

**COMMISSION ON ACCREDITATION FOR CORRECTIONS**  
**STANDARDS COMPLIANCE REACCREDITATION AUDIT**

Arkansas Department of Corrections  
Delta Regional Unit  
Dermott, Arkansas

March 7-9, 2017

**VISITING COMMITTEE MEMBERS**

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**A. Introduction**

The American Correctional Association re-accreditation audit of the Arkansas Department of Corrections Delta Regional Unit was conducted on March 7, 2017 through March 9, 2017 by the ACA visiting team as follows: Susan Lindsey, Chairperson, Michael David, ACA Auditor and Anne Cybulski-Sandlian, ACA Medical Auditor. This audit was conducted based on the Adult Correctional Institutions 4th Edition and the 2014 Standards Supplement.

**B. Facility Demographics**

Rated Capacity: 642

Actual Population: 625

Average Daily Population for the last 12 months: 600

Average Length of Stay: Two years, two months, five days

Security/Custody Level: Maximum 50, Medium 248, Minimum 327

Age Range of Offenders: 18-72

Gender: Male

Full-Time Staff:

(194) Security Staff, Non- Security (20), Program Education (50)

Contracted Staff: Medical 11

**C. Facility Description and Program Description**

Delta Regional Unit (DRU) is an adult correctional facility under the jurisdiction of Arkansas Department of Corrections (ADOC). It is located at the extreme southeast corner of the State, ten miles from the Mississippi River and 40 miles north of the Louisiana line, approximately 72 miles south of Pine Bluff, Arkansas, and 113 miles south of Little Rock, Arkansas.

The physical plant encompasses 108,000 square feet on 97.9 acres with a portion of the facility designated as a regional jail with a four bed capacity. Although the facility was established in May, 1990, the original capacity of 400 was expanded to 625 through additions to the original construction. These additions include a school building, new office area and covered exercise pavilion, a janitorial products building outside the perimeter, single man exercise units for the maximum security area, a records storage building, and the armory. The additions to the school building since the last audit included a computer lab, additional office space and storage.

The total bed capacity of 625 includes inmates from all security levels, but predominantly medium (248) and minimum (327). Inmates are housed in eight open barracks, with a capacity of 67 inmates in barracks one to seven in two-tiers (1804 square feet) for the living area and a dayroom (1416 square feet). Barracks eight has a capacity of 66, which is designated as the handicapped barracks and provides a lift and bathroom facilities to accommodate their needs.

An additional shower area is located in the laundry area to provide an additional 24 shower heads. In addition, Delta Regional Unit has ten maximum security isolation cells. Each cell measures 8' by 10' and includes a toilet and lavatory unit. The adjacent dayroom provides 170 square feet for out of cell exercise when weather does not permit outside exercise. Another six pods are located in the East Wing that was originally designated for county jail detainees. These pods have been modified to house both ADOC inmates and jail detainees. Inmates housed in this area are assigned to the Reentry Program, Disciplinary Court Review, Investigative Status, Punitive, and Protective Custody statuses. These changes increased the jail capacity to adequately house the 600 average inmates for this audit period.

The outdoor recreation area for general population covers 62,520 square feet and an enclosed gymnasium measuring 5,980 square feet with heating and cooling units. Softball field and volleyball areas are included and provide for routine sports events with participants from throughout the facility.

Delta Regional Unit includes the following buildings: main compound, school, entrance building, gym, sally port, and four towers. Outside the perimeter are the armory building, horse barn, ICC garage, janitorial products building, and records storage buildings.

Employees and visitors enter through a main entrance manned by a security officer. Immediately adjacent to this entrance is the North Tower with posted security twenty-four hours per day. All staff and visitors must pass through a metal detector as well as be subjected to body pat searches. A biometric identification system is utilized for both visitors and staff which provides for easy but secure access in and out of the facility. Two additional sally ports are available: one located on the south side of the facility and one at the East Wing.

Inmate programs at Delta Regional Unit include an impressive accredited education program staffed with a full-time principal and four full time certified teachers. The Education Department was awarded accreditation for July 1, 2015 through June 30, 2015. DRU had the third highest number of GED graduates in the State. These numbers are evident as demonstrated by 62 graduates from DRU in the 2014-2016 year and 180 students enrolled this semester- a very high percentage of the relatively small population and turnaround time for inmates in this facility. Every inmate without a GED is automatically enrolled in educational programming and students with special needs are individually assisted by instructors. Seven inmate tutors also utilized for one-on-one instruction.

Beginning in September 2016, Delta Regional Unit also began working with the University of McGehee to provide re-entry programming through hands on wage training. This four week course prepares inmates to transition into the free world work force. Topics of instruction include how to get interviews, how to fill out job applications, how to compile a resume, and where to find jobs in the current market.

Re-entry program also includes coaching in life and social skills for a total six month program that addresses daily life and relationship skills, G.E.D., employment skills, attitude, self-awareness, and self-improvement. Inmates who complete these programs receive certificates to assist them upon release and which are documented in their inmate correctional electronic record.

Inmates are also able to participate in work -craft classes afterhours every day of the week when they achieve Class One. Religious services are also available throughout the week through a full-time chaplain and community volunteers representative of major denominations. Character First is taught by the Chaplain in Think Legacy with approximately 24 participants.

Work programs are diverse, and provide inmates opportunities to learn and practice employable skills, but also support the unit and surrounding communities. These include maintenance, utility landscape, horse barn, and ICC garage for the maintenance of equipment and vehicles, domestic, food service, laundry, inside utility, porters, librarian, barbering, and industrial janitorial supply.

The mission of the Delta Regional Unit is to carry out the intentions of the Governor, Legislature, and the Director of the Department of Correction to create a model corrections system by complying with the intentions of the state statutes: state and federal court offers; state, federal and local fire and safety codes; Arkansas Department of Correction Administrative Regulations, Directives and policies. They seek to provide a safe, humane environment for staff and inmates, strengthen the work ethic through teaching of good habits, and provide opportunities for inmates to improve spiritually, mentally, and physically.

194 full time employees carry out this mission including 158 full time security staff, 20 non-security staff, five educational staff, and eleven contracted medical personnel. Delta Regional Unit operates with two twelve hour shifts from 6:00 a. m. to 6:00 p. m. and from 6:00 p. m. to 6:00 a. m. Each shift works two days on and three days off, allowing a three day weekend every other week. Special assignment officers and administrative staff work five eight hours days per week to include laundry, fire and safety, key/weapon control and field utility.

Notices of the ACA audit were conspicuously posted throughout the facility including the housing units, medical area and visitation.

#### **D. Pre-Audit Meeting**

Auditors met for dinner on March 6, 2017 to discuss information provided from the facility and the Association. In attendance were Warden Darryl Golden, Sandra Kennedy, Agency ACA Manager, Deputy Warden Tommy Hurst, Captain Kim Lum, LT. Karina Barrow, and the visiting committee: Susan Lindsey, Chairperson, Michael David, Member and Anne Cybulski-Sandlian, Medical Auditor. This was a great opportunity to get acquainted with the staff and organization of the Delta Regional Unit.

The itinerary was discussed as well to make best use of the three day audit. Afterwards team members met to discuss the three day agenda and to assign standards which were as follows:

Standard # 4 - 4001 - # 4 - 4175	Susan Lindsey
Standard # 4 - 4176 - # 4 - 4343	Michael David
Standard # 4 - 4344 - # 4 - 4344	Anne Cybulski-Sandlian

## **E. The Audit Process**

### **1. Transportation**

The audit team was transported from the Little Rock International Airport to the meeting site and hotel on March 6, 2017 by Sandra Kennedy, Agency ACA Coordinator. She also provided generous transportation to the Delta Regional Unit throughout the audit, which required some repeated visits to accommodate the audit team so all aspects of the audit could be conducted.

### **2. Entrance Interview**

The visiting team was escorted to the large visitation room at approximately 8:45 a. m. Warden Golden opened the session and introduced the ACA auditors. Employees from throughout the facility attended and each introduced themselves noting their length of service and position. Most of the attendees reported ten to thirty years on the job within Arkansas Department of Correction, but many of the staff worked throughout their careers at Delta Regional Unit. There was clear diversity in race, ethnicity and gender represented in management and line staff. The list below reflects the wide representation of the levels of staff and departments.

Chairperson Lindsey thanked Delta Regional Unit for again involving ACA in their accreditation process. This facility has been accredited for many cycles.

Given the longevity of most staff, they were very familiar with the importance of achieving accreditation to accomplish best outcomes, reduced liability and efficient, effective correctional practices. The team members each described their experience both in Corrections and as ACA auditors. It was emphasized that they would not want to intrude on the duties that must be continuously performed. The audit was not only to determine that best practices were followed, but also to highlight the special accomplishments of the unit. The introductory materials provided by Warden Golden included many positive aspects of operation they would want to observe and report.

