

COMMISSION ON ACCREDITATION FOR CORRECTIONS

STANDARDS COMPLIANCE REACCREDITATION AUDIT

Arkansas Division of Corrections
Grimes Unit
Newport, Arkansas

April 17-19, 2024

VISITING COMMITTEE MEMBERS

Marilyn Lynn McAuley, Chairperson
ACA Auditor

Anita Carnell
ACA Auditor

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ACA Auditor

A. Introduction

The audit of the Arkansas Division of Correction Scott Grimes Unit, Newport, Arkansas, was conducted on April 17-19, 2024, by the following team: Marilyn Lynn McAuley, Chairperson; Anita Carnell, Member; and Frederick Schoonover, Member.

B. Facility Demographics

Rated Capacity:	1077
Actual Population:	1094
Average Daily Population for the last 12 months:	1087
Average Length of Stay:	1 Year, 11 Months, 25 Days
Security/Custody Level:	Maximum, Medium, Minimum
Age Range of Offenders:	18 Years to 81 Years
Gender:	Male
Full-Time Staff:	231
15 Administrative, 6 Support, 4 Program, 206 Security, 44 Other/contract	
Vacancy is 94	

The population on the first day of the audit was 1093 inmates.

C. Facility Description

The Scott Grimes Unit, located at 300 Corrections Drive, Newport, Arkansas 72112, is a maximum/medium/minimum level male facility situated on the White River, approximately two miles East/Northeast of the historic downtown city limits of Newport and approximately 45 miles South of Jonesboro, Arkansas, and around 88 miles from Little Rock. Newport, Arkansas is located in the county seat of Jackson and is situated in the Northeast area of the state.

The Grimes Unit and McPherson Unit, constructed in 1997, initially opened their doors in 1998 under private ownership of the Wackenhut Correction Corporation. In 2001 the Units were relinquished to State operations. The last date of renovations at Grimes Unit was 2003. The McPherson Unit, located nearby, and Grimes Units embodied the Newport Complex and were under one Superintendent until 2015. In December 2015 the Grimes and McPherson Units were separated into two facilities, each overseen by their own Warden.

The Grimes Unit physical plant is 200,734 square feet and sits on approximately 325 acres of land. The perimeter of the facility is surrounded by a 12-foot-high double fence reinforced with razor wire.

The total number of state employees is 231 (Administrative 15 Support 6, Programs 4, Security 206) with 44 contract employees (School/Voc-Tec 11, Health Care 31, & Parole Services 2).

Work hours are Administrative Staff 8:00 a.m. to 4:30 p.m. and 7:30 a.m. to 4:00p.m. (on call as needed); Security Staff Days 5:45 a.m.. to 6:00 pm.. & Nights 5:45 pm. to 6:00 a.m.; and Kitchen Staff Mornings 1:00 a.m. to 11:00 a.m. and Evenings 9:00 a.m. to 7:00 p.m. Extraordinary Hours is for Emergency Response Team on call 24 hours per day-seven days per week.

Vacancy rates throughout the nation are running well above the ACA Standard of 10% and all correctional agencies are focusing on retention and filling positions. On February 26th, 2024, the Grimes Unit was privileged to host Academy class 2024C at the Tech Depot in Newport, Arkansas. Classes were instructed by the Unit Trainer for the Grimes Unit, along with other various instructors throughout the course. Students will complete academic studies and physical training. The academy is four weeks in a classroom environment and two weeks of on-the-job training at the cadet's assigned unit. The cadets were required to maintain a 70% average. The Grimes Unit is expected to welcome four new correctional officers following their graduation.

There are ample Religious, Educational, Mental Health, Work, and Private Business Program opportunities for inmates at the Grimes Unit including Prison Industry Enhancement Program (PIECP), producing Claridge Products such as Cork Boards, Tac Boards, and Dry Erase Boards; Educational opportunities such as GED, ASU Newport College, and a Vocational Tech Barber College; Regional Maintenance Inmate Crew works with surrounding State Agencies and City Municipalities to provide community service to the public; Substance Use Rehabilitation Services providing inmates with drug history, educational information services to assist them in their transition to return to society; Mental Health programs such as Anger Management, Communication Skills, Domestic Violence, Substance Abuse Education, Stress Management, Parenting, Thinking Errors and Victims of Domestic Violence; K-9 tracking leash dogs used to assist surrounding law enforcement agencies as well as the Division of Corrections; Grimes Unit Garden that is maintained by inmates for the purpose of utilizing fresh vegetables to serve the inmate population; and Principal Application Life Skills (PALS) a religious based program overseen by the Chaplaincy Department.

The Grimes Unit has an eight Zone Map Legend including Zone one is Housing Unit 1 (Barracks 1-7), Programs, Library, School, Barber School, Hallway-turn outdoor to H1, Both Captains Office, Tool Room, Chemo Mixing Room, Deputy Warden Office, Mental Health; Zone two is Housing Unit 2 (Barracks 8-14), Gym, Inmate Council Room, Turn-out/Shakedown, Hallway-turn outdoor to H2, SURS Supervisors Office, Main Commissary, H-1 and H-2, Pill Call Room, Chaplain Office; Zone three is Housing Unit 3 (Barracks 15-18), Outside Recreation yards, Kitchen, Laundry, Intake, Maintenance, Sally Port, ODR, Building Major Office, Count Room, Chow Hall, Tray Room, Camera Room, Dry Storage; Zone four is Housing Unit 4 (Barracks 19-22), Infirmary, Visitation/Chapel, H-4 Commissary, Commissary Storage, Assistant Chaplain Office, Chaplain Storage, EPC Office, Central Control; Zone five is Restrictive Housing, 5 Side, 6 Side; Zone six is Administration; Zone seven is Industry; and Zone eight is ICC Grage, Horse Barn, Dog Kennel, a l l outside areas.

The Grimes Unit maintains an inmate population of approximately 1087 Inmates. Housing units one (1), and two (2) consist of two (2) types of barracks arrangements; eight (8) open barracks, with a maximum occupancy of 42 inmates per barracks; and six (6) cell block barracks, with a maximum occupancy of 56 inmates, housed in double occupancy cells. Housing 3 and 4 consists of double occupancy cells, with a maximum occupancy of 52 inmates. The Restrictive Housing area consists of a five side and six side which consists of single occupancy cell blocks. The six side consists of a total of 42 inmates and the 5th side consists of 45 cells.

The Inmate barracks are equipped with two (2) inmate telephones, two (2) television viewing areas, and tables with seats for letter writing or the pursuit of board games. Each barrack is also equipped with a Kiosk where inmates electronically fill out commissary orders, sick call requests, and can engage in video visits with contacts approved through the visitation system.

Grimes Unit's Medical Department is comprised of a six(6) bed Infirmary, two (2) double-occupancy cells, and two (2) single-occupancy observation cells, one of which is used to accommodate RHU inmates.

The facility's physical plant also includes an onsite: Canine Unit, a Horse Barn Program, a Garden, and an ADC Industry PIECP operations. These programs provide valuable skill training for the inmates. When touring the sites the auditors found the areas to be clean, organized, and compliant with standards.

It is the Mission of the Grimes Unit to provide: "Public Safety by carrying out the mandates of the courts, provide a safe, secure, and humane environment for both staff and inmates, provide opportunities for inmates to serve their sentences positively and productively with the available programs, provide the training and staff support for employee development of professional correctional standards and attitudes, and provide prudent fiscal management of ADC facilities, equipment, and resources. We will strive to create a model correctional system by carrying out the intentions of the courts, Governor, Legislature, and the Director of the Department of Corrections".

Intake for the Grimes Unit is completed at the Ouachita Unit in Malvern which is a "Parent Unit" where the inmates will wait until programming slots are available at the appropriate unit which usually takes four-six weeks. Intake and the Laundry Supervisor stated Grimes will receive about 30 new commits each month. In the intake process, inmates are given handbooks and clothing. Any property is inventoried. New commits are screened by medical, fed and sent to the intake barrack. Inmates are processed through Classification and are assigned to Class 2 upon arrival. Class 4 inmates are problematic and are assigned to restrictive housing. Class 3 inmates are improving in their behavior. Class 2 inmates are the intake inmates who come into the facility. Class 1 inmates are general population inmates with controlled behavior and are allowed to have the unit tablets. They have no major or minor disciplinary reports and have access to better job opportunities. Classification is overseen by the Classification and Assignment Officer and the Administrative Specialist.

Inmates are reviewed for the regional maintenance crew, bedmoves, reviewed for health restrictions, building utility, which is mostly cleaning, or as picket men (infirm inmates who can get out of bed to help shuck corn or fold laundry.) Classification personnel updates ID photos at annual review unless appearance has drastically changed. Classification boards are made up of medical/mental health staff, the field major, deputy warden, school personnel, the chaplain and sometimes maintenance personnel. Classification for restrictive housing including new commits takes place every Tuesday, for unit management every Wednesday and for the general population every Thursday. Inmates may self-request consideration for reclassification or may be recommended by supervisors.

D. Pre-Audit Meeting

The team met on April 14, 2024, in Newport, Arkansas, to discuss the information provided by the Association staff and the officials from McPherson and Grimes Units.

The chairperson divided standards into the following groups:

1A-01 to 2G-03 & 4A-01 to 4B-34 (234 files) Marilyn Lynn McAuley, Chairperson
3A-01 to 3D-19 & 5A-01 to 5F-08 (178 files) Frederick Schoonover, Member
6-A-01 to 7F-08 (162 files), Anita Carnell, Health Care Member

The Wardens from both Ronald McPherson Unit and Scott Grimes Unit met with the audit team for this Pre-audit meeting and the following questions were asked and answered.

The auditor asked if staff and prisoners were aware of the audit and did staff or prisoners ask orally or in writing to speak with the auditor. Warden Hurst advised that staff and inmates were aware of the ACA Reaccreditation Audit and no staff or prisoner requested to speak with the auditors. The auditor advised that ACA had referred to three communications from inmates requesting, through ACA, to speak to the auditors. Response to the three communications is addressed later in this report.

The auditor was advised by the Warden that there were no consent decrees, class action lawsuits, adverse judgment, or monitoring reports.

Also, Warden Hurst advised there was nothing the audit team needed to be aware of that had occurred or was occurring that could jeopardize the audit.

Warden Hurst advised that the facility had received ACA Reaccreditation notices, and they were posted around the facilities. The audit team observed notices of the ACA Reaccreditation Audit strategically posted throughout the facilities. Interviews with staff and inmates confirmed that they were aware of the ACA audit.

E. The Audit Process

1. Transportation

The team was escorted to the facility by Shelly Jones, State ACA Manager.

2. Entrance Interview

The audit team proceeded to the office of Warden Hurst. The team expressed the appreciation of the Association for the opportunity to be involved with the Scott Grimes Unit in the accreditation process.

Warden Thomas Hurst escorted the team to the Visiting Room where the formal entry meeting was held.

The following persons were in attendance:

Thomas Hurst	Warden
Claudia Harris	Deputy Warden
John Sparks Jr.	ACA Manager
John Haynes	Building Major Maurice
Williams Field	Major
Lt. Richard Lee	Emergency Preparedness Coordinator
Delynn Sorrells	Deputy Warden Assistant
Cathy Jeffery	
Karmen Epperson	Classification Assistant
Alan Rogers	
Perry Jackson	
Sgt. Erin Zuber	
Phillip Thompson	
Abby Rizor	Records Supervisor
Andrew Stover	
Crystal Runsick	Human Resource
Bill Robertson	Maintenance Supervisor
Sgt. Peter Massing	Tool Control, Fire, Safety & Sanitation Supervisor
Shurika Brown	Grievance Coordinator
Amy Billings	
Ashley Wells	
Tanya Higgins	Business Manager
Paula Cowell	Administrative Review Officer
Megan Pigford	Classification Officer
Lynda Teague	
Marcus Willkerson	Unit Trainer

Central Office/Visiting Staff in attendance:

Dexter Payne	Agency Director
Dale Reed Chief	Deputy Director
William Straughn	Deputy Director
Aundrea Culclager,	Deputy Director
Manda Bass	DOC Social Media
John Moss	Deputy Warden McPherson
Jason Kelly	Regional Manager WellPath
Gaylon Lay	Superintendent Work Release
Johnnie Swift	Major McPherson
Ronald Martin	DOC Construction Coordinator
Brian Drost	Maintenance Coordinator
Shelly Jones	State ACA Coordinator
Brian Taylor	DOC Construction Corporal
Lt. Jacob Higgins	Fire Safety Coordinator
Virginia Robins	McPherson ACA Manager
Dona Gordon	RVP WellPath
Kim Rosenthal	RDO WellPath
Chris Horan	SMP WellPath

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 facility from 1:30 p.m. to 3:30 p.m. on April 17, 2024, and 8:45 a.m. to 11:30 a.m. on April 18, 2024. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Thomas Hurst, Warden
Claudia Harris, Deputy Warden
John Haynes, Major
John Sparks Jr. ACA Manager
Avery Cox, Sergeant
Corporal Kenny Cantrell
Richard Lee, Lieutenant
Phillip Thompson
Shurika Brown, Scribe
Abby Rizor, Scribe
Paula Cowell, Scribe

Billy Robertson, Maintenance Supervisor
Lt. Jacob Higgins, Fire and Safety Manager

During the tour staff shared their responsibilities and responded to questions in a completely concise manner showing their knowledge and pride in their work.

While on the tours, the auditors observed ACA Reaccreditation Audit notices strategically placed throughout the facility.

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 Grimes Unit is a multi-security level facility. Security staff included 206 security positions with 94 vacancies. Positions include two (2) Majors (Chief of Security-Field Operations and Chief of Security-Building Operations), two (2) Captains, seven (7) Lieutenants, 44 Sergeants, 146 CO-1/ Corporals. The one (1) F i e l d Major while at Grimes Unit is also responsible for field security at the McPherson Unit. The Unit is a multi-security level facility.

