

*American Correctional Association*

## ACCREDITATION REPORT



*Commission on Accreditation for Corrections*

**Arkansas Division of Corrections  
Central Office/Administration East Annex  
Pine Bluff, Arkansas**

*The mission of the Commission on Accreditation for Corrections is to upgrade and improve practices and conditions in adult and juvenile correctional facilities and programs through an accreditation process which is founded on a commitment to accountability, professionalism and respect for basic human rights and which recognizes sound and effective correctional practices, while striving towards excellence in the field of corrections.*



## American Correctional Association

206 N. Washington Street, Suite 200  
Alexandria, Virginia 22314  
703-224-0000 • Fax: 703-224-0010  
[www.aca.org](http://www.aca.org)

January 22, 2024

Arkansas Division of Corrections  
Central Office/Administration East Annex  
Pine Bluff, Arkansas

Congratulations!

It is a pleasure to officially inform you that the Central Office/Administration East Annex was accredited by the Commission on Accreditation for Corrections at the American Correctional Association 2024 Winter Conference on January 5<sup>th</sup> in National Harbor, Maryland.

Your accreditation represents the satisfactory completion of a rigorous self-evaluation, followed by an outside review by a team of experienced, independent auditors.

Every profession strives to provide a high quality of service to society. To know that you, your staff, and other officials are complying with the requirements of the accreditation process is indeed a statement of a high level of commitment to the staff and persons under your care.

On behalf of the American Correctional Association and the Commission on Accreditation for Corrections, thank you for your commitment to the corrections profession and to the accreditation process.

Sincerely,

A handwritten signature in black ink that reads 'TJ Stickrath'.

Thomas Stickrath, Chairperson  
Commission on Accreditation for Corrections



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For Immediate Release

### **Central Office/Administration East Annex Awarded National Accreditation**

Thomas Stickrath, Chairperson of the Commission on Accreditation for Corrections (CAC), and David Haasenritter, Director of Standards and Accreditation, American Correctional Association recently announced the accreditation of the Central Office/Administration East Annex. The award was presented in conjunction with the American Correctional Association 2024 Winter Conference on January 5<sup>th</sup> in National Harbor, Maryland.

In presenting the award, Thomas Stickrath, Chairperson of the CAC, and Denise Robinson, President of the American Correctional Association (ACA), complimented the facility on their professional level of operation and their success in completing the accreditation process. The agency is one of over 1,300 correctional organizations currently involved in accreditation across the nation.

The accreditation program is a professional peer review process based on national standards that have evolved since the founding of the Association in 1870. The standards were developed by national leaders from the field of corrections, law, architecture, health care, and other groups who are interested in sound correctional management.

ACA standards address services, programs, health care and security operations essential to effective correctional management. Through accreditation, an agency is able to maintain a balance between protecting the public and providing an environment that safeguards the life, health, and safety of staff and offenders. Standards set by ACA reflect practical up-to-date policies and procedures and function as a management tool for agencies and facilities throughout the world.

The three-year accreditation award granted to the Central Office/Administration East Annex does not signal the end of their involvement in the accreditation process. During the award period, staff will work to improve any deficiencies identified during the audit and maintain continuous compliance with the standards.



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Congratulations on your accreditation award! You are now a member of the elite in achieving correctional excellence. The certificate you have received is but a small symbol of the enormous dedication and commitment demonstrated by each and every member of your staff to the accreditation process, and I urge you to display it prominently as a continual reminder of the level of professionalism achieved. This is just the beginning of your journey, however, for the true test of excellence is the test of time. It is critical that your operation be able to sustain this achievement over time and be constant through both prosperity and adversity.

Achieving American Correctional Association Accreditation means you have demonstrated your dedication to getting the job done right, and that you are holding your agency to a higher standard.

Thank you for your commitment to the American Correctional Association and the accreditation process.

A handwritten signature in black ink, appearing to read 'David Haasenritter', with a long, sweeping flourish extending to the right.

David Haasenritter,  
Director, Standards and Accreditation Department  
American Correctional Association

## **Overview of the American Correctional Association**

The American Correctional Association (ACA) is a professional membership organization composed of individuals, agencies and organizations involved in all facets of the corrections field, including adult and juvenile services, community corrections, probation and parole and jails. It has thousands of members in the United States, Canada and other nations, as well as over 100 chapters and affiliates representing states, professional specialties, or university criminal justice programs. For more than 150 years, ACA has been the driving force in establishing national correctional policies and advocating safe, humane and effective correctional operations. Today, ACA is the world-wide authority on correctional policy and expected practices, disseminating the latest information and advances to members, policymakers, individual correctional workers and departments of correction. ACA was founded in 1870 as the National Prison Association and became the American Prison Association in 1907.

At its first meeting in Cincinnati, the assembly elected Rutherford B. Hayes, then governor of Ohio and later U.S. president, as the first president of the association. At that same meeting, a *Declaration of Principles* was developed, which became the accepted guidelines for corrections in the United States and Europe. At the 1954 annual Congress of Correction in Philadelphia, the name of the American Prison Association was changed to the American Correctional Association, reflecting the changing philosophy of corrections and its increasingly important role in society.

Since that time, ACA has continued to take a leadership role in corrections and work toward a professional unified voice in correctional policy. In recent years, one of the Association's major goals has been the development of national and international policies and resolutions of significant issues in corrections. Policies are considered for ratification at the Association's two annual conferences and ratified policies are then widely disseminated. Since its formation, ACA has also had a major role in designing professional standards, and more recently performance based standards and expected practices, for correctional organizations. Since the early 1980s ACA has been involved in a program of accreditation to recognize programs representing excellence in more than 20 different disciplines within the field, with emphasis on evidenced based practices.

Membership in ACA is open to any individual, agency, or organization interested in corrections and the purposes and objectives of the Association. Members include the majority of state, local, provincial, and territorial correctional agencies, individual correctional institutions, local jails, pretrial programs and agencies, juvenile justice programs, schools of criminal justice in colleges and universities, libraries, and various probation, parole, and correctional agencies. Many of ACA's members are employed at federal, military, private, state, and local agencies. Members also include volunteers affiliated with these agencies as service providers or as members of advisory boards and committees.

## **Organizational Purposes of the American Correctional Association**

Among the most significant purposes of the Association as outlined in its Constitution, are:

- *To provide a professional association of persons, agencies, and organizations, both public and private, who hold in common the goal of improving the profession of corrections and enhancing their contribution to that profession.*
- *To broaden and strengthen support for the Association's goals by advocating Association policies, resolutions, positions, and standards to policymakers and the public and by forming coalitions with other professional organizations sharing these goals.*
- *To develop standards for all areas of corrections and implement a system for accreditation for correctional programs, facilities and agencies based on these standards. Where feasible, standards shall be based on performance outcome.*
- *To conduct or sponsor corrections conferences, congresses, institutes, forums, seminars and meetings.*
- *To publish and distribute journals and other informative materials relating to criminology, crime prevention, and corrections and to encourage and stimulate research of these matters.*
- *To promote recognition of corrections as a profession, and those who work in corrections as professionals, and to ensure validity of that recognition by encouraging the recruitment and development of highly qualified corrections professionals, and by developing and implementing a certification program for corrections professionals*

In carrying out these purposes, ACA supports programs for policy analysis, demonstration, effective delivery of health services to offender populations and research. ACA also provides testimony, consultation, publications, conferences, workshops, and other activities designed to stimulate constructive action regarding correctional issues.