Attendees included:

L. S. Gibson	Fire/Safety Coordinator
Alicia Wilson	Human Resources Coordinator
Chris Pittillo	Recreation
Wanderlane Moseby	Deputy Warden's Secretary
Lanette Britt	Mailroom Coordinator
Michael Ingram	Key Control
Pat Tabb	Principal
Katrina Barrow	EPC/Fire/Safety
Serena McCoy	Tool Control
Lisa Bass	Records Supervisor
Gary Nalls	Disciplinary/Work Craft
Carole Gilgore	Sergeant/Jail
Donald Compton	Rehabilitation Program Manager
Angela King	Training
Pam Burke	ACA Coordinator/ DRU
Linda Louis	Captain
Keedren King	Field Sergeant
Jon Jackson	Field Sergeant
Bryan Hale	Field Sergeant
Kim Hoffman	Regional Manager/Regional Office
Jonathan Wiscaver	Mental Health
Keitrich Wade	Classification
Carol Anne Chisom	Health Services Administrator
Roderick Davis	Health Services Administrator
Chris Ashcroft	Maintenance Coordinator/ Construction
Debra Scott	Sergeant/Laundry
Stanley Smith	Captain
M. D. Reed	Chief Deputy Director
Rory Griffin	Deputy Director
Darryl Golden	Warden
Wendy Kelley	Director
Beverly Cokley	Warden's Secretary
Kovosha Mosby	Laundry
Loretta Brown	Major's Secretary
Oscar Greene	ARO
Kathy Gladden	Business Manager
Lydia Godfrey	Grievance Coordinator
Charlie Hopper	Prison Industry
Chance Norris	Lieutenant

3. Facility Tour

The visiting team toured the facility from approximately 9:00 a. m. until 2: 30 p. m. Additional visits were made throughout the audit period by the individual auditors to interview staff and inmates in each area. The following staff members accompanied the team and answered questions regarding operations:

Darryl Golden	Warden
Thomas Hurst	Deputy Warden
Kennie Bolden	Major
Linda Louis	Captain
Kim Lum	Captain
Linda Gibson	Fire and Safety
Chris Ashcraft	Maintenance Supervisor/ Construction
Gene Phillips	Maintenance
Pam Burke	ACA Accreditation Manager
Lisa Bass	Records Supervisor/ Scribe
Angela King	Training Officer/ Scribe
Wanderlane Moseby	Deputy Warden Secretary/ Scribe
Shannon McFadden	Classification

The tour agenda was followed as planned but included subsequent visits:

Security Entrance	Sgt.. Jon Jackson; CO 2 Jacqueline Bea
Administration Building	Touring Team
Main Hallway	Jacqueline Robinson, CO 2, Sgt. John Johnson
Laundry	Sgt. Debra Scott, Laundry Supervisor
Kitchen	Captain Martha Block, Kitchen Supervisor
Inmate Dining	Sgt. Kevin Ridgell, Field Security
Staff Dining	Touring Team
Commissary	Monica Terry, Commissary Supervisor
Pill Window	Nurse Bea and Officer Corey Beliew
Barracks 1-8	Touring team
Mail Room	Lanette Britt
Library	Two inmates assigned to Library
Tool Control	Serena McCoy
School	Principal Tabb and Barbara Benton, Danny Chisolm, Teachers
Infirmery	Johnnie Hines, Edward Jackson, Carol Chisolm,
Nurses	
Correct Care	Kimberly Hoffman, Area Manager
East Wing:	Lt. Chance Norris
Intake	Staff Tour Team
Segregation: Pre-Hearing	Detention, Disciplinary Segregation and Protective
Custody	
Visitation	Staff Tour Team

Chaplain's Office	Tony Shockley, Chaplain
Medical Unit	Carol Chisolm
Key Control	Sgt. Michael Ingram
Armory	Sgt. Michael Ingram
North Tower	Chamonix Jones, CO 2
Perimeter	Danirus Daniels, CO2
Vehicle Sally Port	Sgt. Polite
Correctional Industries	Charlie Hopper, Director
Horse Barn	Kenneth McMickle, Sgt., Clint Stanley, Sgt.
Gun Range	Sgt. Michael Ingram
Master Control	Jacqueline Bea

4. Conditions of Confinement/Quality of Life

During the three day audit, the conditions of confinement and quality of life for staff and inmates was determined through observation, interviews of employees and inmates and documentation:

**Security:**

The main compound of Delta Regional Unit is enclosed by 3,110 linear square feet of double chain-linked fencing laced with two rolls of razor wire connected to a Senstar Security microwave alarm system that is activated by motion. The perimeter is protected by four towers proximal to the entrance and sally ports. Each is manned 24 hours per day with clear sight of the fence and building lines and is augmented by a patrolling rover vehicle 24 hours per day. The security lighting at the perimeter is backed up by a generator system.

Security is further enhanced by 112 cameras located around the perimeter and throughout key locations inside the facility. In the medical, educational and housing barracks staff offices there are panic alerts for immediate back-up if needed.

Employees and visitors enter through a main entrance manned by a security officer. Immediately adjacent to this area is the North tower. As they enter, they are identified through a biometric identification system in place for inmates, staff and visitors. As observed by the visiting team, they must also pass through a metal detector and are subject to pat down searches. There is also a main sally port located at the south side of the facility and an additional sally port at the East wing.

Inmate movement is typically escorted, and by group, and controlled within the living, food service, and program areas. They are logged out as they leave their barracks and move single file through the hallway behind a yellow line. Inmates were observed throughout the three day audit to move throughout the facility in an extremely well organized manner.

Interviews of inmates were complimentary regarding the structure provided by the facility which they felt was in their best interest. Many inmates were viewed moving to and from the commissary, or to and from jobs within guidelines.

Maximum security housing and restrictive housing including protective custody areas were visited and interviews confirmed that inmates receive exercise, books, visits by faith based staff or volunteers, and meals as required. Meals are delivered to the cells as opposed to inmates eating in the inmate dining room. Documentation of compliance was difficult as entries were vague but was eventually verified. Exercise/refusal to take advantage should be notated either by inmate or by cell.

Correctional officers are trained in accordance with Arkansas Department of Corrections requirements which include completion of an Academy, on the job training, and annual training thereafter. Training records reflected that security and non-security staff met ACA criteria for staff which is also essential to safety of staff and inmates. Communication between all levels of rank and file security staff was evidently very positive and comfortable. As top administrative staff moved through the facility, it was clear that staff knew them and could talk with them informally during the tours.

Staff communication is accomplished by two way radios, telephones, shift change meetings and in writing, through posted policies. Counts are conducted eight times per day: at 2:00 a.m.; 5:00 a.m.; 8:00 a.m.; 1:00 p.m.; 5:00 p.m.; 10:00 p.m. and midnight. Count sheets, inventory logs, and disciplinary paperwork is completed before each twelve hour shift ends. Change of shift briefings are also conducted fifteen minutes before the start of the next shift, at which time all staff is informed of any information from the previous shift and information on changes in operation or assignment. The visiting team attended multiple changes of shift briefings which were impressive in the clear dissemination of information and staff participation.

“Main Line” was created nine years ago at DRU. This is a practice worthy of replication and not seen by the audit team previously. There is a daily schedule of all administrative staff who mans a station near the inmate dining room that allows inmates to discuss any concerns with administration without going through the chain of command. This benefits the highest rank with an appreciation of concerns at inmate and correctional officer levels and provides transparency that earns inmate trust and educates them on the appropriate way to address their problems. This practice, which was observed by the visiting team, contributes positively to a safe facility for all.

Key control procedures were reviewed with the key master. Keys are stored on numbered pegs matching key tags. They are issued on control logs by numbers and these are maintained in control centers or in the armory. They are audited each month by the key shop each month and after each shift by the control center.

Logs and inventories were examined and matched after spot checks of ten different sets of keys and blanks. Keys were in a locked secure cabinet in a room also used as the Armory. Emergency and signed out keys agreed with logs. Cameras also recorded all activities. The reviewing team member suggested further color coding for ease of identifying certain Barracks keys.

The armory was inspected and found to be clean and well-organized. It included 40 caliber pistols, 223 caliber rifles, 37 mm gas launchers and various non-lethal weapons including bean bag rounds, CS and OC gas canisters. Firearms and gas canisters were kept in separate locked cages and cabinets in the Armory. All firearms matched the inventory with spot checks of more than half of the non-lethal munitions. The only recommendation was to label the cabinet that held expired/training gas canisters. Thousands of rounds of ammunition were counted which matched the recorded amounts on inventories. The auditor also recommended caging of all ammunition similar to firearms.

Another aspect of security is accomplished through the mail room to eliminate any possibility of contraband. The mail room is staffed by a single employee. She receives mail for review as it enters and leaves the facility. Indigent inmates receive envelopes and stamps without cost and legal mail is counted as a negative balance. Approved magazines are permitted. All packages are screened, x-rayed and inspected by security staff prior to coming into the building. Cash is not permitted but is photocopied and identified by serial numbers for accounting. In a typical day, 50-100 pieces of mail are received; this is an important function to maintain a secure facility.

The camaraderie of staff and respectfulness to inmates was noted as a strong support to the excellent daily operation of this facility in terms of security and program outcomes.

### **Environmental Conditions:**

Inmates are housed in eight open barracks with two tiers in each barracks approximating 1,804 square feet with a bed capacity of 60 to 67. Each bed had a storage area for storing personal belongings. While this design provided an open atmosphere, there is less privacy which was not a concern according to inmate interviews. Dayrooms measuring 1,416 square feet are equipped with two televisions benches in the television viewing area, two table units for writing surfaces or to play games, and complete restroom facilities.

The living areas were appropriate; moreover inmates were typically out of the barracks attending school or performing work assignments so the space and dayroom usage were sufficient

The ten maximum security isolation cells met standards and measured 8 x 10 square feet with a dayroom measuring 170 square feet.