The perimeter is surrounded by a double chain link fence reinforced with a height of 12 feet. The outer fence is topped with two rolls of coiled taunt razor ribbon wire. The inner fence is topped with three rolls of coiled taunt razor ribbon wire. The facility is patrolled by two alternating full time perimeter vehicles that service 24 hours per day, seven days a week.

The perimeter security is comprised of a microwave, hard wire detection alarm system consisting of seven zones, all servicing the facility 24 hours per day, seven days per week. LED lighting, including 28 total lights on outside poles, serves to illuminate the outside perimeter of the facility during hours of darkness. Grimes Unit's Central Control operations is responsible for the monitoring of all facility security systems.

The facility has three points of egress into the facility. The Administration building, Zone 6, serves as the facility's main entrance and pedestrian gate through which staff, contractors, and visitors enter. The Sallyport, Zone 3, serves as the second point of egress and services all truck traffic. Zone 11 serves as the third point of egress which services the staff and offender field squads. An auditor observed field squads using this point of egress and going to work. The process was orderly, efficient, and professional.

When entering the main pedestrian point of egress, identification is checked, with log entry on each individual entering the building. This includes staff, inmates, volunteers, contractors, and other authorized personnel. Entrance and exit into the compound are through the front administration building. Everyone entering the compound proceeds with a pat down search and a metal detector, and if all clear, entry is granted. All personal items are processed through an x-ray machine prior to entering into the facility.

Central Control operations is responsible for the monitoring of all security surveillance. There is a PBX room before entering Central Control. The PBX room opens gates and doors, answer phone calls, and handles shift change of receiving and distributing equipment.

The Grimes Unit has a total of 145 cameras that have been strategically positioned throughout the unit. The cameras cover staff entrances, living quarters, outside perimeter, and inmate-work areas. Cameras are monitored in Central Control and the camera room.

Post orders and evacuation procedures were reviewed and found to be clear, concise, signed, and in order. Central Control staff interviewed were very knowledgeable and understood their role as being the nerve center of the facility.

Searches are conducted on inmates as they depart and return from varied work assignments. Inmate movement is controlled, and inmate searches are conducted randomly in key areas within the facility. During a 24-hour period there are nine counts with four formal day counts at 6:30 a.m.; 9:30 a.m.; 1:30 p.m. and 5:30 p.m.; and 5 formal night counts at 6:30 p.m.; 2:30 p.m.; 10:30 a.m.; 2:30 a.m.; and 5:30 a.m.. Additional counts are conducted throughout the day/evenings as needed.

The Grimes Unit is responsible for a central armory shared with the McPherson Unit. There is a staff member assigned Monday-Friday to issue weapons and security equipment needed. Emergency Response Team equipment is also maintained in this area. Grimes and McPherson Unit share a 12-person Emergency Response Team (ERT). This team assists both the facilities with shakedowns and emergency situations, such as riots, forced cell movement, etc. Emergency Response Team is on call 24 hours per day-seven days per week.

The armory is supervised by a certified armorer. Weapons in the armory include 28 shotguns, 14 rifles and 62 Glocks with ammunition. Less lethal weapons include 4-4mm launchers-12 ga. Rubber pellets. Inventories are done daily and monthly. All items were found properly labeled, secured, and inventoried according to policies and standards.

Keys for Grimes Unit that are kept in the Central Control include Daily, Emergency, and Restricted. Backup keys are located in the armory. KOP/24-hour keys are issued to Administration and Security Supervisors.

Keys are inventoried daily and monthly.

McPherson and Grimes share ICC Garage work assignment responsibilities. Inspection found all Class A and Class B tools were secured and properly inventoried. Inspection of the Horse Barn and the Canine Unit found all assigned chemicals, tools, and equipment were sorted properly.

Mailroom services are provided by the Grimes Mailroom Services Coordinator Andrew Stover and one Mailroom Clerk Nancy Chapman. The Mailroom is open 7:30 a.m.-4 p.m. Monday through Saturday. Each of the two staff members work every other Saturday so that six days a week coverage for the mailroom is provided. Approximately ten-12 crates of regular mail are received and reviewed each week. The mail crates are run through the scanner upon arrival at the facility and all non-legal letters and mail pieces are opened.

The inmates have been informed that all individual mail pieces received must be three written pages or less because only four pages are allowed to be copied, otherwise the letter will be considered contraband and returned or disposed. Mailroom staff then copy each letter along with the envelope, giving only the copies to the inmates to prevent contraband from entering the facility. All emails sent on the housing unit kiosks are also reviewed and cleared by mailroom staff with assistance from the Visitation clerk and the Deputy Warden's assistant. Mr. Stover stated that he has found Suboxone strips beneath a mailing label. He also stated that he watches closely for the mention of Cash App transfers when inmates and correspondents share usernames. The area appeared neat, clean and of adequate size. Available logs indicated that the mail and packages are delivered as per ACA standard requirements.

Special Management and Restrictive Housing:

The Grimes Unit does not have a Special Management Unit.

The Grimes Unit maintains two (2) Restrictive Housing Units (RHU) with a total of 87 beds. Housing Unit five (5) is comprised of one (1) Barrack which contains 45 restrictive single-occupancy cells. Housing Unit six (6) is comprised of one (1) Barracks which contains 42 restrictive housing , single-occupancy cells. Grimes RHU also maintains two (2) cells with one (1) suicide/prevention and one (1) behavioral control cell, with one located in each of the restricted housing units. The medical department also provides one additional single observation cell specifically designed to monitor RHU offenders in crisis. The RHU Units house inmates for administration and disciplinary reasons. The RHU areas are supervised by a Lieutenant, with the assistance of one (1) Sergeant, and three (3) Corporals, Monday through Friday with the assistance of shift staff seven days a week.

At the time of the audit there were 84 inmates in RHU. Of that number 29 inmates were in Extended Restrictive Housing and 55 inmates were in Restrictive Housing.

During the three (3) years of the audit cycle no inmates were released directly from Extended Housing to the community.

Review of logbooks found documentation of security cell to cell observation rounds were found compliant. Daily rounds conducted by the Senior Security Supervisor and medical/mental health staff rounds were logged in all of the RHU areas. Weekly programming staff rounds are conducted in the RHU. Weekly rounds are conducted by one of the facility Chaplains. Additional religious requests or services are provided by the Chaplain in accordance with provisions noted by security.

Medical and mental health services are provided to all inmates housed in RHU. Inmates request medical care/assistance by submitting paper requests to nursing staff during daily cell to cell rounds. Documentation reflects required screenings are reviewed promptly in accordance with health care protocols. Medical staff nurses conduct medication passes (with security escort) twice daily or more often as required. Mental health staff advisors (2) conduct RHU rounds a minimum of three times per week.

A Licensed Clinical Social Worker conducts RHU rounds a minimum of once per week. Documentation review reflects laundry, mail, and other related services are provided to inmates housed in RHU in accordance with the same schedule as offenders housed in general populations, unless otherwise designated by security.

Meals are transported from the kitchen to RHU in temperature-controlled hot boxes. Inmates housed in RHU are provided the same meal and content, at the same time as inmates housed in general population. Temperatures are checked when the cart arrives at RHU.

Library and law library services are offered to inmates housed in RHU. Inmates submit written requests that are processed by the library staff. Requests are processed by the library staff. If authorized, requested items are forwarded to the RHU with a two (2) day return date. Items are inspected by security staff prior to and upon exiting the RHU.

The RHU provides nine (9) outdoor uncovered exercise areas. The exercise areas are comprised of individual yard modules. Each yard module consists of 180 square feet of unencumbered space. Documentation reflects that all offenders housed in RHU receive a minimum of one hour of exercise outside their cells, five days per week, unless security or safety considerations dictate otherwise.

Environmental Conditions:

The Grimes Unit is a well-designed facility with the most recent change completed in 2015 when the facility separated from the McPherson Unit and became a stand-alone facility. Grimes Unit is a smoke-free environment.

The facility has both natural and artificial lighting, making the facility well lit. A qualified environmental expert conducted light, noise and airflow testing and the facility was found to be within acceptable or exceeded ranges. Air circulation exceeded 15 feet of outside or recirculated filtered air permitted per person as per the last air circulation test March 2024. The last lighting, noise and airflow testing was conducted January 2024 by the Arkansas Department of Labor & Licensing, HVAC Section. Results were excellent and met or exceeded standard requirements.

Noise levels throughout the facility were within acceptable limits. The audit team tested the hot and cold running water and found temperatures suitable as required. The ratio of showers, washbasins, and toilets to offenders is compliant with state statutes and ACA standard guidelines.

The facility's water, sewage, and power supply are serviced by the city of Newport.

The grounds inside and outside the perimeter of the facility were well maintained. The landscaping is performed by inmates under the supervision of staff members. From the well-maintained look of the facility, you can see that the staff and inmates take pride in their work.

There are two generators with one being 750 kw and one 300 kw. Both are inspected weekly, and load tested monthly.

Sanitation:

Inmates are assigned housekeeping duties for housing area as well as institutional grounds, under the supervision of Correctional Officers. Sanitation inspections are conducted daily, weekly, monthly, and annually per the Housekeeping Plan dated March 4, 2024. The facility's attention to detail and organization has set high standards in cleanliness and efficiency.

Sanitation throughout the facility was exceptional. The team observed offenders cleaning in various areas of the facility. Inmate housing units were found to be clean, beds made, property stored, and shoes properly placed. Housing unit furnishings were found to be clean and in good order.

Chemicals/cleaning supplies used throughout the facility are inventoried and dispensed from the Central Caustic supply room. Cleaning supplies are transported to locations throughout the facility by way of secured caustic mobile carts. Safety Data Sheets and safety equipment were located in close proximity to the area. Cleaning supplies located in the housing units were limited. Inspection of supplies were found to be organized, properly stored, and inventories.

Institutional grounds were well maintained and groomed with no evidence of dumping or improper material disposal. A contract is in place for monthly pest control, recycling, and bio-hazard waste services.

The level of cleanliness at the facility indicates that ongoing cleaning and maintenance is a high priority. At the time of the audit all areas of the facility were clean, with floors, surfaces, and vents dirt free. The outside areas at the Grimes Unit are well groomed and landscaped.

Fire Safety:

The Grimes Unit has one (1) Sergeant responsible for Massing-Tool Control, Fire, Safety and Sanitation.

The fire protection system is a wet system that contains approximately 1,300 wet sprinkler heads and is activated by heat buildup. The food production area is protected with a vent-a-hoot system over each cooking area, a pilot light system for gas appliances, and an emergency cut off-system. The Grimes Unit is equipped with 452 smoke heads, 34 duck detectors, and 18 pull stations.

Central Control is located in Zone 4 and has one security staff on each 12-hour shift. Responsibilities include monitoring the Fire Panel which is under repair and the facility is on Fire Watch.

Keys located in Central Control include emergency keys, restricted keys, with backup keys located in the Armory. Keys are inventoried daily, weekly, and monthly.

The SCBA's and 110 fire extinguishers have been strategically placed throughout the unit. Training is regularly provided in evacuation procedures, setting up a fire watch and how to accumulate evidence after a fire. One (1) fire drill is conducted per shift, per area, per quarter.

The Grimes Unit has a working agreement with the Newport Fire Department for fire protection. The Newport Fire Department sub-station is approximately 2.8 miles from the Grimes Unit. The Main Newport fire station is approximately 5.4 miles from the Grimes Unit.

The Grimes Unit follows all local and state codes, regarding fire and safety and is inspected annually by the Arkansas Department of Public Safety Division of Emergency Management for Fire Alarm System, Fire Extinguishers, Fire Hydrants, and Water Base Protection, Firewalls and doors, and Exits/Egress, Hazardous Material, Hood System & Electrical. The auditors reviewed the last inspection dated November 8, 2023. The facility is on Fire Watch and all fire alarm equipment will be swapped out as equipment is waiting to be installed.

Food Service:

The Food Service Department is under the direction of one (1) Food Preparation Manager with the assistance of three (3) Food Preparation Supervisors and one (1) full-time security Sergeant. Inmate workers include 43 inmates on the am shift and 41 inmates on the pm shift. Inmate food service workers are cleared by medical staff prior to working in the Food Service and receive inmate hygiene check prior to work each day. All food service managers and supervising staff are certified in ServSafe procedures.

A Certified Dietitian reviews and approves the master menu system. Grimes Unit Food Service Department provides the inmate with an average daily caloric count of 2,500 to 3,000. Both general and medical diets have a six (6) week rotating menu cycle. Medical diets approved by the Medical and Religious diets approved by the Chaplain are provided upon review and administrative approval. At the time of the audit, there were around 300 authorized medical diets. Religious diet requests have been reduced since the facility is pork free. Cost per day, per meal is Breakfast \$1.57; Lunch \$1.40; and Dinner \$1.81; for a total of \$4.78 per inmate per day.

Inmates are served three (3) hot meals in a dining room with a capacity of 115 individuals. Mealtimes served are 2:30 a.m. to 5:30 a.m. Breakfast; 9:15 a.m. to 9:30 a.m. and 11:45 a.m. to 12:30 pm Lunch; and 2:15 pm-2:30 pm and 4:45 pm to 5:15 pm Dinner. The number of meals served per day are Breakfast 900 meals; Lunch 1200 meals; and Diner 1200 meals.

Inmates in RHU receive their three (3) hot meals each day by heated cart with temperatures taken when the cart arrives at RHU. The auditors observed the arrival of the food cart and distribution to the inmates and found the process according to standards and policy.

A meal tray was sampled in the dining area on the second day of the audit and included noodles, peas with carrots, beans with cut up pieces of wiener, spiced beets, roll and water.

The meal was of an appropriate temperature and the serving size appeared to be uniform among the inmates. Inmates verbalized that the food had improved but still had some "bad days" which is a typical response for most institutional food. An inmate was observed putting a roll in his pocket as he left the dining hall. Another inmate stated that is typical because it is a long time between dinner and breakfast especially for inmates on restriction who cannot buy from the commissary. However, looking at eating times the standard of under 14 hours between dinner and breakfast is being met.

