreation, and the 48-hour break given to inmates serving disciplinary sanctions every 30 days. While there, he had the privilege of observing the Restrictive Housing classification committee. The RH Committee included representation from all departments, including health care, mental health, security, programs, and operations. One offender was reviewed on the date of the observation to advise the individual that a disciplinary hearing would be scheduled soon to hear his disciplinary ticket and to determine what disciplinary sanction might be issued. The individual understood the process and had no questions or concerns for the Committee during the auditor's presence.

4. Shifts

a. Day Shift

The team was present at the facility during the day shift from 7:30 a.m. until 6:00 p.m. the first two days of the audit.

The tour began in the RHU, where we observed an officer collecting trays from breakfast. Lt. Penn gave the auditors a brief presentation about the unit, recreation and shower schedules, and took us to the recreation yard. RHU has the ability to be doubled bunked, but none of the 30 cells were double bunked, and there were only approximately 20 inmates housed in RHU.

The medical auditor was in the Medical Unit, so the two remaining auditors split up to inspect the Dorms. The Security Auditor inspected Dorms 7, which has the Paws in Prison program, Dorm 5, which houses the PALS program, and Dorm 3. The Chair went to Dorm 6 which is the Therapeutic Community, Dorm 4, and Dorm 1, which houses low mobility inmates.

The tour continued into the Storage unit which used to be 2 Dorm death row, we observed the janitorial product chemicals and distribution of cleaning supplies to the porters. One auditor watched the dilution of cleaning chemicals from 55-gallon drums into 5-gallon containers.

The groups continued into the kitchen, dining area, medical unit, education classes, laundry, commissary, and library. The security auditor toured Master Control. We watched the pill call process.

Before breaking for dinner, we toured the Armory building, where we verified the ammunition and chemical weapons inventories, and spoke with sergeant in charge of keys to learn about the procedures he uses to safeguard and maintain the facility keys.

The following days, the auditors went to areas both inside and outside the perimeter of the facility. Inside, we toured the Industries program, 10 Dorm where the Think Legacy and Wage programs operate, the administrative offices, chapel and vehicle sally port area.

Outside the perimeter, we inspected the Training building, Maintenance Buildings, composter, Canine Program, Auto Maintenance, and the Agricultural program.

b. Second Shift

Tucker has two, 12-hour shifts, and the team was present at the facility during the evening shift from 5:45 p.m. briefing, until 7:00 p.m.

The Medical Auditor met with the two nurses coming on shift in the medical Unit and listened to the briefing given from the four nurses going off the day shift. The second shift discussed their duties, including their responsibility for medication administration for the late evening, and early morning pill lines. They also triage inmate requests and prepare the sick call list for the next day.

The security auditor attended roll call for the 6p-6a shift. The Captain and Lieutenant both provided information to all staff in attendance, conducted uniform inspections, announced staff posts for the evening and passed along vital information, including the presence of ACA Auditors.

After roll call, this auditor shadowed Corporal Easton to 6 dorm. Cpl. Easton conducted the count process, and the auditor observed a briefing given by the day shift officer passing along of vital information regarding the offender population.

The auditor observed Corporal (Cpl.) Easton communicate with the offender population, assigned staff in the housing unit, and supervisory staff in the unit. Conversation was held with Cpl. Easton regarding working 12-hour shifts, ability to work overtime and whether or not mandatory overtime was a positive or negative (not a factor in this employee's work), his opportunity for advancement within ADC, staff morale, supervisory support, and overall staff wellness. Cpl. Easton was very positive about his job, appreciative of the support from supervisory staff, and the possibility of future job promotional opportunities.

Overall, the housing unit ran efficiently, and it appeared that Cpl. Maintained consistent control over the housing unit and offenders within. He was well respected by the offender population, coworkers, and supervisory staff.

The Chair observed the shift briefing, and then shadowed Sgt. Phillips, who was assigned to relieve Sgt. Brazell, the Dorm 1 officer. There was a short briefing about getting an inmate packed for the morning transfer. Keys for the post are kept “on shift” meaning that they get passed to the oncoming officer at shift change in the unit. No chits are exchanged. Sgt. Phillips first official duty was to take count in 1A and 1B dorms. The count sheets are collected and taken to the Shift Commander in the Classification office. Officers from the prior shift must stay at post until count has cleared at both the evening and morning shift change.

The chair proceeded to the Education Department to observe a college Reading class. He met with the instructor Ms. Andersen, who had previously worked at Tucker in the GED program. She was grateful that Tucker was giving the inmates an opportunity for more education after their GED was acquired. There apparently are 3-4 liberal arts courses being taught each semester, with the hope that inmates will eventually earn their AA degree.

Finally, he and DW Emsweller climbed Tower One, and met with Cpl. Norris. She explained her duties and went over the weapons in the tower. We discussed whether the lighting was sufficient for visibility into the yard and on the perimeter at night. She pointed out a few areas in the prison interior that were difficult to see well; one where there was a tree in front of the administration building. She also said the perimeter lights illuminating the parking lot shine directly into her face, making it difficult to view the entry road and bridge. DW Emsweller took note, and it is likely improvements will be made.

5. Status of Previously Non-compliant Standards/Plans of Action. The team reviewed the status of standards previously found non-compliant, for which a waiver was not granted, and found the following:

Standard # 4-4052

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

FINDINGS:

Due to staffing and the 18 Month Vacancy Report from Central Office, the Tucker Unit was over the 10% for any 18month.

The Agency Plan of Action developed to come into compliance with this standard appears to be solid, however, for a variety of reasons, the Tucker Unit continues to struggle with finding security staff. During the past three years, Tucker closed over 350 bedspaces due to lack of staff available to safely supervise inmates.

Obviously, the COVID pandemic exacerbated the situation, however, their own documentation shows little improvement over the past three years; in fact, Tucker exceeded a 10% vacancy rate for each month of this audit period.

G. Interviews

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

1. Offender Interviews

Auditors spoke with over 65 inmates during the audit. The inmates were respectful to staff and were aware of the audit process. Inmates reported feeling safe at the facility, and many were complimentary of the programs offered, medical care, and the food received. As we toured, they knew who the administrative staff were as we toured, and DW Emsweller and Major Johnson called many of the inmates by name.

Inmates we spoke with while in GED and College classes, the Think Legacy program, and at their work programs (industries, canine unit, maintenance) were very happy to have the opportunity to learn and were grateful and proud of their accomplishments.