## **Organizational Structure of the American Correctional Association**

### **Executive Committee**

The Executive Committee is composed of the elected officers of the Association - president, vice president, treasurer, two Board of Governors members, the immediate past president, the president-elect, and the ACA executive director. The Executive Committee meets at least quarterly and exercises most of the powers of the Board of Governors during the intervals between meetings of the board.

### **Board of Governors**

ACA's bylaws vest control of the Association with a 19-member elected Board of Governors composed of the officers of the Association and five at-large members. The 19 elected governors shall general reflect the Association's composition. The following areas of practice shall be represented by at least one board member:

Correctional Administration	Detention
Institutions	Education
Juvenile	Health Care
Probation	Community Programs
Parole, Aftercare or Post-Release Supervision	

### **Delegate Assembly**

The Delegate Assembly is composed of delegates from the professional affiliates, geographical chapters, membership at-large, Board of Governors, past presidents of ACA, and representatives of each military service. The Delegate Assembly can establish policy, define Association positions on broad social and professional issues, and determine major programs and legislative priorities. They meet at least twice annually, at the Winter Conference and Congress of Correction.

### **Committees**

The majority of the Association's activities take place through committees. Each committee chair reports to the Association's Board of Governors at least twice a year. In this way, the Association collectively benefits from the involvement and contribution of the hundreds of individuals who function on the various committees. Ad-hoc committees are appointed by the president of the Association.

### **Affiliates and Chapters**

Affiliates and state chapters are major features of the Association's structure. They represent professional, regional, and state groups across the United States and Canada. Affiliates and chapters contribute to the professional development of all members by providing consultation in their respective areas of interest and by participating in seminars and workshops at ACA's annual conferences.

## **Major Activities of the American Correctional Association**

### **Standards and Accreditation**

Perhaps ACA's greatest influence has been the development of Expected Practices and the accreditation process. ACA Expected Practices address services, programs, and operations essential to effective correctional management. Through accreditation, an agency is able to maintain a balance between protecting the public and providing an environment that safeguards the life, health, and safety of staff and offenders. Expected Practices set by ACA reflect practical up-to-date policies and procedures and function as a management tool for correctional agencies internationally. The Standards and Accreditation Department manage the expected practices for all standards manuals and the accreditation process.

### **Legislation**

The American Correctional Association is involved with all major issues affecting corrections today. Members and ACA staff maintain close working relationships with committees of the U.S. Congress and all federal agencies and groups whose decisions affect correctional policy. Expert testimony on a wide range of correctional issues is prepared for congressional committee and subcommittee hearings, and recommendations are provided to federal administrative agencies.

To ensure that the concerns and issues of the corrections profession are represented in proposed legislation and public policy, ACA's legislative liaison is addressing legislative and government concerns that will impact the corrections profession. ACA has established partnerships between chapters and affiliates and other national policy making organizations to present a strong collective voice for correctional reform throughout the world.

### **Professional Development**

The purpose of the Association's Professional Development Department is to plan, promote, and coordinate professional development through training seminars, workshops, and published materials including curriculums, resource guides, and monographs.

ACA's training plan calls for a variety of professional development activities. Nationally advertised workshops cover topics such as training for trainers, management training, community-based employment programs, and stress management. On-site workshops for state and local departments of corrections are offered in curriculum development, supervision, communications, and report-writing skills.

The *Training for Correctional Staff Trainers* workshops further the skills of correctional professionals qualified to initiate and deliver training. These workshops also enable agencies to comply with national expected practices for accreditation and ensure that training is job-related and professionally developed and presented.

The department also offers correspondence courses to further professional development. More than 6,000 correctional personnel have completed or are in the process of completing ACA's self-instruction training program for correctional officers. This program, developed under the auspices of the National Institute of Corrections, provides 40 hours of basic training in accordance with ACA expected practices. A score of at least 80 percent on the comprehensive examination must be attained to achieve certification. The Association has similar courses available for correctional supervisors, juvenile caseworkers, and food service employees. Additional courses which cover report writing skills, correctional management skills, legal issues for probation and parole officers, and legal issues for correctional officers are also available.

### **Office of Correctional Health**

ACA's Office of Correctional Health serves ACA members, jurisdictions and its affiliates by supporting health services programs for the effective delivery of health to offender populations. We offer comprehensive services, support, and resources to help correctional facilities provide security and quality care for the offender population. The office is responsible for improving ACA's performance-based health care expected practices, trainings and the health certification program. The health certification program includes Nurse, Nurse Manager, Health Services Administrator and Correctional Behavioral Health.

### **Publications**

As one of the leading publishers of practical correctional publications, ACA produces books, videos, and lesson plans. Among the wide ranging subjects available are management, community, security, counseling, law, history, and health. These excellent resources for career advancement appeal to practitioners and scholars alike. Directories for every major sector of corrections are also published by ACA.

The following is just a few of the many publications that ACA offers:

*Corrections Today* is the major corrections magazine in the United States. Published seven times a year, it focuses on the interests of the professional correctional employee and administrator. Articles include reports of original research, experiences from the field, discussion of public policy, and the perspectives of prominent practitioners and academicians.

*Correctional expected practices* are the most significant improvement in correctional programming. As the basis for accreditation, they give administrators a nationally recognized system for upgrading and improving their correctional services. The Association currently publishes over 20 manuals for every correctional discipline.

To aid in the development of policy with relation to accreditation, *Guidelines for the Development of Policies and Procedures* are available for adult correctional institutions, adult parole authorities/adult probation and parole field services, adult local detention facilities, adult community residential services, juvenile detention facilities, and juvenile training schools.

## **Conventions**

ACA hosts two national conventions each year that attract more than 5,000 professionals from all aspects of corrections; the Winter Conference held in January, and the Congress of Correction, held in August. These events include a variety of workshops, exhibits, and seminars devoted to addressing topics specific to the corrections profession.

## **Contracts and Grants**

The American Correctional Association has a history of successful grant and contract management and administration. ACA has completed contracts and grants of more than \$30 million. These diverse initiatives, which are funded through federal and private sources, add to the technical expertise and knowledge of the organization as well as to the total field of corrections.

## **Overview of the Commission on Accreditation for Corrections**

The Commission on Accreditation for Corrections (CAC) is a private, nonprofit organization established in 1974 with the dual purpose of developing comprehensive, national expected practices for corrections and implementing a voluntary program of accreditation to measure compliance with those expected practices.

The Commission was originally developed as part of the American Correctional Association. In 1979, by joint agreement, the Commission separated from the Association in order to independently administer the accreditation program. Between 1978 and 1986, the organizations shared the responsibility for developing and approving expected practices and electing members of the Commission. On November 7, 1986, the Commission on Accreditation for Corrections officially realigned itself with the American Correctional Association.

The Commission is governed by a Board of Commissioners who reflect the Association's composition, including adult and juvenile components; the geographical distribution of its membership; and representation of ethnic and racial minorities, women, and management and non-management staff. The responsibility of rendering accreditation decisions rests solely with the Commission.