There are three (3) freezers with one (1) not working with work order issued; two (2) working refrigerators; one (1) dishwasher; and one (1) ice machine.

Equipment temperature inspections were conducted, logs reviewed, and found complaint and in accordance with safety standards.

Food Service has weekly inspections required on all Food Service areas including dining and food preparation area and equipment by administration, medical staff, or dietary person. The Food Service Department was inspected December 13, 2023, by the Arkansas Department of Health, Environmental Health Protection Service. The food Establishment Inspection Report was reviewed by the auditors.

Pest Control is a regular service by Allstate Pest Solutions Inc.

Commissary services are provided to inmates housed at Grimes Unit. There are a total of three (3) commissary stores located within the facility. The main store is located between Housing Unit 1 and 2, the second store is located in the corridor leading to Housing Unit 3, and a third store is located in the corridor leading into Housing Unit 4. Each store is supervised under the direction of two (2) Commissary Store Managers and three (3) inmate store workers. There is a maximum of \$100.00 commissary allowance per week.

Medical Care:

The mission of the Grimes Unit medical services is to provide health care to male inmates. Grimes is not a reception center and receives inmates from the “parent unit” in Ouachita as program slots becomes available. Currently Grimes’ inmates are aged 18 to 81 with 343 inmates who have at least 20-year sentences or life without parole. Grimes is licensed to have a six bed 24-hour infirmary with round the clock nursing staff and end of life services are provided as needed. Inmates with illness or injury that cannot be addressed at Grimes are transferred to other area units as appropriate. Grimes also provides chemotherapy to inmates with infusions as ordered and has a chemo drug mixing room that is separate from the infirmary. This drug mixing room is placed on an outside wall of the unit so that the medications will not be brought into the inmate areas of the facility.

Upon entry to the infirmary there is a security area just outside the central nurses’ station.

This central area also contains the lab, two chemo infusion rooms, two staff offices, the employee restroom, and a storeroom.

Along the periphery of the medical area are the inmate waiting room with inmate restroom, the pill call area with pill call window, the dental suite, three exam rooms, an emergency exam area, break room, three additional staff offices, a total of four (4) observation cells. Two (2) cells are single man cells and two are double man cells. While all cells can house general population inmates, one is fitted to house a restrictive housing inmate. There is a second pill call window in this area. Negative air pressure cells are not available at Grimes. An exam room separate from the primary medical services area is in the Restrictive Housing unit (RHU)

and is utilized by Medical and Mental Health.

This exam area contains an exam bed, sink, scales, sharps container, computer, biohazard trash container, eye chart, EKG machine, PPE supplies, dressing changes, alcohol pads and saline. This room does not contain sharps. The area was observed to be well-kept, clean and very orderly.

Health care services are provided through contract with Wellpath Care utilizing Wellpath employees under the direction of a Regional Medical Director, an MD, and a Unit Medical Director. An LPN is the Health Services Administrator, and an RN is the Director of Nurses. Both are on-site Monday through Friday. Current nursing staffing includes two (2) nurse practitioners (APRN), three (3) registered nurses (RN), two (2) chemo certified registered nurses (RN), eleven (11) licensed practical nurses (LPN) and two (2) certified nursing assistants (CNA). Grimes Unit also has on staff one (1) administrative assistant and one (1) medical records clerk. Weekday shifts are typically staffed with one (1) RN and three (3) LPNs. One (1) RN along with one (1) LPN are scheduled to work each weekend day, and two (2) to three (3) LPNs are scheduled to work each night. Medical services are provided by an MD who is on the grounds each Monday through Thursday from 7am to 5pm and is on call as needed. On call services are also available through the Zanoba Wellpath Telehealth portal which provides immediate emergency access with physicians at other units. The dental suite contains two dental chairs. Dental services are provided by a DDS each Monday through Thursday with the assistance of a full-time dental assistant. A Dental hygienist is shared with McPherson and works 10-hour shifts on two days as scheduled. An autoclave is available for sterilization with logs kept for weekly spore tests.

Laboratory: the Infection Control nurse or an LPN draws blood samples as needed with LabCorp picking up samples between 3 and 4pm as needed weekdays only. Weekend STAT draws go to nearby Unity Health. Lab results are submitted electronically directly into each inmate's medical record within 24 to 24 hours. Critical lab values are called in immediately to the Grimes Unit medical staff.

Radiology: Radiology services are provided on the grounds through contract with Express Mobile one day per week, typically a Tuesday or Wednesday. Results are electronically inserted into the medical record within 24-48 hours. Express Mobile also does ultrasounds and emergency x-rays as needed. Inmates who cannot be seen by Express Mobile are sent to Unity Health, the local emergency room, when emergency x-rays or ultrasounds cannot be provided by Express.

Pharmacy Services: Medications are stored in locked cabinets in the locked pharmaceutical area. Pharmacy services are provided by Diamond with ordered medication shipped via courier.

New medications ordered before 10am may be shipped that day but are usually received the next day. Upon arrival of the medication to the facility, nursing staff pick up the medications and take them to the pharmacy area. On Person

Medications are picked up directly by the inmates.

When emergency medications are needed, Diamond is first contacted for billing purposes, and they decide through a local pharmacy for the Grimes staff to pick up the needed medications. The ICare pharmacy at Unity Health is sometimes used, but Darlings pharmacy or Walgreens in Newport may also be used.

Keep on person (KOP) medications at the Grimes Unit are called On Person Medications (OPMs). Being allowed to have them is a privilege that is taken away if the inmates misuse or abuse the medications. Inmates are not allowed to keep on person narcotics, seizure, or psychiatric medications. They are also not given medications that are high risk or high cost. Medication administration for other prescriptions is conducted around mealtimes by a nurse; but typically, daily at 2 a.m. for the diabetics, 7a.m., 2p.m. and 7p.m. at the two pill call windows for the general population inmates. Restrictive housing medications are delivered cell to cell by a nurse at approximately the same time as pill call. The pill room and medication carts were examined during the audit and were clean and orderly.

The general population inmates can request sick call on the kiosks, while inmates in isolation can give their paper medical request form to the nurse or an officer. All requests are reviewed and triaged daily. Each health service request is classified as a one, two, three or four; with ones being seen within 24 hours, twos being seen within 48 hours, threes being seen within 72 hours and fours just needing a reply (such as asking for a refill of an active prescription). Approximately 60 medical requests are handled daily. There is a \$3.00 co-pay for self-initiated requests with no charge for chronic care or emergencies. Grimes has the Zanoba Telehealth portal and emergency physicians can be contacted immediately. Emergencies that cannot be handled at Grimes are taken as directed by the Zanoba physician to Unity Health or other Arkansas Units as specified by staff in the Zanoba portal.

Grimes has oxygen tanks on-site supplied through contract with Espiragas delivered by Airgas with tanks kept in the pharmacy area and on the stretcher in the emergency room. Since there are no negative air pressure cells at Grimes, inmates requiring this type of isolation to prevent contagion are taken to Ouachita Regional Correctional Unit in Malvern where they have 6 negative air pressure cells. AEDs and emergency medical equipment are maintained in the medical area. First aid kits are available in the Maintenance, Kennel, Horse Barn, Industry, ICC, vans, bus and Maintenance truck which are not in close proximity since medical staff will respond to any emergency within four minutes of being called. All medical tools and sharps counted during the audit were correctly counted and secured. The area was clean and organized.

Inmates housed at Grimes receive regular medical exams. While all receive medical assessment at intake and medical care as requested, inmates ages 39 and under are seen for exams at least every five years, those ages 40 to 64 are seen at least every three years, and those ages 65 and older are seen annually. Chronic care patients are seen at least every three months or more frequently as needed.

Chronic care needs handled at the time of the audit included diabetes, hypertension, asthma, Hep C, HIV, COPD, pulmonary and chronic kidney disease; but chronic care clinics of all types are available depending on the needs of the inmates.

A therapeutic diet list is utilized in food service. Inmates needing glasses are seen by an eye doctor who provides optometry services to the area prisons on a set calendar with inmates at Grimes being seen about every two to three months. Eyeglasses are supplied by Institutional Eye Care and are usually received within three weeks of the exam. Staff explained that the eye doctor works with his two sons, one who is an optometrist and the other who is their assistant, to operate a seamless and effective eye clinic in the visitation room. With security getting the inmates, this eye clinic can examine up to 100 inmates each day.

Urology services are provided by White River Medical Center in Batesville or at the University of Arkansas Medical Sciences (UAMS) in Little Rock.

Grimes contracts with Stericycle for the collection of biohazardous waste. Boxes are maintained in a locked area on the Grimes grounds but shared with McPherson for pickup. Medical records at Grimes are all electronic through the Offender Management Information System (eOMIS). Two Telehealth platforms are available: the emergency system Zanoba which provides an almost immediate access to emergency physicians and the Wellpath Telehealth system which is HIPAA compliant for psychiatric, chronic care, oncology, and other medical consults. Scheduled on-call providers are contacted for the patients housed in the infirmary who need emergency care.

Grimes is licensed to have six infirmary beds and six chemo infusion chairs. They currently have 70 inmates receiving active chemotherapy. Dialysis, when needed, is done at the Ouachita Unit in Malvern.

Twenty-seven deaths at the Grimes Unit were reported during the audit cycle. Twelve were unexpected natural deaths, one was a suicide by hanging in housing, and one after being reviewed by the State Crime Lab was determined to be of unknown causes. In this situation, an infirm inmate got into a physical fight with his roommate over noise being made. The infirm inmate was seen by medical staff and reported a headache. The two were taken to separate holding cells and the infirm inmate was later found dead in the holding cell. It must be reiterated that the Grimes provides oncology services, has a six-bed infirmary and provides end-of-life care as needed. While 27 deaths occurred, 25 were natural deaths.

COVID precautions included giving the COVID test to all inmates having a body temperature of 100.4 degrees or higher. Inmates who test positive are isolated for ten days with the barrack quarantined for five days to determine if more will fall ill. Groups of inmates testing positive are then placed in the same barracks.

Such precautions were not needed at the time of the audit and will be restarted in case COVID returns to the population.

Mental Health Services

The Mental Health area at Grimes consists of three (3) staff offices and no group rooms. Mental health services are currently provided onsite by Arkansas Department of Corrections employees, but Grimes is in the process of contracting with Wellpath to provide mental health related services.

Grimes does not provide hospital type housing for inmates with acute psychiatric illness, nor do they have a residential program for stabilized mental health patients. At the time of the audit, Grimes had 99 inmates diagnosed with mental illness excluding substance abuse, and 143 on psychotropic medications to stabilize adjustment or treat mental illness. Mental health staff receives self-referrals from the inmates and referrals from staff for both counseling and crisis counseling as needed. They conduct rounds in the housing units as well as twice weekly rounds in the segregation areas. They also see individual inmates who may not self-request but are required to be seen as per their individual treatment plan at either 30-60-90-day intervals. Mental health also oversees substance abuse, sex offender treatment and the issuance of the self-help packets.

Current Mental Health staffing includes a Rehabilitation Program Manager with three (3) Bachelor level case managers working as Advisors to provide mental health related services to the inmates. Psychiatric services are provided through Telehealth utilizing Shawn Richard, MD, Psychiatrist who has clinic one day per week on Telehealth seeing approximately 18 patients. If a psychologist is needed, Dr. Douglas Sell is contacted on Telehealth. When a licensed mental health worker is needed, the licensed professional counselor (LPC) from McPherson is used. Emergency on-call services are provided on rotation with all supervisory staff and licensed professionals placed on the schedule. Inmates who require acute mental health services are sent to the Ouachita Unit in Malvern for stabilization where there is also a male Residential Program Unit (RPU).

Inmates placed on suicide-related treatment precautions are observed in a segregation cell while being monitored and logged. Paper gowns, suicide smocks and mats are available for the inmates placed on treatment precautions and logs are maintained with watches occurring at the specified interval. Generally, when inmates decompensate after hours, the mental health on-call staff is contacted, and orders are given to security to place the inmate on treatment precaution at a specified interval. Mental health will then see the inmate the next day to adjust the precaution if needed. Security has on hand prison made mats and smocks that are used for behavior issues as well as Bob Barker supplied suicide prevention smocks and mats to keep from having excessive wear on the suicide prevention products. One (1) inmate was on suicide precautions at the time of the audit.

Recreation:

The Grimes Unit provides a variety of recreational opportunities for the inmate population.

The department is under the supervision of one (1) civilian recreational staff and one (1) security officer. Five (5) inmate recreational workers also assist with scheduled activities. At the weekend recreation activity security staff provide assistance as needed. The facility has a large outdoor recreational field, and an indoor gymnasium with two basketball courts. The Recreation Department schedules special holiday events during major holidays such as Memorial Day, July 4th, Thanksgiving, and Christmas. Inmates participating must be class I or II. Organized and informal events such as tournaments are held with monetary prizes given to the winners.

Outdoor recreational activities include a full basketball court, a workout station, soccer, toss bag, a sand volleyball pit, a walking area, and exercise space. Indoor recreational activities include two basketball courts, a handball court, volleyball, a ping pong table, and workout stations.

Recreational activities are provided through yard call as well as the gymnasium. Recreational activities include various exercise programs including volleyball, basketball, and board games.

Religious Programming:

There is a Senior Chaplain Jackson who provides oversight for the chapel services at both the Grimes and the McPherson Units. Full time chaplain Anthony McMath works under Chaplain Jackson providing coverage and meeting the ACA standard requirements. Both chaplains along with trained volunteers provide chaplaincy services to both the inmates as well as staff when needed. Chaplaincy duties include conducting housing unit rounds, providing counseling, death notifications, family notification of inmate illness, arranging furloughs (hospital or funeral trips), baptism, communion, counseling concerning marriage, crisis counseling as well as employee counseling, along with teaching in Grimes' faith-based program, Principle and Application for Life (PALS) program.