The American Correctional Association Office in Arlington Virginia received a letter from a relative concerning a sexual assault on an inmate. Unfortunately, the letter was received 2 ½ years prior to the on-site audit, and the actual incident took place five years prior. The incident was reviewed with facility staff and found that proper PREA protocols had been followed for the incident. The victim of the sexual assault, as well as the perpetrator were no longer in custody of the Tucker unit. The case was referred to the Arkansas State Police for investigation and possible prosecution. No disposition had been received by the Tucker facility in regard to this referral.

2. Staff Interviews

During the course of the audit the team spoke with over 50 staff on the tour and through informal conversations. More than one employee discussed the positive change in staff morale over the past year since Warden Ball and DW Emsweller were installed. Comments by staff during the exit conference reflect that opinion as well.

Officers mentioned they would prefer to work 8-hour shifts to allow more time at home with family. A few mentioned the mandatory overtime was growing old, but believe the administration is doing all they can to hire more security officers. Many commented they liked seeing the administration making frequent rounds through the facility and believe they “have their backs”.

H. Exit Discussion

The exit interview was held October 6, 2022, at 11:45 a.m. in the Tucker Unit Chapel with Warden Todd Ball and twenty-one members of his staff. In addition, there were eleven more ADC employees, including wardens and accreditation managers, present from other nearby facilities.

The following dignitaries were also in attendance:

Solomon Graves, Secretary of Corrections	Arkansas Department of Corrections
Dexter Payne, Director of Corrections	Arkansas Division of Corrections
Dale Reed, Chief Deputy Director	Arkansas Division of Corrections
Williams Straughn, Deputy Director	Arkansas Division of Corrections
Aundrea Culclager, Deputy Director	Arkansas Division of Corrections
Richard Cooper, Assistant Director	Arkansas Division of Corrections
Gaylon Lay, Superintendent	Arkansas Division of Corrections

Members of the audit team each discussed their sections of the standards, highlighting the exceptional practices and programs they observed during our visit. The chair then discussed the compliance levels of the mandatory and non-mandatory standards and reviewed the findings with the group. Procedures that would follow the audit were explained.

The chairperson expressed appreciation for the cooperation of everyone concerned and congratulated the facility team for the progress made, encouraging 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	Tucker Unit	
Audit Dates	October 4-6, 20323	
Auditor(s)	Tim Schuetzle Randy Cross Jason W. Hall	
	MANDATORY	NON-MANDATORY
Number of Standards in Manual	64	509
Number Not Applicable	7	70
Number Applicable	57	439
Number Non-Compliance	0	4
Number in Compliance	57	435
Percentage (%) of Compliance	100%	99.1%
<ul style="list-style-type: none"> ● Number of Standards <i>minus</i> Number of Not Applicable <i>equals</i> Number Applicable ● Number Applicable <i>minus</i> Number Non-Compliance <i>equals</i> Number Compliance ● Number Compliance <i>divided by</i> Number Applicable <i>equals</i> Percentage of Compliance 		

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections
Tucker Unit
Tucker, Arkansas

October 4-6, 2022

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance (4)

Standard #5-ACI-1C-05

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

FINDINGS: Non-Compliance

The Tucker Unit's vacancy rate exceeded 10 percent for the entire audit period.

AGENCIES RESPONSE:

Plan of Action

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

Task

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

Responsible Agency

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

Assigned Staff

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

Anticipated Completion Date

- a. ACA Audit 2025 or sooner

AUDITOR'S RESPONSE:

The auditors support the plan of action.

Standard #5-ACI-2C-04

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

FINDINGS: Non-Compliance

The Dayrooms in Dorms 1A, 1B, 3A, 3B, 4A, and 4B do not provide 35 square feet of dayroom space per inmate.

AGENCIES RESPONSE:

Waiver Request

The Tucker Unit was constructed in 1916. Since then, there have been changes made to enhance the quality of life for the inmate population at Tucker Unit. During the hours of 7:00 a.m. (wake-up) to 4:30 p.m. (end of workday), the dayroom is only utilized by a small number of inmates. Many of the inmates spend the evening hours on their respective beds reading, writing letters or visiting with one another.

Inmates who are physically able to work, go out each day to their respective jobs. Dayrooms with space for varied inmate activities include playing board games, writing letters, reading and watching television. Inmates can sit on their beds and view the television. Inmates can listen to the television with their headphones during viewing hours.

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

AUDITOR'S RESPONSE:

The audit team support the Waiver request.

Standard #5-ACI-4B-08 NEW August 2018

(EFFECTIVE NLT OCTOBER 1, 2020) WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR A REVIEW OF THE STATUS OF INMATES IN RESTRICTIVE HOUSING BY THE CLASSIFICATION COMMITTEE OR OTHER AUTHORIZED STAFF EVERY SEVEN DAYS FOR THE FIRST 60 DAYS AND AT LEAST EVERY 30 DAYS THEREAFTER.

FINDINGS:

Non-Compliance

Status reviews for inmates assigned to Restrictive Housing are not being conducted every seven days for the first 60 days and/or at least every 30 days thereafter. Documentation provided did not indicate status reviews were conducted consistently according to standard.

AGENCIES RESPONSE:

Plan of Action

All inmates placed in Restrictive Housing will have a review of their status by the classification committee every seven days for the first 60 days and at least every 30 days thereafter.

Task

- a. Hold classification in Restrictive Housing every Wednesday
- b. Document 7-day, 30-day, and 60-day reviews in eOMIS

Responsible Agency

- a. Tucker Unit Warden
- b. Tucker Unit Warden

Assigned Staff

- a. Unit Classification Supervisor
- b. Unit Classification Supervisor

Anticipated Completion Date

- a. ACA Audit 2025 or sooner
- b. ACA Audit 2025 or sooner

AUDITOR'S RESPONSE:

The audit team supports the plan of action.

Standard #5-ACI-4B-31 NEW August 2018 (Revised January 2019)

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

- 1. PRE-SCREENING EVALUATION
- 2. MONTHLY EVALUATIONS USING A MULTI-DISCIPLINARY APPROACH TO DETERMINE THE INMATE'S COMPLIANCE WITH PROGRAM REQUIREMENTS.
- 3. SUBJECT TO MONTHLY EVALUATIONS; TO GRADUALLY INCREASING EDUCATION AND PROGRAMMING OPPORTUNITES TO GRADUALLY INCREASING PRIVILIEGES
- 4. A STEP-DOWN TRANSITION COMPLIANCE REVIEW
- 5. POST-SCREENING EVALUATION
- 6. NOTIFICATION OF RELEASE TO STATE AND LOCAL LAW ENFORCEMENT
- 7. NOTIFY RELEASING OFFENDER OF APPLICABLE COMMUNITY SERVICES

FINDINGS:

Non-Compliance

The Tucker Unit has extended restrictive housing (ERH), as evidenced by other standards (see 4B-26) wherein program services are provided to inmates housed in ERH. There does not exist a step-down program or gradually increasing education and programming opportunities.

