

COMMISSION ON ACCREDITATION FOR CORRECTIONS
STANDARDS COMPLIANCE REACCREDITATION AUDIT

Arkansas Department of Correction
Wrightsville/Hawkins Complex
Wrightsville, Arkansas

September 19-21, 2022

VISITING COMMITTEE MEMBERS

Doug Sproat, Chairperson
ACA Auditor

Bruce Denny
ACA Auditor

William Gallaher
ACA Auditor

A. Introduction

The audit of the Wrightsville/Hawkins Complex (W/HC) of the Arkansas Department of Correction (ADC) was conducted on September 19-21, 2022, by the following team: Doug Sprout, Chairperson; Bruce Denny, Member; and William Gallaher, Member.

B. Facility Demographics

Wrightsville Unit

Rated Capacity:	850
Actual Population:	854
Average Daily Population for the last 12 months:	807
Average Length of Stay:	1 year 7 months 29 days
Security/Custody Level:	Maximum, Medium, Minimum
Age Range of Offenders:	19-79 years of age
Gender:	Male
Full-Time Staff:	219, 6 Administrative, Support 10, Security 203

Hawkins Unit

Rated Capacity	456
Actual Population	455
Average Daily Population for the last 12 months:	438
Average Length of stay:	1 year 5 months 11 days
Security/ Custody Level:	Maximum, Medium, Minimum
Age Range of Offenders:	20-73 years of age
Gender:	Female/Male
Full-Time Staff:	85, 3 Administrative, 7 Support, 1 Program, 74 Security

C. Facility Description

The Wrightsville/Hawkins Complex is located in Wrightsville, Arkansas which is approximately ten miles south of Little Rock. The complex consists of the Wrightsville Unit which houses 850 male inmates, and the Hawkins Unit which houses 256 female inmates and 200 male inmates. The complex consists of 4,000 acres which includes both complexes, hay production and grazing for horses and cattle. State housing is provided for upper-level management staff. There is a mobile home park, swimming pool, and a lake available for staff and their families to use.

The Wrightsville Unit has 17 inmate living units. Except for the Restrictive Housing Unit all the housing units are open bay style with capacities ranging from 40 to 60 inmates. Barracks Nine and Ten are double occupancy cells; the rest are single occupancy cells. The Restrictive Housing Unit is a combination of four single and eight double occupancy cells for a total capacity of 20 inmates. The other buildings on the compound house the administrative offices, the gymnasium, food service, medical, maintenance, and prison industries.

The Hawkins Unit is located approximately 300 yards from the Wrightsville facility and houses both female and male inmates. The unit has a ten-foot-high concrete wall running the length of the building separating the female inmate living and programming area from the male inmate living and programming area, with a cocked gate allowing foot traffic between the two sides. This unit was opened in 2006.

The female side houses 256 inmates in four open bay style units, there is also a twelve bed Restrictive Housing Unit. On the male side there are 200 inmates housed in three open bay units. These inmates participate in the faith-based, Pathways to Freedom program. The kitchen/dining area for Hawkins Unit is located on the male side and is also used to feed and employ the female inmates. All the male inmates are removed from this area prior to the female population enter the area.

D. Pre-Audit Meeting

The team met on September 18, 2022, in Little Rock, Arkansas to discuss the information provided by the Association staff and the officials from the Arkansas Department of Correction and the Wrightsville/Hawkins Complex.

The chairperson divided standards into the following groups:

Standards 5-ACI-1A-01 through 5-ACI-2G-03 to Doug Sproat, Chairperson
Standards 5-ACI-5E-01 through 5-ACI-5F-08 to Doug Sproat, Chairperson
Standards 5-ACI-3A-01 through 5-ACI-5D-15 to William Gallaher, Member
Standards 5-ACI-6A-01 through 5-ACI-7F-08 to Bruce Denny, Member

E. The Audit Process

1. Transportation

The team was escorted to the facility each day of the audit by Shelly Lawrence, State Accreditation Manager ADC.

2. Entrance Interview

The audit team proceeded to the administrative conference room, escorted by Superintendent Earl where a briefing was held with the Superintendent and his administrative staff.

The Superintendent was asked whether staff and inmates were aware of the audit and whether signs regarding the audit were posted. He responded that everyone had been made aware of the audit, and during the course of the audit, the team observed many prominently displayed signs throughout the facility.

Superintendent Earl was asked whether any staff or residents had requested, either orally or in writing, to speak to the audit team. He advised the team that no one had requested to speak to the auditors

The Superintendent 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. He informed us that nothing of that nature had occurred or was occurring.

The Superintendent was also asked if there were any consent decrees, class action lawsuits, adverse judgments against the facility or monitoring reports. He stated that there were none in that regard.

The audit team was escorted to the visitation area where the formal entry meeting was held. The team expressed the appreciation of the Association for the opportunity to be involved with the Wrightsville/Hawkins Complex in their reaccreditation process.

The following persons were in attendance:

DeAngelo Earl	Superintendent
Solomon Graves	ADC Secretary
Dexter Payne	ADC Director
M. D. Reed	ADC Chief Deputy Director
William Straughn	ADC Deputy Director
Richard Cooper	ADC Assistant Director
Linda Dykes	Deputy Warden, Hawkins Unit
Linda Louis	Deputy Warden, Wrightsville Unit
Emily Wood	ACA Manager, Wrightsville/Hawkins Complex
Shelly Lawrence	ADC ACA Manager
Lt. Byron Brown	ADC Fire Safety Officer
Sgt. Leman Bowers	Fire Safety Officer, Wrightsville Unit
Sgt. Lakendra Smith	Key Control Officer, Wrightsville Unit
Sgt. Lanata Ridgle	Property Control Officer, Wrightsville Unit
Sgt. P. Brown	Property Control Officer, Hawkins Unit
Major Jason Davis	Building Major, Wrightsville Unit
Field Major Maxie Foote	Chief of Security, Wrightsville Unit
Capt. Donald Turtine	Building Captain, Hawkins Unit
Capt. Tonda Spencer	Building Captain, Hawkins Unit
Capt. Ivory McDaniel	Building Captain, Wrightsville Unit
Cpl. Jordan Boyd	Sanitation Officer, Wrightsville Unit
Mary Carter	Regional Manager, Wellpath
Melissa Moore	R.N, Wellpath

Jason Kelly	Regional Manager, Wellpath
Davy Farabough	Farm Administrator, Wrightsville/Hawkins Complex
Stacy Sanders	Kitchen Captain, Hawkins Unit
Cpl. Cashay Chew	Fire Safety Officer, Hawkins Unit
Dona Gordon	Wellpath Central Office
Heather Johnson	Administrative Assistant, Wrightsville Unit
Lynette James	Records Supervisor, Wrightsville Unit
Jennifer Miller	Administrative Specialist, Wrightsville Unit
Stanley Appleby	Administrative Specialist, Wrightsville Unit
Evette Britton	Administrative Specialist, Superintendent's Office
Kejuania Grayson	Program Specialist, Wrightsville Unit
Lynn McCallister	Training Officer, Wrightsville Unit
Unknown Treasure	Senior Chaplain, Hawkins Unit
Makeyvia Goodwin	Classification Assistant, Wrightsville Unit

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. It was emphasized that the goals of accreditation promoted the efficiency and effectiveness of correctional systems throughout the United States. The audit schedule was also discussed at this time.

3. Facility Tour

The team toured both units from 8:30 A.M. to 12:30 P.M. The following persons accompanied the team on the tour:

DeAngelo Earl	Superintendent
M. D. Reed	ADC Chief Deputy Director
William Straughn	ADC Deputy Director
Linda Dykes	Deputy Warden, Hawkins Unit
Linda Louis	Deputy Warden, Wrightsville Unit
Emily Wood	ACA Manager, Wrightsville/Hawkins Complex
Shelly Lawrence	ADC ACA Manager
Lt. Byron Brown	ADC Fire Safety Officer
Sgt. Leman Bowers	Fire Safety Officer, Wrightsville Unit
Sgt. Lakendra Smith	Key Control Officer, Wrightsville Unit
Sgt. Lanata Ridgle	Property Control Officer, Wrightsville Unit
Sgt. P. Brown	Property Control Officer, Hawkins Unit
Major Jason Davis	Building Major, Wrightsville Unit
Capt. Tonda Spencer	Building Captain, Hawkins Unit
Capt. Ivory McDaniel	Building Captain, Wrightsville Unit
Cpl. Jordan Boyd	Sanitation Officer, Wrightsville Unit
Mary Carter	Regional Manager, Wellpath
Melissa Moore	R.N., Wellpath
Jason Kelly	Regional Manager, Wellpath

4. Conditions of Confinement/Quality of Life

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

Security:

The Wrightsville/Hawkins Complex houses inmates with custody designations ranging from Levels 1-2 and minimal 3's. The complex is situated on approximately 100 acres, with an additional 6,400 acres devoted to farming operations, of state-owned land located in Pulaski County Arkansas.

Buildings outside the perimeter include the ICC garage and buildings for storage of farm and miscellaneous equipment. Also outside the perimeter are a state vehicle shop, gas pumps, staff housing and a pond-side pavilion for staff usage. The complex grounds are adjacent to private properties and are clearly marked with fencing and signage.

Security is enhanced with a perimeter chain link fence, ranging from two to ten feet, topped with two strands of razor wire. Three strands of razor wire are affixed to the bottom, and razor wire is stretched in areas where fencing meets buildings. Additional security measures include video surveillance and a Senstar intrusion detection system.

Gun towers are located at the front, rear and both sides of the grounds of the complex. Each tower is manned by an armed officer. These security measures seem adequate for the size of the complex and custody level of the inmates.

The main entrance is located in the front center of the complex and is staffed with one officer, each shift. Staff and pedestrian entrance require presentation of a photo ID, use of metal detectors, and package scanning. All pedestrians must present a photo ID to the officer in the control station before being admitted into the perimeter; and an ID must also be presented when leaving the facility. This process applies to staff and visitors alike, regardless of position or rank.

Vehicles access the complex through two sally-ports which are used solely for commercial vehicles or inmate transports. The primary sally-port is located on the north side of the complex, and the secondary sally-port is situated at the front/left side of the complex. Each sally-port is staffed with a correctional sergeant or above on each shift. Access is restricted to large deliveries to prison industries or food service. All individuals must present a photo ID, after which staff verify related paperwork prior entrance to the sally-port.

After the first gate is secured, staff inspect the cabin, engine bay, and undercarriage. Persons within the vehicle are searched.

The sally-port is equipped with a heartbeat detection system that will check for any additional persons not reported. Once unloaded, products are fully inspected before being distributed.

