COMMISSION ON ACCRDITATION FOR CORRECTIONS

STANDARDS COMPLIANCE REACCREDITATION AUDIT

Arkansas Department of Corrections
Wrightsville-Hawkins Complex
Wrightsville, Arkansas

September 15, 2025 - September 17, 2025

VISITING COMMITTEE MEMBERS

Douglas Sproat, Chairperson
ACA Auditor

James Imholte
ACA Healthcare Auditor

Ronald Brereton
ACA Auditor

A. Introduction

The audit of the Wrightsville/Hawkins Complex (W/HC) of the Arkansas Department of Correction (ADC) was conducted on September 15-17, 2025, using the manual for Adult Correctional Institutions 5th Edition by the following team: Doug Sproat, Chairperson; Jim Imholte, Member; and Ronald Brereton, Member.

B. Facility Demographics

Wrightsville Unit

Rated Capacity:	850
Actual Population:	862
Average Daily Population for the last 12 months:	855
Average Length of Stay:	1 year 6 months 9 days
Security/Custody Level:	Maximum, Medium, Minimum
Age Range of Offenders:	19-79 years of age
Gender:	Male
Full-Time Staff:	151 6 Administrative, Support 10, Security 135

Hawkins Unit

Rated Capacity:	400
Actual Population:	440
Average Daily Population for the last 12 months:	402
Average Length of stay:	0 year 10 months 20 days
Security/ Custody Level:	Maximum, Medium, Minimum
Age Range of Offenders:	20-73 years of age
Gender: Female/Male	
Full-Time Staff:	71 3 Administrative, 7 Support, 1 Program, 60 Security

C. Facility Description

The W/HC is located in Wrightsville, Arkansas, which is approximately ten miles south of Little Rock. The complex consists of the Wrightsville Unit, (WU) which houses 850 male inmates, and the Hawkins Unit, (HU) which houses 200 male inmates. (At the time of the audit, Hawkins Unit also housed approximately three to five pregnant females separately from the general population.) The complex consists of 4,000 acres which includes both complexes, hay production, and grazing for horses and cattle. State housing

is provided for upper-level management staff. There is a mobile home park, swimming pool, and a lake available for staff and their families to use.

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

The HU is located approximately 300 yards from the WU and now houses predominantly male inmates. The unit has a ten-foot-high concrete wall running the length of the building separating the female inmate living and programing area from the male inmate living and programing area, with a gate allowing foot traffic between the two sides. This unit was opened in 2006. Note that at the time of the audit, three to five pregnant inmates were housed on the female side of the living unit, as they were in transition for transfer to another facility.

While most female offenders were transferred in May 2025, the female side of the unit had the capacity to house 256 inmates in four open-bay style units, and there is no Restrictive Housing in the HU. On the male side, there are 200 inmates housed in three open-bay units. These inmates participate in the faith-based Pathways to Freedom program. The kitchen/dining area for HU is located on the male side and is also used to feed and employ the female inmates. All the male inmates are removed from this area prior to the female population entering the area.

According to the facility's welcome book, the mission of the ADC "is to provide public safety by carrying out the mandate of the courts, provide a safe humane environment for staff and inmates, strengthen the work ethic through teaching of good habits, and provide opportunities for staff and inmates to improve spiritually, mentally, and physically."

Also, according to the facility's welcome book, the mission of the Wrightsville Complex is "to utilize an effective management system in providing treatment and service to inmates the promote a successful transition into society, while providing a safe environment for employee and inmates that encourages staff development and teamwork."

D. Pre-Audit Meeting

The team met on September 14, 2025, in Little Rock, Arkansas to discuss the information provided by the Association staff and the officials from the ADC and W/HC.

The chairperson divided standards into the following groups:

Standards 5-ACI-1A-01 through 5-ACI-2G-03 to Ronald Brereton, Member
Standards 5-ACI-5E-01 through 5-ACI-5F-08 to Ronald Brereton, Member

Standards 5-ACI-3A-01 through 5-ACI-5D-15 to Doug Sproat, Chairperson
Standards 5-ACI-6A-01 through 5-ACI-7F-08 to Jim Imholte, Member

E. The Audit Process

1. Transportation

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

2. Entrance Interview

The audit team proceeded to the administrative conference room, escorted by Superintendent Jackson, where a briefing was held with the Superintendent and his administrative staff. The Superintendent was asked whether staff and inmates were aware of the audit and whether signs regarding the audit were posted. He responded that everyone had been made aware of the audit, and during the course of the audit, the team observed many prominently displayed signs throughout the facility.

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

The Superintendent was asked whether there was anything the audit team needed to be aware of that had occurred or was occurring that could jeopardize the audit. He informed us that nothing of that nature had occurred or was occurring.

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

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

The following persons were in attendance:

Macky Ann Hurst, Complex ACA Manager
Evette Britton, Warden's Secretary
Cpl. Lakesha Anderson
Latisha White, Major's Secretary
Lieutenant Jeffrey Highsmith
Sergeant Stephen Cockrell
Sergeant Curtesha Lang

Sergeant Charlena Green-Cage
Lynette James, Records
Major Percy Arnold
Sergeant Penny Brown
Sergeant Lanata Ridgle
Dean Shields, Maintenance
John Shelton, Maintenance
Sergeant LaShaundra Gibbs
Captain Mary Lloyd
Shelly Jones, Agency ACA Manager
Major Maxcie Foote
Major Undray Fields
Sergeant B. Hyshaw
Sergeant Antonia Canelo
Corporal Lee
Sergeant Shelby Houston
Lieutenant Jacob Higgins, Fire & Safety
Captain Kapri Givens
Captain Donald Turntine
Corporal Mona Haas
Tracy Garrett, Inmate Grievance Coordinator
Captain Tonda Spencer
Chaplain Unknown Treasure
Sergeant Leman Bowers
Lieutenant LaQuint Lockhart
Superintendent Moses Jackson, III
Tina Varnell, Deputy Warden Assistant
Kristen Evans, Classification
William Straughn, Chief Deputy Director
Gaylon Lay, Deputy Director
Dexter Payne, Director
Dona Gordon, RVP Wellpath
Cynthia Chapman, Business Manager
Adesina Shoyode, Inmate Grievance Coordinator
Aundrea Culclager, Central Office (Deputy Director, Treatment)
Tiffanye Compton, Central Office (Assistant Director)
Antionne Alcorn, Mental Health Director
Samantha Gates, ACA Tucker
Sylvia Jack, RN - DON
Amanda Pasley, Wellpath Accreditation Manager

Crystal Price, RN - Charge Nurse
Zonnie Burnell, RN – DON
Sondra Parker, RN
Vesta Blanks, Health Services Administrator
Emily Wood , Tucker Program Coordinator/
Former Wrightsville Complex ACA Manager

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

3. Facility Tour

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

Superintendent – Moses Jackson

Deputy Warden – Jason Davis

Chief of Security HU – Major Undray Fields

Chief of Security WU – Major Percy Arnold

Agency Fire Safety Officer – Jacob Higgins

Agency ACA Manager – Shelly Jones

Program Manager/Former ACA – Emily Wood

Complex ACA Manager – Macky Hurst

Maintenance Coordinator – Ronald Martin

(Scribe) Sgt. Charlena Green-Cage

(Scribe) Sgt. Curtesha Lang

(Scribe) Sgt. Leman Bowers

(Unlocked doors at Hawkins) Sgt. Penny Brown

(Unlocked doors at Wrightsville) Sgt. Jordan Boyd

4. Conditions of Confinement/Quality of Life

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

Security:

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

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

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

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

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

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

After the first gate is secured, staff inspect the cabin, engine bay, and undercarriage. Persons within the vehicle are searched. The sally-port is equipped with a heartbeat detection system that will check for any additional persons not reported. Once unloaded, products are fully inspected before being distributed. Transports are escorted to and from the holding area in the sally-port. Security procedures for egress are the above measures completed in reverse.