AGENCIES RESPONSE:

Appeal of the Visiting Committee Finding

This standard is not applicable to the Tucker Unit because we are not intended to house inmates in Extended Restrictive Housing. Inmates who need to be housed in Restrictive Housing for longer than 30 days are to be transferred to a Maximum-Security Unit that offers the Step-Down program. However, restrictions due to COVID prevented us from being able to transfer some of our inmates in a timely manner during this audit cycle. Therefore, we are requesting that this standard be marked NA for our audit.

AUDITOR'S RESPONSE:

The audit team believes this standard is applicable and was non-compliant during this audit period. There were recent examples where Tucker housed inmates in RHU longer than 30 consecutive days if and when their total disciplinary punishment exceeded thirty days. This practice continued even after the COVID *transfer ban* had been lifted. Inmates sanctioned to greater than 30 days of disciplinary sanctions would serve their first 30 days and then were given a 48-hour break from their punishment *but remained in the RHU* for that break. During those 48 hours they did not receive privileges afforded inmates living in the general population (i.e., commissary, programming, out of cell activities) and remained locked in the RHU cell, following the RHU schedule for recreation and showers. When this break ended, the inmate remained in RHU and continue to serve whatever disciplinary sanctions were remaining. Once their disciplinary time had been served, they moved from RHU to Tucker Unit housing. This practice meets the definition of Extended Restrictive Housing (ERH) whether Tucker is intended to have EHU or not.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections
Tucker Unit
Tucker, Arkansas

October 4-6, 2022

Visiting Committee Findings

Mandatory Standards

Non-Compliance

Standard #5-ACI-4A-01-MANDATORY

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 PROFESSIONAL. 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: Non-applicable

The Tucker Unit does not have a Special Management Unit.

Standard #5-ACI-5B-12 MANDATORY

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

FINDINGS: Non-applicable

The Tucker Unit does not house juvenile offenders.

Standard #5-ACI-6A-10 MANDATORY

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

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

FINDINGS: Non-applicable

The Tucker Unit houses male inmates only.

Standard #5-ACI-6C-13 MANDATORY

THE USE OF RESTRAINTS FOR MEDICAL AND PSYCHIATRIC PURPOSES IS DEFINED, AT A MINIMUM, BY THE FOLLOWING:

- CONDITIONS UNDER WHICH RESTRAINTS MAY BE APPLIED
- TYPES OF RESTRAINTS TO BE APPLIED
- IDENTIFICATION OF A QUALIFIED MEDICAL OR MENTAL HEALTH CARE PRACTITIONER WHO MAY AUTHORIZE THE USE OF RESTRAINTS AFTER REACHING THE CONCLUSION THAT LESS RESTRICTIVE MEASURES WOULD NOT BE SUCCESSFUL
- MONITORING PROCEDURES FOR OFFENDERS IN RESTRAINTS
- LENGTH OF TIME RESTRAINTS ARE TO BE APPLIED
- DOCUMENTATION OF EFFORTS FOR LESS RESTRICTIVE TREATMENT ALTERNATIVES AS SOON AS POSSIBLE
- AN AFTER-INCIDENT REVIEW

FINDINGS: Non-applicable

The Tucker Unit does not use restraints for medical or psychiatric purposes.

Standard #5-ACI-6A-21 MANDATORY

INTAKE MEDICAL SCREENING FOR OFFENDER TRANSFERS, EXCLUDING INTRA-SYSTEM, COMMENCES UPON THE OFFENDER'S ARRIVAL AT THE FACILITY AND IS PERFORMED BY HEALTH-TRAINED OR QUALIFIED HEALTH CARE PERSONNEL.

ALL FINDINGS ARE RECORDED ON A SCREENING FORM APPROVED BY THE HEALTH AUTHORITY. THE SCREENING INCLUDES AT LEAST THE FOLLOWING:

INQUIRY INTO:

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

The Tucker Unit is not an intake unit. Intake is done at the Ouchita River Unit.

Standard #5-ACI-6A-25 MANDATORY

(EFFECTIVE NLT JANUARY 1, 2021) A COMPREHENSIVE HEALTH APPRAISAL FOR EACH INMATE, EXCLUDING INTRASYSTEM 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 90 DAYS, A NEW HEALTH APPRAISAL IS NOT REQUIRED, EXCEPT AS DETERMINED BY THE DESIGNATED HEALTH AUTHORITY. HEALTH APPRAISAL DATA COLLECTION AND RECORDING INCLUDES THE FOLLOWING:

1. A UNIFORM PROCESS AS DETERMINED BY THE HEALTH AUTHORITY
2. DOCUMENTATION OF REVIEW OF THE EARLIER 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: Non-applicable

The Tucker Unit is not an intake unit. Intake is done at the Ouchita River Unit.

Standard #5-ACI-6A-32 MANDATORY

(EFFECTIVE NLT JANUARY 1, 2021) INMATES WHO ARE REFERRED AS A RESULT OF THE MENTAL HEALTH SCREENING OR BY STAFF REFERRAL WILL RECEIVE A MENTAL HEALTH APPRAISAL BY A QUALIFIED MENTAL HEALTH PERSON WITHIN 14 DAYS OF ADMISSION TO THE FACILITY OR THE REFERRAL. 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 EXAMINATIONS INCLUDE, BUT ARE NOT LIMITED TO THE FOLLOWING:

1. REVIEW OF THE MENTAL HEALTH SCREENING
2. HISTORICAL REVIEW OF THE FOLLOWING:
 3.
 - A. AVAILABLE HISTORICAL RECORDS OF INPATIENT AND OUTPATIENT PSYCHIATRIC TREATMENT
 - B. TREATMENT WITH PSYCHOTROPIC MEDICATION
 - C. PSYCHOTHERAPY, PSYCHO-EDUCATIONAL GROUPS, AND CLASSES OR SUPPORT GROUPS
 - D. EDUCATIONAL STATUS
 - E. DRUG AND ALCOHOL USE/ABUSE; TREATMENT
 - F. SEXUAL ABUSE-VICTIMIZATION AND PREDATORY BEHAVIOR
4. ASSESSMENT OF CURRENT MENTAL STATUS AND CONDITION, INCLUDING:
 - A. CURRENT SUICIDAL POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT MAY INCREASE SUICIDE POTENTIAL
 - B. VIOLENCE POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES
 - C. CIRCUMSTANCES THAT MAY INCREASE VIOLENCE POTENTIAL
 - D. DRUG AND ALCOHOL ABUSE AND/OR ADDICTION
5. USE OF ADDITIONAL ASSESSMENT TOOLS, AS INDICATED
6. DEVELOPMENT AND IMPLEMENTATION OF A TREATMENT PLAN, AS INDICATED, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION

7. REFERRAL TO TREATMENT, AS INDICATED

FINDINGS: Non-applicable

The Tucker Unit is not an intake unit. Intake is done at the Ouchita River Unit.

Standard #5-ACI-6A-41 MANDATORY

WITHDRAWAL MANAGEMENT IS DONE ONLY UNDER MEDICAL SUPERVISION IN ACCORDANCE WITH LOCAL, STATE, AND FEDERAL LAWS. WITHDRAWAL MANAGEMENT FROM ALCOHOL, OPIATES, HYPNOTICS, STIMULANTS, AND SEDATIVE HYPNOTIC DRUGS IS CONDUCTED UNDER MEDICAL SUPERVISION WHEN PERFORMED AT THE FACILITY OR IS CONDUCTED IN A HOSPITAL OR COMMUNITY TREATMENT CENTER. SPECIFIC GUIDELINES ARE FOLLOWED FOR THE TREATMENT AND OBSERVATION OF INDIVIDUALS MANIFESTING MILD OR MODERATE SYMPTOMS OF INTOXICATION OR WITHDRAWAL FROM ALCOHOL AND OTHER DRUGS. OFFENDERS EXPERIENCING SEVERE, LIFE-THREATENING INTOXICATION (AN OVERDOSE), OR WITHDRAWAL ARE TRANSFERRED UNDER APPROPRIATE SECURITY CONDITIONS TO A FACILITY WHERE SPECIALIZED CARE IS AVAILABLE.

FINDINGS: Non-applicable

The Tucker Unit is not an intake unit. Intake is done at the Ouchita River Unit.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections
Tucker Unit
Tucker, Arkansas

October 4-6, 2022

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance (70)

Standard #5-ACI-1B-24

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

FINDINGS: Non-applicable

Per Act 1262 of 1997, the ADC is not responsible. Restitution is addressed in Arkansas Code Annotated 5-4-205.act 817-1997 *Arkansas Crime Victims Reparations Act*.

Standard #5-ACI-2B-01

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

FINDINGS: Non-applicable

The Tucker Unit has had no new construction.

Standard #5-ACI-2B-04

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

FINDINGS: Non-applicable

There were no single cell living units constructed after 1/1/1990.

Standard #5-ACI-2C-02

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT SINGLE-OCCUPANCY CELLS/ROOMS SHALL BE AVAILABLE, WHEN INDICATED, FOR THE FOLLOWING:

- INMATES WITH SEVERE MEDICAL DISABILITIES
- INMATES SUFFERING FROM SERIOUS MENTAL ILLNESS
- SEXUAL PREDATORS
- INMATES LIKELY TO BE EXPLOITED OR VICTIMIZED BY OTHERS
- INMATES WHO HAVE OTHER SPECIAL NEEDS FOR SINGLE HOUSING

WHEN CONFINEMENT EXCEEDS 10 HOURS A DAY, THERE IS AT LEAST 80-SQUARE FEET OF TOTAL FLOOR SPACE, OF WHICH 35-SQUARE FEET IS UNENCUMBERED SPACE.

FINDINGS: Non-applicable

The ADC does not house these inmates at Tucker. Tucker does not have single cells

Standard #5-ACI-2C-06

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

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

FINDINGS: Non-applicable

The Tucker Unit has not had new construction after 6/2014.

Standard #5-ACI-2C-08

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

FINDINGS: Non-applicable

The Tucker Unit has not had new construction after 6/2014.

Standard #5-ACI-2C-10

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

FINDINGS: Non-applicable

The Tucker Unit has not had new construction after 6/2014.

Standard #5-ACI-2C-12

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

FINDINGS: Non-applicable

Inmates requiring this level of care are not assigned to the Tucker Unit.

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: Non-applicable

The Tucker Unit has not had any renovation, addition, or new construction after 6/1/2008.

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: Non-applicable

The Tucker Unit has not had any renovation, addition, or new construction after 6/1/2014.

Standard #5-ACI-2D-06

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

FINDINGS: Non-applicable

The Tucker Unit has not had any renovation, addition, or new construction after 1/1/1990.

Standard #5-ACI-2D-08

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

FINDINGS: Non-applicable

The Tucker Unit has not had any renovation, addition, or new construction after 1/1/1990.

Standard #5-ACI-2E-02 Revised August 2019

(EFFECTIVE NLT JANUARY 1, 2021) SPECIAL MANAGEMENT HOUSING UNITS HAVE EITHER OUTDOOR UNCOVERED OR OUTDOOR COVERED EXERCISE AREAS. THE MINIMUM SPACE REQUIREMENTS FOR OUTDOOR EXERCISE AREAS FOR SPECIAL MANAGEMENT UNITS ARE AS FOLLOWS: FOLLOWING:

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

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

FINDINGS: Non-applicable

Tucker Unit does not have a special management unit.

Standard #5-ACI-2E-04

(RENOVATION, NEW CONSTRUCTION ONLY AFTER JANUARY 1, 1990). IN INSTITUTIONS OFFERING ACADEMIC AND VOCATIONAL TRAINING PROGRAMS, CLASSROOMS ARE DESIGNED IN CONSULTATION WITH SCHOOL AUTHORITIES.

FINDINGS:

No new construction after 1/1/1990.

Standard #5-ACI-3A-07

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

FINDINGS: Non-applicable

Tucker Unit only houses male inmates.

Standard #5-ACI-3A-17

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

FINDINGS: Non-applicable

Tucker Unit doesn't house female inmates.

Standard #5-ACI-3D-05

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT MALE AND FEMALE INMATES HOUSED IN THE SAME INSTITUTION HAVE SEPARATE SLEEPING QUARTERS BUT EQUAL ACCESS TO ALL AVAILABLE SERVICES AND PROGRAMS.

