

COMMISSION ON ACCREDITATION FOR CORRECTIONS
STANDARDS COMPLIANCE REACCREDITATION AUDIT

Ohio Department of Rehabilitation and Corrections
West Central Community Correctional Facility
Marysville, Ohio

November 6-7, 2017

VISITING COMMITTEE MEMBERS

Bonnie O'Brien, CCM, Chairperson
ACA Auditor

Christy Gutherz
ACA Auditor

A. Introduction

The audit of the West Central Community Correctional Facility, Marysville, Ohio was conducted on November 6-7, 2017, by the following team: Bonnie O'Brien, Chairperson; Christy Gutherz, Member.

B. Facility Demographics

Rated Capacity:	<u>150</u>
Actual Population:	<u>141</u> 96 males; 45 females
Average Daily Population for the last 12 months:	<u>144</u>
Average Length of Stay:	<u>115.29 days</u>
Security/Custody Level:	<u>Minimum/Medium, Minimum</u>
Age Range of Offenders:	<u>18-60</u>
Gender:	<u>Males/Females</u>
Full-Time Staff:	<u>63</u>

3 Administrative, 15 Support, 22 Program, 22 Security, 1 Other (Maryhaven)

C. Facility Description AND Program Description

West Central CCF was built in 1999 as a collaborative effort as a community-based correctional facility serving eight neighboring counties. The facility is a single-story brick structure with the male and female wings separated by locking gates, doors and a corridor. Each of the housing unit areas has a large day room, dormitories, bathrooms, multi-purpose rooms, a library, laundry facilities, utility/electrical rooms and janitor closets. Each of the housing wings has outdoor recreational areas. In addition to the male and female wings, there is an administrative wing and a program/educational wing. Throughout the entire facility are inspirational quotes and murals.

The control center is staffed 24/7 and provides remote access through all locked gates and doors. Pedestrian visitors enter through the same main door as staff does. There is an intake area where new arrivals are delivered by transporting officials. A third vehicular sally-port entrance allows for deliveries into the facility.

The primary function of the program is to provide comprehensive treatment programs within a therapeutic environment. Participants are transferred from correctional facilities. The program challenges behavior and thinking that is affiliated with the drug and criminal lifestyle and offers an opportunity to achieve satisfaction from accomplishment. The lighthouse is the symbol utilized by WCCCF to “inspire feelings of hope and salvation during turbulent times”. During the audit it was apparent that this was a comforting theme to the residents.

The stated mission of the facility is “to prepare offenders for re-entry into the community with program integrity by meeting established standards in a safe and secure treatment environment.”

D. Pre-Audit Meeting

The team met on November 5, 2017 in Marysville, Ohio, to discuss the information provided by the Association staff and the officials from West Central Community Correctional Facility.

The chairperson divided standards into the following groups:

Standards #4-ACRS-1A-01 - #4-ACRS-5A-26 to Bonnie O'Brien, Chairperson
Standards #4-ACRS-6A-01 - #4-ACRS-7F-10 to Christy Gutherz, Member

E. The Audit Process

1. Transportation

The team was escorted to the facility by Demetrius Thomas, Resident Monitor Coordinator.

2. Entrance Interview

The audit team proceeded to the board room next to the office of Dave Ervin, Executive Director. The team expressed the appreciation of the Association for the opportunity to be involved with West Central Community Correctional Facility (WCCCF) in the accreditation process.

The Chair advised the Executive Director of the plan for the audit team to be professional during observation of the routine activities and thorough with the file review. The Chair asked if any residents or staff had requested to meet with the audit team or if there were any consent decrees, class action lawsuits, or adverse judgments and received a negative response.

Facility staff was then invited to join us in the board room where the formal entry meeting was held.

The following persons were in attendance:

Ann Barge, Fiscal Coordinator
Stephen Beil, Counselor
Lindsey Blair, Screening Specialist
Ginger Cichy, Lead Counselor
Derek Clay, Human Resource Manager
Laura Florentino, Counselor
Terri Funderburgh, Executive Assistant
Lucinda Hammond, Fiscal Specialist
Annee Humphreys, Clinical Coordinator
Angela Kalb, Education Aide

Tezrene LaRoce, Counselor
Rebecca Miracle, Lead Counselor
Cynthia Morgan, Medical Coordinator
Lori Penrod, Accreditation Manager
Shaylon Perkins, Counselor
Kimberly Ratliff, Clerical Specialist
Kay Raypoltz, Family Counselor
Craig Shumaker, Deputy Director
Aaron Stidham, Facility Coordinator
Casandra Stone, Counselor
Demetrius Thomas, Resident Monitor Coordinator
Cheryl Tossey, Family Specialist
Deborah Troiano, Food Service Coordinator
Shae Kinnison, Resident Monitor
Carrie Pyles, Resident Monitor
Victoria Dolce, Investigative Specialist

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

3. Facility Tour

The team toured the entire facility from 9:15 a.m. to 11:15 a.m. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

David Ervin, Executive Director
Craig Shumaker, Deputy Director
Lori Penrod, Accreditation Manager
Demetrius Thomas, Resident Monitor Coordinator
Terri Funderburgh, Executive Assistant
Aaron Stidham, Facility Coordinator

Facility notices were posted prominently throughout the facility where residents, staff and visitors would see them.