The area outside of the perimeter fence is open and free of viewing obstructions. A perimeter road is patrolled each shift by an armed officer in a motor vehicle. There are 30 LED mast lights, spaced apart at variable distances, which illuminate the entire perimeter.

All staff wear the same department-issued uniforms and must wear an ADC ID badge. All inmates wear white complex-issued uniforms.

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

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

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

Cleaning products are stored in bulk within a secure area of the complex and are initially issued in small containers by way of an automatic dilution system. A pre-established local inventory is maintained in each area and replenished from the bulk inventory on a daily basis. Since the local inventories remain constant, any discrepancy is readily apparent. Bulk products are subject to a perpetual written inventory that is adjusted as products are received or dispensed. Diluted chemicals are secured and accessed by staff in designated chemical closets and inventoried by ounces. Chemicals are then issued in bottles identified by product name, usage purpose, and color. The bottles are returned to the chemical closets on a daily basis. Only safety-trained and approved inmates handle chemicals, and then under staff supervision. All chemical storage areas include SDS sheets.

The armory for the complex is located outside the secure perimeter adjacent to the front parking lot. A security fence and a secondary vault door fortify the armory.

Keys, firearms, restraint equipment, and emergency response equipment are maintained in the armory. Access is restricted to the armorer, chief of security, shift supervisor, field supervisor, and key control officer and documented in a designated log book. Issuance logs and inventories are maintained daily; and monthly reports are reviewed by the armorer, emergency preparedness officer, chief security officer and designated Department of Correction agency staff.

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

Restrictive Housing

There is a 20-bed Restrictive Housing Unit (RHU) at the WU. The HU does not have an RHU. The inmates in this unit pose a direct threat to the safety of persons or a clear threat to the safe operation of the WU. The living conditions in this unit approximate those of the general population. Any exceptions to these living conditions are documented. The inmates in this unit receive one hour of recreation five days per week, provided their behavior is appropriate. At the time of this audit there were 19 inmates in RHU.

The inmates in this unit receive daily visits from medical, mental health, and senior correctional staff. These inmates also receive the same program services as the general population, provided they meet the behavioral requirements.

WU does not have an Extended Restrictive Housing Unit. The facility does have a review committee that provides the inmate population with review services that helps the inmates reintegrate back in the general population. This review committee's goal is to work with inmates in the restrictive housing unit to get them back into the general population as soon as possible.

When all efforts by staff in the RHU fail, the inmate is transferred to an ADC facility with an Extended Restrictive Housing Unit. This only occurs when all efforts by the treatment team and the review committee have been exhausted.

The inmates in RHU are under direct supervision of specially trained staff. The inmates are responsible for all the cleaning within the unit, and it was obvious that the inmates took pride in the cleaning of their unit since the cleanliness of the unit was impressive.

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

Environmental Conditions:

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

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

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

W/HC has 28 emergency generators with a total combined KW of 1190. The batteries and fluid levels of all the emergency generators are checked weekly, and monthly preventative maintenance is done by the complex maintenance. All emergency generators are load tested monthly by the complex maintenance. The emergency generators are capable of carrying 60 per cent of the electrical load to avoid any interruption in the complex's daily operation. The complex preventive maintenance on the boiler system is done by complex maintenance.

The maintenance department is staffed by a maintenance coordinator, a maintenance technician, maintenance security technician, a maintenance administration technician. There are also nine inmates trained to work in maintenance.

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

Sanitation

The audit team was very impressed with the sanitation level throughout the entire complex. The complex has an outstanding detailed housekeeping plan in place and uses it as a standard for maintaining its sanitation level. It was obvious to the auditors that the inmates took pride in keeping the facilities clean. The required sanitation inspections were documented and met standard requirements.

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

The complex contracts with Republic Services for solid waste removal. The complex also contracts with All State Termite and Pest Control for vermin and insect control. W/HC is on the city of Wrightsville water system and the complex has its own wastewater system.

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

Fire Safety:

Staff at both the WU and HU were well aware of the emergency fire evacuation plans and procedures. At both units, fire safety inspections and drills are conducted by standard requirements and documented. Fire safety egress routes were clearly posted, and all exit signs were illuminated. All fire extinguishers at WU and HU were serviced by contract through Summit Fire and Security.

There are five fire hydrants located on the WU compound, and there are two fire hydrants on the HU compound. There are 122 fire extinguishers located in specific locations throughout the WU, with 33 fire extinguishers at the HU. They are checked, flushed and pressure tested by complex maintenance. The Wrightsville Volunteer Fire Department, located ten minutes away from the compound, is the first responder for fire related issues at the facility.

The Arkansas State Fire Marshal's office performs an annual fire safety inspection at the complex and an up:dated copy was on hand. The fire safety system of the complex is inspected and certified annually by contract through State Systems. The preventive maintenance of both unit's sprinkler system is also by contract with State Systems.

The auditors were extremely impressed with the WU's and HU's emergency plan and procedures with all the checks and balances in place to provide fire safety protection for staff and inmates alike. This has resulted in a safe work environment for staff and a safe environment for inmates, which adds positively

to their quality of life.

Food Service:

The food service department at theWU is staffed by five correctional sergeants and a lieutenant. There are also approximately 100 inmates classified to work in food service. All staff and inmates have been cleared by medical to work in food service. The inmates are also trained in food preparation and at the completion of the training they receive a certificate that can help them find employment upon release.

The WU's food service provides three meals per day and works from a two-week menu cycle approved by a registered dietician. Changes to the menu only occur when fresh produce is available. The calorie count for each day is approximately 2,800 calories. Food service served approximately 88,500 meals in the last month at a cost of $5.46 per day for three inmate meals. Inmates provide the majority of the labor and the food preparation in food service.

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

Temperatures for the freezers, chillers, dishwashers, and dry storages met standard requirements. The preventive maintenance on the vent hood fire suppression systems was in order. The cleaning and the inspection of the vent hood fire suppression systems is by contract through States Systems. Preventive maintenance on the dishwasher, and ice machine is completed by facility maintenance.

The inmates at the WU are served breakfast from 4:00 a.m. to 6:00 a.m., lunch 10:00 a.m. to 12:00 p.m. and supper from 3:00 p.m. to 5:00 p.m. The inmates are allowed 20 minutes to finish their meals.

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

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

The food service department at the HU is staffed by a lieutenant and four sergeants. There are also 40 inmates classified to work in food service. All staff and inmates have been cleared by medical to work in food service. The inmates

have been trained in food preparation.

The HU food service serves three meals per day and works from a fourteen-day menu cycle approved by a registered dietician. Changes to the menu only occur when fresh produce is available. The calorie count for each day is 2,800 calories. Food service served approximately 42,750 meals in the last month at a cost of $5.46 for three inmate meals. Inmates provide the majority of the labor and the food preparation in food service. The inmates are served breakfast at 4:00 a.m., lunch at 10:00 a.m. and supper at 2:45 p.m. They are allowed 20 minutes to finish their meals.

The sharps inventory was in order and under lock and key. The chemicals used for cleaning and the dishwasher was controlled, inventoried and in order. HU also provides the same religious dietary requirements and special medical diets as the WC.