They represent the following specific categories:

- Correctional Administration
- Juvenile
- Institutions
- Probation
- Parole, Aftercare or Post-Release Supervision
- Community Programs
- Detention
- Education
- Health Care
- Legal

### **Association Staff**

Accreditation activities are supported by the staff of the American Correctional Association, Standards and Accreditation Department, under the leadership of the director of the department. Standards and Accreditation Department staff is responsible for the daily operation of the accreditation program. Agencies in the process have contact primarily with the accreditation specialist responsible for their state or agency.

## **Auditors**

Auditors are corrections professionals who have been selected, trained, and certified by the Association. These individuals perform the field work for the Association which includes providing assistance to agencies working toward accreditation and conducting on-site audits of agencies to assess compliance with program requirements. In certain cases, when the Commission believes it necessary, they monitor agencies to ensure maintenance of the conditions required for accreditation. Teams of auditors, referred to as Visiting Committees, are formed to conduct compliance audits of agencies seeking accreditation and reaccreditation.

Auditors are recruited through announcements in prominent criminal justice publications, online and at major correctional meetings. Affirmative action and equal employment opportunity requirements and guidelines are followed in the recruitment of auditors. All auditors have a minimum of five years of corrections experience, have received a recommendation from an agency administrator, and have demonstrated knowledge in the substantive area(s) in which they are engaged to assist the Association. In addition, all auditors must successfully complete the auditor orientation course, participate in an ACA sanctioned training every three years (check out [www.aca.org](http://www.aca.org) for details on training dates and times) and be members of the ACA in good standing. All auditors are approved by ACA.

## **Performance Based Standards and Expected Practices Development**

Development of the traditional ACA standards began in 1974 with an extensive program of drafting, field testing, revising, and approving them for application to all areas of corrections. Since then, local, state, national, and international correctional facilities and programs have adopted the traditional standards, performance-based standards, and expected practices as outlined in ACA's accreditation manuals, for implementation through accreditation.

In the development of expected practices, the goal was to prescribe the best possible practices that could be achieved in the United States today, while both being realistic and practical. Steps were taken to ensure that the expected practices would be representative of past standards development efforts, reflect the best judgment of corrections professionals regarding good corrections practice, recognize current case law, and be clear, relevant, and comprehensive. The expected practices development and approval process has involved participation by a wide range of concerned individuals and organizations. Twenty-five manuals of performance-based standards and expected practices are now used in the accreditation process:

*Performance-Based Standards and Expected Practices for Adult Correctional Institutions,*  
*Performance-Based Core Jail Standards*  
*Performance-Based International Correctional Core Standards—Adult*  
*Performance-Based International Correctional Core Standards—Juvenile*  
*Performance-Based Standards for Adult Community Residential Services*  
*Performance-Based Standards for Adult Local Detention Facilities*  
*Performance-Based Standards for Adult Probation and Parole Field Services*  
*Performance-Based Standards for Correctional Industries*  
*Performance-Based Standards for Juvenile Correctional Facilities*  
*Performance-Based Standards for Therapeutic Communities*

*Performance-Based Health Care Standards for Adult Correctional Institutions*  
*Performance-Based Health Care Standards for Adult Local Detention Facilities*  
*Performance-Based Health Care Standards for Juvenile Correctional Facilities*  
*Standards for Administration of Correctional Agencies*  
*Standards for Adult Correctional Boot Camps Programs*  
*Standards for Adult Parole Authorities*  
*Standards for Correctional Training Academies*  
*Standards for Electronic Monitoring Programs*  
*Standards for Food Service Programs*  
*Standards for Juvenile Community Residential Facilities*  
*Standards for Juvenile Correctional Boot Camps*  
*Standards for Juvenile Day Treatment Programs*  
*Standards for Juvenile Detention Facilities*  
*Standards for Juvenile Probation and Aftercare Services*  
*Standards for Small Juvenile Detention Facilities*

Performance-based standards and expected practices establish clear goals and objectives critical to the provision of constitutional and humane correctional programs and services. The performance-based expected practices include the requirement for practices to promote sound administration and fiscal controls, an adequate physical plant, adherence to legal criteria and provision of basic services. Basic services called for by the performance-based standards and expected practices include the establishment of a functional physical plant, training of staff, adoption of sanitation and safety minimums, and provision of a safe and secure living environment. In offering specific guidelines for facility and program operations, the manuals of performance-based standards and expected practices address due process and discipline, including access to the courts, mail and visitation, searches, and conditions of confinement of special management offenders.

The expected practices are systematically revised to keep pace with the evolution of different correctional practices, case law, and after careful examination of experiences, applying them over a period of time and circumstances. The ACA Standards Committee, which includes membership from the Commission on Accreditation for Corrections, is responsible for expected practices development and revision.

Suggestions and proposals for revisions to the expected practices from the field and interested others are encouraged. The Standards and Accreditation Department has developed an on-line process specifically for this purpose. Proposals should be submitted via the ACA website.

## **Accreditation Process Descriptions**

For over 120 years, the American Correctional Association has been the only national body involved in the development of performance-based standards and expected practices for the correctional field. ACA expected practices are supported by ACA's Standards and Accreditation Department and the Commission on Accreditation for Corrections, which is the evaluating and certifying body for accreditation. The department is responsible for the administration of accreditation and ongoing development of correctional expected practices.

The accreditation process is a voluntary program for all types of correctional agencies. For these agencies, accreditation offers the opportunity to evaluate their operations against international expected practices, to remedy deficiencies, and to upgrade the quality of programs and services. The recognized benefits of such a process include: improved management; a defense against lawsuits through documentation; demonstration of a "good faith" effort to improve conditions of confinement; increased accountability and enhanced public credibility for administrative and line staff; a safer and more humane environment for personnel and offenders; and the establishment of measurable criteria for upgrading programs, staffing, and physical plant on a continuous basis.

A major component of the accreditation process is the expected practices compliance audit conducted by a visiting committee. The purpose of the audit is to measure operations against the expected practices, based on documentation provided by the agency.

### **The Visiting Committee Report**

The results of the compliance audit are contained in the Visiting Committee report. The finished report consists of a number of sections, which are compiled through an exchange of information between the Visiting Committee, the agency, and Standards and Accreditation Department staff. The report is sent to agency staff for review and distribution to the agency administrator. The completed Visiting Committee report is submitted to the Commission for consideration at the next regularly scheduled panel hearing.

The following information is usually contained in the visiting committee report:

*Agency and Audit Narrative*— The agency narrative includes a description of program services, a description of physical plant, number of offenders served on the days of the audit, a summary significant incidents and consent decrees, class action lawsuits and/or judgments against the agency/facility, if applicable. The audit narrative, prepared by the visiting committee chairperson, describes audit activities and findings. The narrative examines issues or concerns that may affect the quality of life and services in an agency or facility. Quality of life issues include areas such as staff training, adequacy of medical service, sanitation, use of segregation and detention, reported and/or documented incidences of violence and crowding in institutions, offender activity levels, programming and provision of basic services. The audit narrative also contains comments as a result of staff and offender interviews, and a detailed explanation of all noncompliant and not applicable expected practices.

*Agency Response*– The agency has three options for expected practices found in noncompliance: a plan of action; an appeal; or a waiver for the requirement of a plan of action request.

