Please print in ink or type

BEFORE THE STATE CLAIMS COMMISSION Of the State of Arkansas

RECEIVED

state Claims Commission

JUL 18 2014

dMr. □ Mrs.	Do Not Write in These Spaces
□ Ms.	Claim No. 15-0033-CC
□ Miss	
James McAlphin, #088328	Claimant Date Filed July 18, 2014 (Month) (Day) (Year)
	Amount of Claim \$ 15000 . 00
State of Arkansas, Respondent	Fund DOC
Dept. of Corr.	
CO James McAlphin, #088328, the above named Clade (Name)	MPLAINT Loss of Property, Failure to Follow Procedure, Pain & Suffering, Nedgligence POB 180 Brickeys, AR 72320 (Street or R.F.D. & No.) (City)
County of	represented by
(State) (Zip Code) (Daytime Phone No.)	(Legal Counsel, if any, for Claim)
(Street and No.)	
State agency involved: ARKINIANS Dept & Core	state) (Zip Code) (Phone No.) (Fax No.) Amount sought: # 5 000 " (1.44 or thou
Month, day, year and place of incident or service:	
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sparts of this complaint, the claimant makes the statements, and answer the following	questions, as indicated: (1) Has claim been presented to any state department or officer thereof?
; when?	Chief of the World Cast Cast Control of Chief
(Year No) (Month) (Day) (Year)	(Department)
and that the following action was tal	Ken thereon: 11 1407 SOLD CERTER OF PORTO
that \$ was paid thereon; (2) Has any third person or o	reporting an interest in this string.
The state of the s	corporation an interest in this claim?; if so, state name and address
(Name) (Street or R.F.D. & No. that the nature thereof is as follows:	(City) (State) (Zip Code)
: and was acquired or	
	in the following manner:
THE UNDERSIGNED states on oath that he or she is familiar with the mu	atters and things set forth in the above complaint, and that he or she verily believes
t they are true.	to an an area of the companied and the or she verify befleves
James / / Hiphin	James 11/2 Minus
(Print Claiman Depresentative Name)	(Signature of Clasmant/Representative)
SWORN TO and subscribed befo	me me at Brickey AR
Street on No.	
on this	day of City (State)
	1 2017
A SPUBLIC Date	(Month) (Year)
Con Expires Co. Co.	Deces Cop
T. D. C.	(Notary Public)
My Commission Expires:	Dec 01 2017
	(Month) (Day) (Year)

Be En The Holowork Still and Commission James 41/2 April 88329 Clommont Alle South a Comedia Responsent Mohan for Lote Supplimentation of Eurobance Comes Nous the Claiment Junes Mitalphin A Inio motion for lete Supplementation of Evidence and horoby States do fellows: The Coment leg Boace Claim in a Ongoing Situation because the Breck how there Been refused Staff Suy they Cant Sind in) and The Myory resulting from Lack of Brock is Consing antenned Swelling For the point of Busting of the Skin and Infection. For thos reces medical staff whote Claiment a "Caver Trea" Script to keep him From houng to Claims Stairs. However, after heaving about this Claim. The Other Megh Soft Grandom Spoke With Doctor asking That Script be for-Minoted Claiment has been forced by ADE Stort to Ethor Hop on Stairs on one leg

Arkansas Claims Commission Or USE fand reintuse bod leg. HE Was induced Doing 30 2-24-15 and TVED Still Word Moved ... The Leg swoten So books Ynot by 2/25/15 an infection and Cyst god Obvelaged Council the Tonder of Fret and beg Cousing Gongarces . Yest Don the Claiment also glocos on the Informary Ward where he was given 4 Bogs of 2 Different type of IV Antibiotics Doily Until 3/5/15. However, although Claiment has Dressing on his Feet where Cyst alea Surgically removed Once Aledras Stoff released Claiment from Inthoming ADC Staff Placed Claimont beat On 200 flor where he has to Choice but hop (one leg) Down Stores, There is no account dies given by stop to Shower holyn Onessing or Assist Benda 49 Sucre AND you is now has been felling them and Writing Orioverce Duly , Hay Singly Dont- Cine | Wheneby Clament Would Like to Alesent This Affidant as Eurdence Due to Engoing Circumstances. The Foregoing is true and leaved to the Best of my Bristofe University and bellet. this 2th day of march 2015 Janes Mari