Transports are escorted to and from the holding area in the sally-port. Security procedures for egress are the above measures completed in reverse. The area outside of the perimeter fence is open and free of view obstructions. A perimeter road is patrolled each shift by an armed officer in a motor vehicle. There are 30 LED mast lights, spaced apart at variable distances, which illuminate the entire perimeter.

All staff wear the same department-issued uniforms and must wear an Arkansas Department of Correction ID badge. All inmates wear white complex-issued uniforms.

Central control is located adjacent to a sally-port situated in the main building and is equipped with one control panel and six screens. An officer is posted each shift, and primary responsibilities include control of movement and gates. The only areas not controlled by this officer are the gates between zones. Radios are issued from this post.

The working keyboard is maintained in master control. All key rings are closed with tamper proof seals and displayed on numbered hooks. A designated logbook provides up to the minute accountability for all keys issued from the keyboard. The key control officer maintains key inventories and replacements. Restricted keys are issued by the shift supervisor and/or duty warden. Keys are identified by color with black tab keys issued to an individual officer and yellow for day-to-day use by approved staff. Emergency keys are red and notched and tested monthly. Permanently assigned keys are inspected monthly. Back-up keys are maintained in a key vault, located in a caged area in the armory, and are tested quarterly. Staff assigned inside the secure perimeter are issued OC if they are certified.

All zones in the complex have assigned tools which are secured in a locked tool closet. Inmates are issued designated tools which have been identified for use in specific jobs. Issuance and return inventories are completed each shift. Inventories are also completed monthly and quarterly and are reviewed by the tool control officer, emergency preparedness officer, chief of security and deputy warden.

Cleaning products are stored in bulk within a secure area of the complex and are initially issued in small containers by way of an automatic dilution system. A pre-established local inventory is maintained in each area and replenished from the bulk inventory on a daily basis. Since the local inventories remain constant, any discrepancy is readily apparent. Bulk products are subject to a perpetual written inventory that is adjusted as products are received or dispensed. Diluted chemicals are secured and accessed by staff in designated chemical closets and inventoried by ounces.

Chemicals are then issued in bottles identified by product name, usage purpose, and color.

The bottles are returned to the chemical closets on a daily basis. Only safety-trained and approved inmates handle chemicals, and then under staff supervision. All chemical storage areas include SDS sheets.

The armory for the complex is located outside the secure perimeter adjacent to the front parking lot. A security fence and a secondary vault door fortify the armory. Keys, firearms, restraint equipment, and strategic response equipment are maintained in the armory. Access is restricted to the armorer, chief of security, shift supervisor, field supervisor, and key control officer and documented in a designated log book. Issuance logs and inventories are maintained daily; and monthly reports are reviewed by the armorer, emergency preparedness officer, chief security officer and designated Department of Correction agency staff.

The complex conducts multiple formal inmate counts throughout the day according to an established schedule. Counts are ordered and cleared by the shift supervisor. Staff is encouraged to complete ongoing counts, and additional unit counts can be ordered at any time. Inmate movement in the complex ceases while an official count is in progress. Staff count breathing bodies and totals are reported to count room staff. Inmates in programs and other who are out of their assigned areas are documented on a written form and turned in. Staff reported it takes between 15 and 30 minutes to clear the count and are documented in count logs and recorded in the Electronic Offender Monitoring System.

Restrictive Housing

The complex has a 20-bed restrictive housing pod at the Wrightsville Unit and a 12-bed restrictive housing pod at the Hawkins Unit. The inmates in these pods pose a direct threat to the safety of persons or a clear threat to the safe operation of the complex. The living conditions in these pods approximate those of the general population. Any exceptions to these living conditions are documented.

The inmates in these pods receive daily visits from medical, mental health, and senior correctional staff. These inmates also receive the same program services as the general population, provided they meet the behavioral requirements. W/HC does not have an Extended Restrictive Housing Pod. The complex does have a review committee that provides the inmate population with review services that helps the inmates reintegrate back in the general population. This review committee's goal is work with inmates in restrictive housing unit to get them back into the general population as soon as possible.

The above programs are under direct supervision of specially trained staff.

The inmates are responsible for all the cleaning within the pods, and it was obvious that the inmates took pride in the cleaning of their pods since the cleanliness of the pods was impressive.

Programming is based on an individual inmate's behavior, and the audit team observed the effectiveness of this system during the tour and on revisits; daily interaction between the staff and inmates demonstrated a civility and respect often not found in a prison setting.

Environmental Conditions:

The grounds and flower beds inside the secure perimeter fence at both units were extremely well manicured, as were the grounds and flower beds outside the secure perimeter fence. The inmate population provides all the labor for the upkeep of the grounds and is under staff supervision at all times.

The complex's maintenance department is responsible for monitoring environmental conditions at these units. The maintenance department is also responsible for all preventive maintenance on all equipment and machinery on the compounds. When preventive maintenance is beyond that which the complex maintenance staff can perform the complex uses ADC Construction and Maintenance Department.

Temperature ranges in the housing areas were comfortable and within the required temperature requirements. The housing units are not all air-conditioned but have adequate working ventilation systems.

W/HC has ten emergency generators with a total combined KW of 100. The batteries and fluid levels of all the emergency generators are checked weekly, and monthly preventative maintenance is done by in-house staff. All emergency generators are load tested monthly by in-house staff and are tested annually. The emergency generators are capable of carrying 75 to 80 per cent of the electrical load to avoid any interruption in the facility's daily operation. The complex preventive maintenance on the boiler system is done maintenance.

The maintenance department is staffed by a maintenance supervisor and three maintenance staff. Three of the staff are certified electricians and one is a certified plumber.

The maintenance department's preventive maintenance program for all machinery and equipment was in order and documented. Tools, chemicals, caustics, and fuels were inventoried, logged, and controlled for accountability purposes. The complex maintenance department is very organized, efficient, and well run.

Sanitation:

The audit team was very impressed with the sanitation level throughout the entire complex. The complex has an outstanding detailed housekeeping plan in place and uses it as a standard for maintaining its sanitation level.

It was obvious to the auditors that the inmates took pride in keeping the facilities clean. The required sanitation inspections were documented and met standard requirements.

The inmates are responsible for all of the cleaning of the units, and it was obvious that the cleaning was continuous on all shifts. The cleanliness of the units is the total result of continuous cleaning 24/7 by the inmate population. All the chemicals and cleaning supplies used for cleaning of the complex were controlled, well documented and under lock and key.

The complex contracts with Waste Management of Pine Bluff for solid waste removal. The complex also contracts with Pine Brass Termite and Pest Control, for vermin and insect control. W/HC is on the city water system and has its own wastewater system.

It was obvious to the auditors that the administration at W/HC sets a very high priority on sanitation. This was evident throughout the audit process as the auditors toured the complex and made revisits to different areas and departments.

Fire Safety:

Staff at the W/HC were well aware of the emergency fire evacuation plans and procedures. There are 238 fire extinguishers located in specific locations throughout the units and all fire extinguishers were serviced and documented.

Fire safety inspections and drills are conducted by standard requirements and documented. Fire safety egress routes were clearly posted, and all exit signs were illuminated.

There are six fire hydrants located inside the secure perimeter fence and two located outside the secure perimeter fence. They are checked, flushed and pressure tested by maintenance. The Wrightsville Volunteer Fire Department, located ten minutes away from the compound, is the first responder for fire related issues at the complex.

The Arkansas State Fire Marshal's office performs an annual fire safety inspection at the complex and an up-dated copy was on hand. The fire safety system of the complex is inspected and certified annually by contract through Johnson Controls of Little Rock.

The auditors were extremely impressed with the W/HC emergency plan and procedures with all the checks and balances in place to provide fire safety protection for staff and inmates alike. This has resulted in a safe work environment for staff and a safe environment for inmates, which adds positively to their quality of life.

Food Service:

The food service department is staffed by a food production manager and four food service staff at the complex. There are also approximately 78 inmates classified to work in food service.

Food service provides three meals per day and works from a four-week menu cycle approved by a registered dietician. Changes to the menu only occur when fresh produce is available. The calorie count for each day is approximately 3,000 calories. Food service served approximately 88,350 meals in the last month at a cost of \$4.06 per day for three meals. Inmates provide the majority of the labor and the food preparation in food service.

The audit team was very impressed with the efficiency and cleanliness of the food service departments at the complex. The orderliness of the inmates while working under the supervision of the food service staff was also worth noting. The inmates obviously took pride in their work.

Temperatures for the freezers, chillers, dishwashers, and dry storages met standard requirements. The preventive maintenance on the vent hood fire suppression systems was in order. The cleaning and the inspection of the vent hood fire suppression systems is by contract through with The Vent King, Inc. Preventive maintenance on the dishwashers, and ice machines is completed by maintenance.

The sharps inventory was in order and under lock and key. The chemicals used for cleaning and for the dishwashers were controlled, inventoried and in order.

Religious diets are offered to meet religious dietary requirements. Special medical diets are also prepared when requested. Numerous inmates were interviewed, and none complained about the quality or quantity of food provided at the complex. The audit team ate the noon meal on the first day of the audit and found it to be very tasty and filling.

Medical Care:

Healthcare services are provided through a contract between the Arkansas Department of Corrections and Wellpath. The infirmary is open 24 hours a day. Both the Wrightsville/Hawkins Units have on-site licensed infirmaries and housing units equipped to accommodate handicap offenders. The facilities are able to care for offenders with various disease processes to include pregnant offenders at the Hawkins Unit.

Pregnant female offenders are managed by the Antenatal and Neonatal Guidelines, Education and Learning System (ANGELS) which was established in 2003 when two major state agencies--the UAMS College of Medicine and the Arkansas Department of Human Services--combined forces to address rural health care disparities and improve obstetrical and neonatal care across Arkansas.

Currently, the High-Risk Pregnancy Program within the UAMS Institute for Digital Health & Innovation program thrives in a collaborative, provider-driven network that focuses on improving obstetrical and neonatal outcomes throughout Arkansas while reducing healthcare expenditures.

A private area is provided for mothers who are expressing breast milk which is picked up at the facility by the caretaker of the infant.

Male offenders in the Pathway to Freedom program receive medical treatment at the Wrightsville Unit.

Physicians/PA

Name	Credentials	Days worked	Hours worked
Williams Scott	MD	5	48
Maria Lane	ANP	5	40

Heath Care Staff- Wrightsville/Hawkins

Name	Credentials/Title	Hours worked
Sievers, Cymber	LPN	40
Brooks, Tena	LPN	40
McCauley, Tabitha	LPN	40
Cockrell, Lisa	LPN	40
Childress, Lisa	LPN	36
McEntire, Patsy	LPN	40
Howlett, Melissa	LPN	40
Chestnut, Tasia	LPN	20
Warren, Marsha	RN	40
Abhulimen, Lucky	RN	40
Verser, Latonya	Medical Records Clerk	40
Bell, Sernia	Medical Records Clerk	40
Michaels, Shacorya	Medical Records Clerk	40
Boykins, Shonda	Medical Records Clerk	40
Moore, Cicely	Certified Nursing Assistant	40
Miller, Martha	Certified Nursing Assistant	40
Gulley, Latoshai	Certified Nursing Assistant	40
Wilson, Unikia	Certified Nursing Assistant	40

Kirk, Eyvonne	RN, Director of Nursing	40
Blanks, Vesta	Health Service Administrator	40

The Dental Department uses an autoclave. A spore test is conducted in the autoclave load once a week. The testing is done by CrossTex BMS.

