COMMISSION ON ACCREDITATION FOR CORRECTIONS

STANDARDS COMPLIANCE REACCREDITATION AUDIT

Arkansas Department of Corrections
Cummins Unit
Grady, Arkansas

May 1-3, 2018

VISITING COMMITTEE MEMBERS

Danny Hartline, Chairperson
ACA Auditor

Jody Smith
ACA Auditor

Bryan Hicks
ACA Auditor
A. Introduction

The audit of the Cummins Unit located in Grady, Arkansas was conducted on May 1-3, 2018, by the following team: Danny Hartline, Chairperson; Jody Smith, Member; and Bryan Hicks, Member.

B. Facility Demographics

Rated Capacity: 1850
Actual Population: 1649
Average Daily Population for the last 12 months: 1892
Average Length of Stay: 9 years 2 months
Security/Custody Level: Maximum - Minimum
Age Range of Offenders: 18 years-82 years
Gender: male
Full-Time Staff: 498
(50) Administrative (41) Support (10) Programs, (375) Security (22) Other

C. Facility Description

The Cummins Unit is located in Grady Arkansas which is 28 miles southeast of Pine Bluff, Arkansas off Highway 65 in Lincoln County.

In 1902 the state purchased the Cummins and Maple Grove Plantations consisting of 10,000 acres. In the same year, an additional 6,727 acres adjoining the plantations was purchased making the total number of acres 16,727 of what would be the Cummins State Farm. This remained the acreage until 2009 when the state purchased 1,060 adjoining acres and the bringing the total to 17,787 today. The facility sits on 42 acres and is enclosed by a secure perimeter (lethal fence). The buildings are made of concrete blocks (most buildings), pre-cast concrete (East Building), and metal (Laundry, 17 barracks, South Hall, Garment Factory, and Vinyl Bindery).

At full capacity the unit will house 1850, but is currently at approximately 1650. The units houses minimum, medium, and maximum security inmates.

The main compound consists of 21 barracks located on a hallway that runs east and west and includes our open population and restrictive housing area and with five buildings outside the central building.
The rest of the 17,745 acres consists of garden crops, row crops, a dairy, a swine department, chicken houses/egg processing, beef herd, cold storage, milk processing, feed mill, a dog kennel, outside maintenance, farm construction and 24 houses and 12 mobile homes are available for qualified staff. Sergeants and above may live on the compound in their own mobile homes if the permission has been granted after a request has been submitted.

The garden has five hot houses. It produced 2,289,060 pounds of vegetables in 2017. The 2017 harvest produced 142,971 bushels of soy beans, 184,087 bushels of rice, 37,923 bushels of wheat, 265,499 bushels of corn, and 26,970 bushels of oats. In addition to the row crops grown on the farm a cold storage (slaughter house) and milk processing plant provides beef, pork, and milk to all units in the Arkansas Department of Corrections. There were 1,150,390 pounds of meat processed and 289,810 gallons of milk processed for 2017. The Cummins Unit Farm has 1,360 pigs and 283 dairy cattle. There are five chicken houses. Currently we have approximately 140,000 chickens and however at different times of year and conditions can house as many as 200,000 plus. Egg production for 2017 was 25,362,908. The Cummins Farm also has approximately 2,000 cattle/dry herd, and 340 horses.

D. Pre-Audit Meeting

On April 30th, 2018 at approx. 8:30PM the team met at the Holiday Inn Express (2903 Pines Mall Drive, Pine Bluff, Arkansas) lobby to discuss the audit schedule and assignments.

The chairperson divided standards into the following groups:

Standards #4-4001 to 4169 to Danny Hartline, Chairman
Standards #4-4170 to 4343 to Jody Smith, Member
Standards #4-4344 to 4530 to Bryan Hicks, Member

E. The Audit Process

1. Transportation

On May 1, 2018, the team was escorted (by Sandra Kennedy, Internal Auditor/Agency Accreditation Manager) from the Holiday Inn Express to the Cummins Unit arriving at 7:50 a.m.

2. Entrance Interview

The team was met at the main entrance by Warden William Straughn who escorted the team to the Warden’s conference room.
The team was welcomed in the conference room by Warden William Straughn, Agency Accreditation Manager, Sandra Kennedy and Facility ACA Manager Mary Allen. The audit process and schedule was discussed.

The audit team proceeded to the Visiting Room for the formal entry meeting. The following persons were in attendance.

<table>
<thead>
<tr>
<th>Position</th>
<th>Name</th>
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<tbody>
<tr>
<td>Director</td>
<td>Wendy Kelley</td>
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<tr>
<td>Chief Deputy Director</td>
<td>Dale Reed</td>
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<tr>
<td>Deputy Director, Institutions</td>
<td>Dexter Payne</td>
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<tr>
<td>Deputy Dir, Programs/Medical/Accreditation</td>
<td>Rory Griffin</td>
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<tr>
<td>Assistant Director, Finance</td>
<td>Mark Cashion</td>
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<tr>
<td>Warden, Cummins Unit</td>
<td>William Straughn</td>
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<tr>
<td>Deputy Warden/Security, Cummins Unit</td>
<td>Christopher Budnik</td>
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<tr>
<td>Deputy Warden/Operations, Cummins Unit</td>
<td>Gary Musselwhite</td>
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<tr>
<td>Unit Accreditation Specialist</td>
<td>Mary Ann Allen</td>
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<tr>
<td>Internal Auditor/Agency Accreditation Manager</td>
<td>Sandra Kennedy</td>
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<tr>
<td>Agency Construction Manager</td>
<td>Chris Ashcraft</td>
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<tr>
<td>Key Control</td>
<td>Sergeant Christopher Jones</td>
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<tr>
<td>Maximum Security Supervisor</td>
<td>Captain Kenneth Starks</td>
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<tr>
<td>Clothing Room Supervisor</td>
<td>Sergeant Darren Dill</td>
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<tr>
<td>STG Coordinator</td>
<td>Sergeant Corey Haynie</td>
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<tr>
<td>Fire Safety Supervisor</td>
<td>Lieutenant Rosieanna Lee</td>
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<tr>
<td>Emergency Preparedness Coordinator</td>
<td>Lieutenant Merlin Fitzpatrick</td>
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<td>Utility Sergeant</td>
<td>Sergeant Orin Odom</td>
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<tr>
<td>Chief of Security</td>
<td>Major Clyde Daniel</td>
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<tr>
<td>Internal Auditor/Agency Accreditation Mgr</td>
<td>Sandra Kennedy</td>
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<tr>
<td>Agency Fire Safety Coordinator</td>
<td>Lieutenant Linda Gibson</td>
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<td>Unit Trainer</td>
<td>Steve Slaughter</td>
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<tr>
<td>Program Specialist</td>
<td>Chanda Dooms</td>
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<tr>
<td>School Principal</td>
<td>David Webb</td>
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<td>Maintenance Supervisor</td>
<td>Dean Shields</td>
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<tr>
<td>Utility</td>
<td>Lieutenant Dernitta Thomas</td>
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<tr>
<td>Visitation Clerk</td>
<td>Connie Cook</td>
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<tr>
<td>Rehab Program Supervisor</td>
<td>Jerry Moore</td>
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<tr>
<td>Disciplinary Supervisor</td>
<td>Sergeant Rose Jackson</td>
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<td>Records Supervisor</td>
<td>Gleenover Knight</td>
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<tr>
<td>Mail Room Supervisor</td>
<td>Tina Gibson</td>
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<tr>
<td>Health Services Administrator</td>
<td>Dana Haynes</td>
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<tr>
<td>Regional Manager, Correct Care Solutions</td>
<td>Kim Hofmann</td>
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<tr>
<td>Inmate Grievance Coordinator</td>
<td>Lola Elliot</td>
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<tr>
<td>Food Production Supervisor</td>
<td>Captain Angelika Smarjesse</td>
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<tr>
<td>Unit Training Supervisor</td>
<td>John Haynes</td>
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<tr>
<td>Business Manager</td>
<td>Tammy Allen</td>
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<tr>
<td>Classification/Population</td>
<td>Laura Cook</td>
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The audit team introduced themselves and provided brief descriptions of their experience, qualifications, correctional and auditing backgrounds. The team emphasized the goals of accreditation, which are to improve the efficiency and effectiveness of correctional systems throughout the United States. The team expressed the appreciation of the Association for the opportunity to be involved with the re-accreditation process of the Cummins Unit. The audit team expressed that they were aware that the facility staff had worked long and hard in preparation for this event and would endeavor to provide as fair and thorough audit as possible while holding them accountable to high standards. The audit schedule and procedures were discussed with Warden Straughn. Warden Straughn was asked about any problem areas the team should be made aware. Warden Straughn was asked if any inmate or employee had requested to speak with the auditors. Escorts were requested by the team to accompany them on the tour and subsequent visits to departments and note the number of inmates and the names and titles of employees with whom the auditors spoke. The Warden was advised that the audit team would meet with him each evening prior to its departure from the facility to discuss the progress of the audit up to that point, and any problems that were encountered. It was explained that the goal of the visiting team was to be as helpful and non-intrusive as possible while conducting the audit. The team members would visit as many departments and areas as possible and meet and speak with as many staff as possible in the time available. It was requested that when an audit team member paused to speak to inmates, to please step away so the conversation may remain private.