4. Conditions of Confinement/Quality of Life

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

Security

Entry into the facility is controlled remotely via camera monitoring and authorization by staff. The central control station is conveniently located in an area that separates the administrative wing from the rest of the facility. Keys are stored in the control center and are issued through a pass-through drawer. Staff attendance is monitored through the Morse Watchman Key Watcher System. Security cameras are strategically placed on the outside grounds as well as in the general activities areas within the facility. Resident monitors staff the housing units 24/7. They conduct rounds, supervise cleaning and perform searches, observe fire safety procedures, direct transportation and control the movement of the residents through door control. Staff are not equipped with any weaponry or chemical agent.

Environmental Conditions

All the required minimum levels for lighting, noise, and air quality are observed and documented to be at or above standard requirements. The temperature was seasonally appropriate. Furnishings were sufficient to meet the needs of the residents in terms of quantity and usability. The atmosphere of the facility is peppered with the continuous use of inspirational murals and statements, which lend towards a peaceful overtone.

Sanitation

Daily housekeeping plans are in place and strictly adhered to. Weekly, monthly and annual inspections support the adherence to the daily housekeeping. Documentation of these inspections was available for review in the standards file. Cleaning supplies are readily available and are properly stored, inventoried and tracked. The facility is very well maintained, and presented as extremely clean. There was no build-up of trash or personal property, no offensive odors were present and there was no evidence of pest or vermin.

Fire Safety

There is a fire/evacuation plan that includes posted floor plans with primary and secondary egress routes. Exits comply with state/local authorities. There were lighted exits and evacuation plans posted throughout the facility. A few of the lighted exit signs were not working due to a planned interruption in service directly related to an on-going project of adding three classrooms. The Simplex Grinnell fire alarm inspection was last conducted on 10/3/17, annual inspection was conducted on 10/27/17, both with no deficiencies noted. There is an automatic fire alarm and smoke detection system throughout the facility, an Ansul chemical suppression system in the kitchen, wet and dry sprinkler systems, fire extinguishers and firewalls in place. Fire drills were documented as having been conducted quarterly on all shifts.

The emergency plans have been certified by the fire authority having jurisdiction. Non-flammable, non-toxic washable materials and furnishings are in used. All toxic, corrosive, flammable substances and other potentially dangerous supplies and equipment are stored safely in locked areas.

Food Service

All meals are prepared according to a cyclic menu that is approved by a certified nutritionist. Food service employees are assisted by residents assigned to work in the kitchen. The kitchen and dining room were found to be clean. The kitchen is small, and activity was abundant. There was no master inventory for the tools and utensils that were in the shadow-box, some of which were double- and triple-layered on pegs. This was addressed with the Executive Director and his Deputy, who assured that an actual, written inventory, would be prepared. There was a proper issuance procedure in place. Men report to the dining room for their meals and meals are delivered to the women's unit where they eat in their dayrooms. The daily cost for meals is \$1.05 per day. Staff has the opportunity to purchase the same meals that are prepared for the residents, with the additional option of items from a grill selection.

Medical Care

A full-time LPN provides medical services 40-hours per week. New admissions are received on Tuesdays and Thursdays, at which time all are screened and given the PPDs. A limited selection of health education is available to the residents.

There is a physician available on-site weekly for sick call and chronic care clinics. Any pre-natal care is provided in the community. Medications are ordered through Diamond Pharmacy and are dispensed/available through the four medication runs daily. There are no "keep-on-person" medications at WCCCF. Two segregation/observation rooms are located in the medical unit for temporary use. Dental care is provided for in the community.

The facility staffs are trained in first aid, CPR and the use of the AED. Medical emergencies are referred to "911".

Recreation

Exercise/fitness equipment is available in the dayrooms, along with more sedentary activity options such as television, table games, reading, socializing, or writing. Outdoor recreational areas are adequate for the population.

Religious Programming

All residents of the facility are offered the opportunity to practice the faith of their choosing.

Various volunteers facilitate the activities of the various faith groups, to include worship, study, and counseling. Residents do also have the opportunity to request passes to attend worship services in the community.

Offender Work Programs

Residents may participate in food service and janitorial assignments within the facility. For residents in Phase 3 or the Re-Entry Phase of their programming there is a “Job Readiness Group [that] meets three times per week for a period of four weeks. Each session is 1.5 hours in length. This group helps residents identify transferable skills, understand workplace expectations, help them learn to explain their felony convictions, and practice interviewing. Residents also practice completing applications and develop their own resume. The group introduces social skills to be used in the process of seeking and maintaining employment”.

Academic and Vocational Education

New admissions participate in educational assessments and the TABE academic skills test. Those without verified high school diplomas or GEDs are placed into an academic program plan. At this time approximately 30% of the residents need GED instruction. “Residents participate in education lesson plans to increase their academic skills. Residents can prepare for the GED exam and take it while a resident of the facility. If a resident is eligible to earn high school credit the education department will work with the schools to make that happen.” WCCF is an approved testing site for Pearson View, where up to five residents may test at a time. In 2016, 67 residents earned their GEDs.

“Residents have an opportunity to participate as a member of various crews where they can practice skills learned within the program and also demonstrate vocational skills. Vocational training is available as an Assistant Cook and as a Maintenance Tech. These positions offer residents the ability to learn new job skills. Residents are also given an opportunity to apply skills while performing community service with local agencies or by participating in work release program while still residing at the facility.”