Dental Emergencies

Dr. Stringfellow, Regional Dental Director on call 24/7 for dental concerns

Dental Staff

Name	Credentials	Work Hours
Breedlove, Jessica	DDS	40
Ganaway, Astanica	Dental Assistant	36
Dietrich, Bailey	Dental Hygienist	8

Mental Health Emergencies

On call mental health assistance is available after hours and on weekends, either through a Wellpath ANP or psychiatrist or through an ADC social worker or psychologist.

Mental Health Staff

Name	Credentials/Title	Work Hours
Miles, Theresa	Social Worker	40
Rausch, Theresa	Social Worker	40
Faupel, Ron	Psychologist	40
Gigglemen, William	ANP	8
Lee, Eugene	Psychiatrist	8

Medical Emergencies

Dr. Scott, the Medical Director, is on call 24/7 for medical concerns.

For medical emergencies, the following off-site medical facilities are used: University of Arkansas Medical Services (UAMS), St. Vincent Hospital, and Arkansas Heart Hospital. Emergency Medical Service (EMS) transports emergencies to the designated location. There are three AED machines which are located in each medical area.

Infirmary

The infirmary has a total of four beds available for offender care at Wrightsville. There are an additional four beds at the Hawkins Unit. There is no respiratory isolation room in any of the infirmaries. There is a full-time infection control nurse.

Sick Call

Sick call is available to offenders five days per week. Requests for health care services triages are available seven days a week. Offenders in confinement requesting sick call must submit a sick call request.

Chronic Clinics

The W/HC offers the following clinics:

- endocrine clinic for offenders with diabetes, thyroid disease, or other chronic endocrine abnormalities.
- cardiovascular clinic for offenders with hypertension, hyperlipidemia, or other cardiac disease.
- pulmonary clinic for offenders with asthma, chronic obstructive pulmonary disease (COPD), tuberculosis, etc.
- neurology clinic for offenders with neurological diseases or on medications to control seizures.
- HIV clinic for offenders who are HIV positive.
- hepatitis C clinic for all offenders with hepatitis C and/or hepatitis A or B will follow guidelines based on the American Association for the Study of Liver Disease.
- Chronic liver disease clinic for offenders with a noninfectious chronic liver disorder, e.g., alcoholic cirrhosis. Hepatitis A and chronic Hepatitis B carriers will be treated on a case-by-case basis and reported to local health department for assistance. Isolation will follow current CDC guidelines. Education will be based on current CDC guidelines. The clinical provider will determine when hepatitis A and B immunization is indicated; and
- general medicine/special needs for offenders with other conditions not specified.

Offenders are seen in Chronic Clinics every three months or as specified by provider.

Electronic Medical Record

EOMIS (Electronic Offender Management Information System) contains all medical, dental, and mental health information.

Telemedicine

Telemedicine is used in the providers' exam room within medical. Telemedicine presentations are conducted as need arises.

Off-site telemedicine conferences are conducted with University of Arkansas Medical Services, (UAMS), St. Vincent Hospital, Arkansas Heart hospital, Physicians' offices, and Central Office, etc.

Laboratory

CNA and RN/LPN are responsible for laboratory samples. These samples are sent to Labcorp five days per week, Monday-Friday. The results are sent electronically to the EMR and sent to the providers' desktop to be reviewed. Results are generally available within one to two days.

Radiology

Radiology is done on site one day per week for routine radiographs. However, if urgent, the radiology tech will be called to come to the facility and perform the radiology exam. If this cannot be set up, the patient would be sent to the local hospital for the radiology exam to be performed. If radiology examinations are completed on-site/off-site, the results are usually received within four hours.

Annual Physicals

The frequency of periodic health examinations will be determined by the offender's age:

Age 16 - 39 - every five years

Age 40 – 64 - every three years

Age 65 and older - annual

Pharmacy

Pharmacy services are provided by Diamond Pharmacy. Pharmaceuticals are received six days per week via FedEx or UPS. Medications are received and inventory reconciled to manifest sent with medication. Diamond Pharmacy provides automatic renewals of medication. Unused medications are returned to the pharmacy via FedEx.

Pill line distribution times for each day of the week are: 3:00 a.m., 9:00 a.m., and 3:00 p.m. A licensed nurse or CNA brings medications to the offender in restrictive housing/special management for offenders in confinement. Distribution of medication is documented through the EMAR system.

All offenders are able to purchase over the counter (OTC) medications from the commissary or prison store. The facility does use Keep on Person (KOP) medications for self-administered medication.

Self-Injurious Offenders

The suicide observation cells are located in the Infirmary and in restrictive housing. These cells are visited by health care staff on each shift. All offenders are dressed in the appropriate attire.

Optometry Services

Optometry services are provided by a private contractor once per month. The time frame for the offender to receive the glasses is about 4 to 6 weeks.

Medical waste is stored in a designated locked containment area within the medical department. The waste is picked up two to three times each week. Stericycle is designated for the disposal.

Recreation:

Recreation at W/HC is coordinated by a recreation supervisor with assistance from a recreation sergeant. The recreation department for the complex provides a wide range of recreational, athletic, and leisure time programs. The Wrightsville Unit has a large gymnasium which is used on a regularly scheduled basis when weather prohibits outdoor recreation. The recreation schedule includes all security levels of the inmate population.

The recreation department has a very well-organized intramural program. The outdoor recreation area includes a walking track. The gymnasium is used for basketball, volleyball, and handball. Special holiday competitive sporting events are planned every year. Based on the inmate interviews by the auditors, the inmate population really looks forward these special holiday events.

The Hawkins Unit does not have a gymnasium. The unit uses a multipurpose area for recreation activities. The complex leisure time activities include chess, checkers, dominoes and reading. The inmate population at the complex gets a minimum of one hour per day in a seven-day week of large muscle exercise each day and one hour of leisure time recreation each seven-day week. Recreation is available to the inmate population 24/7.

The inmate population gets all the leisure and competitive recreation and exercise that they can handle, a fact which leaves little room for idle time and consequently reduces the pressures leading to assaultive behavior.

Religious Programming:

The W/HC has a very strong religious program led by a full-time chaplain assisted by one female and one male porter. The chaplain plays a major role in the inmates' adjustment to life within the prison system.

The chaplain also provides religious orientation to the new inmates at intake and coordinates the volunteer program at the complex. The audit team was very impressed with the chaplain's genuine concern for the welfare of the entire inmate population.

The chaplain also has the responsibility of arranging and scheduling worship services for religious groups that provide volunteer services at the complex. The complex has approximately 40 active volunteers, with 25 serving at the Wrightsville Unit and 15 serving at the Hawkins Unit. These volunteers provide approximately 12 hour per week of volunteer services and activities for the inmate population. Volunteer services occur seven days a week.

The Wrightsville Unit offers the Principles and Applications of Life program for male inmates and the Hawkins Unit offers the Advanced Principal Application Life Skills program for female inmates. These programs seek to address through educational and group sessions the spiritual element of a person's life. The curriculum is bible based and is open to all Christian faiths.

These religious volunteers must pass annual background checks and must complete their initial training before they are allowed to work with the inmate population. This orientation training is provided by the complex training staff.

Offender Work Programs:

The inmates are responsible for all the cleaning of their residential living units. This cleaning is done daily under staff supervision on every shift. The inmate population is responsible for the cleaning of all other areas of the complex.

This certainly speaks volumes as to why the complex is so clean and the grounds and flower beds are so well maintained. The administration should be commended for instilling in the inmate population the need to take ownership in keeping their units and grounds neat and clean.

Both units offer various types of work opportunities for the inmate population to learn work ethics and relevant job skills.

The inmate population can acquire working skills from maintenance of grounds, to working in the fields, and the necessary skills for harvesting vegetables in the garden. There are also job opportunities such as horseshoeing, horsemanship, beef production, and bee keeping.

The Furniture Factory and Graphic Arts Industries programs employ a large percentage of the inmate population. Other inmate job assignments include unit porters, floor crews, food service, laundry workers, clerks, and recreation workers. There is no shortage of work assignments if an inmate wants to work.

Academic and Vocational Education:

The W/HC is a part of the Arkansas Correctional School. The education department is staffed by a principle and six academic teachers. Five of the academic staff have master's degrees and two have bachelor's degrees.

The academic school is in operation three hours in the morning and three and a half hours in the afternoon. The complex offers Adult Basic Education, Intermediate Pre-GED, and GED. The Adult Basic Education test is administered four times in each calendar year.

The academic instruction centers on GED preparation. During the past twelve months five inmates attempted the GED test and one was successful. This is not bad since only five per cent of the inmate population is involved in academics at the present time.

The inmate population also has an opportunity to earn college credit or even a college degree. The Second Chance Pell Program through Shorter College provides the inmate population with this educational opportunity. The Furniture Factory and Graphic Arts Industries programs provides the inmate population with vocational type skills they can use after being released.

Social Services:

The W/HC has very good social services programs in place offering a number of treatment programs to assist the inmate population in developing the skills needed to reduce their chances of re-offending. The largest is for the 200 male inmates housed at the Hawkins Unit. The Pathway to Freedom program is funded and staffed through private donations. This program's goal is to promote the transformation of inmate's lives through an 18-month faith-based, pre-release program. What makes this a positive choice for the inmate population is that the program continues for an additional 12 months after discharge by offering mentoring and other services through local churches and trained volunteers.

Female offenders at the Hawkins Unit participate in the Paws in Prison program which rescues homeless dogs and trains them to follow commands and simple rules in order to make the more adoptable. Other social programs for the female inmates include Substance Abuse Education, Anger Management, as well as parenting classes through the University of Arkansas at Little Rock. These classes are conducted at the unit by volunteers from the community.

The Wrightsville Unit has a six to nine-month Substance Abuse Treatment Program and six-to-twelve-month Therapeutic Community program. These addiction therapy programs are staffed by a supervisor, four counselors in-training, and four certified counselors.

Visitation:

The inmates at W/HC are allowed visitation with family and/or friends who are on their approved visitation list. Visitation is Saturday and Sunday for contact visitation from 12:00 p.m. to 4:00 p.m. The visitation area has ample room for inmates' families to visit comfortably. It is spacious with restroom facilities and vending machines for the use of the inmates' families.