A **plan of action** is a detailed statement of tasks to be performed in order to achieve compliance with an expected practice found in noncompliance at the time of the audit. The plan of action designates staff responsibilities and timetables for completion.

An **appeal** is the agency's attempt to change the visiting committee's decision on an expected practice. The result of a successful appeal is a change in the status of the expected practice and a recalculation of the compliance tally.

A **waiver** may be requested when noncompliance with an expected practice does not adversely affect the life, health, or safety of staff and offenders and when quality of life conditions compensate for the lack of implementation of a plan of action. The granting of a waiver by the Commission waives the requirement for submitting a plan of action; however, it does not change the non-compliant finding.

*Auditor's Response*– This section contains the visiting committee's final reply to all responses received from the agency and includes comments regarding the acceptability of plans of action, appeals, and waivers.

## **Accreditation Hearings**

The Commission on Accreditation for Corrections is solely responsible for rendering accreditation decisions and considers an agency's application at its next regular meeting following completion of the visiting committee report. The Commission is divided into panels that are empowered to reach and render accreditation decisions. These panels hear the individual application for accreditation and include a quorum of at least three Commissioners which includes the panel hearing chairperson. Agencies are notified in writing of the date, time, and location of the hearings by Standards and Accreditation Department Staff.

The panel hearing is the last step in the process. With the panel chairperson presiding, panel members discuss issues and raise questions relative to all aspects of agency operations and participation in the process. The information presented during the hearing and in the visiting committee report is considered by the panel members in rendering accreditation decisions.

The agency is invited to have a representative at the hearing and, in most cases, one or more individuals attend. When special conditions warrant, the visiting committee chairperson or a member of the visiting committee also may be asked to attend the hearings. When this occurs, the auditor provides information to help clarify controversial issues and responds to questions and concerns posed by panel members.

Attendance by any other parties (i.e. media representatives, public officials, or personnel from agencies other than the applicant) occurs only with the permission of the applicant agency. In these cases, the applicant agency representatives and panel members discuss procedures to be followed before commencement of the hearing.

### **Conduct of Hearings**

The panel schedule provides ample time for review of each individual agency pursuing accreditation. Hearings are conducted by the panel chairperson in accordance with established procedures. Panel proceedings require that a formal vote be taken on all final actions, i.e., agency appeals, Waiver requests, and the final accreditation decision of the Commission. All panel proceedings are tape-recorded to assist in preparing minutes of the hearings. Panel activities generally occur as follows:

- Applicant agency representatives are requested by Standards and Accreditation Department staff to be on-call to allow for scheduling flexibility.
- A designated waiting area is usually provided for this purpose.
- When the panel is ready to review the agency, the Standards and Accreditation Department staff representative notifies agency representative(s)
- The hearing opens with an introduction by the panel chairperson
- The agency representative is asked to give a brief description of the program

- If a Visiting Committee member is present at the hearing, the panel chairperson may request that the auditor present an account of the visit, focusing on matters particularly pertinent to the decision or specific panel actions. In some cases, however, the panel may wish to call on the Visiting Committee member only to request additional information at different points during the hearing.
- The panel chairperson leads review of each individual non-compliance finding. The agency representative presents information relative to their requests for Waivers, Plans of Action, and appeals. The agency may also present additional materials, including photographs or documentation, for review by the panel.
- Following the agency presentation, the chairperson has the option of calling the panel into executive session to consider the information provided, determine findings, and make an accreditation decision. Whether or not panel deliberations occur in the presence of agency personnel or in executive session, varies from panel to panel, considering the preference of panel members and the sensitivity of issues to be discussed regarding the application.

In final deliberations, the Commission panel:

- Ensures compliance with all mandatory expected practices and at least 90 percent of all other expected practices
- Responds with a formal vote to all appeals submitted by the applicant agency
- Responds with a formal vote to all requests for Waivers, and Plans of Action submitted by the applicant agency

At this time, the panel also:

- Assures that an acceptable Plan of Action will be submitted for every non-compliance finding, including those for which appeals of non-compliance and Waiver requests have been denied by the panel. In judging the acceptability of Plans of Action, the panel ensures that all of the information requested on the form is provided. Furthermore, the feasibility of plans to achieve compliance is considered, including specific tasks, time frames, and resource availability (staff and funding) for implementing proposed remedies.
- Addresses to its satisfaction any concerns it has with Visiting Committee comments about the quality of life in the facility or program, patterns of non-compliance, or any other conditions reviewed by the panel relating to the life, health, and safety of residents and staff
- For each application, a roll call vote to award accreditation, extend an agency in Candidate or Correspondent Status, or deny accreditation is conducted. The options for final action available to the panel are outlined in the next chapter.

- If the panel has deliberated in executive session, agency representatives are invited back into the meeting and informed of the panel's final decision and actions or recommendations on all other issues raised by the applicant. If accreditation has not been granted, the chairperson discusses with agency personnel specific reasons for the decision and the conditions of extension in Candidate or Correspondent Status and procedures for appeal.

## **Accreditation Decisions**

The decisions available to the Commission panel relating to the accreditation of an agency are:

- *Three-year accreditation award* based on sufficient compliance with expected practices, acceptance of adequate Plans of Action for all applicable non-compliant findings, (or approval of the Waivers of the requirement that a Plan of Action be submitted) and satisfaction of any other life, health, and safety conditions established by the panel.
- *Extension of the applicant agency in initial accreditation process* (initial accreditation only) for reasons of insufficient compliance, inadequate Plans of Action, or failure to meet other requirements as determined by the panel, the Commission may stipulate additional requirements for accreditation if, in its opinion, conditions exist in the facility or program that adversely affect the life, health, or safety of the offenders or staff. Extension of an agency is for a period of time specified by the panel and for identified deficiencies if in the panel's judgment, the agency is actively pursuing compliance.
- Continuation of accreditation in *Probationary Status* after reaccreditation hearings is considered when the panel specifies that compliance levels are marginal, there is a significant decrease in compliance from the previous audit (in the case of reaccreditation), or there are quality of life issues that would indicate continued monitoring. Probationary Status lasts for a specific period of time designated by the Commission to allow for correction of deficiencies. While an award of accreditation is granted, a monitoring visit *must* be completed, and the report presented at the next meeting of the Commission. At the end of the probationary status, another monitoring visit *MAY* be conducted to ensure that the deficiencies have been corrected. Following the visit, a report is prepared for review by the Commission at its next regularly scheduled meeting. The Commission again reviews the program and considers removing the probationary status or the revocation of accreditation. When the agency corrects the deficiencies within the probationary status period and the corrections have been verified and accepted by the Commission on Accreditation of Corrections by the Commission on Accreditation of Corrections, the agency resumes its status as an accredited agency.

- *Denial of accreditation* denies initial accreditation or removes the agency from Accredited Status (in the case of reaccreditation) and withdraws the agency from the accreditation program. Situations such as insufficient compliance, inadequate Plans of Action, failure to meet other requirements as determined by the panel or quality of life issues may lead to the denial of accreditation. If an agency is denied accreditation by the panel, it is immediately appealed to the full commission. If the agency is denied accreditation by the full commission, it is withdrawn from the process and is not eligible to re-apply (as an applicant) for accreditation status for a minimum of six months from the date of that panel hearing.

The agency receives written notification of all decisions relative to accreditation after the hearing.