3. Facility Tour

The team toured the entire facility from 8:30 a.m. to 3:00 p.m. The following persons accompanied the team on the tour and responded to the team’s questions concerning facility operations:

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<td>Christopher Budnik</td>
</tr>
</tbody>
</table>

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Senior Chaplain                Jim Babcock
Farm Manager                   Ray Lenderman
ARO                            J.D. Rana
Garment Factory Supervisor     Debra Glover
ADON                           Lindsay Fortson
Farm Administrator             Davey Farabough
Grievance Officer              April Gibson
Human Resources Manager        Tabitha Whaley
Classification Officer/Restrictive Housing | Crystal Wood
Commissary                     Cindy Owen
Chief of Security/Field        Major Vernon Robertson
Inmate Property                Francis Ray
4. Conditions of Confinement/Quality of Life

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

Security:

The Cummins Unit has a secure perimeter; twelve foot interior perimeter fence, a twelve foot outer perimeter fence, and a lethal fence between the two surrounding the entire perimeter of the facility with multiple interior fencing inside the perimeter to restrict movement. There is a double layered razor wire deployed at the top of the interior and exterior fencing. There are a total of 218 cameras located in advantageous positions where offenders and staff can be observed and are monitored by the Central control post officer. They are recorded and videos are retained for 45 days. All known incidents are transferred to a secondary storage and retained as evidence. There are two exterior pedestrian/vehicle sally ports; one located on the east side; the primary use is for food trucks to the kitchen, all service and delivery vehicle traffic and incoming/outgoing prisoner transports. The other is on the North side; the primary use is for the main pedestrian entrance. The facility is patrolled by vehicular mobile patrol 24 hours a day with two 12 hour shifts and when the lethal fence is down or during times of low visibility such as inclement weather additional rovers are put on post. The Mobile Patrol Officer is armed with a 12 gauge shotgun and ten rounds. The Mobile Patrol Officer is normally on a 12 hour watch and is strategically posted based on the weather and visibility. The facility has five towers with overlapping fields of view that can be manned in emergencies with two towers manned full time at the facility entrance points. The facility is illuminated at night by high mast pole lights and lights affixed to the outside of the building.
There are 58 high mast pole lights located around the perimeter of the facility; 26 high mast pole lights illuminate inside the perimeter and recreation area, and nine high mast pole lights illuminate the parking lot area. Illumination at nighttime is adequate.

The East Building, known as Punitive housing has a capacity of housing 106 inmates including two quite cells. Inmates housed in this area are housed for disciplinary reasons. Inmates receive one hour per day for recreation, and are allowed to shower three times per week.

Barracks 14 and 16, known as Restrictive Housing, has a capacity of housing 183 inmates. Inmates housed in this area are housed for Administrative/Segregation. Inmates receive one hour per day for recreation, and are allowed to shower three times per week.

Security staffing is comprised of 2-12 hour shifts with approximately 49 total security staff per shift. There are 33 Mandatory Security posts. All staff personnel were professional and knowledgeable about their post and reviewed and signed their post orders daily prior to assuming their respective post. All staff personnel were observed as being fair, firm and impartial when conducting their duties.

Chemical Agents

All chemical agents are kept in the Armory, with a small inventory stored at Central Control for daily issuance to each security staff member. OC-MK-4 (COP) is logged out and issued to each security member prior to assuming post and then returned prior to departing. All chemical agents are properly labeled with the expiration dates. All riot control equipment is maintained and properly inventoried in the armory. Inventories were inspected with no discrepancies.

Entrance Procedures

At the entrance of the Cummins Unit property is an Officer post with a vehicle stop barrier; this Officer checks all incoming vehicles and personnel, ensuring they have proper identification and a need to drive into the facility parking area. When exiting the property, this Officer verifies the identity of the passengers and checks the vehicle to include searching the trunk space of the vehicles. The main entrance of the facility is a separate building outside of the main perimeter that has a back door that leads to the main pedestrian gate. The entrance building is adjacent to the parking area. The parking area is divided into day and night shift areas to ensure supervisors have the parking lot clear of vehicles. All persons wanting to enter the facility, including staff members, are identified by their staff badge or government issue identification card, they are required to empty their pockets, and are screened through a doorway metal detector.
Personal items and shoes are screened through an X-Ray machine prior to entry and all persons are pat searched for non-metallic contraband and/or required to pass the body scanner. Staff and Visitors are required to be logged in and out of the facility using a biometric verification system. No cell phones, Bluetooth enabled devices, or electronic devices are authorized. Only standard wristwatches are authorized. Once verified the person entering can proceed through the rear door of the entrance building, through pedestrian gates which are controlled and monitored by the tower. Once through the pedestrian gates there is a main entrance door to the administrative area, which has an Officer posted to verify and direct those that enter the area to the appropriate destination. There is a sally port located on the East side of the facility which is separate from the administrative spaces that is monitored by the Sally Port Tower with an Officer posted and has a Sergeant posted at the Sally Port as well.

All vehicles and individuals are searched and are required to have an identification card. On exiting the Sally Port the vehicles are physically checked by staff and a heartbeat monitor system is also used.

Shift Change

At shift change, a briefing is conducted with the officers where they go through a dress inspection and then then debriefing begins. The briefing includes all information on any occurrences that may have taken place on the previous shift. Policy and Procedures are read during these briefings to keep the officers up to date.

Offender Movement

Offender movement is controlled by a lay-in list that has the inmate’s names and locations listed that go to various calls such as school, doctor calls, parole and other various events. The calls are made for specific areas at specific times that are coordinated via radio or phone through central control, the shift supervisor, and the area supervisor. The inmates are searched entering and exiting living areas and program areas. Mass movements are scheduled events such as work calls, chow, recreation, is done by zones. The mass movement is controlled by building schedule that is approved by the Chief of Security and coordinate through control center, shift supervisor, and area supervisor. The movement in the facility is controlled through doorways and riot gates to maintain control of the inmate movement and limit access to other areas of the facility. In the main hallways, in key areas and exit/entrance doors there are metal detectors to search the group of inmates while in transit during these mass movements. Inmates in the Restrictive Housing area and Punitive areas are moved by two staff members and are restrained by leg irons and hand restraints. The Hallways are cleared and all other movement is stopped while moving inmates in restraints.
Key Control

Key Control is monitored by the Key Control Officer. Facility keys are secured, issued and controlled by the Key Control Officer. Keys are issued from the Armory and the Armory Officer serves as the Alternate Key Control Officer. The Key Control Officer performs daily key inventories. Spare keys, originals, back up key rings and exact sets are kept in the armory that is restricted to authorized staff personnel only.

Armory

The armory is located outside the facility’s secured area on the north side of the facility by the main entrance building. There is a clearing barrel outside the perimeter fence near the main entrance. The armory is secured by a fence and a steel door, there is a window inside the fence for issuing or receiving items; the armory is also secured by a solid steel interior door which is closed when items are not being received or issued. Entry into the armory is restricted by the use of an access roster. The Armory is also observed from the main armory tower.

Armory inventory includes; 32,800 rounds of .223 ammunition, 12,000 rounds of .40 H/P ammo, 1500 rounds of .40 training ammo, 12,465 12 gauge slug shotgun shells, 11,675 12 gauge buckshot shotgun shells, 2990 .308 ammo, 315 12 gauge Rubber Pellet shells, 165 12 gauge R/B fin stabilizer shells, 8 37mm T-21 OC muzzle blast, 18 37mm .32 cal. Stinger (short), 30 37mm foam baton, 18 37mm bean bag (short), 31 37mm rubber baton, 41 37mm 60 cal. Stinger, two smoke grenade, four cs pocket tactical grenade, six cs triple chase grenade, six cs riot control grenade, nine oc stinger grenade, 23 stinger rubber ball grenade, 17 flame-less tri-cambered grenade, 15 1.3% aerosol six ounce fog grenade, six 1.3% aerosol 1oz fog grenade, four 12 gauge launching cups, 20 gas masks one satellite phone, 222 leg irons, 256 handcuffs, 2499 flex cuffs, 9 M/4 AR15, 6 less lethal 12 gauge shot gun,18 12 gauge shot gun, 53 Glock .40 cal, 9 37mm, 1 .308. Weapons and ammunitions are secured in a weapons locker and locked boxes. Weapons are issued by the Armory Officer utilizing signed log sheets. Weapons and ammunitions are inventoried once a month. Staff is required to be trained and qualify in the use of weapons annually. Inventory and log sheets were checked with no discrepancies.

Tool Control

There are strict tool control procedures in place at the facility. Tools are located in the maintenance room, medical, Food Service kitchens. In these areas, the tools are in locked cabinets, in a locked building when not in use and have restricted access to these areas by use of manned sally ports. All tools are in a locked cage or cabinet and sensitive tools are again locked behind a cage or cabinet. All tools observed have shadow boards behind the tool. All tools were properly inventoried and utilized shadow boards or boxes with shadow placements.
Broken tools are reported by the department supervisors with the broken tool and appropriate paperwork. The issuance of tools is conducted by the tool Maintenance Officer or designee. Staff requesting to check out tools is required to show identification and fill out a logbook signing the tool in/out. All tools are labeled by etching the appropriate number on the tool. Tools were checked in all known locations, no discrepancies were found.