Special visits are allowed with prior approval from the superintendent. These special visits occur Monday through Friday from 8:00 a.m. to 4:00 p.m.. Criminal history checks are conducted on all visitors prior to approval. 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

Library Service:

The educational and law libraries are located in the academic school. The libraries are open daily for inmate use in the mornings and in the evenings. The inmates are allowed to check out a least two books a day for leisure reading. The complex libraries participate in an interlibrary loan program with the local library system.

The inmates have access to hard volumes as well as Westlaw in the law library. The law library ensures that the inmate population has unimpeded access to the courts, counsel, and public officials. The facility utilizes trained inmate law clerks to help other inmates with their research in the law library. A book cart is also available for inmates in the Restrictive Housing Pods.

Laundry:

The laundry at W/HC is open seven days per week from 6:00 A.M. to 2:00 P.M. The laundry is staffed by a laundry supervisor and nine inmate workers. Equipment in the laundry consists of three large commercial washers and three large commercial dryers. The laundry also has a pressing and a sewing operation.

There is no shortage of clean clothing, sheets, or towels for the inmate population at the facility. There should be no reason an inmate should not have a clean set of clothing every day. The facility also has an ample inventory of inmate clothing, sheets and towels for emergency purposes.

F. Examination of Records

Following the facility tour, the team proceeded to the administrative conference room to review the accreditation files and evaluate compliance levels of the policies and procedures. The facility’s accreditation files were extremely auditor friendly.

The facility had no notices of non-compliance with local, state, or federal laws or regulations.

1. **Litigation**

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

2. **Significant Incidents/Outcome Measures**

SIGNIFICANT INCIDENT SUMMARY

A review of the Significant Incident Summaries shows a well-run complex, given the level of security of its inmate population. The Wrightsville unit had a total of eight inmate on inmate assaults in the previous twelve months, which factors into .66 incidents per month, which is well within the expected limits of this population. The Hawkins Unit had no incidents of assaults during the previous twelve months.

OUTCOME MEASURES

A review of the Outcome Measures was made and the results showed extremely well-run complex. The Wrightsville Unit and the Hawkins Unit were without incident for this audit period.

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>
Administration	DeAngelo Earl, Superintendent Linda Dykes, Deputy Warden, Hawkins Unit Linda Louis, Deputy Warden, Wrightsville Unit Emily Wood, Complex ACA Manager Shelly Lawrence, ACA Manager, ADC
Academic School	Johnny Turner, Principal

Fire Safety
Food Service
Religious Programing

Lt. Bryon Brown, Fire Safety Coordinator, ADC
Carolyn Day, Hawkins Unit Kitchen Captain
Unknown Treasure, Senior Chaplain

4. Shifts

W/HC deploys its correctional officers on two 12-hour shifts. The shifts are 6:00 a.m. to 6:00 p.m. and 6:00 p.m. to 6:00 a.m.

a. Day Shift 6:00 a.m. – 6:00 p.m.

The team was present at the facility during the day shift from 8:00 a.m. – 7:00 p.m. Shift change was very orderly and extremely organized. The audit team observed shift change and briefing. During the briefing the shift supervisor covered all unusual incidents from the previous shift.

The officers were advised to review post orders and fire safety procedures. The auditors were very impressed with the shift change and briefing. The entire shift was well groomed and very professional.

b. Evening Shift 6:00 p.m. – 6:00 a.m.

The team was present at the facility during the evening shift from 6:30 p.m. to 7:00 p.m. The audit team observed interaction between staff and inmates and there seem to be respect for each other on the part of staff as well as inmates.

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 #4-4154 – 5-ACI-2E-01 Remains non-compliant

Standard #4-4314 – 5-ACI-5C-02 Is now Complaint

Standard #4-4346 - 5-ACI-7C-02 Is now Compliant

G. Interviews

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

1. Offender Interviews

The audit team interviewed or spoke to 54 inmates during the audit process. They were very positive about the staff and all felt staff cared about their welfare. They felt safe and stated staff was always available when they needed them.

The inmates appreciated the available programs that could help them upon their release. The number of inmate work assignments was viewed in a very positive manner by all the inmates the auditors interviewed.

They all understood the grievance process and how to access medical services. They did not fear for their safety and had no complaints about food service or medical services.

2. Staff Interviews

The audit team interviewed or spoke to 50 staff. They were all proud of their complex and understood policy, procedure, and post orders. Most felt that they had the support of the administration while performing their daily responsibilities. They were also happy to have a job during these tough times.

It was very obvious to the auditors that the staff understood their role in the overall operation of the complex, and it was evident that they had bought into the programs of the complex. This was observed during the initial tour of the facility and during revisits to different departments and areas and during staff interviews.

A practical measure of the staff's approval of the complex program approach is by the number of years of service of staff members. The audit team was very impressed with the very large number of staff that had double digit years of employment experience with either the W/HC or other Arkansas Department of Correction facilities. This is certainly a plus for the complex and obviously adds to staff cohesiveness.

H. Exit Discussion

The exit interview was held at 11:00 a.m. with the Superintendent and 35 staff from the Wrightsville Unit and 20 staff from the Hawkins Unit in attendance.

The following persons were also in attendance:

Dexter Payne,	Department of Corrections Director
Solomon Graves	Department of Corrections Secretary
Richard Cooper	Department of Corrections Assistant Director
Lindsey Wallace	Chief of Staff
Dale Reed	Chief Deputy Director
William Straughn	Deputy Director
Aundrea Culclager	Deputy Director
Shelly Lawrence	Agency ACA Manager
Lt. Byron Brown	Agency Fire & Safety Officer
Jada Lawrence	Executive Assistant to the Director
Kenny Davis	Deputy Warden Benton Unit
Latoris Willis	ACA Manager Maximum Security Unit

Kelly Beaty	ACA Manager Varner Unit
Mary Allen	ACA Manager Cummins Unit
Jason Sage	ACA Manager Benton Unit
Terra Doering	Administrative Specialist Benton Unit
Melissa Moore	Medical Service Administrator
Jason Kelly	Wellpath Regional Manager
Dana Gordon	Wellpath Regional Vice President
Jennifer Kelly	Wellpath LPN
Evonne Kirk	Wellpath Director of Nursing
David Farabough	Farm Administrator
Laura Robbins	Constituent Services Officer
Scott McClean	Pathway to Freedom Executive Director

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

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

COMMISSION ON ACCREDITATION FOR CORRECTIONS
AND THE
AMERICAN CORRECTIONAL ASSOCIATION

COMPLIANCE TALLY

Manual Type	Adult Correctional Institutions, 5 th Edition	
Supplement	Not Applicable	
Facility/Program	Wrightsville/Hawkins Complex Arkansas Department of Correction	
Audit Dates	April 13-15, 2015	
Auditor(s)	Doug Sproat, Chairperson Bruce Denny, Member William Gallaher, Member	
	MANDATORY	NON-MANDATORY
Number of Standards in Manual	64	509
Number Not Applicable	5	71
Number Applicable	59	438
Number Non-Compliance	0	2
Number in Compliance	59	435
Percentage (%) of Compliance	100	99.54
<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 Correction
Wrightsville/Hawkins Complex
Wrightsville, Arkansas

September 19-21, 2022

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

Standard 5-ACI-1C-05

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

FINDINGS:

The overall vacancy rate at the Wrightsville/Hawkins Complex among staff positions authorized for working directly with inmates exceeds 10% for any 18-month period. The actual vacancy rate is 22.83%

Traditional Standard/Expected Practice # 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 ten percent for any 18-month period.

Plan of Action

An AR-DOC Recruiter was hired in November 2020 to continually recruit for all units by conducting regular job fairs in all local communities within the State of Arkansas. That recruiter also visits high schools & colleges to speak with graduates about AR-DOC careers. The Arkansas Division of Corrections maintains a website (www.state.ar.us/doc) that lists all available jobs and has an on-line application process to aid all interested parties in seeking employment.

The agency also places ads on social media sites such as Facebook, twitter, Instagram, LinkedIn, handshake, digital newspapers and local radio stations. The agency is choosing one employee weekly to post on social media with the hashtag #TellOurStory, so the public can hear from our employees about being a part of the DOC family.

The Wrightsville Unit Human Resource staff attend community job fairs to pass out information about the Complex. Yard signs advertising employment have also been placed in multiple areas in the local community for public viewing. The Deputy Warden, along with various staff volunteers, attends other local community events, such as fairs and festivals, to pass out information to potential applicants. At all events, contact information is obtained from interested parties and the unit Human Resource staff makes follow-up contact. In addition, at monthly staff meetings the Superintendent challenges all staff at the Wrightsville Complex to recruit prospective employees.

Task

- a. Recruit new staff
- b. Process available applicants
- c. Retain staff

Responsible Agency

- a. Human Resource Administrator
- b. Human Resource staff
- c. Agency Human Resource Recruiter

Assigned Staff

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

Anticipated Completion Date

- a. Continuous, until vacancies are filled

Standard 5-ACI-2E-01

(EFFECTIVE NLT JANUARY 1, 2021) BOTH OUTDOOR AND COVERED/ENCLOSED EXERCISE AREAS FOR GENERAL POPULATION INMATES ARE PROVIDED IN SUFFICIENT NUMBER TO ENSURE THAT EACH INMATE IS OFFERED AT LEAST ONE HOUR OF ACCESS DAILY. USE OF OUTDOOR AREAS IS PREFERRED BUT COVERED/ENCLOSED AREAS MUST BE AVAILABLE FOR USE IN INCLEMENT WEATHER. COVERED/ENCLOSED EXERCISE AREAS CAN BE DESIGNED FOR MULTIPLE USES AS LONG AS THE DESIGN AND FURNISHINGS DO NOT INTERFERE WITH SCHEDULED EXERCISE ACTIVITIES. THE MINIMUM SPACE REQUIREMENTS FOR EXERCISE AREAS ARE AS FOLLOWS: FOLLOWING:

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

FINDINGS:

The Hawkins Unit does not have a covered/enclosed exercise area that meets the required minimum ceiling height of 18’.

Traditional Standard/Expected Practice # 5-ACI-2E-01

Both outdoor and covered/enclosed exercise areas for general population inmates are provided in sufficient number to ensure that each inmate is offered at least one hour of access daily. Use of outdoor areas is preferred but covered/enclosed areas must be available for use in inclement weather. Covered/enclosed areas can be designed for multiple uses as long as the design and furnishings do not interfere with scheduled exercise activities.

The minimum space requirements for exercise areas are as follows:

- Outdoor exercise areas in facilities where 100 or more inmates utilize one recreation area: 15-square feet per inmate for the maximum number of inmates expected to use the space at one time, but not less than 1,500 square feet of unencumbered space.