The chaplains ensure offered religious services are conducted. Two services are held each Sunday evening along with the different group offerings held during the week. Religious programs include nondenominational services, open Bible Study, Buddhist meditation, Jehovah Witness, Catholic Services, Jumu'ah Prayer along with the Kiaros group coming out twice monthly. Inmates may also request other religious representation as needed. Attendance for the services is approximately 40 for each service but may be as high as 80 at times. The chaplains do mainline checks as inmates go to meals. They also make rounds in the barracks and the infirmary. Twice weekly rounds are made in the segregation area.

Only the volunteers who have had special training for segregation may go into the segregation units. The chaplains also provide leadership training to the inmates who work in the PALS program. The only inmates assigned to assist chaplaincy are those assigned to PALS.

Principal and Application for Life (PALS) is a twelve (12) month faith-based program that teaches principles promoting integrity, personal responsibility and accountability. Classes include character building, anger management, communication skills, how to make positive contributions, problem solving, Bible studies, scripture memorization, keeping a journal, basic finances, time management and managing spaces.

The chaplains work at training leadership in PALS in a special eight week course for 1.5 hours each Friday. Currently 14 PALS inmates are in this course. PALS participants attend classes in the mornings and work in the afternoons. At the time of the audit the program had seven inmates assigned through classification as PALS mentors and 42 participants. PALS is held in Barracks 11.

The chaplains oversee all volunteer services working closely with the volunteers to ensure service provision. Grimes has 20 on roll as regular volunteers with eight (8) active volunteers.

Another 25 to 30 volunteers come as needed to assist with scheduled services and programs. The Kiaros group is expected to provide their weekend program in October or November, in addition to their smaller twice monthly groups. Also provided by volunteers is the Story Book Project sponsored by the Cherokee Village Lutheran church for inmates who record reading selected books to their children. The recording along with the book are sent to the child with hopes to build and maintain an intimacy between the inmate parent and child.

Offender Work Programs:

The Grimes Unit offers many job skills and programs that will benefit the inmate population while incarcerated and once they return to their communities by providing valuable resources to the inmate. Inmates have opportunities to learn job skills by joining the following programs, regular institution jobs, maintenance, agricultural, regional maintenance, food service etc.

Inmates are required to work, with the exception of those who for security, educational, or medical reasons are unable to do so. Grimes Unit staff provides ample work opportunities for the inmates. There is a list showing all the available job sites including administration porter, barber shop, barracks porter, commissary, custodian, kitchen, laundry, library, maintenance, painter, tutor, etc. Inmates are not provided monetary wage reimbursements for institutional jobs. In lieu of monetary wages, inmates employed in institutional jobs receive good time credits .

The cleanliness of the housing barracks is maintained by inmate porters who are assigned to each area of the barracks. When touring the barracks the auditors found the area clean, cells organized, and without clutter. It is obvious the inmates take pride in good housekeeping in their housing units.

The Prison Industry Enhancement Certification Program (PIECP) located on the grounds of the Grimes Unit in Zone 6 provides selected inmates the opportunity to work and receive hands on marketable vocational skills. Inmates receive prevailing wages for work done in the area, contribute to victim fund, place money in saving account, and reimburse the facility for room and board. There is a contract between the ADC and the Private Company.

The inmates assemble many different variations of Cork Boards, Tac Boards, and Dry Erase Boards for Claridge Products, a company based in Harrison, Arkansas.

The production occurs in a 22,000 square foot, state-of-the-art manufacturing facility located inside the perimeter of the Grimes Unit. The PIECP program provides jobs for 16 inmates.

Staff in the PIECP program include one (1) Supervisor from a private company, two (2) Correctional Industries Supervisor, one (1) Correctional Officer supervising 16 inmate workers. The inmate workers receive \$12.21 per hour, the comparable wage for work in the area. The inmate received 20% of his wages.

Academic and Vocational Education:

The Grimes Unit's academic and vocational educational programs provide comprehensive educational training for inmates which enable them to be employed upon release from prison. The Arkansas Correctional School is responsible for providing educational services at the Grimes Unit.

Staff for Academic and Vocational Education at the Grimes Unit include one (1) Principal, six (6) teachers including one (1) Special Needs Teacher, and one (1) Barber Instructor with 7 inmate students. Staff hours are 7:00 am to 4:00 pm with two classes 7:15 am to 11:00 am and 12:15 pm to 4:00 pm. All teachers are certified by the Arkansas Department of Education.

There are seven (7) well equipped classrooms and two (2) laboratories with one (1) only for GED testing located in Zone 1. Academic Programs offered include Adult Basic Education (ABE), English as Second Language (ESL), General Educational Development (GED), and Pre-GED. At the time of the audit there were 185 inmates participating in Academic programs. Vocational program at Grimes Unit includes several Technical Certification courses.

In 1997, the ADC Board adopted compulsory school attendance for all inmates who did not have a verified high school diploma or GED.

Students are placed in classes according to their scores achieved on a prescribed placement test. A computer lab is used to supplement classroom instruction. The curriculum is designed to help students obtain their GED. The GED is administered on a computer approximately every four (4) to six (6) weeks while school is in session. While incarcerated in the ADC all inmates, regardless of age, are required to attend school unless they can provide verification of an accredited High School Diploma or GED. During 2023- 2024 there were 240 inmates in GED classes with 20 receiving their GED.

The Grimes Unit provides inmates the opportunity to participate in college classes through Arkansas State University Newport campus. Courses offered include college algebra, et. At the time of the audit 26 inmates were enrolled at the University.

There is a Grimes Unit Inmate Council with the purpose to serve as a viable tool that will increase the level of credibility with both the inmate population and the unit administration. The Council also serves as a means of inter-communication between the inmate population and the unit administration.

Any permanently assigned inmate of the Grimes Unit population who has maintained a Class I-C status for six (6) months and no less than eighteen (18) months to his transfer eligibility date is considered for membership of the council. Assigned offenders meet on a monthly basis with administrative staff to discuss questions and/or concerns presented.

Social Services:

Upon arrival at the Grimes Unit, inmates' needs are determined and individualized plans are developed for them in the multi-disciplinary Classification process.

Inmates maintained at Grimes who have social service-related needs are offered programming to assist with addictions, adjustment needs and character building.

Substance Use Rehabilitation Services (SURS) program oversight is provided by a Substance Abuse Treatment Coordinator, who has a bachelor's in psychology and Arkansas certification in Substance Abuse. Evidence-based therapy modalities utilized include Cognitive Behavioral Therapy (CBT) and Motivational Interviewing (MI) which are recognized as performance-based approaches and are the current community standard of care in addiction treatment. The program is designed that the classes are limited to only 25 inmates to stay in compliance with state certification requirements. SURS uses three (3) rotating modules where entry into and exit from the program may occur at any time during the year which allows for many participants to receive the entire program offerings. While some inmates may be stipulated by the courts to participate in addictions treatment, inmates are screened for substance use risk upon arrival to determine probability of relapse risk.

Placement is needs based, and inmates assigned to the program are prioritized by their release date. Inmates with high probability are offered the 24-week program completing all three modules, and those with low probability complete just the first module in the 8-week SURS program. Inmates who enroll are assigned to either the four-hour morning or the four-hour afternoon program and to one of the three staff program leaders who teach topics such as problem solving, refusal skills, planning for emergencies, family recovery issues, coping with cravings and relapse prevention. Inmates work in their assigned work areas when not in class. During the 2023-2024 year 94 completed SURs.

Mental Health advisors provide self-help packets with topics on communication skills, parenting, substance abuse education, anger management, thinking errors, stress management, victims of domestic violence, and perpetrators of domestic violence to inmates who request them. Those eligible to receive Good Time credit for completing each packet. Typically, staff receive requests for about 20 packets of each type each month.

Sex offender treatment for males is provided at Ouachita Unit in Malvern. Basic reentry/transitional services are provided through the Parole Board who come onto the grounds to interview prospective inmates for transfer to reentry/transitional training and housing outside of Grimes.

General population inmates have access to kiosks in their housing units on which they can access commissary services, make requests to medical, mental health and other staff, send outside emails, check their account balances, and participate in video visitation as approved through the visitation system.

Inmates who meet disciplinary requirements and follow the established rules can participate in a monthly subscription service on an electronic tablet through which they can access learning games, games, movies, music, sitcoms gospel sermons, and academic classes for which they can receive certificates. Inmates can also place phone calls through these tablets as governed by the offender phone system. Tablets are recharged at night on a multi-unit charging station in the housing unit.

During the audit, the following programs were observed in process: eleven (11) inmates in a math class, nine (9) inmates in computer lab, ten (10) inmates a second math class and eight (8) inmates in third math class. The SURS class observed had 17 inmates in class.

Visitation:

The Grimes Unit provides onsite and video visitation. The two large Visitation Rooms are located just pass the Central Control and welcome visitors from 11:00 a.m. to 4:00 p.m. on Saturday, Sunday, and Holidays. The area has six rooms for noncontact visits, vending machines, and a lovely children's play area with creative paintings on the walls.

A detailed schedule provides contact and noncontact visitation hours to all offenders housed within the facility. Attorney, clergy, and special visits are accommodated upon prior request and approval.

Visitation with the family and friends of inmates is conducted according to schedule each weekend according to the inmate's class and last name. Background checks are conducted on each individual that is requested to visit with an inmate. The maximum visits are 4 visitors for a maximum of two hours.

Correctional staff provides security during these visits. There is one security staff bringing the inmates into the visiting area, one security staff bringing the visitor into the area and two security staff in the visiting rooms during the visiting hours.

Special visits are set up to accommodate visitors who live over 300 miles away. Inmates are allowed visitation with attorneys upon request of the attorney.

Inmates and their families are also able to communicate through the Video Visitation and Tablets available at the facility.

Library Services:

Library Services at Grimes Unit includes both the Leisure and Law Library and are under the direction of the facility assigned Library Supervisor with the assistance of staff at Central Office with a Master of Library Science. There are two certified law clerks and one Leisure Library clerk. The General Library is open seven days a week with a variety of books available for inmates to check out or use as reference material. The hours of operation, 8:00 a.m. to 5:00 p.m. and 7:00 p.m. to 9:00 p.m. seven days a week, are scheduled to accommodate morning, afternoon as well as evening availability.

Special library accommodations are provided to inmates in RHU. These special accommodations conducted on Tuesday and Thursday are reviewed and screened by library and administrative security staff prior to approval.

The Grimes unit is part of the interagency library loan program. The Leisure Library inventory consists of 8,155 books, 201 magazines and 15 newspapers. Large print books are available for inmates needing special accommodation materials. Additional library material and booklets are available for inmates having limited English-speaking capabilities. Inmates interviewed confirmed they had ample access to the libraries, and they know how to use the interagency library loan program.

The Law Library aids inmates on legal issues seven days a week by appointment. The Lexis Nexus computer program helps the inmates with legal issues and two clerks are assigned to assist with typing documents. Law Library tablets are also available to check in and out while in the Law Library.

Laundry:

There is a central laundry operation supervised by two security staff providing work opportunities for 12 inmates. Days and hours of operation are 4:00 a.m. to 2:00 p.m. daily. Clothing and linens are done daily with blankets processed quarterly.

Inmates are issued three sets of state issued clothing, three sets of undergarments, and three pairs of socks. State clothing and personal laundry bags are washed/exchanged on a daily basis.

The laundry has three 170 lb. commercial washers with two working and one with work order for repairs and four working 170 lb. commercial dryers. Detergent is automatically dispensed into the machines. Chemicals are secured and inventoried. Lint traps are cleaned after each use. Items containing bio-hazard waste are properly secured and placed in the facilities designated bio-hazard containers for proper disposal.

F. Examination of Records

Following the facility tour, the team proceeded to the conference room to review the accreditation files and evaluate compliance levels of the policies and procedures. The facility has zero notices of non-compliance with local, state, or federal laws or regulations.

1. Litigation

Over the last three years, the facility has had zero consent decrees, class action lawsuits or adverse judgments.

2. Significant Incidents/Outcome Measures

There was a meeting with the auditors, Warden, and Executive staff to review Significant Incidents and Outcome Measures.

The Significant Incidents report for the last 12 months showed one (1) disturbance (fire in barrack), one (1) sexual violence, four (4) offenders on offender assaults, and two (2) offenders on staff assaults.

A review of three years of Health Care Outcome Measures was conducted. Comparison indicated consistent numbers with the identification of and provision of treatment to HIV, Hep C, TB, hypertensive and diabetic patients. During the audit cycle, there were three (3) cases of MRSA reported, no active TB and two (2) cases of new converters.

At the time reviewed all HIV patients were on HAART and all but one had viral loads lower than 50 cps/ml. Four (4) occupational exposure to blood or potentially infectious materials were reported, and no serious medication errors reported. Ten (10) problems identified in quality assurance were corrected and no high-risk events were identified in quality assurance during the audit cycle. Four (4) offender grievances were filed for safety or sanitation concerns during year two of the audit cycle with only one being sustained. A total of 20 of the 441 inmate grievances related to healthcare filed during the entire audit cycle were found in favor of the inmate, and none of the three (3) adjudicated lawsuits related to health care were found in favor of the inmate. During the entire three (3) year audit period, 21 suicide attempts were reported with only one (1) completed suicide. Of the 27 reported deaths, twelve were unexpected natural deaths, one (1) was suicide and one (1) was determined to be unknown causes, with the rest being expected natural deaths.

Overall, the medical clinic was organized, clean and very well run. All ACA standards relating to health care that applied to this facility were met. Inmates and staff talked with were pleased with the services provided. Medical staff work closely with other facility staff as well as with other area facilities to ensure the Grimes Unit inmate population needs are met. Nursing staff verbalized their enjoyment of their work. All Outcome Measures were reviewed, finding minor changes for them. The Outcome Measures were adjusted for minor changes found during the review meeting.