Social Services

The following narrative provides a thorough and comprehensive presentation of the programs utilized at WCCCF.

“Residents are assessed using the Ohio Risk Assessment System to identify criminogenic needs to be targeted via an individualized treatment plan. The facility utilizes cognitive behavioral interventions to address these needs.

The program incorporates CBT groups, individual sessions following the EPICS model, structured activities, educational/employment opportunities, and vocational training. The facility uses a behavioral management system where staff identifies and effectively reinforces positive behaviors. The staff also identifies and effectively disapproves of inappropriate behaviors. The program features three phases (orientation, primary treatment, and reentry) with program requirements established to complete each phase and the program. Some of the interventions within the program include the following:"

“Services”

“Thinking for a Change (T4C)”

“Is an integrated approach to changing offender behavior, developed by Barry Glick, Jack Bush, and Juliana Taymans in cooperation with the National Institute of Corrections (NIC) that uses a combination of approaches to increase an offender’s awareness of themselves and others. It integrates cognitive restructuring, social skills, and problem solving. The program begins by teaching offenders an introspective process for examining their ways of thinking and their feelings, beliefs, and attitudes. The process is reinforced throughout the program. Social-skills training is provided as an alternative to antisocial behaviors. The program culminates by integrating the skills offenders have learned into steps for problem solving. Problem solving becomes the central approach offenders learn that enables them to work through difficult situations without engaging in criminal behavior.”

“Substance Abuse”

“The agency utilizes a cognitive behavioral substance abuse curriculum created by University of Cincinnati. This group focuses on developing cognitive restructuring, emotional regulation, social skills, problem solving skills, and developing a relapse prevention plan. Volunteers are regularly scheduled at the facility to facilitate AA meetings, and NA meetings each week. There are also resident driven meetings. Social Skills- High risk residents also attend 16 additional Social Skill lessons. These lessons introduce new skills, the new skills are modeled, residents practice and receive feedback, and then are given opportunities to practice using the skill.”

“Booster Group”

“This group allows for additional practice in problem solving and will introduce new social skills for use. These groups will be offered twice per week and frequency and duration of attendance depend upon risk level. As residents progress through the program these become advanced practice sessions.

“Healthy Relations”

“This group focuses on three main skill areas: listening, communication, and relationship building skills. Group meets twice per week for 1.5 hours each time over the course of four weeks for a total of twelve hours. Developmental Assets activities from the SEARCH Institute are used to develop the skills. Group also utilizes information from the Duluth Model Batterer’s Intervention Program.”

“Anger Control Group”

“Is a ten session Anger Control Training Program utilized by the agency. This is a module from the Aggression Replacement Training Curriculum. Skill building and practice are incorporated within this curriculum. Residents may be placed in the group based upon an anger assessment, violent or anger related criminal history, or behavior patterns demonstrated within the program.”

“Abuse Survivors Group”

“Many of our residents have been impacted by traumatic abusive events within their lifetime. West Central contracts with a psychologist who facilitates this group to help residents recognize the impact of these events and to provide tools in the process of moving forward.”

“Family Programming”

“Family staff members may meet individually with residents to identify family needs, communication skills, and mediation skills. Staff members also conduct sessions with residents and family members for mediation. Utilization of healthy communication skills and healthy emotional skills are presented to residents and their families. All family members also participate in a visitor orientation prior to their first visitation with the residents. Weekly visitation is available.”

Visitation

Visitation is permitted once the residents have completed Phase I. Space is provided for approved visitors. There are lockers available for the temporary storage of personal belongings that visitors are not able to take with them during the visit. Visitors must exchange their identification during use of the locker key. Visitation is offered three times weekly for both the men and the women residents on different dates/times. Up to three visitors may visit a resident at a time for a one-time 30-minute weekly visit. Residents who have advanced into Phase III are permitted two 30-minute visits per week.

Library Services

Each wing (male and female) have general library resources available. In the male wing the library materials are located on a mezzanine above the dayroom. In the female wing the library materials are located in a general, multi-purpose room adjacent to the dayroom. Materials include general reading, community resource pamphlets and brochures, and county-specific information.

Laundry

While there is a central laundry for linens and bulk loads, there are separate laundry facilities located on each the male and female wings. The male side has five washers and five driers; the female side has four washers and four driers. Laundry crews are responsible for the washing and drying of clothes contained in net bags.

F. Examination of Records

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

1. Litigation

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

2. Significant Incidents/Outcome Measures

There were no reportable significant incidents at WCCCF during this past accreditation period.

A review of the Outcome Measures indicates “389 incidents” in line 2A(1). This number appears high for this setting, but the facility staff clarified that any and all improper behavior by the residents, or injury to staff or resident however minor, are reported as “incidents”. Example categories include arrest, commotion, contraband, emergency action, food service, inappropriate sexual behavior, inventory discrepancy, medical, positive drug screen, PREA, suicide, UA-Nic tests, unauthorized access/absence, vehicle accident, use of force, etc. With the explanation provided, the concern dissipated.

There were 65 reportable injuries that required treatment, which includes all nursing contacts, such as bumped head, jammed finger, fall, pulled muscle, etc.