NEITHER SEX IS DENIED OPPORTUNITIES SOLELY ON THE BASIS OF THEIR SMALLER NUMBER IN THE POPULATION.

FINDINGS: Non-applicable

Tucker Unit only houses male inmates.

Standard #5-ACI-4A-02

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: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-03

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

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

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: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-05

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

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-06

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT AN INMATE IS PLACED IN DISCIPLINARY DETENTION FOR A RULE VIOLATION ONLY AFTER A HEARING BY THE DISCIPLINARY COMMITTEE OR HEARING EXAMINER

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-07

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR A REVIEW OF THE STATUS OF INMATES IN SPECIAL MANAGEMENT HOUSING 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: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-08

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

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-09

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

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

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: Non-applicable

Tucker doesn't have a special management unit.

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 OBSERVATION.

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-12

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: Non-applicable

Tucker doesn't have a special management unit.

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: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-14

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

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

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: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-16

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: Non-applicable

Tucker doesn't have a special management unit.

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 SHALL NOT EXCEED SEVEN DAYS.

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

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 SECURITY OFFICER.

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

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: Non-applicable

Tucker doesn't have a special management unit.

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: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-22

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

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-23

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

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-24

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: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-25

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

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-26

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

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

Standard #5-ACI-4A-27

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

FINDINGS: Non-applicable

Tucker doesn't have a special management unit.

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

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

FINDINGS: Non-applicable

Tucker doesn't house female inmates.

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

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

FINDINGS: Non-applicable

Tucker does not house offenders under the age of 18.

Standard #5-ACI-5A-01

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

- DETERMINING THAT THE INMATE IS LEGALLY COMMITTED TO THE INSTITUTION
- THOROUGH SEARCHING OF THE INDIVIDUAL AND POSSESSIONS
- DISPOSING OF PERSONAL PROPERTY
- SHOWERING AND HAIR CARE, IF NECESSARY
- ISSUING OF CLEAN, LAUNDERED CLOTHING AS NEEDED
- PHOTOGRAPHING AND FINGERPRINTING, INCLUDING NOTATION OF IDENTIFYING MARKS OR OTHER UNUSUAL PHYSICAL CHARACTERISTICS
- MEDICAL, DENTAL, AND MENTAL HEALTH SCREENING
- ASSIGNING TO HOUSING UNIT
- RECORDING BASIC PERSONAL DATA AND INFORMATION TO BE USED FOR MAIL AND VISITING LIST
- EXPLAINING MAIL AND VISITING PROCEDURES
- ASSISTING INMATES IN NOTIFYING THEIR NEXT OF KIN AND FAMILIES OF ADMISSION
- ASSIGNING OF REGISTERED NUMBER TO THE INMATE
- GIVING WRITTEN ORIENTATION MATERIALS TO THE INMATE
- DOCUMENTING ANY RECEPTION AND ORIENTATION PROCEDURE COMPLETED AT A CENTRAL RECEPTION FACILITY

FINDINGS: Non-applicable

The Tucker Unit is not an intake unit. Intake is done at the Ouchita River Unit.

Standard #5-ACI-5A-02

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

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

- STAFF RECOMMENDATIONS
- PREINSTITUTIONAL ASSESSMENT INFORMATION

FINDINGS: Non-applicable

The Tucker Unit is not an intake unit. Intake is done at the Ouchita River Unit.

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: Non-applicable

The Tucker Unit is not an intake unit. Intake is done at the Ouchita River Unit.

Standard #5-ACI-5A-04

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

FINDINGS: Non-applicable

The Tucker Unit is not an intake unit. Intake is done at the Ouchita River Unit.

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

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

FINDINGS: Non-applicable

Tucker does not house offenders under the age of 18.

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: Non-applicable

Tucker does not house offenders under the age of 18.

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: Non-applicable

Tucker does not house offenders under the age of 18.

Standard #5-ACI-5B-16

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

FINDINGS: Non-applicable

Tucker does not house offenders under the age of 18.

Standard #5-ACI-5B-17

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

FINDINGS: Non-applicable

Tucker does not house offenders under the age of 18.

Standard #5-ACI-5B-18

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

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

FINDINGS: Non-applicable

Tucker does not house offenders under the age of 18.

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

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

FINDINGS: Non-applicable

ADC does not offer a facilitated victim/offender dialogue program.

Standard #5-ACI-6A-09

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

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

FINDINGS: Non-applicable

Tucker does not have medical housing (infirmary).

Standard #5-ACI-6A-11

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

FINDINGS: Non-applicable

Tucker only houses male inmates.

Standard #5-ACI-6A-19

(EFFECTIVE NLT JULY 1, 2021) THERE IS A DEFINED SCOPE OF AVAILABLE DENTAL SERVICES UPON ADMISSION, WHICH INCLUDES THE FOLLOWING:

- DENTAL SCREENING UPON INITIAL ADMISSION INTO THE SYSTEM BY A QUALIFIED HEALTH CARE PROFESSIONAL OR HEALTH TRAINED PROFESSIONAL.
- ORAL HYGIENE, ORAL DISEASE EDUCATION AND SELF-CARE INSTRUCTION THAT ARE PROVIDED BY QUALIFIED HEALTH CARE PERSONNEL WITHIN 30 DAYS OF INITIAL ADMISSION INTO THE SYSTEM.
- DENTAL INTAKE ASSESSMENT BY A DENTIST WITHIN 30 DAYS OF INITIAL ADMISSION INTO THE SYSTEM TO ASSESS DENTAL PAIN, INFECTION, DISEASE, OR IMPAIRMENT OF FUNCTION AND ESTABLISH THE OVERALL DENTAL/ORAL CONDITION. CONSULTATION AND REFERRAL TO APPROPRIATE SPECIALISTS ARE PROVIDED WHEN MEDICALLY NECESSARY.

FINDINGS: Non-applicable

Intake is done at the Ouchita River Facility.

Standard #5-ACI-6A-39

(EFFECTIVE NLT OCTOBER 1, 2020) INPATIENT CARE UNIT IS FOR THOSE WHO ARE IN NEED OF INPATIENT MENTAL HEALTH TREATMENT.

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

FINDINGS: Non-applicable

Tucker does not receive offenders who require in-patient mental health care.

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: Non-applicable

Tucker Unit contract with a private vendor, Wellpath to provide full time, qualified personnel for delivery of healthcare to the inmates.