STATE CE	AIMS CO	MMISSION DO	CKET	
15,000.00 Amount of Claim \$	- OPI	NION	Claim No.	15-0033-CC
James McAlphin #088328		Attorneys	Pro se	
AR Department of Corrections	_ Claimant	Lisa W	ilkins, Attorney	Claimant
State of Arkansas July 18, 2014 Date Filed	espondent	Loss of	Property, Pain & Sunce, Failure to Folio	Respondent ffering, w Procedure
	FINDING C	F FACTS		
This claim was filed for loss Procedure in the amount of S Present at a hearing March 1 represented by Lisa Wilkins, The Claims Commission here Claimant's failure to prove here.	3, 2015 was t Attorney.	he Claimant, pro se,	and the Respondent	ns.
Claimant's failure to prove be part of the Respondent.			any liability on the	
Therefore, this claim is here	eby unanimo	ously dismissed.		
IT IS SO ORDERED.				
				8
	See Back of Opi	Inion Form)		
Upon consideration of all the denied and dismissed this clathe evidence any liability on	um Ior Clair	d above, the Claims (Commission unani ve by a preponder	mously rance of
March 13, 2015 Date of Hearing				
March 13, 2015 Date of Disposition		and	Hetero	ァーニ Chairman

Commissioner

Tes A /Alphin #88329 MU: BEX 0970 Flandonna, AR 72360

4/6 Brenda Wade Direction Ark, Otote Claims Commission 101 E. CApital, Auc Little Rock, 72201-

Magch 13, 2015 RE MEAlphin V. ADC CC 13-0022

Arkansas Claims Commission MAR 1 8 2015 RECEIVED

Ms. Wooli (Ley Broce Claim)

I don't know if it's Appropriate procedure to Submitt Whormston after the Heaving but there Were a Couple of things I didn't think to say at the Heaving today (because I Could hondly hear and I lould only See my own Image On the Screen) but I Would Like to Gog them Now.

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Tracky, N)s. Wede There is a Stonding Order for Stoff Not to take a Inmeter Medical Equipment without Contacting Intermody (See Attached) This Corevance Was found Whith Merit about This Metter and Conception action Premised for the Neglegest act. The ADC Director Coursed With This Decision So These Shouldhie been No Dispute:

Again I appologize if Im Cousing any Inconvenence, But IM Not & Educated and Articulate as Ms. Wilkins and I think and write a Lot better Then I CAN Speak. I pray that you take the Foregoing Document into Consideration.

Tunts Aban James Mietre

My Belief. This 13 days March 2015

2150-18

IGTT430 3GD

Attachment VI

INMATE NAME: McAlphin, James R.

ADC #: 088328

GRIEVANCE#:EAM14-01278

CHIEF DEPUTY/DEPUTY/ASSISTANT DIRECTOR'S DECISION

Your complaint is on 04/08/2014; Captain Harris shift did not adhere to policy concerning your urgent medical needs and removed medical equipment from you.

After reviewing your appeal and all supporting documentation, I concur with the Warden's response in which he states in part, "Captain Harris stated a cell search was conducted and no information was given about doctor's orders at the time of the search. She also stated you got upside over the disciplinary from contraband and nothing was done to interfere with your medical condition and she is not retaliating against you. Staff has been advised not to remove medical equipment from the inmate. I, find your complaint with merit and correct action will be taken."

Appeal denied

Director

Date

Before The Arkansas State Claims Commission

James Mcalphin ADC #88328

On

JUN 1 2 2015

Claimant ENED

VS.

Arkansas Department of Correction

Respondent

Case No. CC-130022, CC-130033

Motion for Reconsideration / Appeal to General Assembly

Come Now the Claimant, James Mcalphin for this Motion for Reconsideration / Appeal to General Assembly and hereby states as follows.

History the claimant herein submitted the above styled claim for Compensation after a negligent act and failure to follow procedures by A.D.C. staff in an April 2014 incident where Staff members Capt. Harris, and Lt. Davis held a retaliatory shakedown of claimants cell and spitefully took a medical leg brace from claimants, causing injury when the claimant was forced to go without a leg brace.

In a hearing held March 13, 2015 this claim was unanimously denied and dismissed for claimants alleged failure to prove liability on part of respondent by a preponderance of evidence.