Six incidents concerning keys were reported. The basis for these incidents were: a resident combination lock key set was not in the key box, locker keys were unaccounted for (three times), and two keys broke off in a door.

Lack of a fire panel tag was the cause for the single code violation. The workman's comp claim was deemed to have no basis. The single in-house emergency was the result of a malfunction in the sprinkler system. The two food service grievances were a complaint of not being served breakfast (received his tray, then became agitated, threw his tray and left, then returned expecting a replacement meal tray) and a complaint of receiving less food than others (received a new tray).

Administration supported 91 professional development events that were attended by the employees. Administration also enforced their ethics which resulted in the termination of 13 staff members due to various infractions (walk off, drug/alcohol, attendance, etc.).

The completed objectives were:

1. West Central Community Correctional Facility will provide a sentencing alternative for higher risk felony offenders from Clark, Champaign, Delaware, Logan, Madison, Marion, Morrow, and Union Counties. We will accomplish this by monitoring the number of referrals from each county that meet the established sentencing criteria.
2. West Central Community Correctional Facility will provide cognitive behavior intervention programs for each offender admitted. Our objective is to provide the necessary treatment dosage that will address the criminogenic needs of the offender.
3. West Central Community Correctional Facility will provide educational and employment programs for each offender admitted. The objective is to assist each offender in completing their GED and obtaining gainful employment.
4. West Central Correctional Facility will target the dynamic risk/need factors for our residents in an effort to reduce the risk level of residents admitted to the program. West Central will ensure that there is a completed ORAS on each offender and target treatment planning to match the risk factor identified.
5. West Central Community Correctional Facility will successfully terminate 75% of the offenders admitted to the program. Our objective is to monitor program progression throughout their residency and modify the treatment program when necessary.
6. West Central Community Correctional Facility will provide productive offender reintegration into the community. We develop a reentry plan for each resident and make appropriate linkages to resources within the community.

On a final note, the residents performed over 1600 hours of service within the community.

3. Departmental Visits

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

<u>Department Visited</u>	<u>Person(s) Contacted</u>
Control Center	Lisa Brendel, Resident Monitor III
“	Marty Sheckler, Resident Monitor I/Transport
“	Mark Reynolds, Resident Monitor IV
Administration	Ann Barge, Grants/Fiscal Manager
“	Cindy Hanmond, Fiscal Specialist
Visits/Training/Classroom	Ann Knueven, Teacher
Janitorial	Aaron Stidham, Facility Coordinator
Court Services	Scott Zwiezinski, Court Services Coordinator
Counseling Unit	Rebecca Miracle, Lead Counselor
“	Anne Humphreys, Clinical Coordinator
“	Sheryl Risner, Education Coordinator
“	Stephen Beil, Counselor
“	Laura Florentino, Counselor
Classrooms	<i>various</i>
Education	Angie Kalb, Education Aide
In-Take	Demetrius Thomas, Resident Monitor Coordinator
Medical	Cindy Morgan, Medical Coordinator
Programs	Cheryl Tossey, Family Specialist
“	Kay Raypholtz, Family Specialist
Male Dayroom	<i>Observed Staff</i>
Female Dayroom	<i>Observed Staff</i>
Male/Female Dorms	<i>various</i>
Food Service	Debbie Troiano, Food Service Coordinator
Shift Change	Carla King, Shift Supervisor (nights)
“	Lisa Brandel, Shift Supervisor (days)
“	Lilly Foster, Resident Monitor III
“	Craig Owens, Resident Monitor I

4. Shifts

a. Day Shift

The team was present at the facility during the day shift from 8:00 a.m. to 6:00 p.m.

During this time, the audit team toured the facility, met with departmental staff, interviewed line staff, observed programs and routine operations, interviewed residents, and reviewed files. The noon meal was sampled.

b. Evening Shift

The team was present at the facility during the evening shift from 6:00 p.m. to 7:00 p.m. The shift review between the day and evening personnel was observed. Evening shift personnel were interviewed. A review of the daily activities and observations was shared with the Executive Director and his select administrative staff.

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:

N/A

G. Interviews

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

1. Offender Interviews

A count of 29 residents was interviewed during the audit. Of those, only two expressed a desire for more food (portion size) and one expressed displeasure with the occasional item substitution. There were no complaints regarding medical care, treatment by staff, or safety. Many expressed their appreciation for the program and shared positive feedback regarding same.

2. Staff Interviews

All of the staff noted earlier in this report were interviewed, as were additional administrative staff who were part of the entire audit process. All staff projected positivity and genuine satisfaction with their positions. Staff also was observed performing their job duties in professional and confident manners with willing compliance/participation by the residents. All staff acknowledged their training, fire drills, and safety within the work site.

H. Exit Discussion

The exit interview was held at 12:15 p.m. in the board room with the Executive Director and 22 staff in attendance.

The chairperson explained the procedures that would follow the audit. The team discussed the compliance levels of the mandatory and non-mandatory standards and reviewed their individual findings with the group. The chairperson expressed appreciation for the cooperation of everyone concerned and congratulated the facility team for the progress made and encouraged them to continue to strive toward even further professionalism within the correctional field.