Based on the auditor’s professional judgement and experience and what was personally observed at the Grimes Unit, the Significant Incident Summary and the Outcome Measures Worksheet the numbers reflected in the reports are consistent with the overall mission and security level of the facility.

3. Departmental Visits

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

<u>Department Visited</u>	<u>Person(s) Contacted</u>
Administration	Tanya Higgins, Business Manager Crysal Runsick, Human Resources Kelly Pfitzner, Administrative Assistant Marcus Wilkerson, Training Officer
Food Service	Lori Skinner, Food Production Manager Emme McMorr-Robertson, Food Supervisor
Classification	Megan Pigford, C & A Officer
Intake	Avery Cox, Sergeant

Parole Education	Ranisha White, Parole Officer Amy Billings, Principal Michael Brumley, Teacher
Library	Sergeant Erin Zuber
Maintenance	Billy Roberson, Maintenance Supervisor Phillip Thompson, Maintenance Supervisor
Commissary	Sierra Watwood, Commissary Manager
Medical Services	Jason Kelley, Regional Manager WellPath Linda Teague, Health Services Administrator Ashley Wells, RN, Director of Nurses Linda Teague, RN Stephanie Hubbard, LPN Justin Bodeker, Dentist Claire Garoutte, Dental Hygienist
Mental Health	Alan Rogers, Mental Health Supervisor Candance Davis, Mental Health Advisor Kendrick Jenkins, Mental Health Advisor
SURS	Christopher Riley, Substance Use Supervisor
Correctional Industries	Nina Steele, Industry Supervisor
Recreation	Kevin Sanders, Recreation Supervisor
Religious Services	Perry Jackson, Senior Chaplain Anthony McMath, Chaplain
Mailroom	Andrew Stover, Mailroom Services Coordinator
Laundry	David Alcorn Sergeant, Laundry Supervisor

The Scott Grimes Unit has a number of especially notable departmental achievements. There is an abundance of opportunities within a variety of therapeutic, religious, work, and recreational programs. The Field Operation Program at the facility is particularly impressive.

The Field Major, Chief of Security-Field Operations, is responsible for overseeing the gardens, crops, hay, and Regional Maintenance for both Grimes and McPherson Units. These areas provide work opportunities for 223 inmates at Grimes Unit and 255 inmates at McPherson Unit. The Garden is responsible for providing vegetables for Grimes, McPherson, and several other units around the area. The Grimes/McPherson units Garden received Garden of the Year Award for 2020 and 2021, then runner up in 2022.

The Grimes Unit Regional Maintenance assists the community with storm damage clean up, as well as beautification projects in downtown Newport.

4. Shifts

a. Day Shift (5:45 am- 6:00 pm)

The team was present at the facility during the day shift from 1:00 pm to 5:45 p.m. on April 17, 2024, 7:30 a.m. to 5:45 p.m. on April 18, 2024, and 8:00 a.m. to noon on the final day of the audit.

During the day shift the auditors were able to interview a number of staff and listen to professional responses to questions regarding their operations and responsibilities. Very impressive group of correctional employees.

b. Night Shift (5:45 pm – 6:00 am)

The team was present at the facility during the evening shift from 5:45 p.m. to 8:00 p.m. on the first day of the audit.

The Audit Team attended the shift change on Wednesday, April 17, 2024, and addressed the officers, describing the ACA Reaccreditation audit, thanked them for what they do, and advising them of the important role they play in the success of the audit.

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

The last audit of the Grimes unit on April 5-7, 2021, found the facility 100% compliant in Mandatory and 100% compliant in Non-Mandatory Standards.

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 auditors interviewed around 68 inmates during the tour of the facility and returned visit to various departments. Most interviews were very positive as inmates stated they feel safe in the facility and are treated with respect by security and others. The inmates felt they are receiving good medical and dental care, have religion of their choice, programs and work available, and feel their needs are being met.

Of special note is the fact staff remained away from the auditors when they were talking to the inmates so they could talk freely.

The inmates were very complimentary about how accessible the Warden, executive staff and department heads were when they were making round by being responsive to the inmate questions.

Three correspondences received by ACA were reviewed by the audit team and available correspondents were interviewed.

One inmate had complained about staff disrespecting the inmates and using foul language. He stated that this situation had stopped several months ago, and he had no further complaints.

Another inmate complained the substance abuse program was teaching him things against his religion as a Mason. When he asked to come out of the program (SURS) he stated he was threatened with getting a disciplinary report. He claimed that it was unfair for him to get a disciplinary report for refusing the substance abuse program. Review of the situation indicated upon admission to SURS this inmate had signed an agreement that he would receive a disciplinary report if he requested to come out of the program and he did, in fact, receive a disciplinary report for refusing the program. This practice of informing the inmates in advance of receiving treatment is a way of keeping the program available for those who want to work the program and make life changes. This inmate was presented as lower-level functioning. No further action was taken.

The third inmate who had complained about Grimes not following CDC guidelines during COVID precautions had been paroled.

2. Staff Interviews

The auditors had the pleasure of speaking with over 65 staff at the Grimes Unit on both shifts. Staffing interviewed included both seasoned and newly assigned employees. They voiced positive comments regarding supervisory staff and the manner in which communication is handled at the facility, acknowledged receiving 40 hours of annual training, and were versed in fire safety and suicide prevention protocols. The biggest challenge is the vacancy rate and staff added that the facility and the department were making filling the vacancies a number one priority.

Interviews with staff made it very obvious to the auditors that staff know their responsibilities, and everyone works as a team. All staff interviewed expressed their satisfaction and pride in the degree of collaboration and cohesiveness with and among administration staff, custody, and non-custody staff.

The staff interviewed feels, and the auditors agree, that the Grimes Unit is a well-run facility earning the respect of inmates, staff, and the community. It was obvious that all staff members of the facilities are very skilled in the conduct of their duties.

H. Exit Discussion

The exit interview was held at 11:00 a.m. in the Visiting Room with Warden Thomas Hurst and 56 staff in attendance.

The following persons were also in attendance:

William Straughn, Deputy Director
Heather Holley, DOC Social Media
Nurzuhal Faust, Warden McPherson
Johnnie Swift, Major McPherson
Brian Drost, Maintenance Coordinator
Shelly Jones, State ACA Coordinator
Lt. Jacob Higgins, Fire Safety Coordinator
Virginia Robins, McPherson ACA Manager
Mary Moreno, McPherson Mental Health
Billy Cowell, McPherson HAS
Latoris Willis, Max Unit ACA Manager
Kristina Lettenmaier, McPherson mental Health

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

Manual Type	Adult Correctional Institutions, 5 th Edition
Supplement	None
Facility/Program	Arkansas Division of Corrections Grimes Unit
Audit Dates	April 17-19, 2024
Auditor(s)	- Marilyn Lynn McAuley Chairperson Anita Carnell, Member Frederick Schoonover, Member

	MANDATORY	NON-MANDATORY
Number of Standards in Manual	64	509
Number Not Applicable	5	60
Number Applicable	59	449
Number Non-Compliance	0	1
Number in Compliance	59	448
Percentage (%) of Compliance	100%	99.8%

!	Number of Standards <i>minus</i> Number of Not Applicable <i>equals</i> Number Applicable
!	Number Applicable <i>minus</i> Number Non-Compliance <i>equals</i> Number Compliance
!	Number Compliance <i>divided by</i> Number Applicable <i>equals</i> Percentage of Compliance

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Division of Corrections
Grimes Unit
Newport, Arkansas

April 17-19, 2024

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

Standard # 5-ACI-1C-05

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

FINDINGS:

The vacancy rate at Grimes Unit has exceeded the 10% vacancy rate for any 18- month period for authorized positions for working directly with inmates. The 18- month vacancy rate was 40.25%.

AGENCY RESPONSE:

Plan of Action

We challenge all staff at the Grimes Unit to recruit prospective employees. We have also extended an open opportunity once a week for applicants to become potential new employees by directly visiting the Grimes Unit Human Resource Staff to assist them through the application process. The Grimes Unit employees have been encouraged to work as a team to assist with recruitment efforts through various methods such as conducting job fairs in the community and surrounding areas, posting flyers in their local communities, sharing social media posts by the Grimes Unit, and directly recruiting staff in their communities. The Grimes Unit also uses social media to disseminate information about employment opportunities. The Grimes Unit offers an incentive program to current staff members for referring new employees.

The Arkansas Division of Correction has a website (www.arcareers.arkansas.gov) 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. Grimes Unit Staff

Anticipated Completion Date

ACA Audit 2027 or sooner

AUDITOR RESPONSE:

The audit team agrees with the submitted Plan of Action. Vacancy rates are an issue across the field of corrections, and ADC is taking action to hire more staff and improve retention rates.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Division of Corrections

Grimes Unit

Newport, Arkansas

April 17-19, 2024

Visiting Committee Findings

Mandatory Standards

Not Applicable

Standard # 5-ACI-4A-01 MANDATORY

WHEN AN OFFENDER IS TRANSFERRED TO SPECIAL MANAGEMENT HOUSING, HEALTH CARE STAFF WILL BE INFORMED IMMEDIATELY AND WILL PROVIDE A SCREENING AND REVIEW, AS INDICATED BY THE PROTOCOLS ESTABLISHED BY THE HEALTH AUTHORITY. UNLESS MEDICAL ATTENTION IS NEEDED MORE FREQUENTLY, EACH OFFENDER IN SPECIAL MANAGEMENT HOUSING RECEIVES A DAILY VISIT FROM A QUALIFIED HEALTH CARE PROFESSIONAL. THE VISIT ENSURES THAT OFFENDERS HAVE ACCESS TO THE HEALTH CARE SYSTEM. THE PRESENCE OF A HEALTH CARE PROVIDER IN SPECIAL MANAGEMENT HOUSING IS ANNOUNCED AND RECORDED. THE FREQUENCY OF PHYSICIAN VISITS TO SPECIAL MANAGEMENT HOUSING IS DETERMINED BY THE HEALTH AUTHORITY.

FINDINGS:

The Grimes Unit does not house Special Management Inmates.

Standard # 5-ACI- 6A-10 (4-4353) MANDATORY REVISED JANUARY 2003

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 Grimes unit does not house female inmates.

Standard # 5-ACI-6A-21 (4-4362) (MANDATORY) REVISED JANUARY 2006

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

INQUIRY INTO:

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

OBSERVATION OF THE FOLLOWING:

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

MEDICAL DISPOSITION OF THE OFFENDER:

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

OFFENDERS, WHO ARE UNCONSCIOUS, SEMICONSCIOUS, BLEEDING, OR OTHERWISE OBVIOUSLY IN NEED OF IMMEDIATE MEDICAL ATTENTION, ARE REFERRED. WHEN THEY ARE REFERRED TO AN EMERGENCY DEPARTMENT, THEIR ADMISSION OR RETURN TO THE FACILITY IS PREDICATED ON WRITTEN MEDICAL CLEARANCE. WHEN SCREENING IS CONDUCTED BY TRAINED CUSTODY STAFF, PROCEDURES WILL REQUIRE A SUBSEQUENT REVIEW OF POSITIVE FINDINGS BY THE LICENSED HEALTH CARE STAFF. WRITTEN PROCEDURES AND SCREENING PROTOCOLS ARE ESTABLISHED BY THE RESPONSIBLE PHYSICIAN IN COOPERATION WITH THE FACILITY MANAGER. INMATES CONFINED WITHIN A CORRECTIONAL COMPLEX WITH CONSOLIDATED MEDICAL SERVICES DO NOT REQUIRE HEALTH SCREENING FOR INTRA-SYSTEM TRANSFERS.

FINDINGS:

The Grimes Unit is not an intake unit.

Standard # 5-ACI-6A-25 MANDATORY

A COMPREHENSIVE HEALTH APPRAISAL FOR EACH OFFENDER, EXCLUDING INTRASYSTEM TRANSFERS, IS COMPLETED AS DEFINED BELOW AFTER ARRIVAL AT THE FACILITY.

IF THERE IS DOCUMENTED EVIDENCE OF A HEALTH APPRAISAL WITHIN THE PREVIOUS 90 DAYS, A NEW HEALTH APPRAISAL IS NOT REQUIRED, EXCEPT AS DETERMINED BY THE DESIGNATED HEALTH AUTHORITY. HEALTH APPRAISALS INCLUDES THE FOLLOWING:

WITHIN 14 DAYS AFTER ARRIVAL AT THE FACILITY:

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

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

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

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

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

FINDINGS:

At Grimes Unit a comprehensive health appraisal is completed prior to admission. All transfers are inter-system transfers.