### **Appeal Process**

The accreditation process includes an appeal procedure to ensure the equity, fairness, and reliability of its decisions, particularly those that constitute either denial or withdrawal of Accredited Status, or placement into probationary status. Therefore, if an agency is denied accreditation, it is immediately appealed to the full commission.

If an agency is put in probationary status by the panel, it may submit an appeal of the placement into probationary status. The basis for reconsideration of probationary status is based on grounds that the decision(s) were:

- A misinterpretation of the criteria and/or procedures promulgated by the Commission
- Based on incorrect facts or an incorrect interpretation of facts
- Unsupported by substantial evidence
- Based on information that is no longer accurate
- The reasonableness of the expected practices, criteria, and/or procedures for the process may not serve as the basis for reconsideration.

The procedures for reconsideration are as follows:

- The agency can submit a verbal appeal immediately to the Director of Standards and Accreditation or a written request for reconsideration within 30 days of the adverse decision stating the basis for the request.
- The Executive Committee of the Commission, composed of the officers of the Commission, reviews the request and decides whether or not the agency's request presents sufficient evidence to warrant a reconsideration hearing before the Commission. The agency is notified in writing of the Executive Committee's decision.

- If the decision is made to conduct a hearing, the hearing is scheduled for as soon as possible if the appeal is made verbally or if in writing, for the next full Commission meeting and the agency is notified of the date.
- The agency, at its option and expense, has the right of representation, including counsel.
- Following the hearing held before the Commission, the decision, reflecting a majority opinion, is made known to the agency immediately.
- Pending completion of the reconsideration process, the agency maintains its prior status.
- Until a final decision has been reached, all public statements concerning the agency's accredited status are withheld.

Following completion of the reconsideration process, any change in the status of an agency is reflected in the next regularly published list of accredited agencies.

## **Accredited Status**

The accreditation period is three years, during which time the agency must maintain the level of compliance achieved during the audit and work towards compliance of those expected practices found in non-compliance. Regular contact with Standards and Accreditation Department staff should also be maintained. The Annual Report, Critical Incident Report and Significant Incident Summary forms discussed below are available on the ACA website at [www.aca.org](http://www.aca.org) or through your Accreditation Specialist.

### **Annual Report**

During the three year accreditation period, the agency submits an annual report to the Standards and Accreditation Department. This report is due on the anniversary of the accreditation (panel hearing) date utilizing the template provided by ACA staff (also available at [www.aca.org](http://www.aca.org)). It contains the following information:

*Current Compliance Levels* - This includes any changes in compliance since accreditation, listing on a case by case basis any expected practice with which the agency has fallen out of compliance or achieved compliance.

*Update of Plans of Action* - A progress report is included with respect to Plans of Action submitted to the hearing panel, indicating the status of the completion of the plans. potential revision to plans reflecting the need to request additional time, funds, and/or resources to achieve compliance should also be included.

*Significant Incident Report Summary* - A report is made of events and occurrences at the agency during the preceding year that impact on compliance, agency operation, or the quality of services provided by the agency.

Standards and Accreditation Department staff review the annual report received from the agency and respond to clarify issues or request additional information if necessary.

### **Critical Incident Report**

In addition to submission of the annual report, the agency is responsible for notifying Standards and Accreditation Department staff of any critical incident that has the potential to affect compliance or facility accreditation as soon as possible within the context of the event itself. This information is to be submitted to ACA as soon as possible within the context of the incident itself, using the Critical Incident Report template available at [www.aca.org](http://www.aca.org).

## **Monitoring Visits**

Monitoring visits to agencies in Accredited Status are conducted by an ACA auditor(s) or staff in order to assess continuing compliance. A monitoring visit may be conducted at any time during the accreditation period with notice to the agency. The determination of need for a monitoring visit is based on:

- Compliance levels, findings, and recommendations by the Commission on Accreditation for Corrections during the hearing
- Incidents or events reported by the agency in its annual report.
- Problems indicated by adverse media reports or correspondence received by Standards and Accreditation Department staff, disturbances at the agency, or special investigations.

The length of the visit varies depending on the number of expected practices or special issues that must be addressed during the visit. The visits are conducted similar to expected practice compliance audits, but on a reduced scale. Monitoring visits are charged to the agency at a rate of cost plus twenty-five percent or as stipulated in the contract.

Activities, as a general rule, involve a review of all mandatory expected practices, all expected practices found in non-compliance at the time of accreditation, and any other concerns identified by the Commission. The visit also involves a tour of the agency and interviews with staff and offenders to ensure maintenance of the requirements of accreditation. It concludes with an exit interview during which the auditor informs the agency staff of the findings of the visit.

Following the visit, the auditor prepares a monitoring visit report that addresses findings of the visit. The report includes a list of expected reviewed, explanation of noncompliance findings, results of the tour and interviews with agency staff and offenders, and discussion of any issues believed to be relevant to the agency's accreditation. The report, as with others prepared by auditors, is reviewed and sent to the agency by Standards and Accreditation Department staff.

When a monitoring visit to the agency reveals deficiencies in maintaining compliance levels that existed at the time of accreditation, or less than 100 percent compliance with mandatory expected practices, the agency prepares a response providing explanation of the problems indicated in the report. When the agency has failed to maintain compliance with all mandatory expected practices, the monitoring visit report and the agency response are submitted to the Commission on Accreditation for Corrections for review during a regular hearing. Agency representatives are advised of the date, time, and location of the review, and are invited to attend. At the discretion of the Commission, the agency may be placed in probationary status and a revisit conducted to determine if deficiencies have been corrected.

## **Revocation of Accreditation**

If the Commission panel believes that an agency's failure to maintain continuous compliance with certain expected practices is detrimental to life, health, and safety of residents and staff, the Commission may place an agency on probation. Probationary status last for a specific period of time designated by the Commission at its next regularly schedule meeting. The Commission again reviews the program and considers removing the probationary status or revoking accreditation. When the agency corrects the deficiencies within the probationary status period and the corrections have been verified and accepted, the agency resumes its status as an accredited agency. An agency that does not satisfactorily correct the deficiencies may be withdrawn from accreditation.

Another condition that may result in a rehearing and consideration of revocation is following a significant event in an agency (i.e. major disturbance, death from other than natural causes or allegations of physical/sexual abuse of offenders). Failure to notify the Standards and Accreditation Department in a timely manner may result in suspension of the agency's accreditation. Once ACA is notified of the major event, the Director of Standards and Accreditation may consult with the Executive Committee of the Commission, who may request a monitoring visit. If a visit is warranted, ACA will notify the agency and a date will be established with the concurrence of the facility. The monitoring visit will take place within 14 days of this notification. The monitoring visit report will be sent to the Director of Standards and Accreditation within 7 days of the monitoring visit and then forwarded to the Executive Committee of the Commission. Following review of the report, a determination will be made by the Executive Committee as to whether revocation of accreditation is warranted. Prior to any rehearing, agency representatives will be notified, so that any issues may be addressed and responded to in writing.

Accreditation is revoked for the following reasons:

- Failure on the part of the agency to adhere to the provisions on the contract.
- Failure on the part of the agency to maintain continuous compliance with the expected practices at levels sufficient for accreditation.
- Intentional misrepresentation of facts, lack of good faith, or lack of deliberate speed or a concerted effort to progress in the accreditation process, including the implementation of plans of action.
- Failure to notify ACA of significant incidents in the annual report to the Commission.
- Adverse conditions of confinement that affect the life health, and/or safety of staff and offenders.
- Failure to comply with the conditions of probation or suspension.