Every area mentioned in the WU except what is mentioned above in the last two paragraphs can also be applied to the HU. Both food services were extremely clean and well run. Inmates interviewed at both units had no complaints about food service.

Medical Care:

The W/HC consists of two units, WU and HU. The HU was formerly a women's unit. There are three female inmates housed in the former restrictive housing area in the Hawkins Unit. It is now an open-door unit for pregnant females and female inmates on dialysis. The unit presently houses two pregnant female inmates and one on dialysis. The ADC is in the process of opening a unit in Little Rock to house pregnant and medically fragile female inmates.

The medical, dental, and mental health services are contracted with Wellpath. All the healthcare workers are Wellpath employees. The staffing listed is the total for both units. Currently each unit has a Director of Nursing (DON); the DON in the HU will be transferred to the new unit in Little Rock as the administrator when that unit is opened. The DON for Wrightsville will then serve as the DON for both the units.

<u>Medical Staffing</u>

Physician – 1
Nurse Practitioner – 2 – 1 full time, 1 part time
Registered Nurse (RN) - 4
Administrator – 1 RN
Licensed Practical Nurse (LPN) - 15
Clerical – 4 – 3 medical records clerks, 1 administrative assistant
Certified Nurse Assistant (CNA) 7

Vacancies – 1 LPN and 1 CNA part-time

Dental Staffing

Dentist – 1
Dental assistant – 1
Dental hygienist-1 part time

Mental Health Staff

Psychiatrist – 1 by telehealth 1-2 times a month
Psychologist – 1 – regional office as needed
Nurse Practitioner – 1
Licensed Social Worker – 4 –includes the director
Mental health tech – 1
Mental health administrative assistant - 1

There are two equipped and secure exam rooms in each unit. The waiting areas each have a restroom and water available. Educational materials are provided in the clinic and on the TVs in the unit. Emergencies are seen in one of the exam rooms. There is no crash cart. An emergency bag and Automated External Defibrillator (AED) are stored in a hallway and secured. A gurney is also in place there for a quick response. The only medications in the emergency bag are Narcan and Glucagon. The procedure is to bring the inmate to the medical unit for evaluation. If referrals are required, they are sent to an area hospital, usually the University of Arkansas Medical Center (UAMC).

There are seven first aid kits throughout the two units, all outside of the four-minute response area. There is an AED in each medical unit. Security is provided 24/7 for each unit. Each unit has an infirmary with four beds. There is one negative pressure room in the HU.

There is a medication room in each unit. The rooms are secured with limited access. The controlled substances are under a double lock. A change of shift count was observed, and the controlled substances and sharps counts were both correct.

Required medications are ordered from Diamond Pharmaceuticals with a turn-around time of 1-2 days from time of order to delivery. The local suppliers are Walgreens and Arch St. Pharmacy, both in Little Rock. The pharmacy inspections are conducted by a Diamond pharmacist monthly. The last two inspections were on August 22 and July 18, 2025.

There is a pill line window in the medication room from which the medication is administered. No-shows for pill line are tracked and followed up after seven missed doses. The inmates are allowed keep on person medications.

Universal precaution supplies are used by both the medical and dental units. The supplies are ordered from McKesson with no supply problems. The hazardous waste removal is contracted with Stericycle. Red bags and sharps containers are used.

The Safety Data Sheets (SDS) sheets are kept in the hallway near the emergency bag. The medical unit has a copy of all the SDS sheets for the entire institution. There are no chemical/flammable cabinets in the medical units.

Sick call requests for the general population are submitted through a kiosk on the units. The requests are triaged on the night shift and entered in the Electronic Medical Record (EMR). The inmate is seen the next day after the request. For inmates in restricted housing, requests are through paper requests which are picked up during the cell side medical rounds. The requests are triaged and scanned into the EMR. The inmate is seen the day after the request. Sick call rounds in restrictive housing are done during the pill pass, which occurs three times a day.

There is a $3.00 medical and dental co-pay for inmate-initiated requests. Emergencies, chronic care clinics, follow-up appointments, and referrals are excluded from the co-pay. The medical records are kept electronically. Security and confidentiality are provided by issuing a username and password to those who need to see the records.

Chronic care clinics utilized in the complex include diabetes, hypertension, hepatitis C, HIV, liver and cardiac. There are approximately 525 inmates enrolled in chronic care clinics out of a population of over 1300 inmates. That is approximately 40 % of the complex's population in chronic care.

Communicable diseases are coordinated by an LPN who has received special training from the Regional Office. When a communicable disease is diagnosed, the coordinator reports it to the regional infection control nurse, who then provides guidance for the treatment or transfer of the inmate. The Health Services Administrator then reports the diagnosed disease to the State Health Department.

Tuberculosis tests (PPDs) are not routinely given, but the inmates are screened for tuberculosis symptoms, and a PPD is given if positive symptoms are present. The staff are also screened for symptoms. All medical staff are required to maintain a Cardiopulmonary Resuscitation (CPR) certification every two years. All staff sergeants and above are required to maintain a CPR certification.

Radiology services are contracted with Express Mobile. Express Mobile brings in a mobile unit once a week. The images are read by an Express Mobile radiologist with the report received the same day. If an emergency X-Ray is needed, Express Mobile is called on site.

Laboratory services are provided by LabCorp. The nurses draw and prepare the specimens. The specimens are picked up daily by a LabCorp courier. The results are received in 24-48 hours.

If an inmate requires the services of a specialist, he is referred to one in the area, usually through UAMC. The waiting time from request to appointment is about one month. The specialty service provided onsite is optometry, which is held every other month.

The W/HC is not an intake facility except for pregnant females. Upon arrival at the institution, the inmates are given an orientation to healthcare services, along with their specific orientation to the facility itself. The process is recorded on a form that becomes part of the EMR. The inmates are given written instructions in English or Spanish on how to access healthcare services; other languages are available on a language line. The inmates are screened for medical, dental, and mental health issues after intake and before they go to their living quarters. If any urgent issues are found, they are addressed immediately. Referrals are made as appropriate.

Medical diets are ordered through the medical unit. Diets ordered include cardiovascular diet, low carbohydrate diet, and low sodium diet. An inmate is given a script to present when going to the dining hall to receive the proper diet. There are approximately 400 inmates at the complex on special medical diets.

The WU has one dental chair, and the HU has two chairs. Dental services are provided one day per week in the HU and three days a week in WU. The waiting time from request to appointment is one day.

Services offered include restorations, extractions, oral surgery, cleaning, and dentures. Outside consultations are sent to the UAMC. The sharps inventory was spot checked and all counts were correct. The logs for the autoclave were reviewed and found in order.

The process for dental emergencies is to see them as soon as possible. If the emergency is after hours, there is a nurse protocol to follow, and the inmate will be seen by dental as soon as possible. Hygiene instructions are given when seen in the clinic. Toothpaste and toothbrushes are issued through the laundry department along with other personal supplies. Toothbrushes, toothpaste and dental floss are available for purchase in the commissary.

Mental health services provided include crisis intervention, groups, individual counseling, PREA counseling, substance abuse counseling, and individual treatment plans. Groups provided include substance abuse education, anger management, thinking errors, stress management, communication skills, domestic violence, and parenting.

Access to mental health services can be requested through the kiosk or through a staff referral. The inmates in RHU can submit a paper request or request security to call the mental health unit. Also, a LSW does weekly cell side rounds in the unit. All RHU inmates are seen at seven days in the unit and again at 30 days

Mental health emergencies are seen as soon as possible. If an inmate is suicidal, he goes through a complete assessment and is put on suicide watch. A watch can be constant, every five minutes or every fifteen minutes. There is a room in the restrictive housing for observation. A security officer provides the observation and a log is kept.