**Contraband/Searches**

It was evident that the facility does an excellent job in controlling contraband and conducting searches. Individual cells are arranged to allow for easy cell inspections and all offender personal belongings are in an orderly manner with the limited cell storage space. Offenders are pat searched prior to entering and exiting workplaces and there are door way metal detectors strategically placed throughout the facility.

The pods were clutter free, clean, and organized in a manner which allowed observation from staff enabling the ease of searches. Searches are conducted randomly daily as well as daily targeted searches. Complete shakedowns of the unit are conducted prior to all major holidays and are also conducted when the Training Academy or Dog Team arrives at the Unit. In additions in times of in-climate weather when field staff do not turn out work squads the facility is searched.

**Execution Chamber**

Inmates who are on death row, are kept three to five days prior to the execution in one of the quite cells in the Punitive Housing. During this time, the inmate is allowed visitation prior to his execution. The day of execution, the inmate receives a visit from spiritual advisors. When it is time for the execution, the inmate is taken to the Execution chamber. The inmate is placed on the table and hooked up the IV’s. There are visitors (up to nine random residents), attorneys, victim family members and three media reporters present. Once the inmate is ready for execution, the curtains are opened with everyone seated. The Director reads the order form the Governor’s office, then the execution begins. No one knows who is performing the execution except for the Director. Once the inmate has been executed, the Coroner is present to pronounce the inmate dead.

**Environmental Conditions:**

The Environmental conditions of the Cummins Unit are maintained within the scope of ACA requirements. The inmate living areas have sufficient number of windows to the outside and outside lighting is adequate throughout the facility. Light, noise and airflow conditions have been tested by a qualified environmental expert and all fall within approved ranges. Temperature ranges are within the comfort level in all areas of the facility. The facility operates as a “no tobacco” facility so there no issues with the air qualify.
The buildings were properly maintained. There is adequate shower, sink and lavatory facilities to meet the Arkansas Building code ratio requirements. Furnishings throughout the facility, including bedding in housing areas, are in good condition and are properly fire-rated. The inmate shower areas seem to be in compliance with PREA standards. The facility was clean and orderly.

Note: Some of the cells at the Cummins Unit do not meet the ACA unencumbered space and total square feet requirements. See notes on Non-Compliant.

**Sanitation:**

The facility was very clean and well maintained in all areas. Inmate workers are responsible, under the direction on staff, for the cleaning throughout the facility. Inspections by staff ensure the areas are maintained at a high level. Weekly Safety and Sanitation inspections are conducted by appropriate staff and is documented on inspection forms. Each inmate housing unit has a janitor/mop closet and there is cleaning supplies maintained on the units. All chemicals are controlled and have proper MSDS sheets readily available. Inventory and control documents were spot checked with no discrepancies noted. Staff and inmates are required to know the proper use and what to do in case of an emergency involving chemical and caustics. All staff are trained on safety precautions yearly. Personal hygiene items were available to inmates and staff. There is a housekeeping plan. Daily, weekly and monthly inspections are performed by facility staff and was made available for review. There are also inmates assigned to be responsible for the cleaning of the outside areas of the facility, such as sidewalks and the inner perimeter.

Certified vendors provide services such as sewage, waste management and pest control. A current analysis of potable drinking water was on file. The Cummins Unit was presented as an audit ready facility.

**Fire Safety:**

The Fire/Safety Officer is responsible for maintaining the fire and safety equipment and documentation. Fire Drills are conducted quarterly in all areas on all shifts. Fire drills are reviewed for accuracy and corrective action taken when necessary. The fire safety officer conducts monthly fire/safety inspections and documents corrective action for deficiencies noted. Cummins/Varner Fire Department response to fire emergencies. Response time is five to ten minutes. Also, Gould Fire Department and Grady Fire Department will respond under NIMS agreement. Response time for each is approximately ten to 15 minutes. The State Fire Marshal conducts annual fire life safety inspections. All deficiencies noted are corrected and written corrective action sent to him. There are fire evacuation plans located throughout the unit. The State Fire Marshal approves the plan. There are smoke and heat detectors throughout the facility. The fire alarm system is Simplex and the system is normal.
There are a total of 389 fire extinguishers through the facility. These are inspected monthly by the fire/safety officer. They are tagged and inspected by Fire Extinguisher Sales and Service. Food Service suppression systems and fire alarm are on contract to be inspected by Simplex Grinnell. There are four fire hydrants inside the perimeter fence and five outside the fence for a total of nine. There are three standpipe hoses and three fire department connections.

**Food Service:**

The Food Services Manager oversees the operation of the kitchen. Offenders are first screened by the medical department prior to assignment to the kitchen or any food service activity, and all offenders assigned receive the necessary appropriate training. All staff and offenders assigned wear hair nets and beard nets. Tools are double locked and kept in a closed cabinet with the shadow board tool identification system. All tools are inventoried twice daily. The facility keeps no knives for offender use and cutting is conducted utilizing dough cutters that are kept on lanyards. There are two inmate dining rooms and one large kitchen located at the rear of the dining rooms. There also a bakery equipped with one large oven and a bank of convection ovens so all bread consumed by the population and staff is baked in the kitchen. Inmates spoke highly of the food. Refrigerator and dry storage temperatures were inspected with no discrepancies found. A meal was sampled and was found to be palatable, proportionate, and at the proper temperature.

**Medical Care:**

The Arkansas Department of Corrections (ADC) Cummins Unit provides clinic and infirmary care seven days a week 24 hours a day. The medical department has ambulatory Medical, Dental and Mental Health Services. There is a six bed infirmary for patients that require overnight or continuous treatment. All medical services are available on a single level. Every staff member is licensed to practice in respective specialties. Medical care is contracted with Correct Care Solutions (CCS). The current staff mix is as follows:

- MD = 1
- NP/Mid-level providers = 2
- RN = 1 full-time
- LPN = 8 full-time and 1 part-time.
- CNA = 3 full-time
- Dentist = 1
- Dental Hygienist = 1
- Dental Assistant = 1

At the time of the audit there were vacancies in the medical department.

- RN = 0.4
- LPN = 5.0
• CNA= 1.0

Many of the offenders have history of high-risk behaviors, compounded by lack of medical care and/or mental health treatment, and are more likely to have chronic illnesses and infectious diseases. Medical staff is well trained and caring professionals. Offenders are complimentary of medical services. The process for accessing health care is straightforward and uncomplicated:

1) The offender submits a sick call request.
2) The request is reviewed by a nurse and the patient is scheduled to be seen in medical.
3) The patient has an initial nurse visit and is then referred on to the provider if needed for further assessment and treatment.

The offender population is able to speak to this process with consistency and accuracy. Primary care is completed on the unit and any specialty care is referred out to community providers.

Medical Department Operations

There are three examination rooms have access to water, bathrooms, education materials and health pamphlets that are available for distribution to the offender population.

Interview was conducted with the chronic care nurse who responsible for immunizations, tb testing, and chronic care case management. Patient immunizations status is reviewed based on date of birth my month.

Ancillary services:

• X-ray= contracted and portable
• Lab= drawn at unit and send by currier to contracted labs services.

Medical unit equipped as follows:

• 2 AED’s (secured and inspected)
• 1 EKG’s (secured, inspected and read onsite)
• 2 Jump bags (secured and inspected) used as crash cart.
• 2 Emergency stretchers with straps (secured and inspected)
• 3 Transportation gurneys (secured and inspected)
• 1 Secure medication room
• 2 Pill windows
• 1 Medication refrigerators
• 1 Specimen refrigerator
• 1 Fix Bed for portable X-rays
• 2 Oxygen Concentrators (secured and inspected)
• 10 Portable oxygen cylinders (secured and inspected)
• 6 Bed-Infirmary

Medical Unit Administrative

Cummins Unit has an ADA Coordinator and a Disability Placement Program (DPP) that provides for housing accessible lockers, handicap showers, beds with grabs bars, accessible day room tables and CPAP accommodating housing. Unit had a TDD phones at the time of the audit. Offenders needing limited help are housed in the infirmary or transferred. The Cummins Unit does not house severely disabled offenders.

Upon admittance to the Cummins Unit, offenders receive an Offender Orientation Information to aid the individual in their adjustment to correctional setting. This documentation contains information regarding medical, mental health and dental services. Information includes medical and sick call procedures, general information on medical, co-pay, diets, medication administration, keep on person (KOP) medication and over the counter (OTC) medication. Other educational guides are utilized to inform offenders about AIDS and the spread of HIV, blood borne pathogens and safety when working with body fluids.

Medical diets are coordinated with the food service. Cummins Unit follows “Diet for Health”. Offenders are allowed to choose from a regular, meat-free, or pork-free thus promoting health living. The Cummins Unit Physician approves medically necessary diets. Insulin dependent diabetics some receive midnight snacks if ordered.

Cummins unit medical has a draw only lab and a full time Phlebotomist (Lab Tech). Specimens are collected on site. Blood is spun and sent out for analysis via a lab courier. STAT labs are sent locally if needed.

Patients are transferred via Emergency Medical Services (EMS) when needed for transport to community hospitals. The local hospital used by the Cummins unit are:
Memorial Hospital in Dumas, AR. and the prison Hospital at Ouachita, AR. Security is taken over by hospital security personnel at the time of admission.