Standard # 5-ACI-6A-32 (MANDATORY) Revised August 2019

INMATES WHO ARE REFERRED AS A RESULT OF THE MENTAL HEALTH SCREENING OR BY STAFF REFERRAL WILL RECEIVE A MENTAL HEALTH APPRAISAL BY A QUALIFIED MENTAL HEALTH PERSON WITHIN 14 DAYS OF ADMISSION TO THE FACILITY OR THE REFERRAL. IF THERE IS DOCUMENTED EVIDENCE OF A MENTAL HEALTH APPRAISAL WITHIN THE PREVIOUS 90 DAYS, A NEW MENTAL HEALTH APPRAISAL IS NOT REQUIRED, EXCEPT AS DETERMINED BY THE DESIGNATED MENTAL HEALTH AUTHORITY. MENTAL HEALTH EXAMINATIONS INCLUDE, BUT ARE NOT LIMITED TO THE FOLLOWING:

1. REVIEW OF THE MENTAL HEALTH SCREENING
2. HISTORICAL REVIEW OF THE FOLLOWING:
 - a. AVAILABLE HISTORICAL RECORDS OF INPATIENT AND OUTPATIENT PSYCHIATRIC TREATMENT
 - b. TREATMENT WITH PSYCHOTROPIC MEDICATION
 - c. PSYCHOTHERAPY, PSYCHO-EDUCATIONAL GROUPS, AND CLASSES OR SUPPORT GROUPS
 - d. EDUCATIONAL STATUS
 - e. DRUG AND ALCOHOL USE/ABUSE; TREATMENT

- f. SEXUAL ABUSE-VICTIMIZATION AND PREDATORY BEHAVIOR
- 3. ASSESSMENT OF CURRENT MENTAL STATUS AND CONDITION, INCLUDING
 - a. CURRENT SUICIDAL POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT MAY INCREASE SUICIDE POTENTIAL
 - b. VIOLENCE POTENTIAL AND PERSON-SPECIFIC CIRCUMSTANCES THAT MAY INCREASE VIOLENCE POTENTIAL
 - c. DRUG AND ALCOHOL ABUSE AND/OR ADDICTION
- 4. USE OF ADDITIONAL ASSESSMENT TOOLS, AS INDICATED
- 5. DEVELOPMENT AND IMPLEMENTATION OF A TREATMENT PLAN, AS INDICATED, INCLUDING RECOMMENDATIONS CONCERNING HOUSING, JOB ASSIGNMENT, AND PROGRAM PARTICIPATION
- 6. REFERRAL TO TREATMENT, AS INDICATED

FINDINGS:

At Grimes Unit a comprehensive health appraisal is completed prior to admission. All transfers are inter-system transfers.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Division of Corrections
Grimes Unit
Newport, Arkansas

April 17-19, 2024

Visiting Committee Findings

Non-Mandatory

Standards Not

Applicable

Standard # 5-ACI-1B-24

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT, CONSISTENT WITH 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:

In accordance with Arkansas code: 5-4-205; Act 817-1997, Grimes Unit-ADC does not maintain jurisdiction nor authority over the Victims Division nor its functions.

Standard # 5-ACI-1C-12

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 UNLESS NATIONAL OR STATE REGULATIONS SPECIFY OTHERWISE.

FINDINGS:

Grimes Unit is not unionized and is not covered by merit system on civil service regulations.

Standard # 5-ACI-2C-06 (NEW CONSTRUCTION after June 2014)

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

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

FINDINGS:

Grimes Unit has not had any new construction, after June 2014.

Standard # 5-ACI-2C-08 (4-4138)

INMATES HAVE ACCESS TO OPERABLE WASH BASINS WITH HOT AND COLD RUNNING WATER IN THE HOUSING UNITS AT A MINIMUM RATIO OF ONE BASIN FOR EVERY 12 OCCUPANTS, UNLESS NATIONAL OR STATE BUILDING OR HEALTH CODES SPECIFY A DIFFERENT RATIO.

FINDINGS:

Grimes Unit has not had any new construction, after June 2014.

Standard # 5-ACI-2C-10 (New Construction after June 2014)

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

FINDINGS:

Grimes Unit has not had any new construction, after June 2014.

Standard # 5-ACI-2C-12

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

FINDINGS:

Disabled offenders who cannot otherwise perform basic life functions are not housed at Grimes Unit.

Standard # 5-ACI-2D-04 (RENOVATION, NEW CONSTRUCTION after June 1, 2008)

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

FINDINGS:

Grimes Unit has not had any renovations, additions, or new constructions of inmate housing/living areas after 2008.

Standard # 5-ACI-2D-05 (NEW CONSTRUCTION OR RENOVATION after June 1, 2014)

EACH DORMITORY PROVIDES INMATES WITH ACCESS TO NATURAL LIGHT BY MEANS OF AT LEAST 12 SQUARE FEET, PLUS TWO ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER INMATE IN THE DORMITORY.

FINDINGS:

Grimes Unit's inmate housing living units has not had any renovations, additions on new construction, after June 1, 2014.

Standard # 5-ACI-2E-02

SPECIAL MANAGEMENT HOUSING UNITS HAVE EITHER OUTDOOR UNCOVERED OR OUTDOOR COVERED EXERCISE AREAS. THE MINIMUM SPACE REQUIREMENTS FOR OUTDOOR EXERCISE AREAS FOR SPECIAL MANAGEMENT UNITS ARE AS FOLLOWS: FOLLOWING:

- GROUP YARD MODULES: 330-SQUARE FEET OF UNENCUMBERED SPACE CAN ACCOMMODATE TWO INMATES. FOR EACH ADDITIONAL 150-SQUARE FEET OF UNENCUMBERED SPACE, AN ADDITIONAL INMATE MAY USE THE EXERCISE AREA SIMULTANEOUSLY. (FORMULA: FOR EACH 150-SQUARE FEET OF UNENCUMBERED SPACE EXCEEDING THE BASE REQUIREMENT OF 180-SQUARE FEET FOR THE FIRST INMATE, EQUALS THE MAXIMUM NUMBER OF INMATES WHO MAY USE THE RECREATION AREA SPACE SIMULTANEOUSLY). NO MORE THAN FIVE INMATES ARE TO USE A GROUP MODULE AT ONE TIME.
- INDIVIDUAL YARD MODULES: 180-SQUARE FEET OF UNENCUMBERED SPACE.

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

FINDINGS:

The Grimes Unit does not have a Special Management Housing Unit.

Standard # 5-ACI-3A-07

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

FINDINGS:

Grimes Unit houses only male inmates.

Standard # 5-ACI-3A-17

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

FINDINGS:

Grimes Unit does not house female inmates.

Standard # - 5-ACI-3D-05

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

FINDINGS:

Grimes Unit does not house female inmates.

Standard # 5-ACI-4A-02

SPECIAL MANAGEMENT UNITS PROVIDE LIVING CONDITIONS THAT APPROXIMATE THOSE OF THE GENERAL INMATE POPULATION; ALL EXCEPTIONS ARE CLEARLY DOCUMENTED. SPECIAL MANAGEMENT CELLS/ROOMS PERMIT THE INMATES ASSIGNED TO THEM TO CONVERSE WITH AND BE OBSERVED BY STAFF MEMBERS.

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-03

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

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-04

WHEN SPECIAL MANAGEMENT HOUSING UNITS EXIST, WRITTEN POLICY AND PROCEDURE GOVERN THEIR OPERATION FOR THE SUPERVISION OF INMATES UNDER ADMINISTRATIVE STATUS, PROTECTIVE CUSTODY, AND DISCIPLINARY DETENTION.

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-05

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

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-06

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

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-07

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE FOR A REVIEW OF THE STATUS OF INMATES IN SPECIAL MANAGEMENT HOUSING BY THE CLASSIFICATION COMMITTEE OR OTHER AUTHORIZED STAFF GROUP EVERY SEVEN DAYS FOR THE FIRST TWO MONTHS AND AT LEAST EVERY 30 DAYS THEREAFTER.

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-08

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

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-09

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

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-10

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT A QUALIFIED MENTAL HEALTH PROFESSIONAL PERSONALLY INTERVIEWS AND PREPARES A WRITTEN REPORT ON ANY INMATE REMAINING IN SPECIAL MANAGEMENT HOUSING FOR MORE THAN 30 DAYS. IF CONFINEMENT CONTINUES BEYOND 30 DAYS, A MENTAL HEALTH ASSESSMENT BY A QUALIFIED MENTAL HEALTH PROFESSIONAL IS MADE AT LEAST EVERY 30 DAYS FOR INMATES WHO HAVE AN IDENTIFIED MENTAL HEALTH NEED, AND EVERY THREE MONTHS FOR ALL OTHER INMATES – MORE FREQUENTLY IF PRESCRIBED BY THE CHIEF MEDICAL AUTHORITY.

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-11

WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE THAT ALL SPECIAL MANAGEMENT INMATES ARE PERSONALLY OBSERVED BY A CORRECTIONAL OFFICER TWICE PER HOUR, BUT NO MORE THAN 40 MINUTES APART, ON AN IRREGULAR SCHEDULE. INMATES WHO ARE VIOLENT OR MENTALLY DISORDERED OR WHO DEMONSTRATE UNUSUAL OR BIZARRE BEHAVIOR RECEIVE MORE FREQUENT OBSERVATION; SUICIDAL INMATES ARE UNDER CONTINUING OR CONTINUOUS OBSERVATION.

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-12

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING RECEIVE DAILY VISITS FROM THE SENIOR CORRECTIONAL SUPERVISOR IN CHARGE, DAILY VISITS FROM A QUALIFIED HEALTH CARE OFFICIAL (UNLESS MEDICAL ATTENTION IS NEEDED MORE FREQUENTLY), AND VISITS FROM MEMBERS OF THE PROGRAM STAFF UPON REQUEST.

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-13

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

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-14

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

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-15

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT ALL INMATES IN SPECIAL MANAGEMENT HOUSING ARE PROVIDED PRESCRIBED MEDICATION, CLOTHING THAT IS NOT DEGRADING AND ACCESS TO BASIC PERSONAL ITEMS FOR USE IN THEIR CELLS UNLESS THERE IS IMMINENT DANGER THAT AN INMATE OR ANY OTHER INMATE(S) WILL DESTROY AN ITEM OR INDUCE SELF-INJURY.

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-16

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING HAVE THE OPPORTUNITY TO SHAVE AND SHOWER AT LEAST THREE TIMES PER WEEK.

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-17

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

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-18

ALTERNATIVE MEAL SERVICE MAY BE PROVIDED TO AN INMATE IN SPECIAL MANAGEMENT HOUSING WHO USES FOOD OR FOOD SERVICE EQUIPMENT IN A MANNER THAT IS HAZARDOUS TO SELF, STAFF, OR OTHER INMATES. ALTERNATIVE MEAL SERVICE IS ON AN INDIVIDUAL BASIS, IS BASED ON HEALTH OR SAFETY CONSIDERATIONS ONLY, MEETS BASIC NUTRITIONAL REQUIREMENTS, AND OCCURS WITH THE WRITTEN APPROVAL OF THE WARDEN/SUPERINTENDENT, OR DESIGNEE AND RESPONSIBLE HEALTH AUTHORITY, OR DESIGNEE. THE SUBSTITUTION PERIOD SHALL NOT EXCEED SEVEN DAYS.

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-19

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT WHENEVER AN INMATE IN SPECIAL MANAGEMENT HOUSING IS DEPRIVED OF ANY USUALLY AUTHORIZED ITEM OR ACTIVITY, A REPORT OF THE ACTION IS FILED IN THE INMATE'S CASE RECORD AND FORWARDED TO THE CHIEF SECURITY OFFICER.

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-20

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING CAN WRITE AND RECEIVE LETTERS ON THE SAME BASIS AS INMATES IN THE GENERAL POPULATION.

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-21

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING HAVE OPPORTUNITIES FOR VISITATION UNLESS THERE ARE SUBSTANTIAL REASONS FOR WITHHOLDING SUCH PRIVILEGES.

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-22

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

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-23

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

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-24

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT INMATES IN SPECIAL MANAGEMENT HOUSING RECEIVE A MINIMUM OF ONE HOUR OF EXERCISE PER DAY OUTSIDE THEIR CELLS, FIVE DAYS PER WEEK, UNLESS SECURITY OR SAFETY CONSIDERATIONS DICTATE OTHERWISE.

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-25

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

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-26

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

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4A-27

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

FINDINGS:

The Grimes Unit does not have a Special Management Unit.

Standard # 5-ACI-4B-32

FEMALE INMATES DETERMINED TO BE PREGNANT WILL NOT BE HOUSED IN EXTENDED RESTRICTIVE HOUSING.

FINDING:

Grimes Unit does not house female inmates.

Standard # 5-ACI-4B-33

CONFINEMENT OF OFFENDERS UNDER THE AGE OF 18 YEARS OF AGE IN EXTENDED RESTRICTIVE HOUSING IS PROHIBITED.

FINDINGS:

Grimes Unit does not house juvenile offenders, nor does it utilize Extended Restrictive Housing.

Standard # 5-ACI-5A-01

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

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

FINDINGS:

Grimes Unit is not a Reception Center and does not receive new admissions.

Standard # 5-ACI-5A-02

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

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

INFORMATION FINDINGS:

Grimes Unit is not a Reception Center and does not receive new admissions.

Standard # 5-ACI-5A-03

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

FINDINGS:

Grimes Unit is not a Reception Center and does not receive new admissions.

Standard # 5-ACI-5A-04

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT NEW INMATES RECEIVE WRITTEN ORIENTATION MATERIALS AND/OR TRANSLATIONS IN THEIR OWN LANGUAGE.

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

FINDINGS:

Grimes Unit is not a Reception Center and does not receive new admissions.

Standard # 5-ACI-5B-13

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

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

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

FINDINGS:

Grimes Unit does not house youthful offenders.

Standard # 5-ACI-5B-14

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

FINDINGS:

Grimes Unit does not house youthful offenders.

Standard # 5-ACI-5B-15

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

FINDINGS:

Grimes Unit does not house youthful offenders.

Standard #5-ACI-5B-16

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

FINDINGS:

Grimes Unit does not house youthful offenders.

Standard # 5-ACI-5B-17

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

FINDINGS:

Grimes Unit does not house youthful offenders.

Standard # 5-ACI-5B-18

WRITTEN POLICY, PROCEDURE, AND PRACTICE REQUIRE THAT PROGRAM PERSONNEL WHO WORK WITH YOUTHFUL OFFENDERS FROM THE SPECIALIZED UNIT BE TRAINED IN THE DEVELOPMENTAL, SAFETY, AND OTHER SPECIFIC NEEDS OF YOUTHFUL OFFENDERS.

WRITTEN JOB DESCRIPTIONS AND QUALIFICATIONS REQUIRE TRAINING FOR STAFF SPECIFICALLY ASSIGNED TO THE UNIT OR STAFF WHO ARE RESPONSIBLE FOR PROGRAMMING OF YOUTHFUL OFFENDERS IN THE SPECIALIZED UNIT BEFORE BEING ASSIGNED TO WORK WITH YOUTHFUL OFFENDERS. THE TRAINING SHOULD INCLUDE BUT NOT BE LIMITED TO THE FOLLOWING AREAS:

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

- FINDINGS:

Grimes Unit does not house youthful offenders.