AMERICAN CORRECTIONAL ASSOCIATION
AND THE
COMMISSION ON ACCREDITATION FOR CORRECTIONS

COMPLIANCE TALLY

Manual Type	Adult Community Residential Services, 4 th Edition	
Supplement	2016 Standards Supplement	
Facility/Program	West Central Community Correctional Facility	
Audit Dates	November 6-7, 2017	
Auditor(s)	Bonnie O'Brien, Chairperson; Christy Gutherz, Member	
	MANDATORY	NON-MANDATORY
Number of Standards in Manual	32	218
Number Not Applicable	0	13
Number Applicable	32	205
Number Non-Compliance	0	0
Number in Compliance	32	205
Percentage (%) of Compliance	100	100
<ul style="list-style-type: none"> ● Number of Standards <i>minus</i> Number of Not Applicable <i>equals</i> Number Applicable ● Number Applicable <i>minus</i> Number Non-Compliance <i>equals</i> Number Compliance ● Number Compliance <i>divided by</i> Number Applicable <i>equals</i> Percentage of Compliance 		

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Ohio Department of Rehabilitation and Corrections
West Central Community Correctional Facility
Marysville, Ohio

November 6-7, 2017

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

Standard #4-ACRS-2A-06

IF EMPLOYEE'S CONTRACTS ARE GOVERNED BY CIVIL SERVICE OR UNIONS, PROCEDURES PROVIDE FOR PROVISIONAL APPOINTMENTS TO ENSURE THAT SHORT-TERM PERSONNEL, BOTH FULL-TIME AND PART-TIME, CAN BE AVAILABLE DURING EMERGENCIES.

FINDINGS:

Employee contracts are not governed by civil service or unions.

Standard #4-ACRS-2A-13

THE ELECTRONIC MONITORING PROGRAM HAS A SYSTEM OF ACCOUNTING FOR AN OFFENDER AT ALL TIMES, INCLUDING VERIFICATION OF ACTIVITIES, REPORTING OF TARDINESS AND/OR ABSENCE FROM REQUIRED SERVICES OR ACTIVITIES, AS WELL AS OTHER PROGRAM VIOLATIONS.

FINDINGS:

There is no electronic monitoring program at WCCCF.

Standard #4-ACRS-2A-14

ACCESS TO COMPUTER EQUIPMENT IS LIMITED TO AUTHORIZED PERSONNEL WITH SECURITY CODES. ADEQUATE POWER AND COMMUNICATION BACKUP SYSTEMS PROVIDE CONTINUOUS, UNINTERRUPTED OPERATIONS.

FINDINGS:

There is no electronic monitoring program at WCCCF.

Standard #4-ACRS-2A-15

ANY INTERRUPTION IN SERVICE IS DOCUMENTED AND REPORTED TO THE AUTHORITY HAVING JURISDICTION.

FINDINGS:

There is no electronic monitoring program at WCCCF.

Standard #4-ACRS-2A-16

A DETAILED WRITTEN OFFENDER SCHEDULE IS DEVELOPED AND SIGNED BY A STAFF MEMBER AND THE OFFENDER.

FINDINGS:

There is no electronic monitoring program at WCCCF.

Standard #4-ACRS-2A-17

PROVISIONS ARE MADE FOR THOSE WHO ARE UNABLE TO PAY PROGRAM COSTS.

FINDINGS:

There is no electronic monitoring program at WCCCF.

Standard #4-ACRS-4C-07

EACH NEWLY ADMITTED RESIDENT WHO WAS NOT TRANSFERRED FROM A CORRECTIONAL FACILITY UNDERGOES A MEDICAL EXAMINATION WITHIN 14 DAYS OF ADMISSION.

FINDINGS:

All admissions to WCCCF are received from a correctional agency having jurisdiction.

Standard #4-ACRS-4C-14-1 ADDED JANUARY 2003

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:

[Nursing] Infants are not housed at WCCCF.

Standard #4-ACRS-6A-04-1 ADDED JANUARY 2002

THE ASSIGNMENT OF APPROPRIATELY TRAINED INDIVIDUALS TO ASSIST DISABLED OFFENDERS WHO CANNOT OTHERWISE PERFORM BASIC LIFE FUNCTIONS IS PROVIDED.

FINDINGS:

WCCCF is unable to house residents who are unable to provide their own self-care.

Standard #4-ACRS-6A-04-2 ADDED AUGUST 2002

EDUCATION, EQUIPMENT AND FACILITIES, AND THE SUPPORT NECESSARY FOR INMATES WITH DISABILITIES TO PERFORM SELF-CARE AND PERSONAL HYGIENE IN A REASONABLY PRIVATE ENVIRONMENT ARE PROVIDED.

FINDINGS:

WCCCF is unable to house residents who are unable to provide for their own self-care.

Standard #4-ACRS-7A-02

A SOLE PROPRIETOR OPERATING A FACILITY IS ABLE TO DOCUMENT THAT NECESSARY LEGAL MEASURES HAVE BEEN TAKEN TO PROVIDE CONTINUITY OF SERVICE IN THE EVENT OF BANKRUPTCY, INCAPACITATION, RETIREMENT, OR DEATH.

FINDINGS:

WCCCF is not a sole proprietorship.

Standard #4-ACRS-7A-03

THE AGENCY SATISFIES PERIODIC FILING REQUIREMENTS NECESSARY TO MAINTAIN ITS LEGAL AUTHORITY TO CONTINUE OPERATIONS. (PRIVATE AGENCIES ONLY).