A special mattress, paper gown, and special blanket are provided to the inmate. Reading material may or may not be allowed. The inmate will receive his normal diet but with no utensils. The length of time an inmate can be kept on a watch will depend on the risk level. A transfer to a higher level of care will be decided by collaboration with the psychiatrist and the Regional Office. If a transfer is required, the UAMC is the usual site. All institutional staff get annual training on mental health assessments.

Psychotropic medications are utilized. Anti-psychotics, anti-depressants, anti-anxiety agents, and mood stabilizing agents are used. All inmates on psychotropics are seen by the psychiatrist every three months. The nurse practitioner sees these patients monthly.

Restraints are not used for mental health issues. There is a policy in place for that use. Authorization by a mental health profession in collaboration with the regional staff is required to order restraints.

An inmate may complete grievances on a form and place it in a locked box on the unit. The grievance slips are picked up by the Grievance Officer. The Grievance Officer first sends the grievances to a problem solver who tries to settle the grievance informally before turning it over to the HSA. The HSA attempts to settle the grievance informally. If that doesn't work, it is answered formally by the HSA. If the inmate disagrees with the formal response, he can appeal to the Central Office.

The Continuous Quality Improvement Committee consists of the HSA, physician, DON, clerk, administrative assistant, RN, and a mental health representative. The committee meets monthly, and minutes are kept and reviewed.

Recreation:

Recreation at W/HC is managed by a recreation activity supervisor with one inmate worker. The recreation department for the complex provides a full range of recreational, athletic, and leisure time programs. The Wrightsville Unit has a

large gymnasium which is used on a regularly scheduled basis when weather prohibits outdoor recreation. The recreation schedule includes all security levels of the inmate population.

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

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

The inmate population receives all the leisure, competitive recreation, and exercise that they can handle, which allows little room for inactive periods and consequently reduces the tension leading to aggressive behavior.

Religious Programming

The WU has an exceptionally effective religious program that is led by a full-time chaplain assisted by one volunteer chaplain and one inmate worker. The chaplain's role is a vital function in the inmates' adjustment to life within the prison system. The unit also has a very nice chapel where all religious programing occurs.

The chaplain delivers religious orientation to the new inmates at intake and coordinates the volunteer program at the complex. The chaplain's sincere concern for the welfare of the entire inmate population is praiseworthy.

The chaplain also has the responsibility of arranging and scheduling worship services for religious groups that provide volunteer services at the unit. The WU has approximately ten active volunteers. These volunteers provide approximately 10 hours per week of volunteer services and activities for the inmate population. Volunteer services occur seven days a week.

The following is a list of faith-based organizations that provide volunteer services at the WU:

First Assembly of God
Botkin 4 Square Church
Christian Assembly of God

Body of Worship Church
Christ The King Catholic
Christian Motorcycle Association
Pleasant Valley Church of Christ
Islamic Center of Little Rock
Kingdom Jehovah Witness
Fellowship Missionary Baptist Church
River of Life Assembly of God

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

The HU also has a strong religious program led by a full-time chaplain, assisted by a volunteer chaplain and two inmate workers. The chaplain serves a key role in the inmates' adjustment to life within the prison system.

The chaplain provides religious orientation to the new inmates at intake and coordinates the volunteer program at HU. The chaplain also is responsible for arranging and scheduling worship services provided by volunteers at the unit. HU has fifteen active volunteers that provide approximately five hours per week of volunteer activities and services for the inmate population.

The following is a list of faith-based organizations that provide volunteer services at the HU:

Assembly of God
Jehovah Witness
St. Andrews Catholic
Missionary Baptist
Freewill Baptist
Islamic Christian Fellowship
Church of Christ

Offender Work Programs:

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

This complex is extremely clean, and the grounds and flower beds are well maintained. The administration should be commended for encouraging the inmate population to continuously take ownership in keeping their units sanitary and the institutional grounds neat and orderly. There are 1140 inmates in job assignments.

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

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

Academic and Vocational Education:

The W/HC is a part of the Arkansas Correctional School. The education department is staffed by a principal and five academic teachers. All of the academic staff have master's degrees. The complex also has four inmate tutors. There are 101 inmates attending academic presently.

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

The academic instruction centers on GED preparation. During the past twelve months, 71 inmates attempted the GED test and 50 were successful. That's a passing rate of 70 percent, which is outstanding. Credit should certainly be given to the academic staff at the complex for a job well done.

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

Social Services

The W/HC has very good social services programs in place offering a number of treatment programs to assist the inmate population in developing the skills needed to reduce their chances of re-offending.

The following are programs at the complex available to the inmate population:

<u>Substance Use Rehabilitation</u>

A 24-week program
Must be class III or above and 60 days disciplinary free

Workforce Alliance for Growth in the Economy Program (Wage)

A 6-week voluntary program
It helps participants build skills to increase their chances of obtaining and maintaining employment upon release.

Principal Application for Life Skills Program

A 12-month Program
It is a faith-based program
Helps with reentry to society as productive citizens

The largest program is for the 200 male inmates housed at the Hawkins Unit. The Pathway to Freedom program is funded and staffed through private donations. This program's goal is to promote the transformation of inmates' lives through an 18-month faith-based pre-release program. An exceptional part of this offering is that the program continues for an additional 12 months after discharge by offering mentoring and other services through local churches and trained volunteers.

While the female offenders were largely transferred in cycle year 3 (May 2025), female offenders formerly housed at the Hawkins Unit participated in the Paws in Prison Program which rescues homeless dogs and trains them to follow commands and simple rules that assist in making the dogs more adoptable. Other social programs for the female inmates included substance abuse education, anger management, as well as parenting classes through the University of Arkansas at Little Rock. These classes were conducted at the unit by volunteers from the community.

Visitation:

The inmates at W/HC are allowed visitation with family and/or friends who are on their approved visitation list. Visitation is Saturday and Sunday for contact and non-contact visitation from 11:30 p.m. to 1:30 p.m. and again from 2:00 p.m. to 4:00 p.m.

The visitation area has ample room for inmates' families to visit comfortably. Wrightsville Unit has a capacity of 242 visitors, and the Hawkins Unit 245 capacity. These areas are spacious, with restroom facilities and vending machines for the use of the inmates' families.

Special visits are allowed with prior approval from the superintendent. These special visits may occur Monday through Friday from 8:00 a.m. to 4:00 p.m.

Criminal history checks are conducted on all visitors prior to approval. The administration believes that visitation is a vital part of the inmate's adjustment to the facility and encourages families to participate as much as possible.

Library Service:

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

The inmates have access to hard copy volumes in the law library as well as Westlaw on their tablets. The law library ensures that the inmate population has unimpeded access to the courts, counsel, and public officials.

There is one inmate trained to work in the law library. A book cart is also available for inmates in the Restrictive Housing Unit.

Laundry:

The laundry at WU is open seven days a week from 5:00 a.m. to 1:00 p.m. The laundry is staffed by a laundry supervisor and ten inmate workers.

Equipment in the laundry consists of three heavy duty commercial washers and three heavy duty commercial dryers. The laundry also has four pressers and a sewing machine.

The laundry at the HU is open seven days a week from 5:30 a.m. to 1:00 p.m. The laundry is staffed by a laundry supervisor and seven inmate workers.

Equipment in the laundry consists of two heavy duty commercial washers and two heavy duty commercial dryers. The laundry also has two pressers and one sewing machine.