The six pods located in the east wing provided housing for reentry, disciplinary detention, investigative status, punitive and protective custody. These were double bunked cells with adjacent dayrooms as described above.

Within the housing unit and throughout the audit, the team observed the environmental conditions as they observed all areas of the facility. The temperature was very comfortable. Air quality and sound were tested and the results documented they met standards. Interviews with inmates in all housing areas indicated that they were provided the requisite opportunities to shower and exercise. Inmates were typically positive as to their housing and environmental conditions.

Two complaint letters were submitted to ACA alleging leaks from the ceiling and mold in various locations. It rained heavily for the first two days of the audit, so leaks should have been observable. Inmates housed in the cited area were asked about any concern. They stated that water collected at the windows, which were wet from the rain but were not leaking. They also stated that these areas were all cleaned daily with disinfectant, and they appeared clean with no indication of mold.

In response to the complaint letters, DRU contracted ATOKA, Inc. Professional Environmental Consulting Services to test indoor air quality and for mold. On February 8, 2017, they performed a visual inspection of Barracks #6. They concluded, as per the attached report, that there was no evidence that a significant mold growth site capable of significantly adversely affecting indoor air quality with respect to the reported airborne mold spores present. The indoor airborne mold spore counts were indicative of a clean environment with respect to indigenous airborne molds. No black mold spores were found in the air samples. They point out that in order for mold to grow, there must be sufficient moisture. While temperatures were deemed within an acceptable range (68-74 degrees), they suggested that the dew point should be 55 degrees or less. The shower area measured at 56, and the barracks/control room were at 55 degrees/dew point.

Their recommendations included removal of mold with damp wipe decontamination methods and then painting. There was an area of discoloration on the ceiling noted by the visiting team, which maintenance staff indicated was not included in the areas tested. Staff cleaned and painted the discoloration which could have been due to leaks and tar from roof repairs. It appeared normal and the before and after photographs are attached hereto. This is an area to watch.

It should be noted that DRU experienced significant damage to the roof and gymnasium from two back to back severe storms roughly one year ago. Roof leaks were apparent in various areas of the facility. Per the 2017 report from the fire marshal, all areas passed inspection despite the roof leaks. Delta Regional Unit submitted a request for funding of the repairs which has been approved with funding now available per the attached document.

**Sanitation:**

All areas of the facility were immaculately clean. The visiting team reviewed daily housekeeping plans and routine inspections that ensure the cleanliness of all areas. It should be noted that Arkansas State Plumbing codes require that showers, toilets, and lavatories be available to inmates at a ratio of one to 15 places them in compliance with the applicable ACA standards. 61 showers are available for 625 inmates; thus a ratio of 1:10:25 applies. 105 washbasins are available; for 625 inmates, 5.95 per inmate. Another 24 shower heads are available near the laundry as needed to supplement these numbers. Showers and faucets were checked throughout the tour and found to provide hot water within a reasonable period of time.

**Fire Safety:**

The Delta Regional Unit has a full time certified Fire and Safety Officer. Weekly fire and safety inspections are conducted by qualified staffs who conduct monthly annual fire and safety inspections are conducted by the Arkansas State Fire Marshal. There are 110 fire extinguishers located appropriately throughout the facility with four replacements available.

Ten SCBA tanks are located in the ADC/Jail Book In Vestibule, Main Control, and Barracks Control Booths. A Simplex Fire Alarm System has been installed that automatically connects the sprinkler system to smoke and heat detectors. The food service area has a new Ansul Fire Suppression System in the kitchen area and staff dining area.

The visiting team viewed the last inspection dates on safety equipment which was up to date. Emergency exits were well marked; exit routes were posted with routes of ingress/egress clearly denoted throughout the facility. Inspection reports were on file documenting compliance with requirements or improvements deemed satisfactory.

**Food Service:**

The food service area includes a large kitchen, food preparation area, dry storage area, cooler and freezer space and a dining hall with an inmate capacity of 85. Offenders are allowed twenty minutes to eat although observation indicated some inmates exceeded this time without being addressed. These areas were very clean and well organized. Inmates typically ate with multiple other inmates and enjoyed the social interaction.

Temperatures of freezers and coolers met standards as verified by observation and logs reviewed by the visiting team. Dry goods were organized neatly with caustic substances properly controlled and logged. Foods were date rotated and did not exceed expiration dates.

Kitchen sharps and tools were also properly affixed to shadow boards and logs matched counts. It was suggested that broken tools be labeled on the shadow boards to avoid complacency when missing due to repair. These were however correctly logged.

The facility employs a full time food service staff of five supervisors who oversee 91 inmates assigned as food service workers. The line is not visible to inmates receiving their trays, and is considered “blind serving”. Three meals are served per day in a main dining hall for inmates in general population. Trays are prepared for segregated inmates and delivered to inmates in their housing area in East Wing. Meals are planned by the Department Dietician to guarantee they are nutritionally adequate on a rotating menu. Therapeutic diets must be prescribed by the physician or dentist.

The average cost of meals is \$1.24. Auditors tasted the noon meal on March 7, 2017 which was tasty, nutritious and appropriate in temperature. Inmates were typically complimentary of the food served at D.R.U. The visiting team also verified that the same meals are served to employees and inmates.

All inmates in general population are permitted to purchase items from the commissary twice per week with a spending maximum of \$100. The commissary “pen” store sells food items, hygiene products and over the counter medications. Commissary orders are placed by the inmate in a designated box in the main hallway, which inmates pass each day to enter the dining hall or to attend work/school. Lists are picked up by 7:30 a. m. and available for pick up Monday through Friday based on housing assignment. Inmates in maximum, special orders and jail orders are given to deputies and orders are filled and delivered on Fridays.

### **Medical and Mental Health Care:**

Health services are provided at Delta Unit through a contract with Correct Care Solutions (CCS). This contract began in 2014. Trained medical staff is on site twenty-four hours per day. Providers are on call after hours and weekends for medical and mental health emergency consults. There is no infirmary or medical housing. Should care need exceed those available at the facility, contracts are in place with local emergency response entities and hospitals to receive inmate referrals.

These include Delta Memorial Hospital (25 miles away), Desha County Hospital (McGehee) ten miles away, and the ADOC prison infirmary at Ouachita River Correctional Unit (128 miles away) for longer term needs. Ambulance services are provided by Elite Medical Services in Dermott.

Staffing for this unit includes: one HSA; 6 LPN's; 0.7 Dental Hygienist/Assistant; .60 Dentist; one Nursing Assistant; one Medical Records Clerk; one Nurse Practitioner; 0.20 Physician; and .15 Psychiatrist for a total FTE of 10.85. Of note is the dentist position assigned to this unit was vacant on the date of the audit (the previous dentist having retired on 12/31/16).

Currently dental care is being provided by dentists who rotate into the facility every other Saturday and another dentist comes one time a month. When asked about the dental schedule and any possible delays in service, it was determined that no inmate with urgent dental needs had delayed care, all dental requests were triaged by nursing and received nurse sick call follow up and were placed on the provider schedule for treatment. If need was urgent referrals to community were made. This determination process was shared with the auditor and verified through medical record review and inmate interviews. The hygienist is on site two times per week. The HSA position is presently vacant, but being filled by RN Chisolm. There are as needed (PRN) staff that is available to cover

Open shifts. These PRN staff include: One RN, and three LPN's. Vision services are provided by an eye doctor who comes on site every other month or more frequently if there is need.

Medication pass is three times per day, at 4:00 a.m., 12:00 noon, and 8:00 p.m. Diabetic pill call is at 3:30 a.m. and 2:30 p.m. Diabetic snack bags are utilized. The dispensing pill window is located in the main facility hallway across from the dining hall. Security staff is stationed in the hallway to serve medication call.

Located in this hallway were large white, clearly labeled boxes where requests for health services are placed, mental health requests, outgoing mail, maintenance requests, and grievances. Requests for medical services are collected and triaged daily. Sick call schedules are created and all inmates who requested are seen within seventy two hours of request. Sick call is performed daily.

The clinic area contained a waiting area with chairs, offender restroom, security station, medical records room, infection control office, provider office/exam room, nursing administrator office, pharmacy room, dental suite, and large exam room. ADOC charges a co-payment of \$3.00 per medical encounter for inmate initiated requests. There is no co-pay for medications, mental health, dental or vision services. Inmates are not denied evaluation and treatment based on inability to pay the fee. There is no co-payment for emergent care or chronic clinic care. Tele-medicine equipment is used for routine mental health follow up and medication management by connecting to a psychiatrist at another location.

The facility nurse is present with the inmate for these visits and consents are obtained and in the inmate medical record. Mobile radiology vendor serves the facility routinely one time per week and more frequently if needed.

Emergency equipment and life-saving medications are located in a locked bag on the gurney, as is the AED. These are logged and checked each shift.

It should be noted there was an inmate death during the audit. On review of the facility reports and the medical record, it is the medical auditor's belief staff responded timely and appropriately. The inmate was known to medical, receiving daily medical contact, and had a diagnosis of cancer with documented refusals of various treatments. On the day of death, the patient was taken to medical, received treatment, showed no improvement; the provider was notified, additional treatments given, EMS notified and the inmate transferred out to community via ambulance. All events were within a thirty (30) minute time span.