Medications

Medications are stored in medication rooms and secured behind double door locks. Nursing staff administers medications via the Pill Window to general population (GP) at the following times:
• Daily
  • 3:00 a.m. - 10:00 a.m. to 7:00 p.m.
• Restricted Housing Unit (RHU) is administered at cell side at the same times seven days/week.
• Prior to giving medications, an offender’s identification is confirmed and mouth cavities checked after administration. There is a separate diabetic line at
  • 2:00 a.m., 9:00 a.m. and 3:30 p.m.
• All no shows or refusal to medications are document and/or referred.
• Offenders are allowed Keep on Person (KOP) medications.
• Medication administration record (MAR) are electronic in Electronic Offender Management Information System (eOMIS). This is the electronic health record (EHR).
• The eOMIS system provides continuity of care if offenders have an intra system transfer, as the same system is used state wide by the ADC.
• There are approximately 975 offenders on prescription medications, and eight offenders on controlled medications at the time of the audit.
• Some medications are crushed per specification. Cummins Unit has a distribution list of over-the-counter (OTC) medications and approved by the MD and the Warden.
• Emergency medications maintained in the pill window include epinephrine and naloxone.

The medical auditor observed medication administrations in the GP and RHU, including diabetic lines on the second day of the audit and found the process organized and timely. Unit has a dispensary. Medications are obtained through a central source through CCS. The backup pharmacy is located in the community. Stock medications are maintained the medical auditor found the medication secured, and random inventory inspections on sharps, controlled medications were accurate. Basic medical supplies and materials are obtained through standardized processes within CCS. The disposal of expired, unused, discontinued, recalled, over stocked medications including Over-the-Counter (OTC) prescriptions, (pills and liquids) and narcotics is arranged through CCS. Records are maintained on disposal process.

Dental

Unit dental is staffed with one F/T Dentist, one F/T Dental Hygienist and one F/T Dental Assistant. Dental services are provided Mon-Fri. Dental services include basic dentistry, prophylaxis, fillings, partials, extractions, root canal, cleaning and oral cancer screenings. The offenders access dental health services through the sick call processes. The medical auditor reviewed the licenses, registrations, records and random inventory of sharps and instruments and found them accurate. The dental area was clean.
Dental instruments and sharps not used at the year of expiration are re-autoclaved and repackaged. The Dental at Cummins Unit is equipped with one dental chair.

Recreation:

Recreation activities are available to inmates seven days a week, weather permitting. The facility contains two outside recreations yards for the inmate population. The yards are secured by cross fencing. The yards are also secured by security personnel stationed inside and outside the perimeter fence by an armed perimeter rover. Activities available to the inmates on the yards include; handball, volley ball, soft ball, basketball, soccer, horse shoes, golf Frisbee and a walking track along with isometric weight training equipment. The facility also has an enclosed gym that offers basketball, table tennis, isometric weight training equipment, shuffle board. There are also board games available including chess, checkers, and dominoes. The inmates are encouraged to offer suggestions for intramural competitions in basketball, softball, volleyball, handball, and soccer. The competitions are arranged by age groups to allow for all population involvement.

Social Services:

The Arkansas Department of Correction’s “Think Legacy Reentry Program” has evolved from individual unit programs to a standardized system wide reentry program supported by a specific Administrative Directive (AD 2017-13) and Standard Operating Procedures. The AD and SOP ensure that best practices are incorporated, and all stakeholders clearly understand implementation and management of best practices. The Think Legacy Program unit is defined as a unit that provides housing, ADC staff facilitators, citizen volunteers, and trained security staff for the facilitation of a 24-week curriculum delivered in a structured environment. The “Think Legacy Reentry Program” design relies heavily on citizen volunteers and professional ADC staff members to teach and facilitate best practice curriculum. Training and support of staff and volunteers must be ongoing.

Another component of the Think Legacy Reentry provides is the use of prior offenders that were once incarcerated.

There is one program established in 1985, by a group of inmates to simply assist “New Arrivals” with adjusting to the realities of prison life as a way of survival. This program known as M.M.T. (Making the Transition) includes discusses Alcohol/Drug Abuse/Chemical Dependency, Goal Setting and Family Values, Peer Pressure and Behavioral thinking, Prison Life and Criminal Behavior and Stinking Thinking.
Religious Programming:

There are currently three Chaplains on staff at the Cummins Unit to counsel inmates on numerous personal, family and religious matters. Catholic, Islamic and Protestant Services are conducted at the Unit on a regular basis. The Chaplains visit the barracks on a weekly basis counseling with inmates and distributing religious literature to inmates. The Chaplains coordinate pastoral visits between inmates and free world pastors and works with a number of certified religious assistants to meet a multitude of religious needs. A total of three Revival Services are conducted each year to encourage inmates to look to spiritual areas of their lives for strength and the power to change.

Principles and Applications for Life (PAL) Program is also available. This is a 12-month program. Inmates are required to live in the PAL Barracks for the duration of the program. Certificates will be issued at the completion of the course. The purpose for the PAL Program is an attempt to create better morale among the inmates, reduce disciplinary actions, and prepare the inmate to be a productive citizen. The PAL Program focuses on incarcerated men as holistic individuals who have psychological, educational, physical and spiritual needs. The PAL Program seeks to address, through educational and group sessions, the spiritual element of a person’s life. The curriculum used is based on Christian principles. Concepts and principles will be taught using the Old and New Testaments of the Bible. All faith traditions are welcome and encouraged to apply.

The Chaplains minister to the families of inmates at various times of need.

Education:

The Cummins Unit School is part of the Arkansas Department of Correction School District. There are four regular classes, two Pre-G.E.D. classes, one G.E.D. class and a Title 1 Reading Program. There are eight certified teachers, one teacher works only with the Homebound Students and one Principal at the Cummins School. A new four room addition was added in the summer of 1996. For the school year 2017-2018 there are approximately 500 inmates who participated in the school program. There are approximately 200 inmates who are on a lock down status that could receive instructions through a home bound program. In the 1997-98 school year, all inmates who did not have a high school diploma or G.E.D. are required to attend school. Students are placed in levels based on their academic level. They are tested periodically and moved up only if they show sufficient skills to function in a higher level. There are currently eight levels. Inmates who have the available resources may enroll in correspondence courses upon the approval of the Unit Warden will be transferred to the unit where the applicable class the inmate has chosen is offered. 37 inmate students received their GED this year.
Vocational Education:

In order to be considered for placement into a vocational education program, an inmate must meet the following criteria and will be transferred to the unit where the applicable class the inmate has chosen is offered.

Offender Work Program:

At a facility this large with industries and a huge agriculture operation every inmate able to work can be assigned a job or be enrolled in an education program. Jobs available include the list below:

- Chapel
- Commissary
- Education & Vocational Programs
- Inmate Tutors
- Food Service
- Hobby Craft
- Library
- Maintenance
- Medical Services
- Sanitation
- Barracks & Hall Porters
- Inside & Outside Maintenance
- Farm Workers – Dairy, Beef Herd, Poultry/Swine, Dog Kennel, Horse Barn
- Garment/Vinyl Bindery

In the garment factory’s industry program there are approximately 200 inmates assigned to this area. The inmates make clothing, jackets and jumpsuits. Inmates assigned to farm may have the opportunity to operate farm equipment and obtain skills they would otherwise not be able to obtain. Inmates assigned to the horse barn are given the opportunity to attend Farrier School if they are so inclined to
learn the process of shoeing horses, and which could possibly be a lucrative business upon release.

Mail

Mail received by this unit shall be delivered within 24 hours during normal workdays and packages shall be delivered within 48 hours of receipt. This does not apply to those inmates in punitive segregation. Inmates in punitive segregation will receive first class mail in the same time frame, but will not receive anything other than first class mail until after release from punitive. Mail drop boxes are located on the West and East Hall in front of the chow halls and at East #3 Riot Gate coming from 13/15 Barracks.

Correspondence mailed to the inmate, other than privileged correspondence, will be limited to three (3) pages, which will be copied (black and white photocopy) along with the envelope so that two (2) sheets of paper, front and back, shall be provided for each item of correspondence an inmate receives. Originals will be shredded after the copy is made. Any mail received without a return address containing the first and last name of the individual or the business name, street address or Post Office box number, city, state, and zip code will be considered contraband and destroyed. However, it may be opened to determine if disciplinary charges are warranted against the intended recipient.

Visitation:

Inmates are allowed to visit immediate family members for a period of up to 30 days after the inmate completes intake and is received at their initial unit of assignment until such time as a permanent visitation list is established. The family relationship must be validated by inmate information on record. Immediate family members are defined as the inmate’s father, mother, sisters, brothers, spouse, children, grandchildren, and any other person whose relationship with the inmate has been verified as that of a parent/guardian such as mother-in-law, father-in-law, grandparents, aunts or uncles, or, whose relationship has been verified as that of a child/ward such as a foster child, son-in-law, daughter-in-law, niece or nephew. The list of immediate family members includes step family members and half siblings. After the initial 30-day period at the initial unit of assignment, only visitors on a permanent visitation list will be allowed to visit. Inmates will receive information regarding procedures governing visitation within the first week of arrival at each facility. All Class I inmates housed in general population will be permitted weekly Saturday and Sunday visits for a maximum of 4 or 5 visits a month depending on the number of Saturdays and Sundays, All Class II, III and IV inmates housed in general population will be permitted two (2) visits a month, either the first and third Saturday of the month or the second and fourth Saturday of the month as determined by unit schedule.
In cases where inmates of the same immediate family are housed at the same unit, the Warden may approve requests by those inmates to visit on the same day, per the schedule of the lower class inmate.