An ample supply of clean clothing, sheets, and towels for the inmate population is available at both the WU and the HU. There is no reason an inmate should not have a clean set of clothing every day. The HU also has a sufficient inventory of inmate clothing, sheets, and towels for emergency purposes.

F. Examination of Records

Following the facility tour, the team proceeded to the administrative conference room to review the accreditation files and evaluate compliance levels of the

policies and procedures. The facility's accreditation files were extremely auditor friendly.

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

1. Litigation

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

2. Significant Incidents/Outcome Measures

SIGNIFICANT INCIDENT SUMMARY

A review of the Significant Incident Summaries shows a well-run complex, given the level of security of its inmate population. The WU had a total of nine inmate-on-inmate assaults in the previous twelve months, which factors into .75 incidents per month, which is well within the expected limits of this population. The HU had no incidents of assaults during the previous twelve months.

OUTCOME MEASURES

A review of the Outcome Measures was made, and the results showed an extremely well-run complex. The WU had three deaths in year one and none in remaining two years. This factors into .083 deaths per year. With an average daily population of 855 inmates, .083 deaths per year is well within the range for a facility the size and the security level of WU. The HU had no deaths during the three-year audit cycle.

3. Departmental Visits

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

Department Visited	Person(s) Contacted
Administration	Moses Jackson. Superintendent Jasion Davis, Deputy Warden Mary Cobbs, Deputy Warden Macky Ann Hurst, Complex ACA Manager Shelly Jones, ACA Manager, ADC
Academic School	Haven Crutchfield, Principal
Fire Safety	Lt. Jacob Higgins, Fire Safety Coordinator, ADC

Food Service	Stacy Sanders, Hawkins Unit Kitchen Lieutenant
Religious Programing	Unknown Treasure, Senior Chaplain

4. Shifts

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

a. Day Shift 6:00 a.m. – 6:00 p.m.

The team was present at the facility during the day shift from 7:30 a.m. – 7:30 p.m. Shift change was very orderly and extremely organized. The audit team observed shift change and briefing. During the briefing the shift supervisor covered all unusual incidents from the previous shift.

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

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

The team was present at the facility during the evening shift from 6:30 p.m. to 7:30 p.m. The audit team observed interaction between staff and inmates and there seemed to be mutual respect among staff and inmates.

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

The team reviewed the status of standards previously found non-compliant for which a waiver was not granted and found the following:

Standard #4-4154 – 5-ACI-2E-01 remains non-compliant.

G. Interviews

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

1. Offender Interviews

The audit team interviewed or spoke to 54 inmates during the audit process. Inmates responded favorably in reference to the staff, and all felt that staff were generally concerned about inmate welfare. Inmates stated that they felt safe and that staff members were always present and available when they needed them.

The inmates appreciated the programmatic offerings geared toward assisting them upon their release. The number of inmate work assignments available to the inmate population was viewed in an exceptionally optimistic manner by all the inmates interviewed.

All inmates interviewed understood the grievance process and how to access medical services. They did not express concern for their safety, no were there any complaints about food service or medical services.

2. Staff Interviews

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

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

A practical measure of the staff's approval of the complex program approach is by the number of years of service of staff members. The very large number of staff that had double digit years of employment experience with either the W/HC or other Arkansas Department of Correction facilities was quite impressive. This is certainly a plus for the complex and obviously adds to staff cohesiveness as well as the overall environment and continuity of services provided to the inmate population.

H. Exit Discussion

The exit interview was held at 11:00 A.M. with the Superintendent and 50 staff from the Wrightsville/Hawkins Complex in attendance.

The following persons were also in attendance:

Heather Holley, Public Information Specialist at DOC Headquarters
Kim Rosenthal , Wellpath Director of Operations
Sondra Parker , Wellpath Regional Manager
Amanda Pasley , Wellpath Accreditation Manager
Jessica Langford , Programs Specialist at DOC Headquarters
Shelly Jones , Agency ACA Manager
Lieutenant Jake Higgins , Agency Fire & Safety Officer

Dexter Payne , ADC Director
Latoris Willis , Norris Unit ACA Manager
Samantha Gates , Tucker Unit ACA Manager
Aundrea Culclager , ADC Deputy Director, Treatment
Tiffanye Compton , ADC Asst. Director, Operations
Gaylon Lay – Asst. Director, Work Release

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 on 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, 5th Edition	
Supplement	Not Applicable	
Facility/Program	Wrightsville/Hawkins Complex	
Audit Dates	September 15-17, 2025	
Auditor(s)	Doug Sproat, Chairperson; James Imholt, Member, Ronal Brereton, Member	
	MANDATORY	**NON-MANDATORY**
Number of Standards in Manual	64	509
Number Not Applicable	0	57
Number Applicable	64	452
Number Non-Compliance	0	2
Number in Compliance	64	450
Percentage (%) of Compliance	100%	99.60%

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

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections
Wrightsville/Hawkins Complex
Wrightsville, Arkansas

September 15-17, 2025

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 Wrightsville/Hawkins Complex exceeds the 10% vacancy rate for one or more 18-month periods. The actual vacancy rate is 42.14%.

AGENCY RESPONSE:

Plan of Action

An AR-DOC Recruiter was hired in November 2020 to continually recruit for all units by conducting regular job fairs in all local communities within the State of Arkansas. That recruiter also visits high schools and colleges to speak with upcoming graduates about AR-DOC careers. The Arkansas Division of Corrections maintains a website (www.state.ar.us/doc) that lists all available jobs and has an online application process to aid all interested parties in seeking employment. The agency also places advertisements on social media sites such as Facebook, X, Instagram, LinkedIn, Handshake, digital newspapers, and local radio stations. The rate of pay for AR-DOC careers increased to the industry standard in July 2025. As a result of this pay increase, the Wrightsville Complex has had an influx of applications and now has a waitlist for applying for positions.

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

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

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

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

AUDITORS' RESPONSE:

The audit team supports the facility's plan of action.

Standard #5-ACI-2E-01

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

- OUTDOOR EXERCISE AREAS IN FACILITIES WHERE 100 OR MORE INMATES UTILIZE ONE RECREATION AREA: 15-SQUARE

FEET PER INMATE FOR THE MAXIMUM NUMBER OF INMATES EXPECTED TO USE THE SPACE AT ONE TIME, BUT NOT LESS THAN 1,500 SQUARE FEET OF UNENCUMBERED SPACE.

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

FINDINGS:

The Hawkins Unit does not have a covered/enclosed recreation area with a minimum ceiling height of 18’.

AGENCY RESPONSE:

Waiver Request

Correcting the indoor/covered recreation area ceiling height will require construction of a new structure. After the 2019 audit cycle, a request was submitted to the parent agency requesting funds for the construction of a covered pavilion over the existing outdoor recreation area at the Hawkins Unit. To date, that funding has not been provided, and it is beyond the scope of the Wrightsville Complex to correct. Hawkins Unit does continue to use other resources to mitigate the situation. The visitation center in Zone 1 of the Hawkins Unit is utilized for recreation during inclement weather. It provides the opportunity for the inmates to do aerobic exercise, lift weights, and/or walk. Additionally, during inclement weather, inmates housed in Zone 2 utilize several classrooms as spaces for indoor recreational use. This provides inmates with the option to walk, do floor exercises, and/or lift weights. There have been no grievances or complaints filed by inmates related to the indoor recreation space at Hawkins Unit. Complex administration will continue to ensure that the non-compliance issue does not have an impact on inmate quality of life.