Standard #5-ACI-6B-10

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

FINDINGS: Non-applicable

Volunteers are not utilized in the delivery of healthcare.

Standard #5-ACI-6B-11

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

FINDINGS: Non-applicable

Tucker does not use students, interns, or resident in the delivery of healthcare.

Standard #5-ACI-6B-12

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

- PROVIDING PEER SUPPORT AND EDUCATION
- PERFORMING HOSPICE ACTIVITIES
- ASSISTING IMPAIRED OFFENDERS ON A ONE-ON-ONE BASIS WITH ACTIVITIES OF DAILY LIVING

- SERVING AS A SUICIDE COMPANION OR BUDDY IF QUALIFIED AND TRAINED THROUGH A FORMAL PROGRAM THAT IS PART OF SUICIDE-PREVENTION PLAN
- HANDLING DENTAL INSTRUMENTS FOR THE PURPOSE OF SANITIZING AND CLEANING, WHEN DIRECTLY SUPERVISED AND IN COMPLIANCE WITH APPLICABLE TOOL CONTROL POLICIES, WHILE IN A DENTAL ASSISTANT'S TRAINING PROGRAM CERTIFIED BY THE STATE DEPARTMENT OF EDUCATION OR OTHER COMPARABLE APPROPRIATE AUTHORITY

OFFENDERS ARE NOT TO BE USED FOR THE FOLLOWING DUTIES:

- PERFORMING DIRECT PATIENT CARE SERVICES
- SCHEDULING HEALTH CARE APPOINTMENTS
- DETERMINING ACCESS OF OTHER OFFENDERS TO HEALTH CARE SERVICES

- HANDLING OR HAVING ACCESS TO SURGICAL INSTRUMENTS, SYRINGES, NEEDLES, MEDICATIONS, OR HEALTH RECORDS
- OPERATING DIAGNOSTIC OR THERAPEUTIC EQUIPMENT EXCEPT UNDER DIRECT SUPERVISION (BY SPECIALLY TRAINED STAFF) IN A VOCATIONAL TRAINING PROGRAM

FINDINGS: Non-applicable

Tucker does not use offender assistants to perform familial duties.

Standard #5-ACI-6E-02

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

FINDINGS: Non-applicable

Tucker does not have an infirmary unit.

Standard #5-ACI-6E-03

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

FINDINGS: Non-applicable

Tucker does not have an infirmary unit.

Standard #5-ACI-6E-04

OFFENDERS HAVE ACCESS TO TOILETS AND HAND-WASHING FACILITIES 24 HOURS PER DAY AND ARE ABLE TO USE TOILET FACILITIES WITHOUT STAFF ASSISTANCE WHEN THEY ARE CONFINED IN THE MEDICAL HOUSING UNIT OR IN THE INFIRMARY AREA. TOILETS ARE PROVIDED AT A MINIMUM RATIO OF 1 FOR EVERY 12 OFFENDERS IN MALE FACILITIES AND 1 FOR EVERY 8 OFFENDERS IN FEMALE FACILITIES. URINALS MAY BE SUBSTITUTED FOR UP TO ONE-HALF OF THE TOILETS IN MALE FACILITIES.

ALL HOUSING UNITS WITH THREE OR MORE OFFENDERS HAVE A MINIMUM OF 2 TOILETS. THESE RATIOS APPLY UNLESS STATE OR LOCAL BUILDING OR HEALTH CODES SPECIFY A DIFFERENT RATIO.

FINDINGS: Non-applicable

Tucker does not have an infirmary unit.

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: Non-applicable

Tucker does not house female inmates

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: Non-applicable

There are no private industries operating at Tucker.

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: Non-applicable

Inmates are not employed by public or private organizations.

Year 3
Significant Incident Summary

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

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

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

Facility Name: Tucker Unit **Reporting Period:** October 1, 2021-September 23,2022

Incident Type	Months	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	Total for Reporting Period
Escapes		0	0	0	0	0	0	0	0	0	0	0	0	0
Disturbances*		0	0	0	0	0	0	0	1	0	0	0	0	1
Sexual Violence		0	0	0	0	0	0	0	0	0	0	0	0	0
Homicide*	Offender Victi	0	0	0	0	0	0	0	0	0	0	0	0	0
	Staff Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Other Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
Assaults	Offender / Offender	2	2	1	1	1	0	0	0	0	0	0	0	7
	Offender / Staff	0	0	0	0	0	0	0	0	0	0	0	0	0
Suicide		0	0	0	0	0	0	0	0	0	0	0	0	0
Non-Compliance with a Mandatory Standard*		0	0	0	0	0	0	0	0	0	0	0	0	0
Fire		0	0	0	0	0	0	0	0	0	0	0	0	0
Natural Disaster*		0	0	0	0	0	0	0	0	0	0	0	0	0
Unnatural Death		0	0	0	0	0	0	0	0	0	0	0	0	0
Other*		0	0	0	0	0	0	0	0	0	0	0	0	0

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

**Year 2
Significant Incident Summary**

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

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

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

Facility Name: Tucker Unit **Reporting Period:** October 1, 2020-September 30, 2021

Incident Type	Months	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	Total for Reporting Period
	→													
Escapes		0	0	0	0	0	0	0	0	0	0	0	0	0
Disturbances*		0	0	0	0	0	0	1	0	1	0	0	0	2
Sexual Violence		0	0	0	0	0	0	0	0	0	0	0	0	0
Homicide*	Offender Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Staff Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Other Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
Assaults	Offender/Offender	1	1	4	4	12	1	0	0	0	0	0	0	23
	Offender/Staff	0	0	3	2	7	1	0	0	0	0	0	0	13
Suicide		0	0	0	0	0	0	0	0	0	0	0	0	0
Non-Compliance with a Mandatory Standard*		0	0	0	0	0	0	0	0	0	0	0	0	0
Fire*		0	0	0	0	0	0	0	0	0	0	0	0	0
Natural Disaster*		0	0	0	0	0	0	0	0	0	0	0	0	0
Unnatural Death		0	0	0	0	0	0	0	0	0	0	0	0	0
Other*		0	0	0	0	0	0	0	0	0	0	0	0	0