Standard # 5-ACI-5E-10

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

FINDINGS:

Grimes Unit does not house female inmates.

Standard # 5-ACI-5F-08

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

FINDINGS:

Grimes Unit does not have a Victim/Offender Dialogue Program.

Standard # 5-ACI-6A-11

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

FINDINGS:

Grimes Unit does not house female offenders, nor nursing infants.

Standard # 5-ACI-6A-19

ROUTINE AND EMERGENCY DENTAL CARE IS PROVIDED TO EACH OFFENDER UNDER THE DIRECTION AND SUPERVISION OF A LICENSED DENTIST. THERE IS A DEFINED SCOPE OF AVAILABLE DENTAL SERVICES, INCLUDING EMERGENCY DENTAL CARE, WHICH INCLUDES THE FOLLOWING:

- A DENTAL SCREENING (EXCLUDING INTRA-SYSTEM TRANSFERS) UPON ADMISSION BY A QUALIFIED HEALTH CARE PROFESSIONAL OR HEALTH TRAINED PERSONNEL
- A FULL DENTAL EXAMINATION (EXCLUDING INTRA-SYSTEM TRANSFERS) BY A DENTIST WITHIN 30 DAYS
- ORAL HYGIENE, ORAL DISEASE EDUCATION, AND SELF-CARE INSTRUCTION ARE PROVIDED BY A QUALIFIED HEALTH CARE PROVIDER WITHIN 30 DAYS
- A DEFINED DENTAL TOOTH AND HYGIENE CHARTING SYSTEM THAT IDENTIFIES THE ORAL HEALTH CONDITION AND SPECIFIES THE PRIORITIES FOR TREATMENT BY CATEGORY IS COMPLETED

- CONSULTATION AND REFERRAL TO DENTAL SPECIALISTS, INCLUDING ORAL SURGERY IS PROVIDED, WHEN NECESSARY

FINDINGS:

Dental assessment is conducted at the intake unit. Grimes is not an intake unit.

Standard # 5-ACI-6A-24

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

FINDINGS:

The Grimes Unit does not house in transit offenders.

Standard # 5-ACI-6A-39

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

FINDINGS:

Grimes Unit does not maintain an Inpatient Care Unit.

Standard # 5-ACI-6B-04

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

FINDINGS:

Arkansas Department of Corrections contracts with Wellpath, Services to provide full-time qualified personnel.

Standard # 5-ACI-6B-10

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

FINDINGS:

Grimes Unit does not utilize volunteers in the delivery of health care.

Standard # 5-ACI-6B-11

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

FINDINGS:

Grimes Unit does not utilize students, interns, or residents in the delivery of health care.

Standard # 5-ACI-7A-15

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

FINDINGS:

Inmates housed at Grimes Unit are not permitted to work (public or private) within the community.



Significant Incident Summary

This report is required for all residential accreditation programs. (*Adult Correctional Institutions; Adult Local Detention Facilities; Core Jail Facilities; Boot Camps; Therapeutic Communities; Juvenile Detention Facilities; and Juvenile Small Detention Facilities.*)

This summary is required to be provided to the Chair of your audit team upon their arrival for an accreditation audit and included in the facility's Annual Report. (*Refer to Agency Manual of Accreditation for details*). The information contained on this form will also be summarized in the narrative portion of the visiting committee report and will be incorporated into the final report. It should contain data for the last 12 months; indicate those months in the boxes provided. Please type the data. If you have questions on how to complete the form, please contact your accreditation specialist. This report is for Adult Correctional Institutions, Adult Local Detention Facilities, Core Jail Facilities, Boot Camps, Therapeutic Communities, Juvenile Correctional Facilities, Juvenile Detention Facilities, and Small Juvenile Detention Facilities.

Facility Name: Grimes
 Reporting Period: April 2023- March 2024

Incident Type	Months ➔	April 23	May 23	June 23	July 23	August 23	Sept. 23	Oct. 23	Nov. 23	Dec. 23	Jan. 24	Feb. 24	Mar. 24	Total for Reporting Period
Escapes		0	0	0	0	0	0	0	0	0	0	0	0	0
Disturbances*		0	0	0	0	0	1	0	0	0	0	0	0	1
Sexual Violence		0	0	0	0	0	0	0	0	0	0	1	0	1
Homicide	Offender Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Staff Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Other Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
Assaults	Offender/Offender	1	1	0	0	0	0	1	0	1	0	0	0	4
	Offender/Staff	0	0	0	1	0	0	1	0	0	0	0	0	2
Suicide		0	0	0	0	0	0	0	0	0	0	0	0	0
Mandatory Non-Compliance*		0	0	0	0	0	0	0	0	0	0	0	0	0
Fire*		0	0	0	0	0	0	0	0	0	0	0	0	0
Natural Disaster*		0	0	0	0	0	0	0	0	0	0	0	0	0
Other*		0	0	0	0	0	0	0	0	0	0	0	0	0

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

Shamosw. Hunt

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

		Grimes Unit	Cycle Dates: April 1, 2021 through March 31, 2022			Cycle Dates: April 1, 2022 through March 31, 2023			Cycle Dates: April 1, 2023 through March 31, 2024		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
1. Administration & Management: Administer and manage the facility in a professional and responsible manner, consistent with statutory requirements.											
1A: Facility Administration - The facility is administered efficiently and responsibly. Performance is based on goals, objective, and standard operating procedures and a system of regular review.	1A-1	Number of Plans of Action completed in the past 12 months divided by the number of Plans of Action approved by the Commission on Accreditation.	0	0	0	0	0	0	0	0	0
	1A-2	Number of expected practices in compliance divided by the number of applicable expected practices.	509	510	0.99	509	510	0.99	509	510	0.99
1B: Fiscal Management - The facility utilizes appropriate fiscal planning, budgeting, and accounting procedures and provides for a system of regular review.		<i>Compliance verified through expected practice files. No outcome measure required.</i>									
1C: Personnel - The facility promotes diversity and competency through employee staffing, recruitment, promotions, benefit allocations and performance reviews.	1C-1	The average offender population in the past 12 months divided by the average number of filled full time positions in the past 12 months.	1054	89.16	11.82	1067	132	8.08	1089	129.6	8.40
	1C-2	The number of staff who left employment for any reason in the past 12 months divided by the average number of filled full time positions in the past 12 months.	55	89.16	0.62	66	132	0.5	78	129.6	0.60
	1C-3	The number of verified employee violations in the past 12 months divided by the average number of filled full time staff positions in the past 12 months.	15	89.16	0.17	37	132	0.28	88	129.6	0.67
	1C-4	The number of staff terminated for conduct violations in the past 12 months divided by the average number of filled full time staff positions in the past 12 months.	1	89.16	0.01	4	132	0.03	15	129.6	0.11
	1C-5	The number of performance reviews rated acceptable or higher in the past 12 months divided by the total number of performance reviews conducted in the past 12 months.	115	115	1	133	133	1	119	119	1
	1C-6	Average number of security staff positions filled per month for the past 12 months divided by the total number of authorized security positions.	95.66	212	0.45	119	212	0.56	93.3	206	0.45
	1C-7	Number of security staff who left employment in the past 12 months divided by the total number of authorized security positions.	57	212	0.27	54	212	0.25	77	206	0.37

Appendix E: Outcome Measures

		Grimes Unit			Cycle Dates: April 1, 2021 through March 31, 2022			Cycle Dates: April 1, 2022 through March 31, 2023			Cycle Dates: April 1, 2023 through March 31, 2024		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3		
1D: Training & Development - The facility conducts pre-service, in-service, and specialized development programs to promote the effectiveness of staff, volunteers and other effected parties.		<i>Compliance verified through expected practice files. No outcome measure required.</i>											
1E: Case Records - The facility promotes appropriate security, access control, and other measures designed to assure the integrity of records entrusted to its care.		<i>Compliance verified through expected practice files. No outcome measure required.</i>											
1F: Information Systems & Research - Effective systems of data and information storage and retrieval are vital for the maintenance of operational effectiveness and research capability.		<i>Compliance verified through expected practice files. No outcome measure required.</i>											
1G: Citizen Involvement & Volunteers - The facility is a responsible member of the community, supporting citizen involvement and volunteer initiatives as well as other community interaction.	1G-1	The total number of hours of volunteer service delivered by members of the community in the past 12 months divided by the average daily population in the past 12 months.	1752	1054	1.66	2649	1067	2.48	1847	1089	1.69		
	1G-2	The total number of hours of community service work delivered by offenders in the past 12 months divided by 12.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
2. Physical Plant: The facilities' physical plant is designed, equipped and maintained in a manner that promotes safety, program function and access.													
2A: Building and Safety Codes - The facility complies with professional building and fire safety codes to help ensure the safety of all persons within the facility.	2A-1	Number of worker's compensation claims filed in the past 12 months divided by the average number of filled full-time staff positions in the past 12 months.	30	89.16	0.34	25	132	0.19	31	129.6	0.23		
	2A-2	Number of sanitation or health-code violations identified by external agencies in the past 12 months.			1			2			3		
	2A-3	The number of fire and safe code violations identified by the governing jurisdiction in the past 12 months.			0			3			4		

Appendix E: Outcome Measures

		Grimes Unit	Cycle Dates: April 1, 2021 through March 31, 2022			Cycle Dates: April 1, 2022 through March 31, 2023			Cycle Dates: April 1, 2023 through March 31, 2024		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
2B: Size & Organization - Facility capacity and functional design promote safety, an acceptable quality of life and operational innovation.	2B-1	Number of days facility population exceeded the operational capacity in the past 12 months divided by 365.	365	365	1	365	365	1	365	365	1
2C: Inmate Housing - Inmate housing areas are the foundation of institutional living and promote the safety and well-being of both inmates and staff		<i>Compliance verified through expected practice files. No outcome measure required.</i>									
2D: Environmental Conditions - Environmental conditions significantly influence the overall effectiveness of institutional operations. Lighting, air quality, temperature and noise levels are designed to preserve the health and well-being of inmates and staff members.		<i>Compliance verified through expected practice files. No outcome measure required.</i>									
2E: Program and Service Areas - Adequate space is provided for the various program and service functions conducted within the institution. Spatial requirements reflect functional need.		<i>Compliance verified through expected practice files. No outcome measure required.</i>									
2F: Administrative and Staff Areas - All levels of staff are provided with adequate space to carry out their responsibilities safely and effectively.		<i>Compliance verified through expected practice files. No outcome measure required.</i>									
2G: Security - The physical plan supports the orderly and secure functioning of the institution.		<i>Compliance verified through expected practice files. No outcome measure required.</i>									

		Grimes Unit			Cycle Dates: April 1, 2021 through March 31, 2022			Cycle Dates: April 1, 2022 through March 31, 2023			Cycle Dates: April 1, 2023 through March 31, 2024		
Performance Standards	Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3			
3. Institutional Operations: The facility protects the community, the staff, the offenders, and others from harm while maintaining an orderly environment with clear expectations of behavior and systems of accountability.													
3A: Security and Control - The facility utilizes a combination of supervision, inspection, accountability, and measured force response to promote safe and orderly operations.	3A-1	The number of incidents in which force, as defined by the agency, was used in the past 12 months divided by the average daily population in the past 12 months.	89	1054	0.08	95	1067	0.09	142	1089	0.13		
	3A-2	Number of seizures of contraband, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	222	1054	0.21	571	1067	0.53	169	1089	0.15		
	3A-3	The number of escapes, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	0	1054	0	0	1067	0	0	1089	0		
	3A-4	The number of disturbances, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	0	1054	0	0	1067	0	1	1089	9.18		
	3A-5	The number of acts of sexual violence, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	3	1054	0.003	0	1067	0	1	1089	9.18		
	3A-6	The number of homicides, as defined in the Significant Incident Summary, in the past 12 months, divided by the average daily population in the past 12 months.	0	1054	0	0	1067	0	0	1089	0		
3B: Safety & Emergency Procedures - The number and extent of security, physical plant, environmental and other emergencies are minimized. When they occur, the response mechanism minimizes severity.		<i>Compliance verified through expected practice files. No outcome measure required.</i>											

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		Grimes Unit			Cycle Dates: April 1, 2021 through March 31, 2022			Cycle Dates: April 1, 2022 through March 31, 2023			Cycle Dates: April 1, 2023 through March 31, 2024		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3		
3C: Rules & Discipline - The institution's rules of conduct and sanctions and procedures for violations are communicated to all inmates and staff. The disciplinary process respects due process.	3C-1	The total number of major disciplinary reports, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	1724	1054	1.64	2127	1067	1.99	2303	1089	2.11		
	3C-2	The total number of minor disciplinary reports, as defined by the agency, in the past 12 months divided by the average daily population in the past 12 months.	998	1054	0.95	1621	1067	1.52	986	1089	0.90		
	3C-3	Number of offender on offender assaults, as defined in the SIS form, in the past 12 months divided by the average daily population in the past 12 months.	6	1054	0.006	4	1067	0.003	4	1089	0.003		
	3C-4	Number of offender on staff assaults, as defined in the SIS form, in the past 12 months divided by the average daily population in the past 12 months.	2	1054	0.002	1	1067	9.3	2	1089	0.002		
3D: Inmate Rights - The facility protects the constitutional rights of offenders and seeks a balance between the expression of protected liberties and the preservation of institutional order.	3D-1	Number of grievances found in an inmate's favor divided by the number of grievances filed in the 12 month period.	51	1229	0.04	87	1638	0.05	39	1477	0.02		
4. Special Management Housing & Restrictive Housing: In general, inmates who threaten the secure and orderly management of the institution, posing a threat to others or a danger to themselves, are removed from the general population and placed in designated units. Such assignments are made appropriately and justifiably and offenders placed into such categories are treated justly, humanely, in a constitutionally correct manner and prepared for return to less restrictive units.													
4A: Special Management - Inmates who pose a threat are separated from general population and placed in a cell in a special management unit; (defined as segregation and including administrative segregation, protective custody or disciplinary detention); for periods of time less than 22 hours per day.	4A-1	Average number of offenders in Special Management Housing per month over the past 12 months divided by the average daily population in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		