The facility has a Keep On Person (KOP) medication program for those inmates who are approved by the medical director and the facility head. The program is for routine chronic care medications. No controlled or medications of abuse are permitted in the program. Medications are provided in patient specific labeled blister packages of 30 day supply. If not KOP, these meds are kept in a secure medication cart. All medications, sharps, tools, chemical inventories and counts in the clinic areas were correct when performed and log books examined. Lab Corp is used for processing laboratory samples. First aid kits are located in the control centers and out buildings.

Medical diet orders are sent in writing to the kitchen supervisor who logs and places them in a notebook. These orders include type of diet and duration of diet. Most common was diabetic with 20 orders. The dietician approves a four week menu cycle and is at the facility quarterly. A sample of each meal is frozen and kept for three days.

Restrictive housing medical and mental health rounds and services are logged in large bound books kept at the security station. Various colors of ink are used to differentiate medical, mental health, security and others who visit the area. Inmate interviews in this housing area demonstrated all knew how to access care and reported affirmative for medical, mental health, medication visits.

During the audit several inmates expressed concern about medical services. These concerns were noted and additional review conducted. Medical records were reviewed and information provided back to the inmates by meeting with them, the HSA, and security.

Specific complaints were addressed and found to be actively in process with medical. For example: the inmate with dental concern was to be seen, the inmate who desired a MRI was found to be non-compliant with recommended first level therapy, the inmate who was not prescribed the medication he desired was being provided a chemically equivalent medication, and the inmate who reported a sore on his knee was referred for evaluation.

Inmate commissary includes over the counter (OTC) medications and preparations such as: acne treatment gel, lip balm, lotion, single allergy tablets, band-aids, foot powder, cough drops, IBU (two pack), Tums, multi-vitamins, hydrocortisone cream 0.5%, and 1% Tolfanate cream. Inmates may have canteen two times per week up to \$100 dollars. Order forms are completed and placed in the marked box in the hallway. Pick up is by unit on scheduled days. Medical staff has access to review inmate commissary purchases for use in managing and monitoring chronic care and health needs.

PREA posters and information were noted throughout the facility and near inmate telephones. When asked, all inmates indicated they felt safe at Delta Unit. Inmates did not fear or report concern related to potential retaliation regarding visiting with the auditors. Those in restrictive housing and special management knew how to access care, services and also reported feeling safe. There were appropriate numbers of shower heads, toilets, and sinks in housing areas. When randomly tested all areas provided warm water from the tap.

### **Recreation:**

Inmates in general population have access to a large outside exercise yard weather permitting. Total outdoor recreations space for this population is 68,500 square feet. Included are volleyball courts, a defined walking area, a horseshoe pit and a softball area. Recreational events during the winter season are domino, chess, checkers, basketball, handball, and ping-pong tournaments. During the summer, these events include basketball, softball, homerun derby, horseshoes, sack races, team relay races and over 50 tournaments. An enclosed gymnasium/enclosed pavilion also provides an area for fixed weights, basketball and handball courts. Single man recreation units are provided for inmates in the maximum security area.

Access to exercise is scheduled by barracks on every day of the week from 8:00 a. m. until 4:00 p. m, and extends until 7:30 p. m. under daylight savings time. Dayrooms and the covered gymnasium provide space for exercise in inclement weather.

Although there was damage to the gymnasium, it is still being used according to inmate interviews. Day rooms provide for board games such as domino, chess, checkers, and television. The facility's full time recreation supervisor recently accepted another job and the facility is in the process of filling the position.

All inmates interviewed, which included all housing areas, indicated they were allowed to exercise.

### **Religious Programming:**

Religious services are under the direction of a full-time religious leader with a Bachelor's Degree who is supervised by an ordained Chaplain. DRU has a designated chapel seating approximately fifty persons, with a baptismal, piano, religious library and a religious office. Larger gatherings are held in the visitation area which accommodates up to one hundred persons. Services are held throughout the week including regularly scheduled services for Jehovah's Witness, Victory Prison Ministry, Zion Temple, Seventh Day Adventist, Pentecostal, Jumu'ah Prayer, Principles and Applications for Life (PAL), and Bible Study Groups.

Free-world volunteers from various faiths conduct most services, with special services being conducted throughout the year as requested and approved. Services include Non-denominational, Faith Fellowship, Baptist, Church of God in Christ, Presbyterian, Methodist, Episcopal, Tateen classes, these Classes, and Bikers for Jesus.

Multiple members of the team met with the Chaplain. The religious calendar was filled with diverse and appropriate faith based activities which are posted in housing areas. The faith library was well stocked with a variety of books, magazines and pamphlets that represented a wide spectrum of faiths.

The Chaplaincy program hosts two revivals per year, one of which is the Bikers for Jesus Motorcycle Rodeo which is scheduled in spring from Friday evening through Sunday. The Chaplain oversees volunteer activities and also is involved in notifying families of illness and death.

### **Offender Work Programs:**

One of the most impressive aspects of the Delta Regional Unit was the large percentage of inmates who have jobs at DRU. Inmates are afforded an opportunity to learn saleable skills and also to provide a service to the unit and/or the community.

Jobs in regional maintenance provide a work force that operates in surrounding communities and counties by clearing ditches, cleaning over grown cemeteries, picking up trash on highways and after events, and demolishing buildings. These crews are highly praised and cherished by these communities for the manpower they provide. Inmates also benefit from exercise and meals provided on site. Jobs also include Utility/Landscape, Maintenance (Inside/Outside/Lawn), Horse barn, JCC Garage, Domestic, Food Service, Laundry, Inside Utility, Administrative Porters, Barber Shop, Librarian, Auto Mechanic/Body Work, Industrial Janitorial and Supply, Pre-release, SATP Program, Residential Program Unit, Mental Health, Pen Store, and Security field.

A report provided indicated only 55 inmates were unassigned and 91% are employed which includes inmates newly transferred to the facility. Throughout the three day audit, team members observed inmates proceeding to and from work and all seemed to feel purposeful, in a structured environment that they praised.

Inmates who were in general population barracks were typically there only due to late work schedules. However, work does not take priority over education, but both are balanced and made possible by flexible schedules.

### **Academic and Vocational Education:**

Delta Regional education program is accredited by the Correctional Education Association for the period of July 1, 2015 to June 30, 2018. The school is located in a separate building and contains staff and inmate restrooms, a break room, offices; dedicated computer lab with 21 stations consists of a full time principal and four full time certified teachers. All grades and levels are taught from kindergarten through twelfth grade.

All inmates are assessed and placed into classes usually at grade levels of K through 3rd, 4th through 6th, 7th through 9th and 10th through 12th. College level correspondence courses are available for qualified and recommended students. TABE testing is conducted three times per year. It was reported on the day of the audit there were 180 students with 31 currently enrolled in GED programming. Students with special needs are identified by teachers for specialized instruction. Seven inmate tutors are provided for such literacy tutoring.

There were 62 GED graduates from Delta Regional Unit in the 2014-2016 year, placing Delta Regional Unit as the 3rd highest to accomplish GED's in Arkansas Department of Corrections. This educational program which serves all inmates is to be commended for its broad reach and high percentage of GED's for a facility with an average of 600 inmates. DRU maintains focus on education for all inmates as a priority and also provides them work opportunities through flexible daily schedules.

### **Social Services:**

Two Mental Health advisors provide counseling and therapy in accordance with accepted clinical practice under the standards identified by the American Psychological Association. A Department Psychiatrist/Psychologist is accessible when needed. A wide variety of group counseling is offered, ranging from psycho-educational to insight oriented groups. Classes held in group counseling are Anger Management, Substance Abuse, Education, Stress Management, Communication Skills, Thinking Errors and Domestic Violence. Alcoholics Anonymous/Narcotics Anonymous meetings are also available to inmates which are provided by volunteers on Monday evenings at 6: 30 p.m.

Inmates may request to see a counselor or meet with faith based volunteers or the chaplain as described above.

Delta Regional Unit began working with Re-entry programs in September 2016. Through a partnership with University of Monticello at McGhee, classes were made available in hands on wage training. This class is a four week course that prepares inmates to transition into the free work world. Topics include how to get interviews, how to fill out applications, how to write a resume and where to go to find work.

The Re-entry program is a six month program that coaches inmates in life and social skills, addressing daily life and relationship skills, G.E.D., employment skills, attitude and self-awareness and improvement. Re-entry accountability coaching is conducted by the Chaplain with classes of twenty inmates. Upon completion of these programs, they receive certificates which are also documented in their inmate files. Inmates who are nearing release may be assigned to the Re-entry housing area and enjoy greater freedom and access to programs.

### **Library Services:**

The facility library is managed by the ADOC staff librarian who is responsible for multiple facilities. Inmate workers at DRU are trained and receive certificates in order to work in the facility library. Inmate workers are supervised by Captain Smith while on duty. The library consists of 6,070 books on the facility inventory and thirteen magazines. DRU participates in the ADOC intra-system library exchange program and is able to obtain desired books and rotate inventory. It is open seven days per week and accessible by location two days per week for three hour periods and a two hour period on Sundays.

The inmate law library consists of hard bound books including Arkansas West Law, resource manuals, and tree computer terminals. Inmates request copies of pages of manuals and work on the computer by scheduling time with the facility staff. The law library is closed on Saturday and Sunday. Inmates in segregation can either receive materials requested in writing, or may be allowed to access the library with an approved pass, one day per week.