Standards and Accreditation Department staff notify the agency in writing of the specific reasons identified by the Commission for the revocation hearing.

## **Expiration of Accredited Status**

Accreditation is granted for a three year period. Unless the agency has applied for reaccreditation and completed activities in the process required for reaccreditation, the Commission withdraws the agency from Accreditation Status after this three year period.

For agencies in Accredited Status that are seeking subsequent accreditation, administrative extensions of Accredited Status may be granted under certain conditions. For example, relocation of the facility, staff turnover, and major renovations often warrant an extension. In these cases, a written request to the Director of Standards and Accreditation is required, outlining the reasons for extending the accreditation period. Agencies that fail to successfully complete an audit within the three year period, or do not receive an extension prior to their expiration date, are withdrawn from Accredited Status.



## **Visiting Committee Report and Hearing Minutes**

### **CONFIDENTIALITY**

*The American Correctional Association and the Commission on Accreditation for Corrections do not disclose to external parties specific information contained in this Accreditation Report or information discussed in the Accreditation Hearing. The Association encourages all participating agencies to provide information to the media about their accreditation activities, including disclosure of the Self-Evaluation and Accreditation Report.*

**COMMISSION ON ACCREDITATION FOR CORRECTIONS**

**STANDARDS COMPLIANCE REACCREDITATION AUDIT**

Arkansas Division of Correction

Central Office/Administration East Annex

Pine Bluff, AR

October 4 - 5 2023

**VISITING COMMITTEE MEMBERS**

Ken Valentine, Chairperson  
ACA Auditor

Lisa DiSabato-Moore  
ACA Auditor

**A. Introduction**

The audit of the Arkansas Division of Correction Central Office/East Annex was conducted on October 4-5, 2023, by the following team: Ken Valentine, Chairperson; and Lisa DiSabato-Moore, Member.

**B. Facility Demographics**

Rated Capacity:	15,732
Actual Population:	16,403
Average Daily Population for the last 12 months:	15,373
Average Length of Stay:	5 years, 1 month, 3 days
Security/Custody Level:	minimum custody-7,094 (43.1%); medium custody-3,461 (21.1%); maximum security-5,848 (35.7%);
Age Range of Offenders:	16-92
Gender:	Male (14,981); and Female (1,422)
Full-Time Staff:	Central office staff 77; Administration East Building 168

**C. Facility Description**

The central office of the Arkansas Department of Corrections is located in Pine Bluff, Arkansas. The office includes two buildings which are labeled as Central Office and Administration East. The Central Office building is located on the grounds of the Pine Bluff prison complex. The Administration East Building is located approximately eight miles away.

The Central Office building houses members of the executive team, the Internal Affairs office, medical management including management for the medical care provider, Wellpath. The building is about 26,000 square feet, single story, and is made up of individual and multi-occupancy offices with exterior windows. There is also a staff break room with chairs removed due to COVID-19 to prevent staff grouping, and two conference rooms. A separate building, but still part of this complex is occupied by the State Police.

The Administration East building houses the Human Resources Division, Accounting, Procurement, Information Technology, and the Centralized Inmate Banking unit. The Administration East building is also one story and is about 86,000 square feet made up of individual offices and cubicles in larger office areas. There is a huge conference/training room and warehouse used primarily by the IT department.

The mission of the agency is to provide public safety by carrying out the mandates of the courts; provide a safe, humane environment for staff and inmates, strengthen the work ethic through teaching of good habits, and to provide opportunities for staff and inmates to improve spiritually, mentally and physically.

The Vision of the agency is to be an honorable and professional organization through ethical and innovative leadership at all levels, providing cost efficient, superior correctional services that return productive people to the community.

**D. Pre-Audit Meeting**

The team met on October 3, 2023, in White Hall, AR, to discuss the information provided by the Association staff and the officials from the Arkansas Division of Corrections, Central Office/Admin East Annex,

The chairperson divided standards into the following groups:

Standards #2-CO-1A-01 to 2CO-1D-10 Ken Valentine (Chairperson)

Standards # 2-CO-1E-01 to 2-CO-5F-01 Lisa DiSabato-Moore (Member)

**E. The Audit Process**

1. Transportation

The team was escorted to the facility by Shelly Jones, Accreditation Manager

2. Entrance Interview

The audit team proceeded to the office of Dexter Paynes, Director. The team expressed the appreciation of the Association for the opportunity to be involved with ADC Central Office/Admin East Annex in the accreditation process.

William Straughn, Deputy Director, escorted the team to the Conference Room where the formal entry meeting was held.

The following persons were in attendance:

Dexter Payne	Director
Dale Reed	Chief Deputy Director
William Straughn	Deputy Director
Aundrea Culclager	Deputy Director
Gaylon Lay	Superintendent
Shelly Jones	Agency ACA Manager
Melissa Moore	Health Services Manager
Joshua Mayfield	Chaplaincy Administrator
Thomas Rowland	Internal Affairs Administrator
Shelly Byers	Assistant Medical Administrator
Frances Spivey	Administrative Assistant
Linda Sanner	Executive Administrative Assistant
Emma Hamer	Rehab Director
Laura Robbins	Public Information Coordinator

It was explained that the goal of the visiting team was to be as helpful and non-intrusive as possible during the conduct of the audit. The chairperson emphasized the goals of accreditation toward the efficiency and effectiveness of correctional systems throughout the United States. The audit schedule was also discussed at this time.

3. Facility Tour

The team toured the Admin East Annex facility from 8:35 am to 10:15 am and the Central Office from 10:30 am to 11:30 am. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

**(Admin East Annex):**

Cpl. Jason Price, Building Security  
Dale Reed, Chief Deputy Director  
William Straughn, Deputy Director  
Shelly Jones, Agency ACA Manager  
Frances Spivey, Administrative Assistant

**(Central Office):**

William Straughn, Deputy Director  
Shelly Jones, Agency ACA Manager  
Frances Spivey, Administrative Assistant

Facility notices were observed throughout both buildings.

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 two office buildings that house the agency Administration Staff have adequate security measures in place to provide needed access as well as meaningful security. The front entrances allow members of the public to access appropriate staff, while providing a barrier between that point and free access to all offices. The buildings are equipped with security cameras both inside and outside the buildings and are monitored by on-duty staff. Key card access is also required for the exterior doors as well as certain restricted areas within the building (i.e. Internal Affairs). The Central Office location is adjacent to a correctional facility which provides an added layer of security with roving patrols after normal business hours.

**Environmental Conditions:**

The office buildings are well maintained and clean. During the audit, inmate crews were observed conducting routine cleaning in both buildings, under the supervision of a security officer. The cleaning chemicals were appropriately inventoried, stored and controlled in an acceptable manner. Both buildings are climate controlled and provide a comfortable working environment. The structure of the buildings provides for access to substantial natural light as well as adequate interior lighting.

**Sanitation:**

Both buildings were observed to be clean and orderly, including the individual offices that were visited by the audit team. Storage and warehouse areas were also observed to be clean and orderly.