- Outdoor exercise areas in facilities where less than 100 inmates have unlimited access to an individual recreation area: 15-square feet per inmate for the maximum number of inmates expected to use the space at one time, but not less than 750-square feet of unencumbered space.
- Covered/enclosed exercise areas in facilities where 100 or more inmates utilize one recreation area: 15-square feet per inmate for the maximum number of inmates expected to use the space at one time, with a minimum ceiling height of 18 feet, but not less than 1,000-square feet of unencumbered space.
- Covered/enclosed exercise areas in facilities where less than 100 inmates utilize one recreation area: 15-square feet per inmate for the maximum number of inmates expected to use the space at one time, with a minimum ceiling height of 18 feet, but not less than 500-square feet of unencumbered space.

Waiver Request

Correcting the indoor/covered recreation area ceiling height will require construction of a new structure. After the 2019 audit cycle, a request was submitted to the parent agency requesting funds for the construction of a covered pavilion over the existing outdoor recreation area at the Hawkins Unit. To date, that funding has not been provided and it is beyond the scope of the Wrightsville Complex to correct. Hawkins Unit does continue to use other resources to mitigate the situation. The visitation center at the Hawkins Women's Unit is utilized for recreation during inclement weather. It provides the opportunity for the women to conduct yoga classes, do aerobic exercise, and/or walk. Additionally, during inclement weather Hawkins Men's Unit utilizes several classrooms to provide an indoor recreational space. This provides men with the option to walk, do floor exercises, and/or lift weights. There have been no grievances or complaints filed by any inmates related to the indoor recreation space at Hawkins Unit. Complex administration will continue to ensure that the non-compliance issue does not impact inmate quality of life.

AUDITORS' RESPONSE:

The audit team supports the facility's Request for a Waiver.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Correction
Wrightsville/Hawkins Complex
Wrightsville, Arkansas

September 19-21, 2022

Visiting Committee Findings

Mandatory Standards

Not Applicable

Standard #5-ACI-5B-12

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house delinquent offenders or juveniles.

Standard #5-ACI-6A-21

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:

The Wrightsville/Hawkins Complex is not an intake facility and does not receive any inmates other than intra-system transfers.

Standard #5-ACI-6A-32

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

- REVIEW OF AVAILABLE HISTORICAL RECORDS OF INPATIENT AND OUTPATIENT PSYCHIATRIC TREATMENT
- REVIEW OF HISTORY OF TREATMENT WITH PSYCHOTROPIC MEDICATION
- REVIEW OF HISTORY OF PSYCHOTHERAPY, PSYCHO-EDUCATIONAL GROUPS AND CLASSES OR SUPPORT GROUPS
- REVIEW OF HISTORY OF SUBSTANCE USE AND TREATMENT
- REVIEW OF EDUCATIONAL AND SPECIAL EDUCATION HISTORY
- REVIEW OF HISTORY OF SEXUAL OR PHYSICAL ABUSE-VICTIMIZATION AND PREDATORY BEHAVIOR AND/OR SEXUAL OFFENSES
- REVIEW OF HISTORY OF SUICIDAL OR VIOLENT BEHAVIOR
- REVIEW OF HISTORY OF CEREBRAL TRAUMA OR SEIZURES
- ASSESSMENT OF CURRENT MENTAL STATUS, SYMPTOMS, CONDITION, AND RESPONSE TO INCARCERATION
- ASSESSMENT OF CURRENT SUICIDAL POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT INCREASE SUICIDE POTENTIAL
- ASSESSMENT OF VIOLENCE POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT INCREASE VIOLENCE POTENTIAL
- ASSESSMENT OF DRUG AND ALCOHOL USE AND/OR ADDICTION
- USE OF ADDITIONAL ASSESSMENT TOOLS, AS INDICATED
- REFERRAL TO TREATMENT, AS INDICATED
- DEVELOPMENT AND IMPLEMENTATION OF A TREATMENT PLAN, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION

FINDINGS:

The Wrightsville/Hawkins Complex is not an intake facility and does not receive any inmates other than intra-system transfers.

Standard #5-ACI-6A-41

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:

The Wrightsville/Hawkins Complex does not administer withdrawal management.

Standard #5-ACI-6C-09

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

FINDINGS:

The Wrightsville/Hawkins Complex does not conduct medical or pharmaceutical research.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Correction
Wrightsville/Hawkins Complex
Wrightsville, Arkansas

September 19-21, 2022

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

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:

The Wrightsville/Hawkins Complex is not responsible for restitution.

Standard #5-ACI-1C-12

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

FINDINGS:

The employees at Wrightsville/Hawkins Complex are not covered by a merit system, civil service regulations, or union contracts.

Standard #5-ACI-2B-04

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

FINDINGS

The Wrightsville/Hawkins Complex has not had any new construction of single cell living units.

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:

The Wrightsville/Hawkins Complex has had no new construction after June 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

The Wrightsville/Hawkins Complex has had no new construction after June 2014.

Standard #5-ACI-2C-10

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

FINDINGS:

The Wrightsville/Hawkins Complex has had no new construction after June 2014.

Standard #5-ACI-2C-12

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

FINDINGS:

The Wrightsville/Hawkins Complex does not accept inmates who cannot perform basic life functions.

Standard #5-ACI-2D-04

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

FINDINGS:

The Wrightsville/Hawkins Complex has had no new construction after June 1, 2008.

Standard #5-ACI-2D-05

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

FINDINGS:

The Wrightsville/Hawkins Complex has had no new construction or renovation after June 1, 2014.

Standard #5-ACI-3A-43

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

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a canine unit.

Standard #5-ACI-3A-44

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

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

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a canine unit.

Standard #5-ACI-3A-45

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a canine unit.

Standard #5-ACI-4A-01

WHEN AN OFFENDER IS TRANSFERRED TO SPECIAL MANAGEMENT HOUSING, HEALTH CARE STAFF WILL BE INFORMED IMMEDIATELY AND WILL PROVIDE A SCREENING AND REVIEW, AS INDICATED BY THE PROTOCOLS ESTABLISHED BY THE HEALTH AUTHORITY. UNLESS MEDICAL ATTENTION IS NEEDED MORE FREQUENTLY, EACH OFFENDER IN SPECIAL MANAGEMENT HOUSING RECEIVES A DAILY VISIT FROM A QUALIFIED HEALTH CARE 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:

The Wrightsville/Hawkins Complex does not have a special management housing unit.

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:

The Wrightsville/Hawkins Complex does not have a special management housing unit.

Standard #5-ACI-4A-03

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing unit.

Standard #5-ACI-4A-10

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT A QUALIFIED MENTAL HEALTH PROFESSIONAL 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:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing unit.

Standard #5-ACI-4A-13

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a special management housing unit.

Standard #5-ACI-4A-14

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing unit.

Standard #5-ACI-4A-17

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing unit.

Standard #5-ACI-4A-22

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a special management housing unit.

Standard #5-ACI-4A-23

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Wrightsville/Hawkins Complex does not have a special management housing 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:

The Writtsville/Hawkins Complex does not have a special management housing 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:

The Writtsville/Hawkins Complex does not have a special management housing unit.

Standard #5-ACI-4B-26

(EFFECTIVE NLT OCTOBER 1, 2020) WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN EXTENDED RESTRICTIVE HOUSING HAVE ACCESS TO PROGRAMS AND SERVICES THAT INCLUDE BUT ARE NOT LIMITED TO THE FOLLOWING: EDUCATIONAL SERVICES, COMMISSARY SERVICES, LIBRARY SERVICES, SOCIAL SERVICES, BEHAVIORAL HEALTH AND TREATMENT SERVICES, RELIGIOUS GUIDANCE, AND RECREATIONAL PROGRAMS.

FINDINGS:

The Writtsville/Hawkins Complex does not have a special management housing unit.

Standard #5-ACI-4B-27

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

WHEN A LITERACY PROBLEM EXISTS, A STAFF MEMBER ASSISTS THE INMATE IN UNDERSTANDING THE MATERIAL. COMPLETION OF ORIENTATION IS DOCUMENTED BY A STATEMENT SIGNED AND DATED BY THE INMATE.

FINDINGS:

The Wrightsville/Hawkins Complex does not have a special management housing unit.

Standard #5-ACI-4B-29

(EFFECTIVE NLT OCTOBER 1, 2020) WRITTEN POLICY, PROCEDURE AND PRACTICE REQUIRE THAT THE AGENCY WILL ATTEMPT TO ENSURE OFFENDERS ARE NOT RELEASED DIRECTLY INTO THE COMMUNITY FROM EXTENDED RESTRICTIVE HOUSING. IN THE EVENT THAT THE RELEASE OF AN OFFENDER DIRECTLY FROM EXTENDED RESTRICTIVE HOUSING INTO THE COMMUNITY IS IMMINENT, THE FACILITY WILL DOCUMENT THE JUSTIFICATION AND RECEIVE AGENCY LEVEL OR DESIGNEE APPROVAL (DOES NOT APPLY TO IMMEDIATE COURT ORDER RELEASE).

IN ADDITION TO REQUIRED RELEASE PROCEDURES (SEE 5-ACI-5F-05) THE FOLLOWING MUST BE TAKEN AT A MINIMUM:

- DEVELOPMENT OF A RELEASE PLAN THAT IS TAILORED TO SPECIFIC NEEDS OF THE OFFENDER (DOES NOT APPLY TO IMMEDIATE COURT ORDER RELEASE)
- NOTIFICATION OF RELEASE TO STATE AND LOCAL LAW ENFORCEMENT
- NOTIFY RELEASING OFFENDER OF APPLICABLE COMMUNITY RESOURCES
- VICTIM NOTIFICATION (IF APPLICABLE/THERE IS A VICTIM)

FINDINGS:

The Wrightsville/Hawkins Complex does not have a special management housing unit.

Standard #5-ACI-4B-30

(EFFECTIVE NLT OCTOBER 1, 2020) AN INDIVIDUAL DIAGNOSED WITH A SERIOUS MENTAL ILLNESS WILL NOT BE PLACED IN EXTENDED RESTRICTIVE HOUSING, UNLESS THE MULTIDISCIPLINARY SERVICE TEAM DETERMINES THERE IS AN IMMEDIATE AND PRESENT DANGER TO OTHERS OR THE SAFETY OF THE INSTITUTION. THERE MUST BE AN ACTIVE INDIVIDUALIZED TREATMENT PLAN THAT INCLUDES WEEKLY MONITORING BY MENTAL HEALTH STAFF, TREATMENT AS NECESSARY, AND STEPS TO FACILITATE THE TRANSITION OF THE OFFENDER BACK INTO GENERAL POPULATION

FINDINGS:

The Wrightsville/Hawkins Complex does not have a special management housing unit.