The only oversight of the library/ two clerks assigned is by ADOC. Members of the visiting team observed the operation of the library and reviewed documentation of inmates' requests and the response given/date of response. As the library is not managed on site but is provided certified inmate workers who are overseen by ADOC, the applicable ACA standard was deemed not applicable. It was recommended that increased library oversight by trained staff would be of benefit.

**Visitation:**

The contact visitation room is adjacent to the main entrance hall. Visitors are pre-screened and entered into the bio-metric identification system if approved. All visitors including children over the age of twelve must provide a valid photo ID and be included on the inmate's approved visitor list. Upon arrival, they pass through the security desk where their identity is confirmed prior to entry.

The visitation room is very large with tables and chairs allowing for comfortable visits. It was immaculately clean and well designed for this function. There is an area for the provision of refreshments and snacks. It also has large windows and ample light as well as restrooms. Visitors leave belongings at the administrative entrance, where lockers are made available.

Contact visitation for inmates in general population is held on Saturday and Sunday from noon until 4:00 p. m. Class I inmates may visit every Saturday or Sunday; Class Two through Class Four inmates may visit for two hours every other Saturday or Sunday. Eight non-contact visitation stations provide inmates on punitive status non- contact visits for two hours, once per month. Inmates in Protective Custody have separate visitation from 7:30 a. m. until 11:30 a. m.

The inmate phone system is contracted with SECURUS. Inmates may purchase phone cards as well as receive funds that allow for phone calls.

**Laundry:**

Delta Regional Unit utilizes a central laundry where twenty inmates are currently assigned. Duties include sorting of clothes, washing, pressing and sewing torn clothing. Laundry is picked up, laundered and returned to the barracks daily. Linens are laundered weekly. Under the supervision of an officer, inmate laundry workers accomplish this large task for 625 inmates.

Inspection of the laundry and storeroom revealed a very clean, organized, and well documented area of operation. Chemicals were properly logged and inventory amounts matched the entries. MSDS books outlined chemicals utilized with an easy to locate index.

Inmates working in the laundry were knowledgeable and seemed pleased to be assigned there for work. One of the impressive observations was that inmates were given pressed uniforms for the upcoming Parole Board hearing and for visits on weekends.

**E. Examination of Records**

Following the facility tour, the team proceeded to the Warden’ conference room where they reviewed standards files throughout the three days of the audit. The visiting committee team reviewed all standards per their earlier assignments and reviewed documentation and conducted interviews as needed to establish compliance. The team formed consensus on all standards deemed non-applicable or non-compliant.

1. Litigation

The Delta Regional Unit did not have had any class action lawsuits, consent decrees or adverse judgments since the last audit cycle.

2. Significant Incidents/Outcome Measures

The Significant Incident Summary and the outcome measures regarding to health care services were reviewed with the entire visiting team. Both significant incident and health outcome measures were deemed appropriate to his size facility with all security risk levels. Although there were multiple inmate on inmate assaults with and without weapons, the weapons were determined to be shanks or man-made weapons produced within the facility rather than contraband.

Grievances were representative in numbers and it was confirmed through inmates that there is a fair process with final decisions are made by the warden. Similarly the disciplinary process was also considered fair by inmates. It was verified that many were reversed by the warden due to process/time errors. Inmates interviewed in disciplinary segregation reported that they were there because they violated rules and misbehaved. They also stated that there is recourse for any disagreement they had concerning disciplinary proceedings.

An impressive finding was that disciplinary actions are heard via videoconference from an off-site panel of four judges who are employed not by the facility but by Arkansas Department of Correction. This ensures that a decision is independent of the facility and local staff.

3. Departmental Visits

Additional visits were made to understand the full operations at DRU and to check on concerns from certain inmates. These included:

Human Resources Coordinator	Alicia Wilson
Training Supervisor	Lynn King
Grievance Coordinator	Lydia Godfrey
Disciplinary Officer	Gary Nulls
PREA Coordinator	Mr. Hurst
Classification	Ms. McFadden

Thorough interviews were conducted with each of these managers to document quality of life for both staff and inmates. HR Coordinator Alicia Wilson provided randomly selected personnel files which met all standards. The performance appraisal is thorough and provides for recourse if the employee disagrees. Promotional opportunities are openly posted and there is an established process for selecting the most qualified applicant. Employee assistance programs are in place and are available to staff with confidential services.

Training Supervisor Lynn King presented a very well organized training program whereby staff is monitored for compliance with both hours of training and courses required upon hiring and annually. One suggestion is to add a function for looking at individual staff members to verify hours and courses which could also create an alert. The policy on support staff training was in need of additional verbiage but was compliant upon further inspection of documentation.

The disciplinary process was reviewed. Upon review of recent violation reports and the decision reached, they were found to meet standards for timelines. Disciplinary reports are submitted by the end of the shift and typed in EOMIS. There is a disciplinary log as well and the report is reviewed by Major Bolden, Chief of Security, who approves it and sends it back with a signature it is approved. The case is heard within seven days not by the facility staff but by a court off site through teleconference. Mr. Null reported that many disciplinary reports do not proceed due to time line violations. This process adds objectivity that depersonalizes disciplinary action which is commended as a benefit to inmates and staff alike.

A specific case was reviewed with the PREA officer which was well documented. The inmate's complaint was investigated timely and was addressed per policy. It was also noted that PREA notices were affixed to walls throughout the facility including the housing units, medical and visitation.

Classification is another very important aspect of maintaining a secure facility. Inmates are fully classified prior to transfer into the facility but are also reclassified routinely per standards and after a sustained violation. There is flexibility within the classification policy to allow for a level lower classification when justified.

#### 4. Shifts

##### a. Day Shift

The audit team was present at the facility during the day shift from approximately 5:30 a. m. to 8:00 a. m. until at least 6:00 p. m. and on the second and third dates until 7:30 p. m. and 11:00 p. m. respectively.

All aspects of operation from 6:00 a. m. through 6:00 p. m. were observed including shift change meetings which were well organized to transfer information from one shift to another and to update officers on any change in operations or assignment.

b. Evening Shift

The team was present at the facility from the beginning of the second shift, beginning at 6:00 p. m. until 6:00 a. m. as members of the visiting committee were present until 7:30 p. m. on the second day of the audit and until 11:00 p. m. on the third day of the audit. Two visiting committee members were present for the 5:45 p. m. shift change meeting which served to update the second shift on any information requiring follow up and issues of operational importance. Both spoke to the officers in attendance. It was emphasized how important the night shift is in the overall security footprint of the facility and their role in keeping the facility ACA compliant. 20 officers were present along with their sergeant who acted as shift supervisor. Second shift staffs were observed performing their duties competently and as a team.

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

Standard #4-ACI-4135

The previous visiting team found this standard non-compliant due to the average space in the dayrooms computed at 17.45 square feet of space per offender, which does not meet the ACA standard requiring 35 square feet of unobstructed space per inmate. The Commission granted Delta Regional Unit a waiver on August 16, 2014 and was also granted a waiver in August 2011, 2008, and 2005. Delta Regional Unit last requested the waiver due to a rising number of inmates which they expected to reduce based on new laws aimed at curbing the State's prison population and costs. The law called for lowering sentencing guidelines for lower level offenses and expanded use of alternative sentencing programs such as probation. During the current audit, the visiting team confirmed that the facility currently meets this requirement based on added bed space in a building previously utilized for jail/detention inmates which now limits non-corrections use to four beds. Dayroom space was computed for the facility divided by the number of inmates in barracks housing which met the required average. Moreover, inmates in barracks are typically engaged in educational programs and work so that space actually averages higher.

## **G. Interviews**

### **1. Offender Interviews**

One hundred and thirty two inmates were interviewed by team members throughout the three day audit. Most of the inmates were highly complimentary of the facility and staff. They appreciated having work assignments and educational opportunities. There was a demonstrated respectfulness between inmates and staff; this was one of the most polite groups of inmates encountered by the Chairperson. One inmate praised the daily structure. Although inmates appear to move freely in a line through the hallway to the dining hall, there is clear policy that must be followed and is consistently required and followed. Quality of life for inmates appeared to be very good; every inmate interviewed indicated they had no fear of harm, and if they were fearful, would be readily assisted by staff. Similarly, inmates reported that they were afforded exercise as required and the visiting team observed many inmates enjoying the large outside recreational area on the second and third days of the audit. The quality of food was OK, they stated, especially if compared to other facilities. Medical and dental care were available to all according to the interviews, as was access to faith based services. Reading materials/access to the library and legal assistance was also available to all inmates regardless of their housing assignment. One of the most impressive interviews was with an inmate in disciplinary housing for recent infractions. He readily admitted he lost his temper and was guilty as charged in the violation report and was awaiting the completion of his penalty. He regarded the disciplinary process as fair despite his history of many violations. The overall impression was that the inmates are well treated and appreciate the professional staff and facility.