FINDINGS:

WCCCF is not a private agency.

Standard #4-ACRS-7A-04

AT A MINIMUM, THE BYLAWS FOR THE GOVERNING AUTHORITY OF THE AGENCY INCLUDE:

- MEMBERSHIP (TYPES, QUALIFICATIONS, COMMUNITY REPRESENTATION, RIGHTS, DUTIES)
- SIZE OF GOVERNING BODY
- METHOD OF SELECTION
- TERMS OF OFFICE
- DUTIES AND RESPONSIBILITIES OF OFFICERS
- TIMES AUTHORITY WILL MEET
- COMMITTEES
- PARLIAMENTARY PROCEDURES
- RECORDING OF MINUTES
- METHOD OF AMENDING THE BYLAWS
- CONFLICT OF INTEREST PROVISIONS
- QUORUM

FINDINGS:

WCCCF is not a private agency.

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 Correctional Facilities, Juvenile Detention Facilities, Adult Community Residential Services, and Small Juvenile Detention Facilities.

Facility Name: West Central Community Correctional Facility **Reporting Period:** Nov. '16 – Oct. '17

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

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

Performance-Based Standards for Adult Community Residential Services Outcome Measures Worksheet

Standard	Outcome Measure	Numerator / Denominator	Value	Calculated O.M
1A	(1)	Number of worker compensation claims filed for injuries that resulted from the physical environment in the past 12 months	1	
	divided by	Average number of Full-Time Equivalent staff positions during the past 12 months	65	0.02
	(2)	Number of illnesses requiring medical attention as a result of the physical environment of the facility in the past 12 months	0	
	divided by	Average Daily Offender Population for the past 12 months	142.5	0
	(3)	Number of physical injuries or emotional trauma requiring treatment as a result of the physical environment of the facility in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(4)	Number of sanitation or health code violations identified by external agencies in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
1B	(1)	Number of accidents resulting in property damage in the past 12 months	0	
	divided by	total number of miles driven in the past 12 months unless otherwise noted	29,652	0
	(2)	Number of accidents resulting in injuries requiring medical treatment for any party in the past 12 months	0	
	divided by	Total number of miles driven in the past 12 months unless otherwise noted.	29,652	0
	(3)	Amount (\$) of damage from vehicle accidents in the past 12 months.	0	
	divided by	Total number of miles driven in the past 12 months unless otherwise noted.	29,652	0
1C	(1)	Number of emergencies, caused by forces external to the facility, that result in property damage in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0
	(2)	Number of injuries, caused by forces external to the facility, requiring medical attention that results from emergencies in the past 12 months.	5	

	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0.04
	(3)	Number of times that normal facility operations were suspended due to emergencies caused by forces external to the facility in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0
	(4)	Number of hours that facility operations were suspended due to emergencies caused by forces external to the facility in the past 12 months	0	
	divided by	Number of emergencies caused by forces external to the facility.	0	0
	(5)	Number of emergencies that were not caused by forces external to the facility that resulted in property damage in the past 12 months	1	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0.01
	(6)	Number of injuries requiring medical attention that result from emergencies that were not caused by forces external to the facility in the past 12 months	13	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0.09
	(7)	Number of times that normal facility operations were suspended due to emergencies that were not caused by forces external to the facility in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0
	(8)	Number of hours that facility operations were suspended due to emergencies that were not caused by forces external to the facility in the past 12 months.	0	
	divided by	Number of emergencies.	0	0
	(9)	Number of injuries requiring medical treatment resulting from fires in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(10)	Number of fires that resulted in property damage in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0
	(11)	Amount (\$) of property damage from fire in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0

	(12)	Number of code violations cited in the past 12 months	1	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0.01
	(13)	Number of incidents involving toxic or caustic materials in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0
	(14)	Number of incidents of inventory discrepancies during the past 12 months	9	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0.06
2A	(1)	Number of incidents in the past 12 months	389	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	2.73
	(2)	Number of physical injuries or emotional trauma requiring treatment as a result of the incidents in the past 12 months.	65	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0.46
	(3)	Number of unauthorized offender absences from the facility in the past 12 months	4	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0.03
	(4)	Number of times facility did not report offender absence to the responsible jurisdiction within the established time.	0	
	divided by	Number of unauthorized offender absences	4	0
	(5)	Number of instances of unauthorized access to the facility in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0
2B	(1)	Number of instances in which force was used in the past 12 months.	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0
	(2)	Number of times that staff uses of force was found to have been inappropriate in the past 12 months.	0	
	divided by	number of instances in which force was used	0	0
	(3)	Number of offender grievances filed alleging inappropriate use of force in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0
	(4)	Number of grievances alleging inappropriate use of force decided in favor of offender in the past 12 months.	0	