Standard #5-ACI-4B-31

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

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

*SEE DEFINITION FOR MULTIDISCIPLINARY SERVICES TEAM AND MULTIDISCIPLINARY TREATMENT TEAMS

**DEFINITION OF STEP-DOWN PROGRAM: A PROGRAM THAT INCLUDES A SYSTEM OF REVIEW AND ESTABLISHES CRITERIA TO PREPARE AN INMATE FOR TRANSITION TO GENERAL POPULATION OR THE COMMUNITY.

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have an extended restrictive housing unit.

Standard #5-ACI-4B-32

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have an extended restrictive housing unit.

Standard #5-ACI-4B-33

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

FINDINGS:

The Wrightsville/Hawkins Complex 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:

The Wrightsville/Hawkins Complex is not a reception center.

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:

The Wrightsville/Hawkins Complex is not a reception center.

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:

The Wrightsville/Hawkins Complex is not a reception center.

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:

The Wrightsville/Hawkins Complex is not a reception center.

Standard #5-ACI-5B-13

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

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

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house youthful offenders.

Standard #5-ACI-5B-14

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house youthful offenders.

Standard #5-ACI-5B-15

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house youthful offenders.

Standard #5-ACI-5B-16

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house youthful offenders.

Standard #5-ACI-5B-17

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house youthful offenders.

Standard #5-ACI-5B-18

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

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

- MENTAL-HEALTH ISSUES
- GENDER-SPECIFIC ISSUES
- CASE-MANAGEMENT PLANNING AND IMPLEMENTATION

FINDINGS:

The Wrightsville/Hawkins Complex does not house youthful offenders.

Standard #5-ACI-5D-11

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

FINDINGS:

The Wrightsville/Hawkins Complex does not store inmates' personal clothing.

Standard #5-ACI-5D-15

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT HAIR CARE SERVICES THAT COMPLY WITH APPLICABLE HEALTH REQUIREMENTS ARE AVAILABLE TO INMATES.

FINDINGS:

The Wrightsville/Hawkins Complex does not have health requirements for hair care.

Standard #5-ACI-5F-08

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a victim-offender dialogue program.

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:

At the Wrightsville/Hawkins Complex, infants are not allowed to stay with their mothers.

Standard #5-ACI-6A-24

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house in-transit offenders.

Standard #5-ACI-6A-38

(EFFECTIVE NLT OCTOBER 1, 2020) A MENTAL HEALTH RESIDENTIAL TREATMENT UNIT IS AVAILABLE FOR THOSE INMATES WITH IMPAIRMENT IN BEHAVIORAL FUNCTIONING ASSOCIATED WITH A SERIOUS MENTAL ILLNESS AND/OR IMPAIRMENT IN COGNITIVE FUNCTIONING. THE SEVERITY OF THE IMPAIRMENT DOES NOT REQUIRE INPATIENT LEVEL OF CARE, BUT THE INMATE DEMONSTRATES A HISTORICAL AND CURRENT INABILITY TO FUNCTION ADEQUATELY IN THE GENERAL POPULATION. THERE SHOULD BE A SPECIFIC MISSION/GOAL OF THE PROGRAM, SUFFICIENT QUALIFIED STAFF TO MEET NEEDS OF PROGRAM, SCREENING PROCESS FOR THE PROGRAM, INDIVIDUAL TREATMENT PLANS FOR INMATES IN THE PROGRAM, SAFE HOUSING TO MEET THE THERAPEUTIC NEEDS OF THE INMATE AND TRANSITION PLAN UPON DISCHARGE FROM THE RESIDENTIAL TREATMENT UNIT.

FINDINGS:

The Wrightsville/Hawkins Complex does not have a mental health treatment unit.

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:

The Wrightsville/Hawkins Complex does not have an in-patient health care unit.

Standard #5-ACI-6B-04

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

FINDINGS:

The Wrightsville/Hawkins Complex has full-time qualified health care staff.

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:

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

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:

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

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:

The Wrightsville/Hawkins Complex does not have a private industry on institutional grounds.

		Wrightsville			Cycle Dates: Sept 1, 2019 through Aug 31, 2020			Cycle Dates: Sept 1, 2020 through Aug 31, 2021			Cycle Dates: Sept 1, 2021 through Aug 31, 2022		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	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 12 months divided by the number of Plans of Action approved by the Commission on Accreditation.	3	3	1	3	3	1	3	3	1		
	1A-2	Number of expected practices in compliance divided by the number of applicable expected practices.	537	539	.996	537	539	.996	537	539	.996		
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 12 months divided by the average number of filled full time positions in the past 12 months.	873	166	5.259	745	146	5.102	807	125	6.45		
	1C-2	The number of staff who left employment for any reason in the past 12 months divided by the average number of filled full time positions in the past 12 months.	107	166	.644	85	146	.582	87	125	.696		
	1C-3	The number of verified employee violations in the past 12 months divided by the average number of filled full time staff positions in the past 12 months.	52	166	.313	23	146	.157	15	125	.12		
	1C-4	The number of staff terminated for conduct violations in the past 12 months divided by the average number of filled full time staff positions in the past 12 months.	20	166	.120	16	146	.109	5	125	.04		
	1C-5	The number of performance reviews rated acceptable or higher in the past 12 months divided by the total number of performance reviews conducted in the past 12 months.	117	117	1.00	119	159	.748	87	112	.776		
	1C-6	Average number of security staff positions filled per month for the past 12 months divided by the total number of authorized security positions.	156	185	.843	126	183	.688	107	183	.584		
	1C-7	Number of security staff who left employment in the past 12 months divided by the total number of authorized security positions.	98	185	.529	77	183	.420	75	183	.404		

		Wrightsville	Cycle Dates: Sept 1, 2019 through Aug 31, 2020			Cycle Dates: Sept 1, 2020 through Aug 31, 2021			Cycle Dates: Sept 1, 2021 through Aug 31, 2022		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
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 its 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 12 months divided by the average daily population in the past 12 months.	1053	873	1.206	150	745	.201	443	807	.548
	1G-2	The total number of hours of community service work delivered by offenders in the past 12 months divided by 12.	18,645	873	21.35	12,974	745	17.41	27,143	807	33.64
2. Physical Plant: The facilities' physical plant is designed, equipped and maintained in a manner that promotes safety, program function and access.											
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 12 months divided by the average number of filled full-time staff positions in the past 12 months.	24	166	.144	24	146	.164	14	125	.112
	2A-2	Number of sanitation or health-code violations identified by external agencies in the past 12 months.			5			0			6
	2A-3	The number of fire and safe code violations identified by the governing jurisdiction in the past 12 months.			0			2			1

		Wrightsville			Cycle Dates: Sept 1, 2019 through Aug 31, 2020			Cycle Dates: Sept 1, 2020 through Aug 31, 2021			Cycle Dates: Sept 1, 2021 through Aug 31, 2022		
Performance Standards		Outcome Measures	Year1 Numerator	Year1 Denominator	Accreditation Cycle Year 1	Year2 Numerator	Year2 Denominator	Accreditation Cycle Year 2	Year3 Numerator	Year3 Denominator	Accreditation Cycle Year 3		
2B: Size & Organization - Facility capacity and functional design promote safety, an acceptable quality of life and operational innovation.	2B-1	Number of days facility population exceeded the operational capacity in the past 12 months divided by 365.	138	365	.378	0	365	0	17	365	.046		
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>											

		Wrightsville			Cycle Dates: Sept 1, 2019 through Aug 31, 2020			Cycle Dates: Sept 1, 2020 through Aug 31, 2021			Cycle Dates: Sept 1, 2021 through Aug 31, 2022		
Performance Standards		Outcome Measures	Year1 Numerator	Year1 Denominator	Accreditation Cycle Year 1	Year2 Numerator	Year2 Denominator	Accreditation Cycle Year 2	Year3 Numerator	Year3 Denominator	Accreditation Cycle Year 3		
3. Institutional Operations: The facility protects the community, the staff, the offenders, and others from harm while maintaining an orderly environment with clear expectations of behavior and systems of accountability.													
3A: Security and Control - The facility utilizes a combination of supervision, inspection, accountability, and measured force response to promote safe and orderly operations.	3A-1	The number of incidents in which force, as defined by the agency, was used in the past 12 months divided by the average daily population in the past 12 months.	68	873	.077	50	745	.067	19	807	.023		
	3A-2	Number of seizures of contraband, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	154	873	.176	161	745	.216	107	807	.132		
	3A-3	The number of escapes, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	0	873	0	0	745	0	0	807	0		
	3A-4	The number of disturbances, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	0	873	0	0	745	0	0	807	0		
	3A-5	The number of acts of sexual violence, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	5	873	.005	0	745	0	0	807	0		
	3A-6	The number of homicides, as defined in the Significant Incident Summary, in the past 12 months, divided by the average daily population in the past 12 months.	0	873	0	0	745	0	0	807	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>											

Performance Standards	Outcome Measures	Wrightsville			Cycle Dates: Sept 1, 2019, through Aug 31, 2020			Cycle Dates: Sept 1, 2020, through Aug 31, 2021			Cycle Dates: Sept 1, 2021, through Aug 31, 2022		
		Year1 Numerator	Year1 Denominator	Accreditation Cycle Year 1	Year2 Numerator	Year2 Denominator	Accreditation Cycle Year 2	Year3 Numerator	Year3 Denominator	Accreditation Cycle Year 3			
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 12 months divided by the average daily population in the past 12 months.	1635	873	1.872	1562	745	2.09	986	807	1.22		
	3C-2	The total number of minor disciplinary reports, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	79	873	.090	134	745	.179	189	807	.234		
	3C-3	Number of offender-on-offender assaults, as defined in the SIS form, in the past 12 months divided by the average daily population in the past 12 months.	3	873	.003	4	745	.005	7	807	.008		
	3C-4	Number of offenders on staff assaults, as defined in the SIS form, in the past 12 months divided by the average daily population in the past 12 months.	0	873	0	0	745	0	0	807	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 12-month period.	31	501	.061	35	539	.069	59	443	.133		
4. Special Management Housing & Restrictive Housing: In general, inmates who threaten the secure and orderly management of the institution, posing a threat to others or a danger to themselves, are removed from the general population and placed in designated units. Such assignments are made appropriately and justifiably and offenders placed into such categories are treated justly, humanely, in a constitutionally correct manner and prepared for return to less restrictive units.													
4A: Special Management - Inmates who pose a threat are separated from general population and placed in a cell in a special management unit; (defined as segregation and including administrative segregation, protective custody or disciplinary detention); for periods of time less than 22 hours per day.	4A-1	Average number of offenders in Special Management Housing per month over the past 12 months divided by the average daily population in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		