The claimants requests Reconsideration for the following reasons:

- 1. Claimant was not given a fair, impartial, proper hearing which includes the opportunity to call witnesses, present evidence and properly hear evidence in defense of claim.
- 2. Claim submitted a preponderance of Evidence showing liability for negligence and injury on the part of respondent, thus proving claim against them.

ARGUMENT

A. Not Given Fair, Impartial, Proper Hearing.

- 1. On March 13, 2015 Claimant was escorted to Isolation (3) Dayroom Cage for an Ark.

 Claims Commission hearing on Claim # CC-15-0022 and CC-15-0033 (in Video Conference) by

 Lt. Davis and Lt. Liston. (Lt. Davis was one of the actors in the leg brace claim).
- 2. The first thing the Claimant noticed was all he could see on the video screen was an image of himself sitting in the cage and throughout proceedings he could not see no one from Commission or Respondent.
- 3. The second thing Claimant Noticed was that the voice from the speaker was distorted and he could barely understand what was being said. When "The Man" spoke it was breaking up. Whereby Claimant Could not intelligently grasp defense presented by respondent and this affected his presentation of his case, the facts and outcome of proceedings.
- 4. In Addition, Claimant requested that Lt. Davis and Sgt. Smith be called as witnesses in Leg Brace Claim (This requested prior to hearing) however, (according to them) they were Not Contacted by the commission, and their testimony under examination was a key part of Claimants allegations.
 - 5. Respondent (To Claimants Knowledge) presented;
 - 1. No Witness Testimony
- 2. No Policy references, or otherwise entered any relevant Evidence that support a defense of the Claim.

In contrast, Claimants references to Administrative Regulation on adhering to medical needs of prisoners AD-11-10 and Administrative Grievance response # EAM – 14 -01278 was given no consideration by Commission although they were the head of ADC Agency Conceding the Respondent Negligence and taking Corrective action.

(This Claim was only file because A.D.C. has no Provision for Monetary Compensation for those Negligent Acts).

Whereby, Claimant herein was not given a fair, impartial, proper hearing and allowed properly present evidence in the form of Eyewitness testimony, hear all evidence respondent presented in defense, and he hereby requests this Motion for Reconsideration be granted and decision reversed.

B. Claimant submitted a preponderance of evidence to prove liability on part of Respondent.

Argument

- 1. Negligence is defined as to "disregard", "omit" "leave undone" Ect. Negligence can happen when an individual dose something against Policy and Procedure, or fails to do something they know they should do and are obligated to do.
- . Thus, if a Claimant can show: 1. That a negligent act occurred committed by Respondent; 2. Show he has injury; 3. Show that the negligent act caused the injury, then he has sufficiently proved liability for negligence on part of respondent.

Negligence

Herein Claimant Submitted Evidence documenting that his leg brace was taken in April 2014 by Respondents (See Exhibit – A) and evidence of medical documentation of extensive injury to his leg(See Record) showing likely hood of need for brace and in grievance # EAM 14-01278 (See Exhibit - A) demonstrated that the warden of East Arkansas Regional Unit Along with the Director of ADC Agency on appeal stating that staff shouldn't have taken medical equipment

(they were negligent), that the Grievance had merit and Corrective Action would be taken. This evidence proved negligence occurred.

<u>Injury</u>

Prior to hearing Claimant submitted extensive medical evidence showing swelling in his leg after brace was taken... At the hearing there was evidence that this swelling created cellulites in the diabetic Claimant from which he had to be hospitalized for one week on I.V. Antibiotics for infection in leg. (Cleverly the respondent presented this evidence themselves in order to negate its relevance in establishing injury to claimant). However, their assertion that Claimant has Cellulites dose not negate the fact the swelling in lower extremities was the cause of injury and infection. As Claimant is still waiting to be fitted for another brace. Swelling caused by absence of brace

Negligence Caused Injury

The evidence that was submitted prior to hearing showed in abundance that pain, increased swelling, and infection was caused by absence of brace. Including the inability to go on yard recreation and hospitalization.

Thus the Claimant supplied evidence that all three pronges were proven and meritous grievance #EMA 14-01278, medical consult report, medication administrative records, and encounter reports were a preponderance of evidence showing liability.

Additionally, claimant requested witnesses but they were not made available by respondent or Claims Commission.

Furthermore, respondents presented no evidence.

No witnesses testifying in defense of Claims. No policy indicated a necessity of an (Arbitrary referenced) "script" to have a brace on a bad leg.