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		Grimes Unit			Cycle Dates: April 1, 2021 through March 31, 2022			Cycle Dates: April 1, 2022 through March 31, 2023			Cycle Dates: April 1, 2023 through March 31, 2024		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3		
4B: Restrictive Housing - Inmates who pose a direct and clear threat to the safety of persons or a clear threat to the safe and secure operation of the facility are separated from general population and placed in restrictive housing units / cells for periods of time 22 hours per day or greater.	4B-1	Average number of offenders in Restricted Housing per month over the past 12 months divided by the average daily population in the past 12 months.	46	1054	0.44	37	1067	0.03	49	1089	0.04		
	4B-2	Average number of offenders in Extended Restricted Housing per month over the past 12 months divided by the average daily population in the past 12 months.	26	1054	0.03	51	1067	0.05	34	1089	0.03		
	4B-3	Number of offenders released from Restrictive Housing by the appropriate authority within 24-hours in the past 12 months divided by the total placed in Restrictive Housing in the past 12 months.	91	572	0.16	51	454	0.11	70	588	0.11		
	4B-4	Number of offenders in Extended Restrictive Housing that were released directly into the community from either Restrictive Housing or Extended Restrictive Housing within the past 12 months divided by the total number of offenders released in the past 12 months.	0	384	0	0	391	0	0	300	0		
5. Institutional Services: Internal assignment to housing and program services should meet the basic needs of the offender consistent with the safe operation of the facility and should prepare the offender for successful reintegration into society upon release as appropriate.													
5A: Reception & Orientation - All incoming inmates undergo thorough screening and assessment at admission and receive a thorough orientation to the institution's procedures, rules, programs, and services.		<i>Compliance verified through expected practice files. No outcome measure required.</i>											
5B: Classification - Inmates are classified to the most appropriate level of custody and programming both on admission and upon review of their status.		<i>Compliance verified through expected practice files. No outcome measure required.</i>											
5C: Food Service - Meals are nutritionally balanced, well-planned, and prepared and served in a manner that meets established governmental health and safety codes.		<i>Compliance verified through expected practice files. No outcome measure required.</i>											

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		Grimes Unit	Cycle Dates: April 1, 2021 through March 31, 2022			Cycle Dates: April 1, 2022 through March 31, 2023			Cycle Dates: April 1, 2023 through March 31, 2024		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
5D: Sanitation and Hygiene - The institution's sanitation and hygiene program protects the health and safety of staff and offenders.		<i>Compliance verified through expected practice files. No outcome measure required.</i>									
5E: Social Services - Professional services including individual and family counseling, family planning and parent education; and programs for inmates with drug and alcohol addiction problems, meet the needs of identified inmates.	5E-1	Where a substance use disorder treatment program exists, the number of treatment slot available divided by the average daily population in the past 12 months.	50	1054	0.05	50	1067	0.05	50	1089	0.04
	5E-2	Where a substance use disorder treatment program exists, the number of completers of the program divided by the average daily population in the past 12 months.	104	1054	0.10	160	1067	0.15	97	1089	0.08
	5E-3	Where a sex offender treatment/management program exists, the number of program slot divided by the average daily population in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	5E-4	Where a sex offender treatment/management program exists, the number of completers divided by the average daily population in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
5F: Re-entry - The institution provides a structured program to help inmates make a satisfactory transition upon their release from incarceration.	5F-1	The number of offenders who have completed their re-entry plan, as defined by the agency, in the past 12 months divided by the number of inmates released in the past 12 months.	384	384	1	224	391	0.57	11	300	0.03
6. Healthcare: Each offender receives appropriate physical and behavioral health care necessary to foster the restoration and maintenance of acceptable levels of wellness.											
6A: Access to Services - Offenders have unimpeded access to a continuum of health care services so that their health care needs, including prevention and health education, are met in a timely and efficient manner.	6A-1	Number of offenders diagnosed with a MRSA infection within the past twelve (12) months divided by the average daily population	2	1054	0.002	0	1067	0	1	1089	9.18

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		Grimes Unit	Cycle Dates: April 1, 2021 through March 31, 2022			Cycle Dates: April 1, 2022 through March 31, 2023			Cycle Dates: April 1, 2023 through March 31, 2024		
Performance Standards	Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3	
	6A-2	Number of offenders diagnosed with active tuberculosis in the past twelve (12) months divided by the average daily population.	0	1054	0	0	1067	0	0	1089	0
	6A-3	Number of offenders who are new converters on a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the Number of offenders administered tests for TB infection in the past twelve (12) months as part of periodic or clinically-based testing, but not intake screening.	0	1	0	0	31	0	0	1	0
	6A-4	Number of offenders who completed treatment for latent tuberculosis infection in the past twelve (12) months divided by number of offenders treated for latent tuberculosis infection in the past twelve (12) months.	1	1	1	1	1	1	0	2	0
	6A-5	Number of offenders diagnosed with Hepatitis C viral infection at a given point in time divided by Total offender population at that time.	122	1062	0.11	136	1074	0.13	113	1089	0.10
	6A-6	Number of offenders diagnosed with HIV infection at a given point in time divided by Total offender population at that time.	13	1062	0.12	7	1074	0.01	10	1089	0.009
	6A-7	Number of offenders with HIV infection who are being treated with highly active antiretroviral treatment (HAART) at a given point in time divided by Total number of offenders diagnosed with HIV infection at that time.	13	13	1	7	7	1	11	11	1
	6A-8	Number of selected offenders with HIV infection at a given point in time who have been on antiretroviral therapy for at least six months with a viral load of less than 50 cps/ml total number of treated offenders with HIV infection that were reviewed	13	13	1	7	7	1	9	10	0.9

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		Grimes Unit	Cycle Dates: April 1, 2021 through March 31, 2022			Cycle Dates: April 1, 2022 through March 31, 2023			Cycle Dates: April 1, 2023 through March 31, 2024		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
	6A-9	Number of offenders with an active individualized services/treatment plan for a diagnosed mental disorder (excluding sole diagnosis of substance abuse) at a given point in time divided by the total offender population at that time.	164	1062	0.15	118	1074	0.11	99	1093	0.09
	6A-10	Number of offender admissions to off-site hospitals in the past twelve (12) months divided by average daily population.	36	1054	0.03	77	1067	0.07	89	1089	0.08
	6A-11	Number of offenders transported off-site for treatment of emergency health conditions in the past twelve (12) months divided by the average daily population in the past 12 months.	123	1054	0.12	175	1067	0.16	159	1089	0.14
	6A-12	Number of offender specialty consults completed during the past twelve (12) months divided by Number of specialty consults (on-site or off-site) ordered by primary health care practitioners in the past twelve (12) months.	1030	1172	0.88	2315	2085	1.11	2359	2277	1.03
	6A-13	Number of selected hypertensive offenders at a given point in time with a B/P reading > 140 mmHg/ >90 mm Hg divided by total number of offenders with hypertension who were reviewed.	0	6	0	1	33	0.03	8	15	0.53
	6A-14	Number of selected diabetic offenders at a given point in time who are under treatment for at least six months with a hemoglobin A1C level measuring greater than 9 percent divided by Total number of diabetic offenders who were reviewed.	1	1	1	3	28	0.1	13	15	0.86
	6A-15	The number of completed dental treatment plans within the past twelve (12) months divided by the average daily population during the reporting period.	1512	1054	1.43	1533	1067	1.44	654	1089	0.60

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		Grimes Unit			Cycle Dates: April 1, 2021 through March 31, 2022			Cycle Dates: April 1, 2022 through March 31, 2023			Cycle Dates: April 1, 2023 through March 31, 2024		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3		
6B: Staff Training - The provision of health services should be done in a professionally acceptable manner including the requirement that all staff be adequately trained and qualified and can demonstrate competency in their assigned duties.	6B-1	Number of health care staff with lapsed licensure or certification during a twelve (12) month period divided by Number of licensed or certified staff during a twelve (12) month period.	0	34	0	0	36	0	0	32	0		
	6B-2	Number of new health care staff during a twelve (12) month period that completed orientation training prior to undertaking their job divided by Number of new health care staff during the twelve (12) month period.	6	6	1	3	3	1	91	91	1		
	6B-3	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months divided by the number of employees.	0	34	0	2	38	0.05	2	32	0.06		
	6B-4	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.	0	16	0	0	4	0	0	6	0		
6C: Offender Treatment - Offenders are treated humanely, fairly, and in accordance with established policy and all applicable laws.	6C-1	Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months divided by number of evaluated offender grievances related to health care services in the past twelve (12) months.	8	106	0.08	5	128	0.03	7	120	0.058		
	6C-2	Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period divided by the number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.	0	0	0	1	4	0.25	0	0	0		

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		Grimes Unit	Cycle Dates: April 1, 2021 through March 31, 2022			Cycle Dates: April 1, 2022 through March 31, 2023			Cycle Dates: April 1, 2023 through March 31, 2024		
Performance Standards	Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3	
	6C-3 Number of adjudicated offender lawsuits related to the delivery of health care found in favor of the offender in the past twelve (12) months divided by Number of offender adjudicated lawsuits related to healthcare delivery in the past twelve	0	1	0	0	0	0	0	2	0	
6D: Performance Improvement - Health care services are evaluated and continually improved	6D-1 Number of problems identified by quality assurance program that were corrected during a twelve (12) month period divided by the number of problems identified by quality assurance program during a twelve (12) month period.	0	2	0	4	6	0.66	6	5	1.2	
	6D-2 Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.	0	12	0	0	12	0	0	5	0	
	6D-3 Number of offender suicide attempts in the past twelve (12) months divided by average daily population.	7	1054	0.006	6	1067	0.01	8	1089	0.007	
	6D-4 Number of offender suicides in the past twelve (12) divided by average daily population.	0	1054	0	1	1067	9.37	0	1089	0	
	6D-5 Number of unexpected natural deaths in the past twelve (12) months divided by Total number of deaths in the same reporting period.	3	4	0.75	4	7	0.57	5	17	.29	
	6D-6 Number of serious medication errors in the past twelve (12) months	0	12	0	0	12	0	0	12	0	
6E: Safety, Sanitation and Offender Hygiene - The facility or program is safe and sanitary. Appropriate services and supplies are provided to promote the maintenance of acceptable levels of offender hygiene.	<i>Compliance verified through expected practice files. No outcome measure required.</i>										

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		Grimes Unit	Cycle Dates: April 1, 2021 through March 31, 2022			Cycle Dates: April 1, 2022 through March 31, 2023			Cycle Dates: April 1, 2023 through March 31, 2024		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
7. Inmate Programs: The institution's programs for inmates provide meaningful work, educational, and recreational programs designed to facilitate a stable institutional environment and the inmate's subsequent reentry into the community.											
7A: Work and Correctional Industries - Work and correctional industries programs incorporate work conditions that reflect jobs in equivalent work categories outside of the institution.	7A-1	The number of academic/vocational educational program slots available in the past 12 months divided by the average daily population in the past 12 months.	44	1054	0.04	30	1067	0.03	15	1089	0.01
	7A-2	The average number of offenders with full time work/program assignments in the past 12 months divided by the average number of offenders eligible for work assignment in the past 12 months.	951	958	0.99	854	867	0.99	951	967	0.98
7B: Academic and Vocational Education - The facilities academic and vocational education programs improve the educational levels of assigned offenders and participate in program accreditation, promote staff professional certification, incorporate community resources and participate in internal and external peer review.	7B-1	The number of academic/vocational slots available divided by the average daily population in the past 12 months.	200	1054	0.19	200	1067	0.19	240	1089	0.22
	7B-2	The number of offenders who passed the General Equivalency Diploma (HI Set) exams while confined in the past 12 months divided by the average daily population in the last 12 months.	14	1054	0.01	28	1067	0.03	19	1089	0.01
	7B-3	The number of academic/vocational competency certificates issued in the past 12 months divided by the number of program slots available in the past 12 months.	14	200	0.07	28	200	0.14	52	255	0.20
7C: Recreation and Activities - Recreation and similar leisure activities are provided to reduce idleness, provide opportunities for skill acquisition, promote healthy activities and foster positive group interaction		<i>Compliance verified through expected practice files. No outcome measure required.</i>									

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		Grimes Unit	Cycle Dates: April 1, 2021 through March 31, 2022			Cycle Dates: April 1, 2022 through March 31, 2023			Cycle Dates: April 1, 2023 through March 31, 2024		
Performance Standards		Outcome Measures	Year 1 Numerator	Year 1 Denominator	Accreditation Cycle Year 1	Year 2 Numerator	Year 2 Denominator	Accreditation Cycle Year 2	Year 3 Numerator	Year 3 Denominator	Accreditation Cycle Year 3
7D: Mail, Telephone & Visiting - The maintenance of family and community ties through the provision of comprehensive mail, telephone and visiting services is critical to stable institutional adjustment and improves opportunities for successful reintegration.		<i>Compliance verified through expected practice files. No outcome measure required.</i>									
7E: Library - The facility should provide library services that support educational programs, promote reading skills, enhance leisure activities and maintain awareness of circumstances in the community at large.		<i>Compliance verified through expected practice files. No outcome measure required.</i>									
7F: Religious Programs - The offender population should have the opportunity to participate in the practices of their faith group as enhanced through the supplemental contributions of community resources.	7F-1	The number of regular participants, as defined by the agency, in structured religious programming in the past 12 months divided by the average daily population in the past 12 months.	223	1054	0.21	424	1067	0.39	472	1089	0.43

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