Performance Standards	Outcome Measures	Wrightsville			Cycle Dates: Sept 1, 2019 through Aug 31, 2020			Cycle Dates: Sept 1, 2020 through Aug 31, 2021			Cycle Dates: Sept 1, 2021 through Aug 31, 2022		
		Year1 Numerator	Year1 Denominator	Accreditation Cycle Year 1	Year2 Numerator	Year2 Denominator	Accreditation Cycle Year 2	Year3 Numerator	Year3 Denominator	Accreditation Cycle Year 3			
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 12 months divided by the average daily population in the past 12 months.	19	873	.021	13	745	.017	7	801	.008		
	4B-2	Average number of offenders in Extended Restricted Housing per month over the past 12 months divided by the average daily population in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
	4B-3	Number of offenders released from Restrictive Housing by the appropriate authority within 24-hours in the past 12 months divided by the total placed in Restrictive Housing in the past 12 months.	33	288	.114	35	227	.154	18	158	.113		
	4B-4	Number of offenders in Extended Restrictive Housing that were released directly into the community from either Restrictive Housing or Extended Restrictive Housing within the past 12 months divided by the total number of offenders released in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
5. Institutional Services: Internal assignment to housing and program services should meet the basic needs of the offender consistent with the safe operation of the facility and should prepare the offender for successful reintegration into society upon release as appropriate.													
5A: Reception & Orientation - All incoming inmates undergo thorough screening and assessment at admission and receive a thorough orientation to the institution's procedures, rules, programs, and services.		<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>											

		Wrightsville			Cycle Dates: Sept 1, 2019 through Aug 31, 2020			Cycle Dates: Sept 1, 2020 through Aug 31, 2021			Cycle Dates: Sept 1, 2021 through Aug 31, 2022		
Performance Standards		Outcome Measures			Year1 Numerator	Year1 Denominator	Accreditation Cycle Year 1	Year2 Numerator	Year2 Denominator	Accreditation Cycle Year 2	Year3 Numerator	Year3 Denominator	Accreditation Cycle Year 3
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, meet the needs of identified inmates.	5E-1	Where a substance use disorder treatment program exists, the number of treatment slot available divided by the average daily population in the past 12 months.			200	873	.229	200	745	.268	150	807	.185
	5E-2	Where a substance use disorder treatment program exists, the number of completers of the program divided by the average daily population in the past 12 months.			262	873	.300	79	745	.106	215	807	.266
	5E-3	Where a sex offender treatment/management program exists, the number of program slot divided by the average daily population in the past 12 months.			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	5E-4	Where a sex offender treatment/management program exists, the number of completers divided by the average daily population in the past 12 months.			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
5F: Re-entry - The institution provides a structured program to help inmates make a satisfactory transition upon their release from incarceration.	5F-1	The number of offenders who have completed their re-entry plan, as defined by the agency, in the past 12 months divided by the number of inmates released in the past 12 months.			116	494	.234	28	262	.106	13	365	.035
6. Healthcare: Each offender receives appropriate physical and behavioral health care necessary to foster the restoration and maintenance of acceptable levels of wellness.													
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 twelve (12) months divided by the average daily population			0	873	0	0	745	0	0	807	0

Performance Standards	Outcome Measures	Wrightsville			Cycle Dates: Sept 1, 2019 through Aug 31, 2020			Cycle Dates: Sept 1, 2020 through Aug 31, 2021			Cycle Dates: Sept 1, 2021 through Aug 31, 2022		
		Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3			
6A-2	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months divided by the average daily population.	0	873	0	0	745	0	0	807	0			
6A-3	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the Number of offenders administered tests for TB infection in the past twelve (12) months as part of periodic or clinically based testing, but not intake screening.	0	873	0	0	745	0	0	807	0			
6A-4	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months divided by number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	0	873	0	0	745	0	0	807	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.	93	873	.106	65	745	.087	81	807	.100			
6A-6	Number of offenders diagnosed with HIV infection at a given point in time divided by Total offender population at that time.	10	873	.011	5	745	.006	8	807	.009			
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.	8	873	.009	4	745	.005	8	807	.009			
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	0	873	0	0	745	0	0	807	0			

Performance Standards	Outcome Measures	Wrightsville			Cycle Dates: Sept 1, 2019 through Aug 31, 2020			Cycle Dates: Sept 1, 2020 through Aug 31, 2021			Cycle Dates: Sept 1, 2021 through Aug 31, 2022		
		Year1 Numerator	Year1 Denominator	Accreditation Cycle Year 1	Year2 Numerator	Year2 Denominator	Accreditation Cycle Year 2	Year3 Numerator	Year3 Denominator	Accreditation Cycle Year 3			
		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.	101	894	.112	87	1051	.082	97	970	.1	
6A-10	Number of offender admissions to off-site hospitals in the past twelve (12) months divided by average daily population.	36	873	.004	56	745	.075	21	807	.026			
6A-11	Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months divided by the average daily population in the past 12 months.	54	873	.061	69	745	.092	52	807	.064			
6A-12	Number of offender specialty consults completed during the past twelve (12) months divided by Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.	464	523	.887	475	574	.827	417	712	.585			
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.	1	12	.083	5	20	.25	4	23	.173			
6A-14	Number of selected diabetic offenders at a given point in time who are under treatment for at least six months with a hemoglobin A1C level measuring greater than 9 percent divided by Total number of diabetic offenders who were reviewed.	1	10	.10	3	13	.230	4	16	.25			
6A-15	The number of completed dental treatment plans within the past twelve (12) months divided by the average daily population during the reporting period.	450	873	.575	500	745	.671	589	807	.729			

Performance Standards	Outcome Measures	Wrightsville			Cycle Dates: Sept 1, 2019 through Aug 31, 2020			Cycle Dates: Sept 1, 2020 through Aug 31, 2021			Cycle Dates: Sept 1, 2021 through Aug 31, 2022		
		Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3			
		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 staff with lapsed licensure or certification during a twelve (12) month period divided by Number of licensed or certified staff during a twelve (12) month period.	0	35	0	0	35	0	0	35	0
	6B-2	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job divided by Number of new health care staff during the twelve (12) month period.	0	5	0	0	4	0	0	7	0		
	6B-3	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months divided by the number of employees.	0	30	0	1	30	.033	0	30	0		
	6B-4	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.	0	30	0	0	30	0	0	30	0		
6C: Offender Treatment - Offenders are treated humanely, fairly, and in accordance with established policy and all applicable laws.	6C-1	Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months divided by number of evaluated offender grievances related to health care services in the past twelve (12) months.	0	1	0	0	7	0	0	0	0		
	6C-2	Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period divided by the number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.	1	4	.25	0	0	0	0	0	0		

Performance Standards	Outcome Measures	Wrightsville			Cycle Dates: Sept 1, 2019, through Aug 31, 2020			Cycle Dates: Sept 1, 2020, through Aug 31, 2021			Cycle Dates: Sept 1, 2021, through Aug 31, 2022		
		Year1 Numerator	Year1 Denominator	Accreditation Cycle Year 1	Year2 Numerator	Year2 Denominator	Accreditation Cycle Year 2	Year3 Numerator	Year3 Denominator	Accreditation Cycle Year 3			
		6C-3	Number of adjudicated offender lawsuits related to the delivery of health care found in favor of the offender in the past twelve (12) months divided by Number of offender adjudicated lawsuits related to healthcare delivery in the past twelve (12) months.	0	1	0	0	1	0	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 twelve (12) month period divided by the number of problems identified by quality assurance program during a twelve (12) month period.	7	10	.70	3	4	.75	6	2	3		
	6D-2	Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.	0	0	0	1	0	0	0	0	0		
	6D-3	Number of offender suicide attempts in the past twelve (12) months divided by average daily population.	0	873	0	0	745	0	0	807	0		
	6D-4	Number of offender suicides in the past twelve (12) divided by average daily population.	0	873	0	0	745	0	0	807	0		
	6D-5	Number of unexpected natural deaths in the past twelve (12) months divided by Total number of deaths in the same reporting period.	3	4	.75	2	3	.66	0	0	0		
	6D-6	Number of serious medication errors in the past twelve (12) months	0	0	0	0	0	0	0	0	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>											

		Wrightsville	Cycle Dates: Sept 1, 2019 through Aug 31, 2021			Cycle Dates: Sept 1, 2020 through Aug 31, 2021			Cycle Dates: Sept 1, 2021 through Aug 31, 2022	
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator
7. Inmate Programs: The institution's programs for inmates provide meaningful work, educational, and recreational programs designed to facilitate a stable institutional environment and the inmate's subsequent reentry into the community.										
A: 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 12 months divided by the average daily population in the past 12 months.	152	873	.174	152	745	.204	152	807
	7A-2	The average number of offenders with full time work/program assignments in the past 12 months divided by the average number of offenders eligible for work assignment in the past 12 months.	825	873	.945	724	745	.971	779	807
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 12 months.	160	873	.183	160	745	.214	160	807
	7B-2	The number of offenders who passed the General Equivalency Diploma (HI Set) exams while confined in the past 12 months divided by the average daily population in the last 12 months.	34	873	.038	0	745	0	14	807
	7B-3	The number of academic/vocational competency certificates issued in the past 12 months divided by the number of program slots available in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
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		<i>Compliance verified through expected practice files. No outcome measure required.</i>								

		Wrightsville	Cycle Dates: Sept 1, 2019, through Aug 31, 2020			Cycle Dates: Sept 1, 2020, through Aug 31, 2021			Cycle Dates: Sept 1, 2021, through Aug 31, 2022	
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>								
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>								
7F: Religious Programs - The offender population should have the opportunity to participate in the practices of their faith group as enhanced through the supplemental contributions of community resources.	7F-1	The number of regular participants, as defined by the agency, in structured religious programming in the past 12 months divided by the average daily population in the past 12 months.	N/A*	N/A*	N/A*	N/A*	N/A*	N/A*	140	807

*7F-1 Church services were conducted by DVD due to Covid until June 2022

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

Performance Standards	Hawkins		Cycle Dates: Sept 1, 2019, through Aug 31, 2020			Cycle Dates: Sept 1, 2020, through Aug 31, 2021			Cycle Dates: Sept 1, 2021, through Aug 31, 2022		
	Outcome Measures		Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	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 12 months divided by the number of Plans of Action approved by the Commission on Accreditation.	3	3	1	3	3	1	3	3	1
	1A-2	Number of expected practices in compliance divided by the number of applicable expected practices.	537	539	.996	537	539	.996	537	539	.996
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 12 months divided by the average number of filled full time positions in the past 12 months.	417	58	.139	379	55	6.89	438	56	7.82
	1C-2	The number of staff who left employment for any reason in the past 12 months divided by the average number of filled full time positions in the past 12 months.	4	58	.068	7	55	.127	24	56	.428
	1C-3	The number of verified employee violations in the past 12 months divided by the average number of filled full time staff positions in the past 12 months.	16	58	.275	1	55	.018	5	56	.089
	1C-4	The number of staff terminated for conduct violations in the past 12 months divided by the average number of filled full time staff positions in the past 12 months.	0	58	0	0	55	0	2	56	.035
	1C-5	The number of performance reviews rated acceptable or higher in the past 12 months divided by the total number of performance reviews conducted in the past 12 months.	41	41	1.00	46	54	.851	28	50	.56
	1C-6	Average number of security staff positions filled per month for the past 12 months divided by the total number of authorized security positions.	50	62	.806	45	63	.714	46	63	.730
	1C-7	Number of security staff who left employment in the past 12 months divided by the total number of authorized security positions.	3	62	.048	6	63	.095	16	63	.253