	divided by	number of grievances alleging inappropriate use of force filed	0	0
	(5)	Number of injuries requiring medical treatment resulting from staff use of force in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0
2C	(1)	Number of incidents involving contraband in the past 12 months	17	
	divided by	Average Daily Offender Population for the Past 12 Months.	142.5	0.12
	(2)	Number of weapons found in the facility in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(3)	Number of controlled substances found in the facility in the past 12 months	2	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0.01
2D	(1)	Number of incidents involving keys in the past 12 months	6	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0.04
	(2)	Number of incidents involving tools in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
3A	(1)	Number of rule violations in the past 12 months	6666	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	46.78
	(2)	Number of offenders terminated from the facility due to rule violations in the past 12 months	33	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0.23
4A	(1)	Number of documented offender illnesses attributed food service operations in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0.23
	(2)	Number of offender grievances about food service decided in favor of the offender the past 12 months	0	
	divided by	Number of offender grievances about food service in the past 12 months.	2	0
	(3)	Number of violations cited by independent authorities for food service sanitation in the past 12 months	0	
4B	(1)	Offender grievances regarding offender access to personal hygiene decided in favor of the offender in the past 12 months	0	

	divided by	Number of offender grievances about access to personal hygiene in the past 12 months	0	0
4C	(1)	Number of suicide attempts in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(2)	Number of offender suicides in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(3)	Number of offender grievances regarding access to health care in the past 12 months	2	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(4)	Number of offender health care access complaints that are found to have merit in the past 12 months	0	
	divided by	Number of offender grievances regarding access to health care in the past 12 months	2	0
	(5)	Number of court suits filed against the facility challenging access to health care in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(6)	Number of health care access court cases decided against the facility in the past 12 months	0	
	divided by	Number of court suits filed against the facility challenging access to health care in the past 12 months	0	0
5A	(1)	Number of offenders who are employed upon release in the past 12 months	73	
	divided by	Number of offenders released in the past 12 months	403	0.18
	(2)	Number of offenders who move into permanent housing upon release in the past 12 months	85	
	divided by	Number of offenders released in the 12 months	403	0.21
	(3)	Number of offender substance abuse tests for which the results were positive in the past 12 mos.	49	
	divided by	Number of tests administered in the past 12 months	1032	0.05
	(4)	Total number of offenders who successfully completed the program in the past 12 months	330	
	divided by	Number of offenders who left the program in the past 12 months	403	0.82

	(5)	Number of offenders who showed improvement as measured by the objective assessment instrument prior to release in the past 12 months	330	
	divided by	Number of offenders released in the past 12 months	403	0.82
	(6)	Number of offenders who were arrested while in residence in the past 12 months	0	
	divided by	Daily Offender Population for the Past 12 Months	142.5	0
6A	(1)	Total number of offender grievances in the past 12 months, regarding: (a) access to court; (b) mail or correspondence; (c) sexual harassment; (d) discipline; (e) discrimination; (f) protection from harm	2	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0.01
	(2)	Number of offender grievance (see a through e above) decided in favor of offenders in the past 12 months	0	
	divided by	Total number of grievances filed in the past 12 months	15	0
	(3)	Total number of offender court suits alleging violation of offender rights filed against the facility in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(4)	Number of offender court suits alleging violation of offender rights decided in favor of offenders in the past 12 months	0	
	divided by	Total number of offender suits filed in the past 12 months	0	0
6B	(1)	Number of offender grievances regarding discrimination in the past 12 months	1	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0.01
	(2)	Number of offender grievances regarding discrimination resolved in favor of offenders in the past 12 months	0	
	divided by	Total number of offender grievances filed regarding discrimination in the past 12 months	1	0
	(3)	Number of grievances resolved in favor of offenders in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(4)	Number of grievances resolved in favor of offenders in the past 12 months	0	
	divided by	Total number of grievances filed in the past 12 months	15	0
6C	(1)	Number of disciplinary incidents resolved informally in the past 12 months	6593	

	divided by	Average Daily Offender Population for the Past 12 Months	142.5	46.27
	(2)	Number of formal offender disciplinary decisions that were are appealed in the past 12 months	9	
	divided by	Total number of disciplinary decisions made in the past 12 months	76	0.12
	(3)	Number of appealed disciplinary decisions decided in favor of the offender in the past 12 months	0	
	divided by	Total number of disciplinary decisions made in the past 12 months	76	0
	(4)	Number grievances filed by offenders challenging disciplinary procedures in the past 12 months	2	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0.01
	(5)	Number of disciplinary-related grievances resolved in favor of the offender in the past 12 months	0	
	divided by	Total number of disciplinary-related grievances filed in the past 12 months	0	0
	(6)	Number of court suits filed against the facility regarding discipline in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(7)	Number of court cases regarding discipline decided against the facility in the past 12 months	0	
	divided by	Total number of court decisions regarding discipline decided in the past 12 months	0	0
	(8)	Number of rule violations in the past 12 months	6666	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	46.27
	(9)	Number of offenders terminated from the facility due to rule violations in the past 12 months	33	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0.23
6D	(1)	Number of offenders released in the past 12 months who made regular payments toward their restitution obligations	0	
	divided by	Number of offenders who had restitution obligations in the past 12 months	0	0
	(2)	Number of offenders who satisfy their court cost/fines obligations in the past 12 months	0	
	divided by	Number of offenders who had court cost/fine obligations in the past 12 months	403	0