**Fire Safety:**

Specific components of a fire safety/preparedness plan were evident in both office areas. Fire extinguishers, evacuation plans, pull stations, and heat and smoke detectors were observed by the audit team. Annual inspection by the local fire department indicated no deficiencies.

**Food Service:**

There is no food service operation at either of these office buildings. The inmates assigned to provide janitorial services are provided meals from their assigned correctional unit. The inmates assigned to the Central Office return to their unit for the midday meal, while those assigned to the Administration East Annex carry sack lunches. The food service operations at the facilities are managed under the prison administration.

**Medical Care:**

These offices are equipped with first aid kits for minor workplace injuries, but the primary source for medical assistance for assigned staff is the community emergency response system. The offices are located in the city of Pine Bluff, AR and have ready access to help from local rescue crews and ambulance services.

Medical care is provided to the inmates within the Arkansas Department of Corrections through a contract with Wellpath. Office space is provided for management and support staff who work directly for Wellpath or who work as a liaison between the Arkansas Department of Corrections and Wellpath.

Wellpath employees provide a wide range of services which include medical care, dental care, and psychiatric care. The management of care includes supervision of site infirmaries as well as site medical departments.

Contracted employees include RNs, LPNs, CNAs, doctors, nurse practitioners, psychiatric nurse practitioners, medical records clerks, dentists, dental assistants, and dental hygienists.

Wellpath is responsible, under their contract, for the recruitment, training, and retention of their employees.

**Recreation:**

Recreation opportunities are provided by and managed by each facility.

**Religious Programming:**

The administrator of chaplaincy services works out of an office in the central office building supervising 24 paid chaplains as well as over 100 badged volunteers. Volunteers approved by facility administrators may be recruited and are required to participate in orientation at the facility. The administrator or designee provides guidance and information to facility level chaplains and to management staff regarding operational issues that involve religious programs or policy.

**Offender Work Programs:**

In addition to facility job assignments such as food service, laundry, janitorial services and etc. the Arkansas Department of Corrections provides inmates with additional work opportunities to help inmates develop positive work skills. The farm program is available at several institutions which includes growing and processing a variety of crops, poultry operations, milk production, and a slaughterhouse operation. The Correctional Industry program includes operations for furniture, printing, garment, and upholstery. The “309” program allows inmates to work outside the facility for a variety of non-profit or government agencies. Inmates are motivated to take part in this program to gain access to furloughs. The work release program allows inmates to also work for private employers outside of the facilities, which has often resulted in permanent employment upon release.

\*\* During COVID any programs requiring movement of inmates was suspended but has since been reinstated.

**Academic and Vocational Education:**

The academic and vocational education programs are administered and staffed through a specialized school district which encompasses all of Arkansas Department of Correction facilities. This school district provides classes that include GED, ESL, and vocational training. The GED program is required for any inmate who does not possess a GED or high school diploma. Vocational training opportunities include automotive, horticulture, cosmetology, welding, and plumbing.

**Social Services:**

Arkansas Department of Corrections Health staff provide a psychological assessment of all new arrivals and uses this information for classification and determination of additional needs. They have a Residential Programs unit for intensive treatment, and a Special Needs unit to transition mentally ill inmates back into the general population. Department staff also provide counseling and suicide prevention services, and eight self-study programs that offenders may elect to take, including anger management, stress management, domestic violence, criminal thinking, and relapse prevention classes.

Mental Health Services also provides 800 treatment beds dedicated for inmates participating in one of three different chemical addiction treatment programs, depending on their addiction diagnosis.

The Fast Track program is a four-month program for inmates with a shorter sentence. The Substance Abuse Treatment Program can take from six to twelve months to complete and is a residential treatment program using a relapse/recovery approach. The Therapeutic Community is a long-term residential model with completion times varying from nine to eighteen months.

Male sex offenders are provided counseling through the 12 months, 238 bed Reduction of Sexual Victimization Program (RSVP). Female sex offenders are offered similar programming in a 38 bed Sex Offender Female Treatment (SOFT) program.

The Sex Offender Community Notification Assessment Committee (SOCNA) performs individualized community notification assessment on all adults convicted of targeted offenses and who are required to register by law.

**Visitation:**

The Central Office promotes a policy which permits offenders to visit with family, friends, attorneys, and spiritual advisors under conditions consistent with security and good order of departmental operations. For most offenders, this means access to contact visitation for up to four hours weekly, four times a month. Offenders may have up to 20 people on their visitation lists and may be granted special visits with visitors who travelled long distances or under other unusual circumstances.

\*\*Due to COVID visitation was temporarily suspended but has now been reinstated.

**Library Services:**

The Central Office employs two librarians who coordinate library services throughout the Arkansas correctional system. The library contains a collection of general and reference materials, newspapers, and periodicals.

Legal materials include hardcover books, as well as a Lexus Nexus computerized system.

Staff from the various facilities come to the library and select items to take back to their facilities.

**Laundry:**

Laundry services are provided at each facility and are managed under the prison management function.

**F. Examination of Records**

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

1. Litigation

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

2. Significant Incidents/Outcome Measures

There were no significant incidents at either the Central Office or Admin East Annex during this audit cycle.

3. Departmental Visits

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

Department Visited

Person(s) Contacted

**Admin East Annex:**

Human Resources

Allison Kellebrew – HR  
Ashley Wilkins – HR  
April West HR/Payroll  
Debra Barnes – HR Manager

	Della Simmons – HR Specialist
	Nick Stewart – HR and Training Administrator
	Angel Childs – HR Admin Assistant
	Jessica Dunn – Assistant HR Administrator
	Tracey Lawrence – Associate HR Administrator
	Stefanie Glasscock - Associate HR Administrator
	Greg Murrey – HR Payroll Reports
	Karmin Culpepper – HR Employment
	Jasmine Brown – Admin. Specialist HR Benefits
	Rebecca Holsted – Leave Time/HR
	Nichole Metott – Employee Grievance
Budget/Finance	April Davis – Budget
	Renee Scott – Admin. Specialist for Budget
IT	Cassandra Bennet - IT
	Rhonda Patterson – IT Administrator
	Johnny Tooke – eOMIS Support
	Zac Cosner – IT Support
	Bryan Rodgers – eOMIS Research
	Nick Donaldson – IT Support
	Matt Rodgers – IT Support
	Sherry Adair – IT Purchasing Tech
	Charonda Rushing – eOMIS Support
Trust Fund Banking	Rose VonJungein – Trust Fund Banking
	Charlotte Thomas – Trust Fund Banking
	Mary Owens – Trust Fund Banking
	Terry McDonald – Trust Fund Banking
	Kelly Gill – TCB Supervisor
	Vickie Vice – Trust Fund Banking
	Sam Domineck – Trust Fund Banking
	Laconda Everett – Trust Fund Banking
	Debra Mosley – Trust Fund Banking
	Marquitta Wiley – Trust Fund Banking
Library Services	Evelyn Hosman – Assistant Librarian
Audit Department	Tameca Williams – Internal Audits
	Diana Cole – Auditor
Accounting Department	Cory Yarberry – Accounting Control
	Judy May – Accounting Control
	Jeff Jerry – CFO Accounting Control
	Jessie Owen – Accounts Payable
	Roxie Brockman – Accounts Payable
	Donna Heflin – Accounts Payable
	Lisa Thornburg – Admin Assistant III
	Sherry Jones – Fiscal Support Supervisor
Central Records	Kerry Clark – Victim Coordinator
	Megan Works – Centralized Records
	Michelle Middleton – Centralized Records