Restrictive Housing/Protective Custody are only allowed to visit by video.

**Library Services:**

The general library is a Recreational Reading Library with Inter-Library Loan available through our local library systems. The General Library currently has over 7500 books. Magazines and periodicals are also available for viewing. The general library is a Recreational Reading Library with Inter-Library Loan available through our local library systems. The books are reviewed annually and new volumes are added on an ongoing basis. The library is seven days per week and half the housing units visiting Monday, Wednesday and Saturday and the other half visiting Tuesday, Thursday and Sunday. Friday visits are open to any inmates on a pass basis. Library porters are assigned to assist other inmates in finding reading materials and legal references. Inmates may retain their legal work in their possession to be placed in their issued lockers. Materials that cannot be placed in their lockers must be stored elsewhere and be available upon request.

**Law Library**

The Cummins Unit meets the ACA guidelines for inmate access to courts through the use of the law library. The law library provides all the necessary federal law books and many other law books as required by the specific inmate housing contract.

**Laundry Services:**

The Laundry is equipped with 7 large commercial washer and 8 large commercial dryers. Uniforms will be cleaned daily with the exception of Sunday and holidays. Personal laundry bags consisting of state issued items, such as socks, underwear, etc are laundered on days designated by the housing unit. Clothing items will be laundered on the days designated for their barracks and are marked with the inmate’s name and an Arkansas Department of Corrections number so they receive their own clean clothes back from the laundry. Inmate uniforms are white and have not buttons or use no belts. Uniform pants use strings and shirts are pull overs.

It should be noted that notices of this ACA audit was posted throughout the facility.
F. Examination of Records

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

1. Litigation

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

2. Significant Incidents/Outcome Measures

Both the Significant Incident Summary and Outcome measures were reviewed for thirty-six months. Incidents noted on the Significant Incident Summary reflect a level of operations that is consistent with the overall mission and security level of the facility.

The Outcome Measures were reviewed and found to be within reasonable ranges for this facility.

The medical auditor reviewed the Significant Incident Summary and the Health Care Outcome Measures with the health care administrative team. During the audit period there were a total of fifteen (15) deaths: 0-suicide and 9-unexpected naturals. There was no evidence of litigations or medication errors. The medical auditor discussed the following sections on the Healthcare Outcome Measures for the audit period as follows:

1. Standard 1A (5)-Number of offenders diagnosed with Hepatitis C viral infection at a given point in time was 181 in 2017-2018, and with average offender population of 1927
2. Standard 1A (6)-Number of offenders diagnosed with HIV infection at a given point in time was 12 in 2017-2018, and with average offender population of 1927.
3. Standard 1A (9): Number of offenders with an active individualized services/treatment plan for a diagnosed mental disorder (excluding sole diagnosis of substance abuse) at a given point in time was 155 in 2017-2018, and with average offender population of 1927.

The Chairman and medical auditor concurs with the responses. The Chairman also discussed the Significant Incident Summary regarding the amount of assaults with Warden Straughn. It was determined that the amount was consistent with the level of operations of the facility.
3. **Departmental Visits**

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

<table>
<thead>
<tr>
<th>Department Visited</th>
<th>Person(s) Contacted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Armory</td>
<td>Mike Moseley</td>
</tr>
<tr>
<td>Medical</td>
<td>Administrator, Dana Haynes</td>
</tr>
<tr>
<td></td>
<td>Licensed Practical Nurse, James Waldrup</td>
</tr>
<tr>
<td></td>
<td>Registered Nurse, Jennifer Handly</td>
</tr>
<tr>
<td></td>
<td>Licensed Practical Nurse, David Merritt</td>
</tr>
<tr>
<td>Dental Health</td>
<td>Dental Assistant, Monica Hogue</td>
</tr>
<tr>
<td></td>
<td>Dental Hygienist, Christine Rhodes</td>
</tr>
<tr>
<td>Key and Lock</td>
<td>Sergeant Christopher Jones</td>
</tr>
<tr>
<td>Dietary</td>
<td>Food Service Captain, Angerlka Smarjesse</td>
</tr>
<tr>
<td></td>
<td>Food Service Supervisor, James Wilson</td>
</tr>
<tr>
<td></td>
<td>Fire Safety Supervisor, Lt. Rosieanna Lee</td>
</tr>
<tr>
<td>Library</td>
<td>Program Specialist, Chanda Dooms</td>
</tr>
<tr>
<td>Laundry</td>
<td>Sergeant Kenneth Johnson</td>
</tr>
<tr>
<td>Personnel/Human Resource</td>
<td>HR Manager, Tabitha Whaley</td>
</tr>
<tr>
<td>Commissary</td>
<td>Cindy Shields, Cindy Owens, Tammy Allen</td>
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<tr>
<td>Maintenance</td>
<td>Maintenance Supervisor, Dean Shields</td>
</tr>
<tr>
<td>Training</td>
<td>Training Supervisor, John Haynes</td>
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<tr>
<td>Chaplain</td>
<td>Chaplain, Jim Babcock</td>
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<tr>
<td></td>
<td>Chaplain, Michael Ault</td>
</tr>
<tr>
<td>Recreation</td>
<td>Recreation Supervisor, Randy Patoka</td>
</tr>
<tr>
<td>Record Office</td>
<td>Record Office Supervisor, Gleenover Knight</td>
</tr>
<tr>
<td>Mailroom</td>
<td>Mailroom Supervisor, Tina Gibson</td>
</tr>
</tbody>
</table>
Shifts at the Cummins Unit are divided into two main shifts: 6:00 a.m. to 6:00 p.m. and 6:00 p.m. to 6:00 a.m. There are other shifts that overlap the two main shifts.

Day Shift (6:00 a.m. to 6:00 p.m.)

The team was present at the facility during the day shift on May 1st, 2018 from 7:55 a.m. to 6:00 p.m. and on May 2nd, 2018 from 7:50 a.m. to 6:00 p.m. and on May 3rd, 2017 from 7:55 a.m. to 12:00 p.m. The team observed all programs, inmate dining and recreation. The shift was well groomed, professional, understood policy, procedure and post orders and was motivated about carrying out their responsibilities for the overall operation of the facility. Their control of the inmates was good and their interaction with the inmates was evidenced by how well they worked together to maintain the cleanliness of the facility at a high level.

Night Shift (6:00 p.m. to 6:00 a.m.)

The team was present at the facility during the evening shift on May 1st, 2018 from 6:00 p.m. to 7:40 p.m. and on May 2nd, 2018 from 6:00 p.m. to 7:00 p.m. The team visited with the shift as they entered the building and observed information being passed from one shift to another. The team was impressed with the staff, who were very professional and well groomed. The staff and inmates understood the importance of the accreditation process and seemed motivated to do a good job in their areas of responsibilities.
A team member stood roll call and addressed all staff the evening shift of May 1st, 2018 to discuss the audit process.

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

There were 4 Non-Compliant standards on the previous audit. All findings were granted waivers.

Standard #4-4132 (Found Non-Compliant on 2018 audit)
Standard #4-4133 (Found Non-Compliant on 2018 audit)
Standard #4-4135 (Found Non-Compliant on 2018 audit)
Standard #4-4141 (Found Non-Compliant on 2018 audit)

G. Interviews

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

1. Offender Interviews

The team interviewed a total of approximately 127 inmates. The inmates interviewed were cooperative and willing to speak to the team. The inmates interviewed stated that they felt safe at this facility. The inmates also stated that they had access to medical and dental care. The inmates were supportive of the Warden and the Administrative Staff.

2. Staff Interviews

The audit team spoke with approximately 87 staff in the course of the audit. Staff at the facility is professional in their interaction with the inmates and other staff. There was a great deal of support for all levels of the management team and the administration. The audit team observed a sense of pride by all levels of staff in the facility regarding the jobs they perform. The staff that the audit team spoke with felt that their contributions are recognized and that they make a difference.

H. Exit Discussion

The exit interview was held at 11:30am on May 3rd, 2018 in the Training Building with Warden Straughn and 45 staff in attendance. Also in attendance were:

Wendy Kelley Director
Dale Reed Chief Deputy Director
Dexter Payne Deputy Director
Mark Cashion Assistant Director
Rory Griffin Assistant Director
Gaylon Lay Warden Pine Bluff Complex
The chairperson explained the procedures that would follow the audit. The team discussed the compliance levels of the mandatory and non-mandatory standards and reviewed their individual findings with the group.