	(3)	Total amount of restitution paid by offenders in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(4)	Total number of hours of community service donated by offenders in the past 12 months	21,252	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	149.14
	(5)	Total number of offenders who participated in restitution in the past 12 months	0	
	divided by	Total number of offenders housed in the past 12 months	419	0
	(6)	Total number of offenders who participated in community service work in the past 12 months	1680	
	divided by	Total number of offenders housed in the past 12 months	419	4.01
	(7)	Total number of offenders who participated in victim awareness programs in the past 12 months	0	
	divided by	Total number of offenders housed in the past 12 months	419	0
	(8)	Total amount of restitution paid by offenders in the past 12 months	0	
	divided by	Total number of offenders housed in the past 12 months	419	0
	(9)	Total number of hours delivered by offenders who participated in community service work in the past 12 months	21,252	
	divided by	Total number of offenders housed in the past 12 months	419	50.72
7A		None		
	(1)	Total number of years of staff members' education as of the end of the last calendar year	169	
	divided by	Number of staff at the end of the last calendar year	65	2.6
	(2)	Number of staff who left employment for any reason in the past 12 months	27	
	divided by	Number of full-time equivalent staff positions in the past 12 months	66	0.41
	(3)	Total number of credit hours in course relevant to their facility responsibilities earned by staff participating in higher education in the past 12 months	1087.5	
	divided by	Number of full-time equivalent staff positions in the past 12 months	66	16.48
	(4)	Number of professional development events attended by staff in the past 12 months	91	

	divided by	Number of full-time equivalent staff positions in the past 12 months	66	1.38
7C	(1)	Number of incidents in which staff were found to have acted in violation of facility policy in the past 12 months	9	
	divided by	Number of full-time equivalent staff positions in the past 12 months	66	0.14
	(2)	Number of staff terminated for conduct violations in the past 12 months	13	
	divided by	Number of full-time equivalent staff positions in the past 12 months	66	0.20
	(3)	Number of offender grievances attributed to improper staff conduct which were upheld in the past 12 months	2	
	divided by	Number of offenders grievances alleging improper staff conduct filed in the past 12 months	4	0.5
	(4)	Number of offender grievances attributed to improper staff conduct which were upheld in the past 12 months	2	
	divided by	Average Daily Population for the past 12 months	142.5	0.01
	(5)	Where staff are tested, the number of staff substance abuse tests failed in the past 12 months	2	
	divided by	Number of staff substance abuse tests administered in the past 12 months	34	0.06
7D	(1)	Net amount of budget shortfalls or surplus at the end of the last fiscal year (budget less expenditures)	0	
	divided by	Budget for the past 12 months	3,710,169	0
	(2)	Number of material audit findings by an independent financial auditor at the conclusion of the last audit	0	
	(3)	Number of grievances filed by offenders regarding their records or property in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(4)	Number of offender grievances (records/property) decided in favor of offenders in the past 12 months	0	
	divided by	Total number of offender grievances (records/property) in the past 12 months	0	0
	(5)	Number of objectives achieved in the past 12 months	6	
	divided by	Number of objectives for the past 12 months	6	1
	(6)	Number of program changes made in the past 12 months	0	
	divided by	Number of program changes recommended in the past 12 months	0	0

7E	(1)	Number of grievances filed by staff in the past 12 months	0	
	divided by	Number of full-time equivalent staff positions in the past 12 months.	66	0
	(2)	Number of staff grievances decided in favor of staff in the past 12 months	0	
	divided by	Total number of staff grievances in the past 12 months	0	0
	(3)	Total number of years of staff members' experience in the field as of the end of the last calendar year	501.25	
	divided by	Number of staff at the end of the last calendar year (e.g. Average number of years experience)	65	7.71
	(4)	Number of staff termination or demotion hearings in which the facility decisions were upheld in the past 12 months	0	
	divided by	Number of staff termination or demotion hearings requested in the past 12 months	0	0
7F	(1)	Total number of hours of volunteer service delivered by members of the community in the past 12 months	546	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	3.83
	(2)	Total number of individual community members who provided voluntary service in the past 12 months	83	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0.58
	(3)	Total number of complaints filed by media regarding access to information in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(4)	Total number of positive statements made by media regarding the facility in the past 12 months	5	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0.05
	(5)	Total number of complaints from the community in the past 12 months	0	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	0
	(6)	Total number of hours of community service work delivered by offenders in the past 12 months	21,252	
	divided by	Average Daily Offender Population for the Past 12 Months	142.5	149.14
OPT	(1)	Number of offenders released in the past 12 months who are employed for six months after release		

	divided by	Number of offenders released in the past 12 months		
	(2)	Number of offenders released in the past 12 months who continue substance abuse treatment for six months after release		
	divided by	Number of offenders released in the past 12 months		
	(3)	Number of offenders released in the past 12 months who support themselves for six months following their release		
	divided by	Number of offenders released in the past 12 months		
	(4)	Number of offenders released in the past 12 months who are convicted or adjudicated for a felony crime within 6 months after release		
	divided by	Number of offenders released in the past 12 months		
	(5)	Number of offenders released in the past 12 months who are convicted or adjudicated for a misdemeanor crime within 6 months after release		
	divided by	Number of offenders released in the past 12 months		
	(6)	Number of offenders released in the past 12 months who are convicted or adjudicated for a felony crime within 6 months after release		
	divided by	Number of offenders released in the past 12 months		
	(7)	Number of offenders released in the past 12 months who are convicted or adjudicated for a misdemeanor crime within 12 months after release		
	divided by	Number of offenders released in the past 12 months		