### **2. Staff Interviews**

Seventy-two employees were interviewed by team members throughout the three day audit. Staff repeatedly praised administration for their support. A female employee stated she had long years of service because she was provided excellent flexibility she needed to raise her family as a single mother. Employees described a very thorough training program which included on the job training before assuming security duties. A line staff member was very proud to have been selected as a trainer for this purpose; she beamed with enthusiasm about her role in training new recruits. New officers who were interviewed mentioned how excellent she was in helping them learn their job upon returning from the Academy. Staff composition- line staff and administration- was highly diverse in terms of sex, race and ethnicity. Discrimination and sexual harassment was unheard of and all employees felt would not be tolerated. They described a very open promotional process and fair selection based on best qualifications for the job. The impact of open administration, clear policies and good communication as well as support has very positively impacted morale creating a very good quality of life for staff.

## **H. Exit Discussion**

The exit interview was held as scheduled on March 9, 2017 at 11:45 a. m. with approximately sixty attendees representing all operational areas, and line staff as well as administrative staff. Director of Arkansas Department of Correction Wendy Kelley was present and acknowledged by the Warden as he opened the exit session. He stated that the audit team conducted a thorough audit that provided insight and expertise that would help strengthen the facility. Chairperson Lindsey thanked the Warden and his staff for their great hospitality and accommodation. Special thanks were due to Sandra Kennedy Regional ACA Manager and facility ACA coordinator Pam Burke. Ms. Kennedy provided transportation to the team throughout the audit and both were commended for the organized files that were easy to review. Each of the auditors provided a review of the standards to which they were assigned and their findings. All three auditors complimented the cleanliness of the facility, the teamwork apparent in all areas of operation, and the competence and dedication of staff.

Chairperson Lindsey stated that virtually every area of the facility was visited by the team and representative staff files were reviewed to determine the operational practices in place. Delta Regional Unit is a facility with highly trained staff that comfortable in performing their duties. Morale was very high as evident by the tenure of most staff which typically exceeded ten years. Staff felt supported by line and supervisory staff as they performed their duties. Teamwork was evident throughout the facility thanks to strong leadership and management staff that works closely with all levels of staff.

Many practices were observed worthy of recognition and replication. Delta Regional Unit has been distinguished as the third highest facility to accomplish GED diplomas in the State of Arkansas. This accomplishment reflects their commitment to evaluate every inmate without a high school diploma/equivalency for improving their educational level.

A related impressive finding is that roughly 91% of inmates also have a job which helps the inmate, the facility and the community. There are diverse jobs available and classification works hard to ensure a fair process for inmates to be allowed to work. Another impressive practice is “main line” whereby inmates have access to administrative staff who are posted and available to discuss any concerns without the inmate having to go through the chain of command.

Inmate interviews reflected that they felt absolutely safe and that they would receive help from staff if they had safety concerns. They also indicated they felt respected by staff and felt fortunate to be serving their sentences in this facility. Another practice worthy of mention is that there is great flexibility in allowing inmates to act as trustees if they proved themselves worthy through behavior, even if their offenses were serious or their sentences were lengthy. Most impressive, however, was the staff: they were amazing in their dedication to duty and enthusiasm for their roles in helping Delta Regional Unit shine. She stated this was a truly impressive audit that was a pleasure for the visiting team to conduct.

The chairperson cited the findings of the visiting team as 100% compliance with both mandatory and non-mandatory standards. She noted that these findings are recommendations which will be included in a formal report sent to the Commission on accreditation for their final decision as to compliance. She encouraged the staff to continue this excellent effort to accomplish ever better outcomes.

The meeting closed with Warden Golden who thanked the auditors and praised his staff for their accomplishment. Director Kelley also commended the staff for the very positive audit. Compliance does not happen without dedicated efforts every day. The staff responded with a memorable cheer. The closing session concluded at roughly 12:25 p.m.

COMMISSION ON ACCREDITATION FOR CORRECTIONS  
AND THE  
AMERICAN CORRECTIONAL ASSOCIATION

<b>COMPLIANCE TALLY</b>
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Manual Type	Adult Correctional Institution, 4th Edition	
Supplement	2014 Standards Supplement	
Facility/Program	Delta Regional Unit Arkansas Department of Corrections	
Audit Dates	March 7, 2017-March 9, 2017	
Auditor(s)	Susan Lindsey, Chairperson, Michael David, ACA Auditor and Anne Cybulski-Sandlian, Medical Auditor	
	<b>MANDATORY</b>	<b>NON-MANDATORY</b>
Number of Standards in Manual	58	468
Number Not Applicable	7	45
Number Applicable	51	423
Number Non-Compliance	0	0
Number in Compliance	51	423
Percentage (%) of Compliance	100%	100%
	<ul style="list-style-type: none"> <li>● Number of Standards minus Number of Not Applicable equals Number Applicable</li> <li>● Number Applicable minus Number Non-Compliance equals Number Compliance</li> <li>● Number Compliance divided by Number Applicable equals Percentage of Compliance</li> </ul>	

**COMMISSION ON ACCREDITATION FOR CORRECTIONS**  
**STANDARDS COMPLIANCE REACCREDITATION AUDIT**

Arkansas Department of Corrections  
Delta Regional Unit  
Dermott, Arkansas

March 7-9, 2017

Visiting Committee Findings

Mandatory Standards

Not Applicable

**Standard # 4-ACI- 4353**

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

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

FINDINGS:

Delta Regional Unit does not house female inmates.

**Standard # 4-ACI- 4362**

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

INQUIRY INTO:

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

OBSERVATION OF THE FOLLOWING:

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

MEDICAL DISPOSITION OF THE OFFENDER:

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

OFFENDERS, WHO ARE UNCONSCIOUS, SEMICONSCIOUS, BLEEDING, OR OTHERWISE OBVIOUSLY IN NEED OF IMMEDIATE MEDICAL ATTENTION, ARE REFERRED. WHEN THEY ARE REFERRED TO AN EMERGENCY DEPARTMENT, THEIR ADMISSION OR RETURN TO THE FACILITY IS PREDICATED ON WRITTEN MEDICAL CLEARANCE. WHEN SCREENING IS CONDUCTED BY TRAINED CUSTODY STAFF, PROCEDURES WILL REQUIRE A SUBSEQUENT REVIEW OF POSITIVE FINDINGS BY THE LICENSED HEALTH CARE STAFF. WRITTEN PROCEDURES AND SCREENING PROTOCOLS ARE ESTABLISHED BY THE RESPONSIBLE PHYSICIAN IN COOPERATION WITH THE FACILITY MANAGER.

INMATES CONFINED WITHIN A CORRECTIONAL COMPLEX WITH CONSOLIDATED MEDICAL SERVICES DO NOT REQUIRE HEALTH SCREENING FOR INTRA-SYSTEM TRANSFERS.

FINDINGS:

Intakes are not conducted at Delta Regional Unit; they are conducted at the Ouachita River Correctional Unit.

**Standard # 4-ACI- 4365**

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

WITHIN FOURTEEN DAYS AFTER ARRIVAL AT THE FACILITY:

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

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

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

ASSIGNMENT, AND PROGRAM PARTICIPATION

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

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

INTERPRETATION JANUARY 2004. THE CRITERION FOR TESTING FOR VENEREAL DISEASES IS AT THE DISCRETION OF THE AGENCY'S/FACILITY'S HEALTH AUTHORITY.

FINDINGS:

Inmates all enter Delta Regional Unit as Intra-system transfers.

**Standard # 4-ACI-4371**

ALL INTERSYSTEM OFFENDER TRANSFERS WILL UNDERGO A MENTAL HEALTH APPRAISAL BY A QUALIFIED MENTAL HEALTH PROFESSIONAL WITHIN FOURTEEN DAYS OF ADMISSION TO A FACILITY. IF THERE IS DOCUMENTED EVIDENCE OF A MENTAL HEALTH APPRAISAL WITHIN THE PREVIOUS NINETY 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 DRUG AND ALCOHOL TREATMENT

- REVIEW OF EDUCATION HISTORY
- REVIEW OF HISTORY OF SEXUAL ABUSE-VICTIMIZATION AND PREDATORY BEHAVIOR
- ASSESSMENT OF CURRENT MENTAL STATUS AND CONDITION
- 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 ABUSE 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:**

There are no intersystem transfers into this facility; all are intra system transfers.

**Standard # 4-ACI-4376**

DETOXIFICATION IS DONE ONLY UNDER MEDICAL SUPERVISION IN ACCORDANCE WITH LOCAL, STATE, AND FEDERAL LAWS. DETOXIFICATION FROM ALCOHOL, OPIATES, HYPNOTICS, OTHER STIMULANTS, AND SEDATIVE HYPNOTIC DRUGS IS CONDUCTED UNDER MEDICAL SUPERVISION WHEN PERFORMED AT THE FACILITY OR IS CONDUCTED IN A HOSPITAL OR COMMUNITY DETOXIFICATION CENTER. SPECIFIC GUIDELINES ARE FOLLOWED FOR THE TREATMENT AND OBSERVATION OF INDIVIDUALS MANIFESTING MILD OR MODERATE SYMPTOMS OF INTOXICATION OR WITHDRAWAL FROM ALCOHOL AND OTHER DRUGS.

**FINDINGS:**

Detoxification is not conducted at this facility.