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

**Year 1
Significant Incident Summary**

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

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

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

Facility Name: Tucker Unit **Reporting Period:** October 2019-September 2020

Incident Type	Months	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	Total for Reporting Period
	→													
Escapes		0	0	0	0	0	0	0	0	0	0	0	0	0
Disturbances*		0	0	0	0	0	0	1	0	1	0	0	0	2
Sexual Violence		0	0	0	0	0	0	0	0	0	0	0	0	0
Homicide*	Offender Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Staff Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Other Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
Assaults	Offender/Offender	1	1	4	4	12	1	0	0	0	0	0	0	23
	Offender/Staff	0	0	3	2	7	1	0	0	0	0	0	0	13
Suicide		0	0	0	0	0	0	0	0	0	0	0	0	0
Non-Compliance with a Mandatory Standard*		0	0	0	0	0	0	0	0	0	0	0	0	0
Fire*		0	0	0	0	0	0	0	0	0	0	0	0	0
Natural Disaster*		0	0	0	0	0	0	0	0	0	0	0	0	0
Unnatural Death		0	0	0	0	0	0	0	0	0	0	0	0	0
Other*		0	0	0	0	0	0	0	0	0	0	0	0	0

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

**American Correctional Association: Adult Correctional Institutions Accreditation Manual -
5th Edition Outcome Measures**

Performance Standards		Outcome Measures	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
1. Administration & Management: Administer and manage the facility in a professional and responsible manner, consistent with statutory requirements.					
1A: Facility Administration - The facility is administered efficiently and responsibly. Performance is based on goals, objective, and standard operating procedures and a system of regular review.	1A-1	Number of Plans of Action completed in the past 6 months divided by the number of Plans of Action approved by the Commission on Accreditation.	1	1	1
	1A-2	Number of expected practices in compliance divided by the number of applicable expected practices.	497	498	99.7
1B: Fiscal Management - The facility utilizes appropriate fiscal planning, budgeting, and accounting procedures and provides for a system of regular review.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
1C: Personnel - The facility promotes diversity and competency through employee staffing, recruitment, promotions, benefit allocations and performance reviews.	1C-1	The average offender population in the past 6 months divided by the average number of filled full time positions in the past 6 months.	638	221	2.89
	1C-2	The number of staff who left employment for any reason in the past 6 months divided by the average number of filled full time positions in the past 6 months.	57	221	.258
	1C-3	The number of verified employee violations in the past 6 months divided by the average number of filled full time staff positions in the past 6 months.	21	221	.095
	1C-4	The number of staff terminated for conduct violations in the past 6 months divided by the average number of filled full time staff positions in the past 6 months.	35	221	.158
	1C-5	The number of performance reviews rated acceptable or higher in the past 6 months divided by the total number of performance reviews conducted in the past 6 months.	73	117	.62
	1C-6	Average number of security staff positions filled per month for the past 6 months divided by the total number of authorized security positions.	4	297	.013
	1C-7	Number of security staff who left employment in the past 6 months divided by the total number of authorized security positions.	56	297	.188
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			

1F: Information Systems & Research - Effective systems of data and information storage and retrieval are vital for the maintenance of operational effectiveness and research capability.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
1G: Citizen Involvement & Volunteers - The facility is a responsible member of the community, supporting citizen involvement and volunteer initiatives as well as other community interaction.	1G-1	The total number of hours of volunteer service delivered by members of the community in the past 6 months divided by the average daily population in the past 6 months.	2742	638	4.29
	1G-2	The total number of hours of community service work delivered by offenders in the past 6 months divided by 6.	27860	12	2321
2A: Building and Safety Codes - The facility complies with professional building and fire safety codes to help ensure the safety of all persons within the facility.	2A-1	Number of worker's compensation claims filed in the past 6 months divided by the average number of filled full-time staff positions in the past 6 months.	23	221	.104
	2A-2	Number of sanitation or health-code violations identified by external agencies in the past 6 months.	3		
	2A-3	The number of fire and safe code violations identified by the governing jurisdiction in the past 6 months.	15		
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 6 months divided by 182.5.	84	365	.23
2C: Inmate Housing - Inmate housing areas are the foundation of institutional living and promote the safety and well-being of both inmates and staff		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
2F: Administrative and Staff Areas - All levels of staff are provided with adequate space to carry out their responsibilities safely and effectively.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
2G: Security - The physical plan supports the orderly and secure functioning of the institution.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			

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 6 months divided by the average daily population in the past 6 months.	29	638	.045
	3A-2	Number of seizures of contraband, as defined by the agency, in the past 6 months divided by the average daily population in the past 6 months.	118	638	.184
	3A-3	The number of escapes, as defined in the Significant Incident Summary, in the past 6 months divided by the average daily population in the past 6 months.	0	638	0
	3A-4	The number of disturbances, as defined in the Significant Incident Summary, in the past 6 months divided by the average daily population in the past 6 months.	1	638	.001
	3A-5	The number of acts of sexual violence, as defined in the Significant Incident Summary, in the past 6 months divided by the average daily population in the past 6 months.	0	638	0
	3A-6	The number of homicides as defined in the Significant Incident Summary, in the past 6 months, divided by the average daily population in the past 6 months.	0	638	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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
3C: Rules & Discipline - The institution's rules of conduct and sanctions and procedures for violations are communicated to all inmates and staff. The disciplinary process respects due process.	3C-1	The total number of major disciplinary reports, as defined by the agency, in the past 6 months divided by the average daily population in the past 6 months.	422	638	.661
	3C-2	The total number of minor disciplinary reports, as defined by the agency, in the past 6 months divided by the average daily population in the past 6 months.	118	638	.184
	3C-3	Number of offender-on-offender assaults, as defined in the SIS form, in the past 6 months divided by the average daily population in the past 6 months.	7	638	.010
	3C-4	Number of offender on staff assaults, as defined in the SIS form, in the past 6 months divided by the average daily population in the past 6 months.	0	638	0
3D: Inmate Rights - The facility protects the constitutional rights of offenders and seeks a balance between the expression of protected liberties and the preservation of institutional order.	3D-1	Number of grievances found in an inmate's favor divided by the number of grievances filed in the 6-month period.	17	587	.028