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

AND THE

COMMISSION ON ACCREDITATION FOR CORRECTIONS

COMPLIANCE TALLY

<table>
<thead>
<tr>
<th>Manual Type</th>
<th>Adult Correctional Institution, 4th Edition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supplement</td>
<td>2016 Standards Supplement</td>
</tr>
<tr>
<td>Facility/Program</td>
<td>Arkansas Department of Corrections</td>
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<tr>
<td></td>
<td>Cummins Unit</td>
</tr>
<tr>
<td>Audit Dates</td>
<td>May 1st – 3rd, 2018</td>
</tr>
<tr>
<td>Auditor(s)</td>
<td>Danny Hartline</td>
</tr>
<tr>
<td></td>
<td>Jody Smith</td>
</tr>
<tr>
<td></td>
<td>Bryan Hicks</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>MANDATORY</th>
<th>NON-MANDATORY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Standards in Manual</td>
<td>62</td>
<td>465</td>
</tr>
<tr>
<td>Number Not Applicable</td>
<td>7</td>
<td>34</td>
</tr>
<tr>
<td>Number Applicable</td>
<td>55</td>
<td>431</td>
</tr>
<tr>
<td>Number Non-Compliance</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>Number in Compliance</td>
<td>55</td>
<td>424</td>
</tr>
<tr>
<td>Percentage (%) of Compliance</td>
<td>100%</td>
<td>98.3%</td>
</tr>
</tbody>
</table>

- Number of Standards minus Number of Not Applicable equals Number Applicable
- Number Applicable minus Number Non-Compliance equals Number Compliance
- Number Compliance divided by Number Applicable equals Percentage of Compliance
Standard #4-4052

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

FINDINGS:

The Cummins Unit did not meet the 10% vacancy rate for any 18 month period.

AGENCY RESPONSE:

Plan of Action

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

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

Responsible Agency
a. Human Resource Administrator
b. Human Resource Staff
c. Warden and Human Resource Manager

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

Anticipated Completion Date

ACA Audit 2021 or sooner.

Waiver Request

Appeal

AUDITOR’S RESPONSE:

The Cummins Unit employees will form a recruitment team that will work diligently and consistently to assist the unit with recruitment efforts through various methods such as conducting quarterly job fairs in the community. The Arkansas Department of Correction has a website that lists all available jobs and an online application process to aid all interested parties in seeking employment at the Arkansas Department of Corrections. The team concurs with the Corrective Action Plan.

Standard #4-4082

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT ALL NEW FULL-TIME EMPLOYEES MUST COMPLETE A FORMALIZED 40- HOUR ORIENTATION PROGRAM BEFORE UNDERTAKING THEIR ASSIGNMENTS. AT A MINIMUM, THE ORIENTATION PROGRAM SHOULD INCLUDE INSTRUCTION IN THE FOLLOWING: THE PURPOSE, GOALS, POLICIES, AND PROCEDURES FOR THE FACILITY AND PARENT AGENCY; SECURITY AND CONTRABAND REGULATIONS; KEY CONTROL; APPROPRIATE CONDUCT WITH OFFENDERS; RESPONSIBILITIES AND RIGHTS OF EMPLOYEES; UNIVERSAL PRECAUTIONS; OCCUPATIONAL EXPOSURE; PERSONAL PROTECTIVE EQUIPMENT; BIO HAZARDOUS WASTE DISPOSAL; AND AN OVERVIEW OF THE CORRECTIONAL FIELD, AND THE EMERGENCY PLAN.

FINDINGS:

The Arkansas Department of Corrections policy states that orientation is conducted within 90 days of employment. Documentation showed that orientation training was indeed conducted within 90 days of employment, however orientation training was not conducted prior to staff undertaking their assignments.
AUDITOR’S RESPONSE:

Plan of Action

Task
Policy review and change at Central Office level, in order to be compliant with ACA standard 4-4082.

Responsible Agency
Arkansas Department of Correction

Assigned Staff
Sandra Kennedy

Anticipated Completion Date
July 1, 2018

Waiver Request

Appeal

AUDITOR’S RESPONSE:

The team agrees with the change of policy in the Arkansas Department of Corrections, however the Cummins Unit would have to then adhere to the policy. The team is confident that the Cummins Unit would adhere to the policy. The team concurs with the Corrective Action Plan.

Standard #4-4132

CELLS/ROOMS USED FOR HOUSING INMATES SHALL PROVIDE AT A MINIMUM, 25 SQUARE FEET OF UNENCUMBERED SPACE PER OCCUPANT. UNENCUMBERED SPACE IS USABLE SPACE THAT IS NOT ENCUMBERED BY FURNISHING OR FIXTURES. AT LEAST ONE DIMENSION OF THE UNENCUMBERED SPACE IS NO LESS THAN SEVEN FEET. IN DETERMINING UNENCUMBERED SPACE IN THE CELL OR ROOM, THE TOTAL SQUARE FOOTAGE IS OBTAINED AND THE SQUARE FOOTAGE OF FIXTURES AND EQUIPMENT IS SUBTRACTED. ALL FIXTURES AND EQUIPMENT MUST BE IN OPERATIONAL POSITION.

FINDINGS:

Some of the cells at the Cummins Unit do not meet the requirement for a minimum of 25 feet of unencumbered space per occupant.
AGENCY RESPONSE:

Waiver Request

The Arkansas Department of Correction became accredited with the American Correctional Association in 1989. Barracks 13, 14, 15, and 16 were completed in 1979 before becoming accredited in 1996, therefore ACA standards were not taken into consideration during the planning and construction phase of this part of the facility. It would be cost prohibitive to try and come into compliance with this standard, therefore we are requesting a waiver for standard 4-4132.

AUDITOR’S RESPONSE:

Due to the age and physical layout of Cummins Unit, the team concurs with the request of a waiver for this standard. It should be noted that there was zero complaints concerning this standard.

Standard #4-4133

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

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

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

FINDINGS:

The Cummins Unit single cell occupancy does not meet the ACA requirement of 80 square feet of total floor space, of which 35 square feet is unencumbered space.
FACILITY RESPONSE:

Waiver Request

The Arkansas Department of Correction became accredited with the American Correctional Association in 1989. Barracks 13, 14, 15, and 16 were completed in 1979 before becoming accredited in 1996, therefore ACA standards were not taken into consideration during the planning and construction phase of this part of the facility. It would be cost prohibitive to come into compliance for this standard. Therefore, we are requesting a waiver for standard 4-4133.

AUDITOR’S RESPONSE:

Due to the age and physical layout of Cummins Unit, the team concurs with the request of a waiver for this standard. It should be noted that there was zero complaints concerning this standard.

Standard #4-4134

EACH INMATE CONFINED TO A CELL/ROOM FOR 10 OR MORE HOURS DAILY IS PROVIDED A SLEEPING AREA WITH THE FOLLOWING: A SLEEPING SURFACE AND MATTRESS AT LEAST 12 INCHES OFF OF THE FLOOR; A WRITING SURFACE AND PROXIMATE AREA TO SIT; STORAGE FOR PERSONAL ITEMS; AND ADEQUATE STORAGE SPACE FOR CLOTHES AND PERSONAL BELONGINGS.

EACH INMATE CONFINED TO A CELL/ROOM FOR LESS THAN 10 HOURS DAILY IS PROVIDED A SLEEPING AREA WITH THE FOLLOWING: A SLEEPING SURFACE AND MATTRESS AT LEAST 12 INCHES OFF OF THE FLOOR; STORAGE FOR PERSONAL ITEMS; AND ADEQUATE STORAGE SPACE FOR CLOTHES AND PERSONAL BELONGINGS.

FINDINGS:

The Cummins Unit does not provide a writing surface in the “Punitive” restricted housing unit.

FACILITY RESPONSE:

Waiver Request

The Arkansas Department of Correction – Cummins Unit Punitive (RestrictiveHousing) East Building Barracks was constructed in 1970 at time when Accreditation Standards were not taken into consideration during the planning or construction phase of this area, since the Arkansas Department of Correction did not get involved with the accreditation
process until 1989. It would be cost prohibitive to try and come into compliance with this standard, therefore, we are requesting a waiver for standard 4-4134.

AUDITOR’S RESPONSE:

Due to the age and physical layout of Cummins Unit, the team concurs with the request of a waiver for this standard. It should be noted that there were zero complaints from inmates on this standard.

Standard #4-4135

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

FINDINGS:

The Cummins Unit day rooms do not meet the requirement of a minimum of 35 square feet of space per inmate.

FACILITY RESPONSE:

Waiver Request

The Cummins Unit was constructed in 1902. Since then there have been drastic changes made to enhance the quality of life for the inmate population. The barracks were renovated from large 150-200 man open barracks to smaller barracks that afforded the addition of individual dayrooms along with air conditioning, televisions, and the inmate telephone system. During the hours of 7:00 a.m. (wake-up) through 4:30 p.m. (end of work day), the dayroom is only utilized with the minimum number of inmates. It was noted by officers, the majority of the inmates spend the evening hours on their respective racks reading, writing letters or visiting with one another. Now the inmates are able to tap into the program on the television through their radios and headphones and hear what is going on without being in the dayroom to watch the television, which some inmates prefer. May it be noted, that on the “A” side, the television might be viewed from their racks. On the “B” side approximately 50% of the population can view the television from their racks. May it also be noted, a good majority of the inmates who are physically able to work, go out each day to their respective jobs. For those who cannot work, activities out-
side of their barracks include, church call, gym call, yard call, library call, commissary
call and school, The Think Legacy Program and the Principles and Applications for Life
Program (PAL). To try to come into compliance with this standard would be cost prohib-
itive. For this reason, we are requesting a waiver for standard 4-4135.

AUDITOR’S RESPONSE:

Due to the age and physical layout of Cummins Unit, the team concurs with the request
of a waiver for this standard. It should be noted that there were 0 complaints from in-
mates on this standard.