		Hawkins		Cycle Dates: Sept 1, 2019, through Aug 31, 2020			Cycle Dates: Sept 1, 2020, through Aug 31, 2021			Cycle Dates: Sept 1, 2021, through Aug 31, 2022		
Performance Standards		Outcome Measures		Year1 Numerator	Year1 Denominator	Accreditation Cycle Year 1	Year2 Numerator	Year2 Denominator	Accreditation Cycle Year 2	Year3 Numerator	Year3 Denominator	Accreditation Cycle Year 3
ID: 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>										
IE: Case Records - The facility promotes appropriate security, access control, and other measures designed to assure the integrity of records entrusted to its care.		<i>Compliance verified through expected practice files. No outcome measure required.</i>										
IF: 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>										
IG: 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 12 months divided by the average daily population in the past 12 months.	1482	417	3.55	256	379	.675	1019	438	2.32
		1G-2	The total number of hours of community service work delivered by offenders in the past 12 months divided by 12.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
2. Physical Plant: The facilities' physical plant is designed, equipped and maintained in a manner that promotes safety, program function and access.												
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 12 months divided by the average number of filled full-time staff positions in the past 12 months.	39	58	.672	18	55	.327	20	56	.357
		2A-2	Number of sanitation or health-code violations identified by external agencies in the past 12 months.			1			0			1
		2A-3	The number of fire and safe code violations identified by the governing jurisdiction in the past 12 months.			0			5			0

		Hawkins	Cycle Dates: Sept 1, 2019, through Aug 31, 2020			Cycle Dates: Sept 1, 2020, through Aug 31, 2021			Cycle Dates: Sept 1, 2021, through Aug 31, 2022		
Performance Standards		Outcome Measures	Year1 Numerator	Year1 Denominator	Accreditation Cycle Year 1	Year2 Numerator	Year2 Denominator	Accreditation Cycle Year 2	Year3 Numerator	Year3 Denominator	Accreditation Cycle Year 3
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, meet the needs of identified inmates.	5E-1	Where a substance use disorder treatment program exists, the number of treatment slot available divided by the average daily population in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	5E-2	Where a substance use disorder treatment program exists, the number of completers of the program divided by the average daily population in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	5E-3	Where a sex offender treatment/management program exists, the number of program slot divided by the average daily population in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	5E-4	Where a sex offender treatment/management program exists, the number of completers divided by the average daily population in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
5F: Re-entry - The institution provides a structured program to help inmates make a satisfactory transition upon their release from incarceration.	5F-1	The number of offenders who have completed their re-entry plan, as defined by the agency, in the past 12 months divided by the number of inmates released in the past 12 months.	170	223	.762	59	132	.446	72	140	.514
6. Healthcare: Each offender receives appropriate physical and behavioral health care necessary to foster the restoration and maintenance of acceptable levels of wellness.											
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 twelve (12) months divided by the average daily population	0	417	0	0	379	0	0	438	0

Performance Standards	Outcome Measures	Hawkins			Cycle Dates: Sept 1, 2019, through Aug 31, 2020			Cycle Dates: Sept 1, 2020, through Aug 31, 2021			Cycle Dates: Sept 1, 2021, through Aug 31, 2022		
		Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3			
	6A-2	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months divided by the average daily population.	0	417	0	0	379	0	0	438	0		
	6A-3	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the Number of offenders administered tests for TB infection in the past twelve (12) months as part of periodic or clinically based testing, but not intake screening.	0	15	0	0	52	0	0	14	0		
	6A-4	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months divided by number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	0	0	0	0	0	0	0	0	0		
	6A-5	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time divided by Total offender population at that time.	35	417	.083	39	379	.102	51	438	.116		
	6A-6	Number of offenders diagnosed with HIV infection at a given point in time divided by Total offender population at that time.	1	417	.002	2	379	.005	2	438	.004		
	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.	1	1	1	2	2	1	2	2	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	0	1	0	0	2	0	0	2	0		

Performance Standards	Hawkins			Cycle Dates: Sept 1, 2019, through Aug 31, 2020			Cycle Dates: Sept 1, 2020, through Aug 31, 2021			Cycle Dates: Sept 1, 2021, through Aug 31, 2022		
	Outcome Measures	Year1 Numerator	Year1 Denominator	Accreditation Cycle Year 1	Year2 Numerator	Year2 Denominator	Accreditation Cycle Year 2	Year3 Numerator	Year3 Denominator	Accreditation Cycle Year 3		
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.	51	175	.291	56	252	.222	75	241	.311		
6A-10	Number of offender admissions to off-site hospitals in the past twelve (12) months divided by average daily population.	47	417	.112	16	379	.004	17	438	.038		
6A-11	Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months divided by the average daily population in the past 12 months.	56	417	.134	27	379	.071	19	438	.043		
6A-12	Number of offender specialty consults completed during the past twelve (12) months divided by Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.	340	417	.815	279	379	.736	307	438	.700		
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.	2	16	.125	4	16	.25	4	23	.173		
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.	0	11	0	0	10	0	4	16	25		
6A-15	The number of completed dental treatment plans within the past twelve (12) months divided by the average daily population during the reporting period.	335	417	.803	265	379	.699	351	438	.801		

Performance Standards	Outcome Measures	Hawkins			Cycle Dates: Sept 1, 2019, through Aug 31, 2020			Cycle Dates: Sept 1, 2020, through Aug 31, 2021			Cycle Dates: Sept 1, 2021, through Aug 31, 2022		
		Year1 Numerator	Year1 Denominator	Accreditation Cycle Year 1	Year2 Numerator	Year2 Denominator	Accreditation Cycle Year 2	Year3 Numerator	Year3 Denominator	Accreditation Cycle Year 3			
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 staff with lapsed licensure or certification during a twelve (12) month period divided by Number of licensed or certified staff during a twelve (12) month period.	0	15	0	0	15	0	0	15	0		
	6B-2	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job divided by Number of new health care staff during the twelve (12) month period.	0	3	0	0	3	0	0	3	0		
	6B-3	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months divided by the number of employees.	0	15	0	0	15	0	0	15	0		
	6B-4	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.	0	15	0	0	15	0	0	15	0		
6C: Offender Treatment - Offenders are treated humanely, fairly, and in accordance with established policy and all applicable laws.	6C-1	Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months divided by number of evaluated offender grievances related to health care services in the past twelve (12) months.	1	4	.25	0	5	0	0	0	0		
	6C-2	Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period divided by the number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.	0	0	0	0	0	0	0	0	0		

Performance Standards	Hawkins		Cycle Dates: Sept 1, 2019, through Aug 31, 2020			Cycle Dates: Sept 1, 2020, through Aug 31, 2021			Cycle Dates: Sept 1, 2021, through Aug 31, 2022		
	Outcome Measures		Year1 Numerator	Year1 Denominator	Accreditation Cycle Year 1	Year2 Numerator	Year2 Denominator	Accreditation Cycle Year 2	Year3 Numerator	Year3 Denominator	Accreditation Cycle Year 3
	6C-3	Number of adjudicated offender lawsuits related to the delivery of health care found in favor of the offender in the past twelve (12) months divided by Number of offender adjudicated lawsuits related to healthcare delivery in the past twelve (12) months.	0	0	0	0	0	0	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 twelve (12) month period divided by the number of problems identified by quality assurance program during a twelve (12) month period.	2	3	.666	10	17	.588	2	12	.166
	6D-2	Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.	0	0	0	0	0	0	0	0	0
	6D-3	Number of offender suicide attempts in the past twelve (12) months divided by average daily population.	0	417	0	0	379	0	0	438	0
	6D-4	Number of offender suicides in the past twelve (12) divided by average daily population.	0	417	0	0	379	0	0	438	0
	6D-5	Number of unexpected natural deaths in the past twelve (12) months divided by Total number of deaths in the same reporting period.	1	1	1	2	3	.666	0	0	0
	6D-6	Number of serious medication errors in the past twelve (12) months	0	0	0	0	0	0	0	0	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>								

		Hawkins	Cycle Dates: Sept 1, 2019, through Aug 31, 2020			Cycle Dates: Sept 1, 2020, through Aug 31, 2021			Cycle Dates: Sept 1, 2021, through Aug 31, 2022		
Performance Standards		Outcome Measures	Year1 Numerator	Year1 Denominator	Accreditation Cycle Year 1	Year2 Numerator	Year2 Denominator	Accreditation Cycle Year 2	Year3 Numerator	Year3 Denominator	Accreditation Cycle Year 3
7. Inmate Programs: The institution's programs for inmates provide meaningful work, educational, and recreational programs designed to facilitate a stable institutional environment and the inmate's subsequent reentry into the community.											
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 12 months divided by the average daily population in the past 12 months.	0	417	0	0	379	0	0	438	0
	7A-2	The average number of offenders with full time work/program assignments in the past 12 months divided by the average number of offenders eligible for work assignment in the past 12 months.	402	417	.964	363	379	.957	431	438	.942
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 12 months.	43	417	.103	43	379	.113	43	438	.098
	7B-2	The number of offenders who passed the General Equivalency Diploma (HI Set) exams while confined in the past 12 months divided by the average daily population in the last 12 months.	21	417	.050	5	379	.013	12	438	.027
	7B-3	The number of academic/vocational competency certificates issued in the past 12 months divided by the number of program slots available in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
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		<i>Compliance verified through expected practice files. No outcome measure required.</i>									

		Hawkins	Cycle Dates: Sept 1, 2019, through Aug 31, 2020			Cycle Dates: Sept 1, 2020, through Aug 31, 2021			Cycle Dates: Sept 1, 2021, through Aug 31, 2022		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>									
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.		<i>Compliance verified through expected practice files. No outcome measure required.</i>									
7F: Religious Programs - The offender population should have the opportunity to participate in the practices of their faith groups enhanced through the supplemental contributions of community resources.	7F-1	The number of regular participants, as defined by the agency, in structured religious programming in the past 12 months divided by the average daily population in the past 12 months.	0*	417	0*	0*	379	0*	81*	438	.184*

*7F-1 Church services were conducted by DVD due to Covid until June 2022