4A: Special Management - Inmates who pose a threat are separated from general population and placed in a cell in a special management unit; (defined as segregation and including administrative segregation, protective custody or disciplinary detention); for periods of time less than 22 hours per day.	4A-1	Average number of offenders in Special Management Housing per month over the past 6 months divided by the average daily population in the past 6 months.	0	638	0
4B: Restrictive Housing - Inmates who pose a direct and clear threat to the safety of persons or a clear threat to 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-1	Average number of offenders in Restricted Housing per month over the past 6 months divided by the average daily population in the past 6 months.	21	638	.329
	4B-2	Average number of offenders in Extended Restrictive Housing per month over the past 6 months divided by the average daily population in the past 6 months.	14	638	.021
	4B-3	Number of offenders released from Restrictive Housing by the appropriate authority within 24-hours in the past 6 months divided by the total placed in Restrictive Housing in the past 6 months.	11	364	.030
	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 6 months divided by the total number of offenders released in the past 6 months.	0	171	0
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
5B: Classification - Inmates are classified to the most appropriate level of custody and programming both on admission and upon review of their status.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
5C: Food Service - Meals are nutritionally balanced, well-planned, and prepared and served in a manner that meets established governmental health and safety codes.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
5D: Sanitation and Hygiene - The institution's sanitation and hygiene program protects the health and safety of staff and offenders.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
5E: Social Services - Professional services including individual and family counseling, family planning and parent education; and programs for inmates with drug and alcohol addiction problems,	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 6 months.	62	638	.097
	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 6 months.	65	638	.101

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 6 months.	NA	NA	NA
	5E-4	Where a sex offender treatment/management program exists, the number of completers divided by the average daily population in the past 6 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 6 months divided by the number of inmates released in the past 6 months.	42	171	.245
6A: Access to Services					
Offenders have unimpeded access to a continuum of health care services so that their health care needs, including prevention and health education, are met in a timely and efficient manner.	6A-1	Number of offenders diagnosed with a MRSA infection within the past six (6) months divided by the average daily population	0	638	0
	6A-2	Number of offenders diagnosed with active tuberculosis in the past six (6) months divided by the average daily population.	0	638	0
	6A-3	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past six (6) months divided by the Number of offenders administered tests for TB infection in the past six (6) months as part of periodic or clinically based testing, but not intake screening.	0	638	0
	6A-4	Number of offenders who completed treatment for latent tuberculosis infection in the past six (6) months divided by number of offenders treated for latent tuberculosis infection in the past six (6) months.	0	638	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.	77	610	.13
	6A-6	Number of offenders diagnosed with HIV infection at a given point in time divided by Total offender population at that time.	4	610	.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.	4	4	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.	3	3	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.	47	622	.08

	6A-10	Number of offender admissions to off-site hospitals in the past six (6) months divided by average daily population	19	638	.03
	6A-11	Number of offenders transported off-site for treatment of emergency health conditions in the past six (6) months divided by the average daily population in the past 6 months.	59	638	.09
	6A-12	Number of offender specialty consults completed during the past six (6) months divided by Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past six (6) months.	439	513	.86
	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.	10	40	.25
	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.	4	15	.26
	6A-15	The number of completed dental treatment plans within the past six (6) months divided by the average daily population during the reporting period.	288	638	.45
6B. Staff Training The provision of health services should be done in a professionally acceptable manner including the requirement that all staff be adequately trained and qualified and can demonstrate competency in their assigned duties.	6B-1	Number of health care <i>staff</i> with lapsed licensure or certification during a six (6) month period divided by Number of licensed or certified staff during a six (6) month period.	0	28	0
	6B-2	Number of new health care staff during a six (6) month period that completed orientation training prior to undertaking their job divided by Number of new health care staff during the six (6) month period.	7	7	1
	6B-3	Number of occupational exposures to blood or other potentially infectious materials in the past six (6) months divided by the number of employees.	0	28	0
	6B-4	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past six (6) months divided by the number of direct care staff tested for TB infection in the past six (6) months during periodic or clinically indicated evaluations.	0	28	0
6C. Offender Treatment Offenders are treated humanely, fairly, and in accordance with established policy and all applicable laws.	6C-1	Number of offender grievance related to health care services found in favor of the offender in the past six (6) months divided by number of evaluated offender grievance related to health care services in the past six (6) months.	0	85	0

	6C-2	Number of offender grievances related to safety or sanitation sustained during a six (6) month period divided by the number of evaluated offender grievances related to safety or sanitation during a six (6) month period.	0	6	0
	6C-3	Number of adjudicated offender lawsuits related to the delivery of health care found in favor of the offender in the past six (6) months divided by Number of offender adjudicated lawsuits related to healthcare delivery in the past six (6) months	0	0	0
6D. - 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 six (6) month period divided by the number of problems identified by quality assurance program during a six (6) month period.	2	2	1
	6D-2	Number of high-risk events or adverse outcomes identified by the quality assurance program during a six (6) month period.	0		
	6D-3	Number of offender suicide attempts in the past six (6) months divided by average daily population	0	638	0
	6D-4	Number of offender suicides in the past six (6) divided by average daily population.	0	638	0
	6D-5	Number of unexpected natural deaths in the past six (6) months divided by Total number of deaths in the same reporting period.	2	2	1
	6D-6	Number of serious medication errors in the past six (6) months	0		
6E. - 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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>			
7A: Work and Correctional Industries - Work and correctional industries programs incorporate work conditions that reflect jobs in equivalent work categories outside of the institution.	7A-1	The number of academic/vocational educational program slots available in the past 6 months divided by the average daily population in the past 6 months.	120	638	.188
	7A-2	The average number of offenders with full time work/program assignments in the past 6 months divided by the average number of offenders eligible for work assignment in the past 6 months.	552	603	.915
7B: Academic and Vocational Education - The facilities academic and vocational education programs improve the educational levels of assigned offenders and participate in program accreditation, promote staff professional certification, incorporate community resources and participate in internal and external peer review.	7B-1	The number of academic/vocational slots available divided by the average daily population in the past 6 months.	120	638	.188
	7B-2	The number of offenders who passed the General Equivalency Diploma (HI Set) exams while confined in the past 6 months divided by the average daily population in the last 6 months.	16	638	.025
	7B-3	The number of academic/vocational competency certificates issued in the past 6 months divided by the number of program slots available in the past 6 months.	0	120	0

<p>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</p>		<p><i>Compliance verified through expected practice files. No outcome measure required.</i></p>			
<p>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.</p>		<p><i>Compliance verified through expected practice files. No outcome measure required.</i></p>			
<p>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.</p>		<p><i>Compliance verified through expected practice files. No outcome measure required.</i></p>			
<p>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.</p>	<p>7F-1</p>	<p>The number of regular participants as defined by the agency, in structured religious programming in the past 6 months divided by the average daily population in the past 6 months.</p>	<p>3739</p>	<p>638</p>	<p>5.86</p>