AUDITORS' RESPONSE:

The audit team supports the facility's waiver request.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Arkansas Department of Corrections
Wrightsville/Hawkins Complex
Wrightsville, Arkansas

September 15-17, 2025

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

Standard #5-ACI-1B-24

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

FINDINGS:

The Arkansas Department of Corrections and the Wrightsville/Hawkins Complex are not responsible for the collections for restitution.

Standard #5-ACI-1C-12

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

FINDINGS:

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

Standard #5-ACI-2B-04

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

FINDINGS:

The Wrightsville/Hawkins Complex has not had any new construction after January 1, 1990.

Standard #5-ACI-2C-06

(NEW CONSTRUCTION AFTER JUNE 2014). INMATES HAVE ACCESS TO TOILETS AND HAND-WASHING FACILITIES 24-HOURS PER DAY AND ARE ABLE TO USE TOILET FACILITIES WITHOUT STAFF ASSISTANCE WHEN THEY ARE CONFINED IN THEIR CELLS/SLEEPING AREAS.

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

FINDINGS:

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

Standard #5-ACI-2C-08

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

FINDINGS:

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

Standard #5-ACI-2C-10

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

FINDINGS:

The Wrightsville/Hawkins Complex has not had any new construction after June 1, 2014.

Standard #5-ACI-2C-12

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house offenders that cannot perform basic life functions.

Standard #5-ACI-2D-04

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

FINDINGS:

The Wrightsville/Hawkins Complex has not had any renovations or new construction after June 1, 2008.

Standard #5-ACI-2D-05

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

FINDINGS:

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

Standard #5-ACI-3A-43

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

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

FINDINGS:

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

Standard #5-ACI-3A-44

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

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

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

FINDINGS:

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

Standard #5-ACI-3A-45

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

FINDINGS:

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

Standard #5-ACI-4A-01

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

FINDINGS:

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

Standard #5-ACI-4A-02

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-03

ALL CELLS/ROOMS IN SPECIAL MANAGEMENT HOUSING PROVIDE A MINIMUM OF 80 SQUARE FEET AND SHALL PROVIDE 35 SQUARE FEET OF

UNENCUMBERED SPACE FOR THE FIRST OCCUPANT AND 25 SQUARE FEET OF UNENCUMBERED SPACE FOR EACH ADDITIONAL OCCUPANT.

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-04

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-05

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-06

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-07

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-08

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-09

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-10

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

INMATES – MORE FREQUENTLY IF PRESCRIBED BY THE CHIEF MEDICAL AUTHORITY.

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-11

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-12

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-13

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-14

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-15

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-16

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-17

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-18

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-19

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-20

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-21

WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT

INMATES IN SPECIAL MANAGEMENT HOUSING HAVE OPPORTUNITIES FOR VISITATION UNLESS THERE ARE SUBSTANTIAL REASONS FOR WITHHOLDING SUCH PRIVILEGES.

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-22

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-23

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-24

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4A-25

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have a Special Management 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 Wrightsville/Hawkins Complex 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 Wrightsville/Hawkins Complex does not have a Special Management Unit.

Standard #5-ACI-4B-26

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

FINDINGS:

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

Standard #5-ACI-4B-27

EFFECTIVE NLT OCTOBER 1, 2020) WRITTEN POLICY, PROCEDURE, AND PRACTICE PROVIDE THAT NEW INMATES ASSIGNED DIRECTLY TO RESTRICTIVE HOUSING RECEIVE WRITTEN ORIENTATION MATERIALS AND/OR TRANSLATIONS IN THEIR OWN LANGUAGE.
WHEN A LITERACY PROBLEM EXISTS, A STAFF MEMBER ASSISTS THE INMATE IN UNDERSTANDING THE MATERIAL. COMPLETION OF ORIENTATION IS DOCUMENTED BY A STATEMENT SIGNED AND DATED BY THE INMATE.

FINDINGS:

The Wrightsville/Hawkins Complex does not have inmates assigned directly to restrictive housing.

Standard #5-ACI-4B-29

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

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

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

FINDINGS:

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

Standard #5-ACI-4B-30

(EFFECTIVE NLT OCTOBER 1, 2020) AN INDIVIDUAL DIAGNOSED WITH A SERIOUS MENTAL ILLNESS WILL NOT BE PLACED IN EXTENDED RESTRICTIVE HOUSING, UNLESS THE MULTIDISCIPLINARY SERVICE TEAM

DETERMINES THERE IS AN IMMEDIATE AND PRESENT DANGER TO OTHERS OR THE SAFETY OF THE INSTITUTION. THERE MUST BE AN ACTIVE INDIVIDUALIZED TREATMENT PLAN THAT INCLUDES WEEKLY MONITORING BY MENTAL HEALTH STAFF, TREATMENT AS NECESSARY, AND STEPS TO FACILITATE THE TRANSITION OF THE OFFENDER BACK INTO GENERAL POPULATION

FINDINGS:

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

Standard #5-ACI-4B-31

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

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

*SEE DEFINITION FOR MULTIDISCIPLINARY SERVICES TEAM AND MULTIDISCIPLINARY TREATMENT TEAMS

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

INDIVIDUALIZED PROGRAMS INVOLVE A COORDINATED, MULTIDISCIPLINARY TEAM APPROACH THAT INCLUDES MENTAL HEALTH, CASE MANAGEMENT, AND SECURITY PRACTITIONERS. MEDICAL PERSONNEL WILL BE PART OF THE MULTIDISCIPLINARY

TEAM WHEN INMATES WHO HAVE CHRONIC CARE OR OTHER SIGNIFICANT MEDICAL ACCOMMODATION NEEDS PARTICIPATE IN THIS PROGRAM.

FINDINGS:

The Wrightsville/Hawkins Complex does not have an Extended Restrictive Housing program.

Standard #5-ACI-4B-32

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have an Extended Restrictive Housing program.

Standard #5-ACI-4B-33

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house inmates under the age of 18 in Extended Restrictive Housing.

Standard #5-ACI-5B-13

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

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

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house youthful offenders.

Standard #5-ACI-5B-14

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house youthful offenders.

Standard #5-ACI-5B-15

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house youthful offenders.

Standard #5-ACI-5B-16

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house youthful offenders.

Standard #5-ACI-5B-17

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

FINDINGS:

The Wrightsville/Hawkins Complex does not house youthful offenders.

Standard #5-ACI-5B-18

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

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

- SUICIDE PREVENTION
- NUTRITION
- MENTAL-HEALTH ISSUES
- GENDER-SPECIFIC ISSUES
- CASE-MANAGEMENT PLANNING AND IMPLEMENTATION

FINDINGS:

The Wrightsville/Hawkins Complex does not house youthful offenders.

Standard #5-ACI-5F-08

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

FINDINGS:

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

Standard #5-ACI-6A-11

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

FINDINGS:

The Wrightsville/Hawkins Complex does not allow infants to remain with their mothers.

Standard #5-ACI-6B-04

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

FINDINGS:

The Wrightsville/Hawkins Complex has qualified healthcare staff on-site.

Standard #5-ACI-6B-10

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

FINDINGS:

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

Standard #5-ACI-6B-11

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

FINDINGS:

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

Standard #5-ACI-7A-14

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

FINDINGS:

The Wrightsville/Hawkins Complex does not have private industries on the facility's grounds.

Significant Incident Summary

This report is required for all **residential** accreditation programs.

This summary is required to be provided to the Chair of your visiting team upon their arrival for an accreditation audit and included in the facility's Annual Report. 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. 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 Community Residential Facilities, Juvenile Correctional Facilities, Juvenile Detention Facilities, Adult Community Residential Services, and Small Juvenile Detention Facilities.