Standard #4-4141

ALL CELLS/ROOMS IN RESTRICTIVE HOUSING PROVIDE A MINIMUM OF 80
SQUARE FEET AND SHALL PROVIDE 35 SQUARE FEET OF UNENCUMBERED
SPACE FOR THE FIRST OCCUPANT AND 25 SQUARE FEET OF UNENCUM-
BERED SPACE FOR EACH ADDITIONAL OCCUPANT

FINDINGS:

The Cummins Unit does not meet the requirements of provide a minimum of 80 square
feet and shall provide 35 square feet of unencumbered space for the first occupant and 25
square feet of unencumbered space for each additional occupant.

FACILITY RESPONSE:

Waiver Request

The Arkansas Department of Correction – Cummins Unit Segregation (Restrictive Hous-
ing) barracks are Barracks 14, 16 which were completed in 1979 and the East Building
which was completed in 1970. Standards were not known or taken into consideration
during the planning or construction phases of these areas, since the Arkansas Department
of Correction did not get involved with the accreditation process until 1989. It would be
cost prohibitive to try and come into compliance with this standard, therefore, we are re-
questing a waiver for standard 4-4141

AUDITOR’S RESPONSE:

Due to the age and physical layout of Cummins Unit, the team concurs with the request
of a waiver for this standard.
COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections
Cummins Unit
Grady, Arkansas

May 1-3, 2018

Visiting Committee Findings

Mandatory Standards

Not Applicable

Standard #4-4306

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

FINDINGS:

The Cummins Unit does not house adjudicated delinquent offenders or youth.

Standard #4-4353

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:

The Cummins Unit does not house female inmates.
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:
A. ANY PAST HISTORY OF SERIOUS INFECTIOUS OR COMMUNICABLE ILLNESS, AND ANY TREATMENT OR SYMPTOMS (E.G. CHRONIC COUGH, HEMOPTYSIS, LETHARGY, WEAKNESS, WEIGHT LOSS, LOSS OF APPETITE, FEVER, NIGHT SWEATS THAT ARE SUGGESTIVE OF SUCH ILLNESS), AND MEDICATIONS
B. CURRENT ILLNESS AND HEALTH PROBLEMS, INCLUDING COMMUNICABLE DISEASES
C. DENTAL PROBLEMS
D. 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)
E. THE POSSIBILITY OF PREGNANCY AND HISTORY OF PROBLEMS (FEMALE ONLY); AND OTHER HEALTH PROBLEMS DESIGNATED BY THE RESPONSIBLE PHYSICIAN

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

MEDICAL DISPOSITION OF OFFENDER:
I. GENERAL POPULATION
J. GENERAL POPULATION WITH PROMPT REFERRAL TO APPROPRIATE HEALTH CARE SERVICE
K. 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 UPON WRITTEN MEDICAL CLEARANCE. WHEN SCREENING IS CONDUCTED BY TRAINED CUSTODY STAFF, PROCEDURES WILL REQUIRE SUBSEQUENT REVIEW OF POSITIVE FINDINGS BY LICENSED HEALTH CARE STAFF. WRITTEN PROCEDURES AND SCREENING PROTOCOLS ARE ESTABLISHED BY THE RESPONSIBLE PHYSICIAN IN COOPERATION WITH THE FACILITY MANAGER. INMATES CONFINED WITHIN A CORRECTIONAL COMPLEX WITH CONSOLIDATED MEDICAL SERVICES DO NOT REQUIRE HEALTH SCREENING FOR INTRA-SYSTEM TRANSFERS.

FINDINGS:

The Cummins Unit is not a reception center. The Cummins Unit receive inmates from intra-system transfer.

Standard #4-4365

A COMPREHENSIVE HEALTH APPRAISAL FOR EACH OFFENDER, EXCLUDING INTRA-SYSTEM TRANSFERS, IS COMPLETED AS DEFINED BELOW, AFTER ARRIVAL AT THE FACILITY. IF THERE IS DOCUMENTED EVIDENCE OF A HEALTH APPRAISAL WITHIN THE PREVIOUS 90 DAYS, A NEW HEALTH APPRAISAL IS NOT REQUIRED, EXCEPT AS DETERMINED BY THE DESIGNATED HEALTH AUTHORITY. HEALTH APPRAISALS INCLUDE THE FOLLOWING:

WITHIN 14 DAYS AFTER ARRIVAL AT THE FACILITY:

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

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

G. REVIEW OF THE RESULTS OF THE MEDICAL EXAMINATION, TESTS, AND IDENTIFICATION OF PROBLEMS BY A HEALTH CARE PRACTITIONER OR OTHER QUALIFIED HEALTH CARE PERSONNEL, IF SUCH IS AUTHORIZED IN THE MEDICAL PRACTICE ACT

H. INITIATION OF THERAPY, WHEN APPROPRIATE

I. 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:

J. 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 DISEASE, AND SO FORTH)

K. 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

L. INITIATION OF THERAPY, WHEN APPROPRIATE

M. DEVELOPMENT AND IMPLEMENTATION OF TREATMENT PLAN, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION

FINDINGS:

The Cummins Unit is not a reception center. The Cummins Unit receive inmates from intra-system transfer.

**Standard #4-4371**

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

A. REVIEW OF AVAILABLE HISTORICAL RECORDS OF INPATIENT AND OUTPATIENT PSYCHIATRIC TREATMENT
B. REVIEW OF HISTORY OF TREATMENT WITH PSYCHOTROPIC MEDICATION
C. REVIEW OF HISTORY OF PSYCHOTHERAPY, PSYCHO-EDUCATIONAL GROUPS, AND CLASSES OR SUPPORT GROUPS
D. REVIEW OF HISTORY OF DRUG AND ALCOHOL TREATMENT
E. REVIEW OF EDUCATIONAL HISTORY
F. REVIEW OF HISTORY OF SEXUAL ABUSE-VICTIMIZATION AND PREDATORY BEHAVIOR
G. REVIEW OF CURRENT MENTAL STATUS AND CONDITION
H. ASSESSMENT OF CURRENT SUICIDAL POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT INCREASE SUICIDE POTENTIAL
I. ASSESSMENT OF VIOLENCE POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT INCREASE VIOLENCE POTENTIAL
J. ASSESSMENT OF DRUG AND ALCOHOL ABUSE AND/OR ADDICTION
K. USE OF ADDITIONAL ASSESSMENT TOOLS, AS INDICATED
L. REFERRAL TO TREATMENT, AS INDICATED
M. DEVELOPMENT AND IMPLEMENTATION OF TREATMENT PLAN, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION

FINDINGS:

The Cummins Unit is not a reception center. The Cummins Unit receive inmates from intra-system transfer

Standard #4-4376

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:

The Cummins Unit does not conduct detoxification
Standard #4-4402

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

FINDINGS:

The Cummins Unit does not participate in biomedical research.
Standard #4-4059

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:

The Cummins Unit does not provide civil service employment or contract with union representatives or members.

Standard #4-4118

WRITTEN POLICY SPECIFIES THAT VOLUNTEERS MAY PERFORM PROFESSIONAL SERVICES ONLY WHEN THEY ARE CERTIFIED OR LICENSED TO DO SO.

FINDINGS:

The Cummins Unit does not use volunteers to perform professional services.

Standard #4-4128

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

FINDINGS:

The Cummins Unit has not had any new single-cell construction after January 1, 1990.
Standard #4-4137-1

(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 RATION OF 1 FOR EVERY 12 INMATES IN MALE FACILITIES AND 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:

The Cummins Unit was constructed prior to June 2014.

Standard #4-4138-1

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

FINDINGS:

The Cummins Unit was constructed prior to June 2014.

Standard #4-4139-1

(NEW CONSTRUCTION AFTER JUNE 2014). INMATES HAVE ACCESS TO OPERABLE SHOWERS WITH TEMPERATURE – CONTROLLED HOT AND COLD RUNNING WATER, AT A MINIMUM RATIO OF 1 SHOWER FOR EVERY 12 INMATES, UNLESS APPLICABLE CODES REQUIRE ADDITIONAL FIXTURES. WATER FOR SHOWERS IS THERMOSTATICALLY CONTROLLED TO TEMPERATURES RANGING FROM 100 DEGREES FAHRENHEIT TO 120 DEGREES FAHRENHEIT TO INSURE THE SAFETY OF INMATES AND PROMOTE HYGIENIC PRACTICES.

FINDINGS:

The Cummins Unit was constructed prior to June 2014.
Standard #4-4143

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:

The Cummins Unit does not house inmates that cannot perform basic life functions.

Standard #4-4147-1

ALL INMATE ROOMS/CELLS PROVIDE INMATES WITH ACCESS TO NATURAL LIGHT BY MEANS OF AT LEAST THREE SQUARE FEET OF TRANSPARENT GLAZING, PLUS TWO ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER INMATE IN ROOMS/CELLS WITH THREE OR MORE INMATES.

FINDINGS:

The Cummins Unit was constructed prior to June 2008.

Standard #4-4147-2

(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 2 ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER INMATE IN THE DORMITORY.

FINDINGS:

The Cummins Unit was constructed prior to June 2014.

Standard #4-4149

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. [NEW CONSTRUCTION ONLY AFTER JANUARY 1, 1990]

FINDINGS:

The Cummins Unit is not classified as new construction.
Standard #4-4157

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

FINDINGS:

The Cummins Unit is not classified as new construction

Standard #4-4181

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

FINDINGS:

The Cummins Unit does not house female inmates.

Standard #4-4190-1

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

FINDINGS:

The Cummins Unit does not house female inmates.