**Standard # 4-ACI- 4401**

THE INVOLUNTARY ADMINISTRATION OF PSYCHOTROPIC MEDICATION(S) TO AN OFFENDER IS GOVERNED BY APPLICABLE LAWS AND REGULATIONS OF THE JURISDICTION. WHEN ADMINISTERED, THE FOLLOWING CONDITIONS MUST BE MET:

- AUTHORIZATION IS BY A PHYSICIAN WHO SPECIFIES THE DURATION OF THERAPY
- LESS RESTRICTIVE INTERVENTION OPTIONS HAVE BEEN EXERCISED WITHOUT SUCCESS AS DETERMINED BY THE PHYSICIAN OR PSYCHIATRIST
- DETAILS ARE SPECIFIED ABOUT WHY, WHEN, WHERE, AND HOW THE MEDICATION IS TO BE ADMINISTERED
- MONITORING OCCURS FOR ADVERSE REACTIONS AND SIDE EFFECTS
- TREATMENT PLAN GOALS ARE PREPARED FOR LESS RESTRICTIVE TREATMENT ALTERNATIVES AS SOON AS POSSIBLE

**FINDINGS:**

There are no forced psychotropic medications used at this facility. Inmates in need would be placed in an appropriate facility

**Standard # 4-ACI-4402**

THE USE OF OFFENDERS FOR MEDICAL, PHARMACEUTICAL, OR COSMETIC EXPERIMENTS IS PROHIBITED. THIS DOES NOT PRECLUDE OFFENDER PARTICIPATION IN CLINICAL TRIALS THAT ARE APPROVED BY AN INSTITUTIONAL REVIEW BOARD BASED ON HIS/HER NEED FOR A SPECIFIC MEDICAL INTERVENTION. INSTITUTIONS ELECTING TO PERFORM RESEARCH WILL BE IN COMPLIANCE WITH ALL STATE AND FEDERAL GUIDELINES.

**FINDINGS:**

No experiments or research is conducted on inmates at the Delta Regional Unit.

**COMMISSION ON ACCREDITATION FOR CORRECTIONS**

**STANDARDS COMPLIANCE REACCREDITATION AUDIT**

Arkansas Department of Corrections  
Delta Regional Unit  
Dermott, Arkansas

March 7-9, 2017

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

**Standard #4-ACI-4057**

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT ALL PERSONNEL ARE SELECTED, RETAINED, AND PROMOTED ON THE BASIS OF MERIT AND SPECIFIED QUALIFICATIONS. NEW EMPLOYEES RECEIVE CREDIT FOR THEIR PRIOR TRAINING.

FINDINGS:

ADOC (and DCU) employees are not covered by merit systems, civil service or Union contracts.

**Standard #4-ACI-4059 F**

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

FINDINGS:

ADOC (and DCU) employees are not covered by merit systems, civil service or Union contracts.

**Standard #4-ACI-4128**

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

FINDINGS:

Delta Regional Unit was not constructed after Jan. 1, 1990.

**Standard #4-ACI-4137-1**

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

FINDINGS:

Delta Regional Unit was not built after June 2014

**Standard #4-ACI-4139-1**

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

FINDINGS:

Delta Regional Unit was not built after June 2014

**Standard #4-ACI-4143**

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

FINDINGS:

Inmates who cannot perform basic life functions are not housed at Delta Regional Unit.

**Standard #4-ACI-4144**

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

FINDINGS:

Delta Regional Unit does not house inmates whose disabilities require a private environment for self-care. Inmates having these needs are housed at ORCU.

**Standard #4-ACI-4147-1**

(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:

Delta Regional Unit has had no renovation, addition or new construction after June 1, 2008.

**Standard #4- ACI- 4147-2**

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

FINDINGS:

Delta Regional Unit has had no renovation, addition or new construction after June 1, 2008.

**Standard #4-ACI-4149**

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

FINDINGS:

Delta Regional Unit was not constructed after Jan 1, 1990.

**Standard #4-ACI-4208**

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

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

FINDINGS:

Delta Regional Unit does not have a canine unit.

**Standard #4-ACI-4209**

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

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

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

FINDINGS:

Delta Regional Unit does not have a canine unit.

**Standard #4-ACI-4210**

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

FINDINGS:

Delta Regional Unit does not have a canine unit.

**Standard #4-ACI-4278**

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

FINDINGS:

Delta Regional Unit does not house females.

**Standard #4-ACI-4285**

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

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

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

FINDINGS:

Delta Regional Unit is not a reception center for new admissions.

**Standard #4-ACI-4286**

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

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

FINDINGS:

Delta Regional Unit is not a reception center for new admissions.

**Standard #4-ACI-4287**

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

FINDINGS:

Delta Regional Unit is not a reception center for new admissions.

**Standard #4-ACI-4307**

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

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

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

FINDINGS:

Delta Regional Unit does not house youthful offenders.

**Standard #4-ACI-4308**

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

FINDINGS:

Delta Regional Unit does not house youthful offenders.

**Standard #4-ACI-4309**

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

FINDINGS:

Delta Regional Unit does not house youthful offenders.

**Standard #4-ACI-4310**

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

FINDINGS:

Delta Regional Unit does not house youthful offenders.

**Standard #4-ACI-4311**

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT YOUTHFUL OFFENDERS IN THE SPECIALIZED UNIT FOR YOUTHFUL OFFENDERS HAVE NO MORE THAN INCIDENTAL SIGHT OR SOUND CONTACT WITH ADULT OFFENDERS FROM OUTSIDE THE UNIT IN LIVING, PROGRAM, DINING, OR OTHER COMMON AREAS OF THE FACILITY. ANY OTHER SIGHT OR SOUND CONTACT IS MINIMIZED, BRIEF, AND IN CONFORMANCE WITH APPLICABLE LEGAL REQUIREMENTS.

FINDINGS:

Delta Regional Unit does not house youthful offenders.

**Standard #4-ACI-4312**

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

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

FINDINGS:

Delta Regional Unit does not house youthful offenders.

**Standard #4-ACI-4352**

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

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

FINDINGS:

Delta Regional Unit does not have an infirmary.

**Standard #4-ACI-4353-1**

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

FINDINGS:

Delta Regional Unit does not house females.

**Standard #4-ACI-4363-1**

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR EARLY IDENTIFICATION AND TREATMENT OF OFFENDERS WITH ALCOHOL AND DRUG ABUSE PROBLEMS THROUGH A STANDARDIZED BATTERY ASSESSMENT. THE BATTERY SHALL BE DOCUMENTED AND INCLUDE AT A MINIMUM THE FOLLOWING:

- SCREENING AND SORTING
- CLINICAL ASSESSMENT AND REASSESSMENT

- MEDICAL ASSESSMENT FOR APPROPRIATE DRUG AND ALCOHOL PROGRAM ASSIGNMENT TO THE NEEDS OF THE INDIVIDUAL INMATES
- REFERRAL

FINDINGS:

Delta Regional Unit does not assess inmates for alcohol/substance abuse problems as this is a function of the reception/intake unit in another ADOC facility.

**Standard #4-ACI-4364**

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:

No in-transit inmates are housed at Delta Regional Unit.

**Standard #4-ACI-4377**

OFFENDERS HAVE ACCESS TO A CHEMICAL DEPENDENCY TREATMENT PROGRAM. WHEN A CHEMICAL DEPENDENCY PROGRAM EXISTS, THE CLINICAL MANAGEMENT OF CHEMICALLY DEPENDENT OFFENDERS INCLUDES, AT A MINIMUM, THE FOLLOWING:

- A STANDARDIZED DIAGNOSTIC NEEDS ASSESSMENT ADMINISTERED TO DETERMINE THE EXTENT OF USE, ABUSE, DEPENDENCY, AND/OR CO-DEPENDENCY
- AN INDIVIDUALIZED TREATMENT PLAN DEVELOPED AND IMPLEMENTED BY A MULTI DISCIPLINARY CLINICAL TEAM THAT INCLUDES MEDICAL, MENTAL HEALTH, AND SUBSTANCE ABUSE PROFESSIONALS
- PRE-RELEASE RELAPSE-PREVENTION EDUCATION, INCLUDING RISK MANAGEMENT
- THE OFFENDER SHALL BE INVOLVED IN AFTERCARE DISCHARGE PLANS

FINDINGS:

Delta Regional Unit does not offer a drug treatment program; inmates required to receive treatment are transferred to units with drug treatment programs.

**Standard #4-ACI-4383**

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

FINDINGS:

There are full-time qualified health trained personnel at this facility.

**Standard #4-ACI-4391**

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

FINDINGS:

Volunteers are not used in the delivery of health care services at Delta Regional Unit.

**Standard #4-ACI-4392**

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

FINDINGS:

No medical residents, interns, or students are used in the delivery of health care services at DRU.

**Standard #4-ACI-4393**

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

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

OFFENDERS ARE NOT TO BE USED FOR THE FOLLOWING DUTIES:

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

FINDINGS:

Offenders are not used to perform familial duties.

**Standard #4-ACI-4417**

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

FINDINGS:

There is neither a medical housing unit nor an infirmary at Delta Regional Unit.

**Standard #4-ACI-4418**

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

FINDINGS:

Delta Regional Unit does not have any medical beds or an infirmary.

**Standard #4-ACI-4419**

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

FINDINGS:

There are no medical beds in the Delta Regional Unit.

**Standard #4-ACI-4436**

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

FINDINGS:

There are no females housed at this facility.

**Standard #4-ACI-4437**

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

FINDINGS:

Delta Regional Unit does not provide substance programs; inmates in need of these services are transferred.