Facility Name: Wrightsville Unit Reporting Period: October 1, 2024 - August 31, 2025

Incident Type	Months ⇨	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Total for Reporting Period
Escapes		0	0	0	0	0	0	0	0	0	0	0	N/A	0
Disturbances*		0	0	0	0	0	0	0	0	0	0	0	N/A	0
Sexual Violence		0	0	0	0	0	0	0	0	0	0	0	N/A	0
Homicide*	Offender Victim	0	0	0	0	0	0	0	0	0	0	0	N/A	0
	Staff Victim	0	0	0	0	0	0	0	0	0	0	0	N/A	0
	Other Victim	0	0	0	0	0	0	0	0	0	0	0	N/A	0
Assaults	Offender/ Offender	1	4	2	0	0	1	0	0	0	1	0	N/A	9
	Offender/ Staff	0	0	1	0	0	0	0	0	0	0	0	N/A	1
Suicide		0	0	0	0	0	0	0	0	0	0	0	N/A	0
Non-Compliance with a Mandatory Standard*		0	0	0	0	0	0	0	0	0	0	0	N/A	0
Fire*		0	0	0	0	0	0	0	0	0	0	0	N/A	0
Natural Disaster*		0	0	0	0	0	0	0	0	0	0	0	N/A	0
Unnatural Death		0	0	0	0	1	1	1	0	0	0	0	N/A	3
Other*		0	0	0	0	0	0	0	0	0	0	0	N/A	0

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

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

		WRIGHTSVILLE UNIT	Cycle Dates: Oct. 1, 2022 through Sept. 30, 2023			Cycle Dates: Oct. 1, 2023 through Sept. 30, 2024			Cycle Dates: Oct. 1, 2024 through Sept. 30, 2025		
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	1	0	0	1	0	0	1	0
	1A-2	Number of expected practices in compliance divided by the number of applicable expected practices.	512	514	0.99	512	514	0.99	512	514	0.99
1B: Fiscal Management - The facility utilizes appropriate fiscal planning, budgeting, and accounting procedures and provides for a system of regular review.		*Compliance verified through expected practice files. No outcome measure required.*									
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.	850	107	7.94	861	124	6.94	855	139	6.15
	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.	77	107	0.72	67	124	0.54	53	139	0.38
	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.	39	107	0.36	51	124	0.41	121	139	0.87
	1C-4	The number of staff terminated for conduct violations in the past 12 months divided by the average number of filled full time staff positions in the past 12 months.	20	107	0.19	27	124	0.21	29	139	0.20
	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.	78	86	0.91	59	62	0.95	86	93	0.92
	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.	97	183	0.53	108	175	0.61	85	175	0.48
	1C-7	Number of security staff who left employment in the past 12 months divided by the total number of authorized security positions.	70	183	0.38	61	175	0.34	47	175	0.26

		WRIGHTSVILLE UNIT	Cycle Dates: Oct. 1, 2022 through Sept. 30, 2023			Cycle Dates: Oct. 1, 2023 through Sept. 30, 2024			Cycle Dates: Oct. 1, 2024 through Sept. 30, 2025		
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.		*Compliance verified through expected practice files. No outcome measure required.*									
1E: Case Records - The facility promotes appropriate security, access control, and other measures designed to assure the integrity of records entrusted to its care.		*Compliance verified through expected practice files. No outcome measure required.*									
1F: Information Systems & Research - Effective systems of data and information storage and retrieval are vital for the maintenance of operational effectiveness and research capability.		*Compliance verified through expected practice files. No outcome measure required.*									
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.	960	850	1.12	1122	861	1.30	763	855	0.89
	1G-2	The total number of hours of community service work delivered by offenders in the past 12 months divided by 12.	8631	12	719	41880	12	3490	41202	12	3433.5
2. Physical Plant: The facilities' physical plant is designed, equipped and maintained in a manner that promotes safety, program function and access.											
2A: Building and Safety Codes - The facility complies with professional building and fire safety codes to help ensure the safety of all persons within the facility.	2A-1	Number of worker's compensation claims filed in the past 12 months divided by the average number of filled full-time staff positions in the past 12 months.	39	107	0.36	43	124	0.34	31	139	0.22
	2A-2	Number of sanitation or health-code violations identified by external agencies in the past 12 months.			2			6			2
	2A-3	The number of fire and safe code violations identified by the governing jurisdiction in the past 12 months.			1			3			6

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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.	190	365	0.52	343	365	0.93	244	365	0.66
2C: Inmate Housing - Inmate housing areas are the foundation of institutional living and promote the safety and well-being of both inmates and staff		*Compliance verified through expected practice files. No outcome measure required.*									
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.		*Compliance verified through expected practice files. No outcome measure required.*									
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.		*Compliance verified through expected practice files. No outcome measure required.*									
2F: Administrative and Staff Areas - All levels of staff are provided with adequate space to carry out their responsibilities safely and effectively.		*Compliance verified through expected practice files. No outcome measure required.*									
2G: Security - The physical plan supports the orderly and secure functioning of the institution.		*Compliance verified through expected practice files. No outcome measure required.*									

		WRIGHTSVILLE UNIT	Cycle Dates: Oct. 1, 2022 through Sept. 30, 2023			Cycle Dates: Oct. 1, 2023 through Sept. 30, 2024			Cycle Dates: Oct. 1, 2024 through Sept. 30, 2025		
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.	121	850	0.14	25	861	0.02	43	855	0.05
	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.	350	850	0.41	66	861	0.07	35	855	0.04
	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	850	0	0	861	0	0	855	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.	1	850	0.001	0	861	0	0	855	0
	3A-5	The number of acts of sexual violence, as defined in the Significant Incident Summary, in the past 12 months divided by the average daily population in the past 12 months.	1	850	0.001	0	861	0	0	855	0
	3A-6	The number of homicides, as defined in the Significant Incident Summary, in the past 12 months, divided by the average daily population in the past 12 months.	0	850	0	0	861	0	0	855	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.		*Compliance verified through expected practice files. No outcome measure required.*									

		WRIGHTSVILLE UNIT	Cycle Dates: Oct. 1, 2022 through Sept. 30, 2023			Cycle Dates: Oct. 1, 2023 through Sept. 30, 2024			Cycle Dates: Oct. 1, 2024 through Sept. 30, 2025		
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.	1863	850	2.19	1100	861	1.27	1890	855	2.21
	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.	137	850	0.16	144	861	0.16	81	855	0.09
	3C-3	Number of offender-on-offender assaults, as defined in the SIS form, in the past 12 months divided by the average daily population in the past 12 months.	3	850	0.003	0	861	0	9	855	0.01
	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.	0	850	0	0	861	0	1	855	0.001
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.	44	384	0.11	43	444	0.09	17	337	0.05
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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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.	16	850	0.02	16	861	0.01	22	855	0.02
	4B-2	Average number of offenders in Extended Restricted Housing per month over the past 12 months divided by the average daily population in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	4B-3	Number of offenders released from Restrictive Housing by the appropriate authority within 24-hours in the past 12 months divided by the total placed in Restrictive Housing in the past 12 months.	37	260	0.14	9	170	0.05	35	223	0.15
	4B-4	Number of offenders in Extended Restrictive Housing that were released directly into the community from either Restrictive Housing or Extended Restrictive Housing within the past 12 months divided by the total number of offenders released in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
5. Institutional Services: Internal assignment to housing and program services should meet the basic needs of the offender consistent with the safe operation of the facility and should prepare the offender for successful reintegration into society upon release as appropriate.											
5A: Reception & Orientation - All incoming inmates undergo thorough screening and assessment at admission and receive a thorough orientation to the institution's procedures, rules, programs, and services.		*Compliance verified through expected practice files. No outcome measure required.*									
5B: Classification - Inmates are classified to the most appropriate level of custody and programming both on admission and upon review of their status.		*Compliance verified through expected practice files. No outcome measure required.*									
5C: Food Service - Meals are nutritionally balanced, well-planned, and prepared and served in a manner that meets established governmental health and safety codes.		*Compliance verified through expected practice files. No outcome measure required.*									