Standard #4-4278

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:

The Cummins Unit does not house female inmates

Standard #4-4285

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:

The Cummins Unit is not a reception center

Standard #4-4286

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
FINDINGS:

The Cummins Unit is not a reception center

**Standard #4-4287**

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR A RECEP-
TION PROGRAM FOR NEW INMATES UPON ADMISSION TO THE CORRE-
CTIONAL SYSTEM. EXCEPT IN UNUSUAL CIRCUMSTANCES, INITIAL RECEP-
TION AND ORIENTATION OF INMATES IS COMPLETED WITHIN 30 CALEN-
DAR DAYS AFTER ADMISSION.

FINDINGS:

The Cummins Unit is not a reception center

**Standard #4-4307**

IF YOUTHFUL OFFENDERS ARE HOUSED IN THE FACILITY, WRITTEN POLI-
CY, 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 DOCU-
  MENTS THAT THE YOUTHFUL OFFENDER WOULD BENEFIT FROM
  PLACEMENT OUTSIDE THE UNIT

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

FINDINGS:

The Cummins Unit does not house youthful offenders.

**Standard #4-4308**

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

FINDINGS:

The Cummins Unit does not house youthful offenders.

**Standard #4-4309**

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:

The Cummins Unit does not house youthful offenders.

**Standard #4-4310**

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:

The Cummins Unit does not house youthful offenders.
Standard #4-4311

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:

The Cummins Unit does not house youthful offenders

Standard #4-4312

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:

The Cummins Unit does not house youthful offenders

**Standard #4-4353-1**

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:

The Cummins Unit does not house female inmates.

**Standard #4-4377**

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 CODEPENDENCY
- AN INDIVIDUALIZED TREATMENT PLAN DEVELOPED AND IMPLEMENTED BY A MULTIDISCIPLINARY CLINICAL TEAM THAT INCLUDES MEDICAL, MENTAL HEALTH, AND SUBSTANCE ABUSE PROFESSIONALS
- PRE-RELEASE RELAPSE-PREVENTION EDUCATION, INCLUDING RISK MANAGEMENT
- THE OFFENDER WILL BE INVOLVED IN AFTERCARE DISCHARGE PLANS

The Cummins Unit does not have a chemical dependency program

**Standard #4-4383**

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:

The Cummins Unit have qualified/licensed healthcare staff.
Standard #4-4391

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:

The Cummins Unit does not use volunteers in the delivery of health care.

Standard #4-4392

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:

The Cummins Unit does not use students, interns or residents in the delivery of health care.

Standard #4-4393

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:

The Cummins Unit does not use inmates to perform familial duties.

Standard #4-4436

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:

The Cummins Unit does not house female inmates.

Standard #4-4447-1

Written policy, procedure and practice provide that designated staff is responsible for coordination of victim's programs and that curriculum is established for providing training to staff involved with victim's issues. This curriculum includes the following topics:

• Specific services available to crime victims
• Changes in laws impacting victims
• Way(s) of gaining access to the services
• CONFIDENTIALITY OF VICTIM INFORMATION
• WAY(S) FOR VICTIMS TO COMMUNICATE COMPLAINTS AND OTHER CONCERNS
• PROGRAM EVALUATION MEASURES, WHICH INCLUDE VICTIM INPUT REGARDING THE EFFECTIVENESS OF SERVICES AND WAYS FOR THEM TO MAKE SUGGESTIONS REGARDING AGENCY POLICIES AND PRACTICES INTENDED TO ASSIST CRIME VICTIMS

FINDINGS:

Victim programs are conducted by the Central Office of the Arkansas Department of Corrections.

Standard #4-4461-1

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:

This facility and the Arkansas Department of Corrections is not responsible for the collection of restitution per state law.

Standard #4-4462

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:

The Cummins Unit does not have a Private Industries Program.

Standard #4-4463

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES EMPLOYED IN THE COMMUNITY BY PUBLIC OR PRIVATE ORGANIZATIONS IN POSTIONS 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:

The Cummins Unit does not have offenders employed in the community by public or private organizations in positions normally occupied by private citizens.
# Significant Incident Summary

**Facility Name:** Cummins Unit  
**Reporting Period:** May 2017 thru April 2018

<table>
<thead>
<tr>
<th>Incident Type</th>
<th>Months</th>
<th>May</th>
<th>June</th>
<th>July</th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
<th>January</th>
<th>February</th>
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<td>Disturbances*</td>
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<td>Assaults</td>
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<td>Outcome Measure</td>
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<tr>
<td>1A (1)</td>
<td>Number of offenders diagnosed with a MRSA infection within the past twelve (12) months</td>
<td>1 divided by The average daily population</td>
<td>1892 0.001</td>
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<td>(2)</td>
<td>Number of offenders diagnosed with active tuberculosis in the past twelve (12) months</td>
<td>0 divided by Average daily population.</td>
<td>1892 0</td>
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<td>(3)</td>
<td>Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months</td>
<td>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.</td>
<td>1376 0</td>
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<td>(4)</td>
<td>Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months</td>
<td>0 divided by Number of offenders treated for latent tuberculosis infection in the past twelve (12) months.</td>
<td>7 0</td>
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<td>(5)</td>
<td>Number of offenders diagnosed with</td>
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<td>181</td>
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<td></td>
<td>Hepatitis C viral infection at a given point in time</td>
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<tr>
<td>divided by</td>
<td>Total offender population at that time.</td>
<td>1927</td>
<td>.094</td>
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<tr>
<td>(6)</td>
<td>Number of offenders diagnosed with HIV infection at a given point in time</td>
<td>12</td>
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<tr>
<td>divided by</td>
<td>Total offender population at that time.</td>
<td>1927</td>
<td>.006</td>
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<td>(7)</td>
<td>Number of offenders with HIV infection who are being treated with highly active antiretroviral treatment (HAART) at a given point in time</td>
<td>13</td>
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<tr>
<td>divided by</td>
<td>Total number of offenders diagnosed with HIV infection at that time.</td>
<td>13</td>
<td>1</td>
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<td>(8)</td>
<td>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</td>
<td>13</td>
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<tr>
<td>divided by</td>
<td>Total number of treated offenders with HIV infection that were reviewed.</td>
<td>14</td>
<td>.929</td>
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<td>(9)</td>
<td>Number of offenders diagnosed with an individualized services/treatment plan for a diagnosed mental disorder (excluding sole diagnosis of substance abuse) at any given point in time.</td>
<td>155</td>
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<tr>
<td>divided by</td>
<td>Total offender population at that time.</td>
<td>1647</td>
<td>.094</td>
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<td>(10)</td>
<td>Number of offender admissions to off-site hospitals in the past twelve (12) months</td>
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<tr>
<td>divided by</td>
<td>Average daily population.</td>
<td>1892</td>
<td>.023</td>
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<td>(11)</td>
<td>Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months</td>
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<td></td>
<td>divided by</td>
<td></td>
<td>1892</td>
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<tr>
<td>(12)</td>
<td>Number of offender specialty consults completed during the past twelve (12) months</td>
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<tr>
<td>(13)</td>
<td>Number of selected hypertensive offenders at a given point in time with a B/P reading &gt; 140 mmHg/ &gt;90 mm Hg</td>
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<td>(14)</td>
<td>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</td>
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<td>(15)</td>
<td>The number of completed dental treatment plans within the past twelve (12) months</td>
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<td>2A (1)</td>
<td>Number of health care <em>staff</em> with lapsed licensure or certification during a twelve (12) month period</td>
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<td>2A (2)</td>
<td>Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job</td>
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<td>divided</td>
<td>Number of new health care staff during the</td>
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<td>(3) Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months</td>
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<td></td>
<td>divided by Number of employees.</td>
<td>27</td>
<td>.148</td>
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<td>(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</td>
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<td></td>
<td>divided by Number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.</td>
<td>299</td>
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<td><strong>3A</strong></td>
<td>(1) Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months</td>
<td>22</td>
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<td></td>
<td>divided by Number of evaluated offender grievances related to health care services in the past twelve (12) months.</td>
<td>170</td>
<td>.129</td>
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<td>(2) Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period</td>
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<tr>
<td></td>
<td>divided by Number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.</td>
<td>0</td>
<td>0</td>
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<td>(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</td>
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<td>divided by Number of offender adjudicated lawsuits related to healthcare delivery in the past twelve (12) months</td>
<td>6</td>
<td>0</td>
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<td><strong>4A</strong></td>
<td>(1) Number of problems identified by quality assurance program that were corrected during a twelve (12) month period</td>
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<td>divided by</td>
<td>Number of problems identified by quality assurance program during a twelve (12) month period.</td>
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<td>(2)</td>
<td>0</td>
<td>Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.</td>
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<td>(3)</td>
<td>1</td>
<td>Number of offender suicide attempts in the past twelve (12) months</td>
<td>divided by Average daily population</td>
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<td>(4)</td>
<td>0</td>
<td>Number of offender suicides in the past twelve (12) months</td>
<td>divided by Average daily population</td>
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<td>1892</td>
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<td>(5)</td>
<td>9</td>
<td>Number of unexpected natural deaths in the past twelve (12) months</td>
<td>divided by Total number of deaths in the same reporting period.</td>
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<td>(6)</td>
<td>0</td>
<td>Number of serious medication errors in the past twelve (12) months</td>
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</tbody>
</table>

5A None

6A None

7A None

7B None

7C None