**Standard #4-ACI-4438**

WHERE A DRUG TREATMENT PROGRAM EXISTS, WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT THE ALCOHOL AND DRUG ABUSE TREATMENT PROGRAM HAS A WRITTEN TREATMENT PHILOSOPHY WITHIN THE CONTEXT OF THE TOTAL CORRECTIONS SYSTEM, AS WELL AS GOALS AND MEASURABLE OBJECTIVES.

FINDINGS:

There are neither substance abuse programs nor a therapeutic community program at DRU.

**Standard #4-ACI-4439**

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

- INMATE DIAGNOSIS
- IDENTIFIED PROBLEM AREAS
- INDIVIDUAL TREATMENT OBJECTIVES
- TREATMENT GOALS

- COUNSELING NEEDS
- DRUG EDUCATION PLAN
- RELAPSE PREVENTION AND MANAGEMENT
- CULTURALLY SENSITIVE TREATMENT OBJECTIVES, AS APPROPRIATE
- THE PROVISION OF SELF-HELP GROUPS AS AN ADJUNCT TO TREATMENT
- PRERELEASE AND TRANSITIONAL SERVICE NEEDS
- COORDINATION EFFORTS WITHIN COMMUNITY SUPERVISION AND TREATMENT STAFF DURING THE PRERELEASE PHASE TO ENSURE A CONTINUUM OF SUPERVISION AND TREATMENT

FINDINGS:

There are no drug treatment programs at Delta Regional Unit; inmates in need of these services are transferred to another facility.

**Standard #4-ACI-4440**

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

FINDINGS:

There are neither substance abuse programs nor a therapeutic community operated at Delta Regional Unit.

**Standard #4-ACI-4441**

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

FINDINGS:

There are neither substance abuse programs nor a therapeutic community operated at Delta Regional Unit.

**Standard #4-ACI-4461-1**

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

FINDINGS:

Per Act 1262 of 1997, the ADOC is not responsible for Restitution which is addressed in Arkansas Code Annotated 5-4-205, ACT 817-1997, Arkansas Crime Victims Reparations Act.

**Standard #4-ACI-4462**

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

FINDINGS:

There are no private industries operating on the grounds of Delta Regional Unit.

**Standard #4-ACI-4463**

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

FINDINGS:

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

**Standard #4-ACI-4506**

THE INSTITUTION HAS A QUALIFIED STAFF PERSON WHO COORDINATES AND SUPERVISES LIBRARY SERVICES.

**FINDINGS:**

The library at this facility is supervised by an Arkansas Department of Corrections librarian who trains inmate workers in the library at Delta Regional Unit. They manage the daily operation of the library and are issued certificates for their duties.

**Significant Incident Summary**

This Summary is required to be provided to the chair of your audit team upon their arrival. The information contained on this form will also be incorporated into the final report. It should contain data for the last 12 months; indicate those months in the boxes provided

Facility: Delta Regional Unit

Year: 2016

Incidents		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec
Assault:	Types (sexual** Physical, etc.)	<b>PH</b>	PH	PH	PH	PH	PH	PH	<b>PH</b>	PH	PH	PH	PH
Offenders /	With Weapon	<b>0</b>	0	0	0	0	0	0	<b>0</b>	0	0	0	0
Offenders*	Without Weapon	<b>9</b>	8	8	11	10	3	9	<b>7</b>	6	10	8	5
Assault:	Types (sexual** Physical, etc.)	<b>PH</b>	PH	PH	PH	PH	PH	PH	<b>PH</b>	PH	PH	PH	PH
Offenders /	With Weapon	<b>0</b>	0	0	0	0	0	0	<b>0</b>	0	0	0	0
Staff	Without Weapon	<b>1</b>	0	2	2	1	3	1	<b>0</b>	1	1	0	1
Number of Forced Moves Used ***		<b>1</b>	0	0	1	1	0	1	<b>0</b>	1	0	2	3
Disturbances ****		<b>0</b>	0	0	0	1		0	0	0	0	0	0
Number of Times Chemical Agents Used		<b>2</b>	1	0	2	1	2	0	0	1	0	2	3
Number of Times Special Reaction Team Used		<b>0</b>	0	0	0	1	0	0	0	0	0	0	0
Four/Five Point Restraints	Number	<b>0</b>	0	0	0	0	0	0	0	0	0	0	0
	Type (chair ,bed, board, etc.)												
Offender Medical Referrals as a result of injuries Sustained		<b>0</b>	0	0	0	0	0	0	0	0	0	0	0
Escapes	Attempted	<b>0</b>	0	0	0	0	0	0	0	0	0	0	0
	Actual	<b>0</b>	0	0	0	0	0	0	0	0	0	0	0
Substantiated Grievances	Reason (medical, food, religious, etc	<b>M</b>	0	0	.0	0	0	0	0	0	0	0	0
(resolved in favor of offender)	Number	<b>2</b>	0	0	0	0	0	0	0	0	0	0	0
Deaths	Reason (violent, Illness, suicide, natural	<b>0</b>	NA	0	0	0	NA	0	0	0	0	0	0
	Number	<b>0</b>	1	0	0	0	1	0	0	0	0	0	0

\* Any physical contact that involves two or more offenders.

\*\* Oral , anal or gaval copulation involving at least two parties, whether it is consenting or non-consenting.

\*\*\* Routine transportation of offenders is not considered "forced".

\*\*\*\* Any incident that involves four or more offenders. Including gang fights, organized multiple hunger strikes, work stoppage hostage, major fires, or other large scale incidents.

<b>Standard</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Calculated O.M.</b>
<b>1A</b>	(1)	Number of offenders diagnosed with a MRSA infection within the past twelve (12) months.	1	
	divided by	The average daily population.	589	.002
	(2)	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months.	0	
	divided by	Average daily population.	589	0
	(3)	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months.	0	
	divided by	Number of offenders administered tests for TB infection in the past twelve (12) months as part of periodic or clinically-based testing, but not intake screening.	494	0
	(4)	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months.	7	
	divided by	Number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	42	.17
	(5)	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time.	58	
	divided by	Total offender population at that time.	588	.097
	(6)	Number of offenders diagnosed with HIV infection at a given point in time.	6	
	divided by	Total offender population at that time.	592	.01
	(7)	Number of offenders with HIV infection who are being treated with highly active antiretroviral treatment (HAART) at a given point in time.	6	
	divided by	Total number of offenders diagnosed with HIV infection at that time.	581	.01

	(8)	Number of selected offenders with HIV infection at a given point in time who have been on antiretroviral therapy for at least six months with a viral load of less than 50 cps/ml.	7	
	divided by	Total number of treated offenders with HIV infection that were reviewed.	8	.875
	(9)	Number of offenders diagnosed with an Axis I disorder (excluding sole diagnosis of substance abuse) at a given point in time.	44	
	divided by	Total offender population at that time.	588	.075
	(10)	Number of offender admissions to off-site hospitals in the past twelve (12) months.	8	
	divided by	Average daily population.	589	.014
	(11)	Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months.	34	
	divided by	Average daily population in the past twelve (12) months.	589	.058
	(12)	Number of offender specialty consults completed during the past twelve (12) months.	178	
	divided by	Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.	199	.894
	(13)	Number of selected hypertensive offenders at a given point in time with a B/P reading > 140 mmHg/ >90 mm Hg	8	
	divided by	Total number of offenders with hypertension who were reviewed.	30	.267
	(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.	3	
	divided by	Total number of diabetic offenders who were reviewed.	10	.3
	(15)	The number of completed dental treatment plans within the past twelve (12) months.	0	
	divided by	The average daily population during the reporting period.	589	0
<b>2A</b>	(1)	Number of health care <i>staff</i> with lapsed licensure or certification during a twelve (12) month period	0	

	divided by	Number of licensed or certified staff during a twelve (12) month period.	15	0
	(2)	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job.	3	
	divided by	Number of new health care staff during the twelve (12) month period.	3	1
	(3)	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months.	0	
	divided by	Number of employees.	15	0
	(4)	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past twelve (12) months.	0	
	divided by	Number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.	13	0
<b>3A</b>	(1)	Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months.	3	
	divided by	Number of evaluated offender grievances related to health care services in the past twelve (12) months.	44	.068
	(2)	Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period.	0	
	divided by	Number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.	0	0
	(3)	Number of adjudicated offender lawsuits related to the delivery of health care found in favor of the offender in the past twelve (12) months.	0	
	divided by	Number of offender adjudicated lawsuits related to healthcare delivery in the past twelve (12) months.	0	0
<b>4A</b>	(1)	Number of problems identified by quality assurance program that were corrected during a twelve (12) month period.	1	

	divided by	Number of problems identified by quality assurance program during a twelve (12) month period.	1	1
	(2)	Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.	0	
	(3)	Number of offender suicide attempts in the past twelve (12) months.	21	
	divided by	Average daily population.	589	.02
	(4)	Number of offender suicides in the past twelve (12) months.	0	
	divided by	Average daily population.	589	0
	(5)	Number of unexpected natural deaths in the past twelve (12) months.	1	
	divided by	Total number of deaths in the same reporting period.	1	1
	(6)	Number of serious medication errors in the past twelve (12) months.	0	
<b>5A</b>	<b>None</b>			
<b>6A</b>	<b>None</b>			
<b>7A</b>	<b>None</b>			
<b>7B</b>	<b>None</b>			
<b>7C</b>	<b>None</b>			