Programs  
Sex Offender Program

Cozette Fuller – Programs  
Andi Moore – Sex Offender Programs  
Seletta Hamilton – Sex Offender Programs  
Nicole Pugh – Attorney Supervisor (SOCNA)

**Central Office:**  
Administration

Dexter Payne – Director  
Effiee Murphy – Admin III  
Linda Sanner – Exec. Asst./Director  
Karen Bottoms – Asst./CDD Reed  
Randy Shores – Emergency Preparedness  
Tina Owens – Admin. II (EP)

Medical

Deshona Collins – Medical Grievance  
Ann Teer – Infection Control/HIC Coord.  
Taylor Green – Health Care Analyst  
Aundrea Culclager – DD Health Services /Programs  
Melissa Moore – Medical Services Administrator  
Ayn Freygang – Medical MSW  
Dana Haynes – Wellpath Regional Manager  
Andre Haywood – Wellpath HR  
Jaron Furgerson – Wellpath/Regional Infection  
Control Nurse  
Sharron Spears – Wellpath/Regional Utilization  
Reviewer  
Kavin Snyder – Wellpath/IT Implement Spec  
Marsha Gardner – Wellpath/Regional Care  
Manager  
Sondra Parker – Wellpath/Regional Dir. Of  
Nursing  
Andria Cantrell – Wellpath/309 Coord.  
Tonia Dixson – Wellpath/Regional AA  
Chris Horan – Wellpath/Regional Med Dir  
Jason Kelley – Wellpath/Regional Manager  
Michelle Griswold – Wellpath/Reg Nurse Practition  
LsStephanie Scott – Wellpath/eOMIS Trainer-IT  
Dona Buie – Wellpath/Regional Vice President  
Lorene Claibourne- Wellpath/Admin Asst.  
Charla Harrison – Wellpath Medical Records  
Charlotte Gardner – Wellpath/Reg. Omb.  
Jennifer Kelley – Wellpath/CQI Coord.  
Tiffany Compton – Research/Planning Coord.  
Tanu Tualatamalelafi – Computer Support Tech  
Darrell McHenry – Research/Planning  
Joshua Mayfield – Senior Chaplain  
Daisha Thompson – Classification Administrator  
Roni Gean – Admin III (IAD)

Research/Planning

Chaplain Services

Internal Affairs

	Derwin Metcalf – IAD Investigator
	Joshua Hickey – IAD Investigator
	Susan Townsend - IAD Investigator
Mental Health	Sheila Laney – Admin III/MH
	Emma Hamer – Mental Health
SATP	Kaneichua Johnson – SATP Analyst.
	Jamine Price – Admin II Inmate Grievance
	Gail Stith – SATP/SURS/TC Program Manager
	Kari Ward – Admin II
Superintendent/Work Release	Gaylon Lay – Superintendent/Work Release
	D’Carlos Johnson – ACT 309 Coord.
Inmate Grievance	April Gibson – Inmate Grievance
Public Information	Laura Robbins – Public Info. Coord.
Constituent Services	Heather Knight – Constituent Services

4. Shifts

a. Day Shift

The team was present at the facility during the day shift from 8:00 am to 4:30 pm.

During the day shift the audit team toured the Admin East Annex and interviewed staff in all departments. The team then went to the Central Office, toured that building and interviewed staff there. The team then reviewed the standards files.

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

The team reviewed the status of standards previously found non-compliant, for which a waiver was not granted. The only previous non-compliant standard was granted a waiver.

**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 was able to interview three (3) inmates who worked in janitorial services at the Central Office. All three were grateful for the opportunity to work at the Central office. One had ten years remaining on his sentence having already served 15 years. One had two years remaining and the other had six months remaining.

All three said that they received training in relation to their job assignments; that they have access to their case managers when requested; and that they feel safe at their facility.

## 2. Staff Interviews

During the tours and after reviewing standards files, the team interviewed approximately 55 staff members. Several have been working for ADC for 30 or more years. One lady was 84 year old and has worked there for over 35 years and has no plans to retire. Chief Deputy Director Reed has worked for ADC for over 51 years. There were also a number of new employees. All staff had only positive comments about their employment with ADC.

## **H. Exit Discussion**

At the request of Director Dexter Payne, the exit interview was held at 10:00 am in the Conference Room in the Admin East Annex building with Director Payne and 54 staff in attendance.

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**

<b>Manual Type</b>	Administration of Correctional Agencies, 2 <sup>nd</sup> edition
<b>Supplement</b>	2016 Standards Supplement
<b>Facility/Program</b>	Arkansas Division of Corrections Central office/Admin East Annex
<b>Audit Dates</b>	October 4-5, 2023
<b>Auditor(s)</b>	Ken Valentine, Chair Lisa DiSabato-Moore, Member

	<b>MANDATORY</b>	<b>NON-MANDATORY</b>
Number of Standards in Manual	2	141
Number Not Applicable	0	1
Number Applicable	2	140
Number Non-Compliance	0	0
Number in Compliance	2	140
Percentage (%) of Compliance	100%	100%

Number of Standards *minus* Number of Not Applicable *equals* Number Applicable  
Number Applicable *minus* Number Non-Compliance *equals* Number Compliance  
Number Compliance *divided by* Number Applicable *equals* Percentage of Compliance

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

NONE

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Division of Correction

Central Office/Administration East Annex

Pine Bluff, AR

October 4 - 5 2023

Visiting Committee Findings

Mandatory Standards

Not Applicable

NONE

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Division of Correction

Central Office/Administration East Annex

Pine Bluff, AR

October 4 - 5 2023

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

**Standard # 2-CO-1A-03**

PRIVATE CORRECTIONAL AGENCIES HAVE A CONSTITUTION OR ARTICLES OF INCORPORATION THAT MEET ALL OF THE LEGAL REQUIREMENTS OF THE GOVERNMENTAL JURISDICTION IN WHICH THE AGENCY IS LOCATED.

FINDINGS:

The Arkansas Department of Corrections is not a private correctional agency.

**COMMISSION ON ACCREDITATION FOR CORRECTIONS**

**PANEL ACTION REPORT**

2024 Winter Conference  
Washington, D.C.  
Friday, January 5, 2024

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Agency Name: Arkansas Division of Correction  
Facility Name: Central Office/Administration East Annex  
Facility Location: Pine Bluff, AR

Agency Representative: Dexter Payne, Arkansas DOC Director  
William Straughn, Arkansas DOC Deputy Director  
Shelly Jones, Arkansas DOC Agency ACA Manager

Panel Member: Lanette Linthicum  
Pete Grande  
Timothy Ward  
Angela Arabie

Staff: Jennifer Stohr

**Panel Action**

**Results**

None required

**Accreditation Panel Decision**

Moved: Grande

Seconded: Ward

**Accreditation Vote:**

**Yes**

**No**

Commissioner: Lanette Linthicum	X	
Commissioner: Timothy Ward	X	
Commissioner: Pete Grande	X	
Commissioner: Angela Arabie	X	

**Final Tally**

Mandatory:	100%
Non-Mandatory:	100%