		WRIGHTSVILLE UNIT	Cycle Dates: Oct. 1, 2022 through Sept. 30, 2023			Cycle Dates: Oct. 1, 2023 through Sept. 30, 2024			Cycle Dates: Oct. 1, 2024 through Sept. 30, 2025		
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.		*Compliance verified through expected practice files. No outcome measure required.*									
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.	150	850	0.18	150	861	0.17	150	855	0.17
	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.	187	850	0.22	239	861	0.27	201	855	0.23
	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.	218	319	0.68	263	304	0.86	203	250	0.81
6. Healthcare: Each offender receives appropriate physical and behavioral health care necessary to foster the restoration and maintenance of acceptable levels of wellness.											
6A: Access to Services - Offenders have unimpeded access to a continuum of health care services so that their health care needs, including prevention and health education, are met in a timely and efficient manner.	6A-1	Number of offenders diagnosed with a MRSA infection within the past twelve (12) months divided by the average daily population	0	850	0	0	861	0	0	855	0

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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	850	0	0	861	0	0	855	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	0	0	0	0	0	0	0	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.	2	2	1	0	0	0	1	1	1
	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.	55	850	0.06	107	870	0.12	108	855	0.12
	6A-6	Number of offenders diagnosed with HIV infection at a given point in time divided by Total offender population at that time.	2	850	0.002	2	870	0.002	10	855	0.01
	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.	0	2	0	1	2	0.5	10	10	1
	6A-8	Number of selected offenders with HIV infection at a given point in time who have been on antiretroviral therapy for at least six months with a viral load of less than 50 cps/ml total number of treated offenders with HIV infection that were reviewed	0	2	0	0	2	0	7	10	0.7

		WRIGHTSVILLE UNIT	Cycle Dates: Oct. 1, 2022 through Sept. 30, 2023			Cycle Dates: Oct. 1, 2023 through Sept. 30, 2024			Cycle Dates: Oct. 1, 2024 through Sept. 30, 2025		
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.	77	850	0.09	64	870	0.07	19	855	0.02
	6A-10	Number of offender admissions to off-site hospitals in the past twelve (12) months divided by average daily population.	24	850	0.03	34	861	0.03	19	855	0.02
	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.	98	850	0.12	115	861	0.13	30	855	0.03
	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.	433	659	0.66	702	742	0.94	434	644	0.67
	6A-13	Number of selected hypertensive offenders at a given point in time with a B/P reading > 140 mmHg/ >90 mm Hg divided by total number of offenders with hypertension who were reviewed.	1	42	0.02	3	20	0.15	9	20	0.45
	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.	2	60	0.03	7	20	0.35	9	20	0.45
	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.	1081	850	1.27	335	861	0.38	240	855	0.28

		WRIGHTSVILLE UNIT	Cycle Dates: Oct. 1, 2022 through Sept. 30, 2023			Cycle Dates: Oct. 1, 2023 through Sept. 30, 2024			Cycle Dates: Oct. 1, 2024 through Sept. 30, 2025		
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.	2	31	0.06	0	54	0	0	34	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.	4	9	0.44	0	9	0	0	11	0
	6B-3	Number of occupational exposures to blood or other potentially infectious materials in the past twelve (12) months divided by the number of employees.	0	31	0	0	56	0	0	34	0
	6B-4	Number of direct care staff (employees and contractors) with a conversion of a TB test that indicates newly acquired TB infection in the past twelve (12) months divided by the number of direct care staff tested for TB infection in the past twelve (12) months during periodic or clinically indicated evaluations.	0	0	0	0	0	0	0	0	0
6C: Offender Treatment - Offenders are treated humanely, fairly, and in accordance with established policy and all applicable laws.	6C-1	Number of offender grievances related to health care services found in favor of the offender in the past twelve (12) months divided by number of evaluated offender grievances related to health care services in the past twelve (12) months.	0	18	0	2	69	0.02	2	43	0.04
	6C-2	Number of offender grievances related to safety or sanitation sustained during a twelve (12) month period divided by the number of evaluated offender grievances related to safety or sanitation during a twelve (12) month period.	0	0	0	0	0	0	0	0	0

		WRIGHTSVILLE UNIT	Cycle Dates: Oct. 1, 2022 through Sept. 30, 2023			Cycle Dates: Oct. 1, 2023 through Sept. 30, 2024			Cycle Dates: Oct. 1, 2024 through Sept. 30, 2025		
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	0	0	0	0	0	0	0	0
6D: Performance Improvement - Health care services are evaluated and continually improved	6D-1	Number of problems identified by quality assurance program that were corrected during a twelve (12) month period divided by the number of problems identified by quality assurance program during a twelve (12) month period.	2	2	1	3	3	1	3	3	1
	6D-2	Number of high-risk events or adverse outcomes identified by the quality assurance program during a twelve (12) month period.			0			0			0
	6D-3	Number of offender suicide attempts in the past twelve (12) months divided by average daily population.	2	850	0.002	4	861	0.004	2	855	0.002
	6D-4	Number of offender suicides in the past twelve (12) divided by average daily population.	2	850	0.002	0	861	0	0	855	0
	6D-5	Number of unexpected natural deaths in the past twelve (12) months divided by Total number of deaths in the same reporting period.	1	2	0.5	0	0	0	3	3	1
	6D-6	Number of serious medication errors in the past twelve (12) months			0			0			0
6E: Safety, Sanitation and Offender Hygiene - The facility or program is safe and sanitary. Appropriate services and supplies are provided to promote the maintenance of acceptable levels of offender hygiene.		*Compliance verified through expected practice files. No outcome measure required.*									

Appendix E: Outcome Measures

		WRIGHTSVILLE UNIT	Cycle Dates: Oct. 1, 2022 through Sept. 30, 2023			Cycle Dates: Oct. 1, 2023 through Sept. 30, 2024			Cycle Dates: Oct. 1, 2024 through Sept. 30, 2025		
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.	132	850	0.16	130	861	0.15	136	855	0.15
	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 assignments in the past 12 months.	764	800	.096	843	846	0.99	835	850	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.	120	850	0.19	164	861	0.19	143	855	0.16
	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.	25	850	0.03	31	861	0.03	34	855	0.03
	7B-3	The number of academic/vocational competency certificates issued in the past 12 months divided by the number of program slots available in the past 12 months.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
7C: Recreation and Activities - Recreation and similar leisure activities are provided to reduce idleness, provide opportunities for skill acquisition, promote healthy activities and foster positive group interaction		*Compliance verified through expected practice files. No outcome measure required.*									

Performance Standards		WRIGHTSVILLE UNIT Outcome Measures	Cycle Dates: Oct. 1, 2022 through Sept. 30, 2023			Cycle Dates: Oct. 1, 2023 through Sept. 30, 2024			Cycle Dates: Oct. 1, 2024 through Sept. 30, 2025		
			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.		*Compliance verified through expected practice files. No outcome measure required.*									
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.		*Compliance verified through expected practice files. No outcome measure required.*									
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.	322	850	0.38	336	861	0.39	774	855	0.90