No affidavits, Reports, or statements supporting their position is as if they knew it is not necessary for them to present a case because we don't matter... that they will automatically win whether a prisoner makes a sufficient showing of negligence or not.

This is called discrimination and it's supposed to be illegal in America.

Ms. Wilkin simply indicated that some inmates use braces for other purposes and she didn't see an (arbitrary) "Script" in Claimant medical file. However, what Warden / Director said in response to (exhibit –A) was disregarded.

"Preponderance" is defined as having greater weight. The respondents offer no substantial evidence in dispute of Claim and Claimants clearly outweighed any opposing and proved all allegations.

Failure of the Commission to properly adjudicate the negligent act would give tacit authorization for state staff members to take any brace, wheelchair, cane, crutch or prosthetic limb in which a crippled prisoner has no (arbitrary) "script" for. Where do we draw the line?

Conclusion

It's understandable the Commission may consider the amount of relief requested to be excessive and reduced the award. But to award nothing and deny claim in which ADC Agency has already determined the negligent act occurred and ordered corrective action is totally unfair and defeats the purpose of the establishment of the commission to adjudicate all claims against state of Arkansas Agencies Fairly.

If certain individuals subject to negligence by state actors are not going to be treated equally by the commission because of their incarceration, race or whatever reason, then they shouldn't even be allowed to file claims. Why put on pretence of giving them a just hearing and create farce that's a waste of taxpayer's money? Just bar prisoners from filing claims.

Because there is no doubt had I been a patient in a state hospital, or traveler on an Arkansas Highway, a student at Arkansas University and an Arkansas Officer took a leg brace without regards for need or contacting Medical., and the incident was investigated and in the opinion of the Director of the agency was a finding that staff had previously been told not to take medical equipment, that the claim was with merit, Staff was wrong and corrective action would be taken in the form of suspension, reprimand, termination, Ect. And the Claimant in that case presented this as substantial evidence at a hearing, that claim would have been upheld. Especially if respondents presented no evidence in dispute of these facts. They only alluded to the fact that some prisoners make weapons out of braces and traffic braces from other prisoners, and they found "no Script"

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Which should have been irrelevant because they presented no evidence that claimant (or Anyone for that matter) has ever hid contraband in a brace, made a weapon out of a brace or that any official policy exists saying a "script" is necessary to retain a brace you were fitted within a free world hospital or otherwise.

Claimant submitted extensive evidence for need of brace. He further requested to call on witnesses who could have testified to leg problems, inability for claimant to recreate without brace. And a disproportionate number of retaliatory shake downs that deprived Claimant of property that was legal, to no avail.

Claimant herein requests to be treated just as any other citizens violated by the state, as if our lives and suffering matters. We're paying a debt to society for conviction of a crime, but we're still human and entitled to humane treatment, civil rights and consideration given to claimants elsewhere under similar circumstances of equal standing in the community, of equal worth. Even detained by state, all persons are equal before the law. The law is no more respectful of one

person then another, and all persons, including inmates, detainees, patients, and prisoners stand as equals before the law, and are to be delt with equally in administrations of justice.

Whereby, due to claimants not receiving a proper hearing, and claimant proving allegation by a preponderance of the evidence showing liability on the part of respondent. Claimant request this court grant motion for reconsideration and award relief it deems appropriate.

Respectfully submitted

James McAlphin

x Famer Makein

IGTT410 3GS (ExhibiT-A)

SOLM89L Attachment III

INMATE NAME: McAlphin, James R.

ADC #: 088328D

GRIEVANCE #: EAM14-01278

WARDEN/CENTER SUPERVISOR'S DECISION

Inmate McAlphin, you grieve on 04/08/2014, Captain Harris shift is not adhering to policy on urgent medical needs. Your complaint is intoed. Captain Harris stated a cell search was conducted and no information was given about doctors orders at the time of the search. She also stated you got upside over the disciplinary from contraband and nothing was done to interfere with your medical condition and she is not retaliating against you. Staff has been advised not to removed medicals equipment from the inmate. I find your complaint with merit and correct action will be taken.

Signature of Wirden/Supervisor or Designee

Windw

5/8/14/ Date

INMATE'S APPEAL

If you are not satisfied with this response, you may appeal this decision within five working days by filling in the information requested below and mailing it to the appropriate Chief Deputy/Deputy/Assistant Director along with the Unit Level Grievance Form. Keep in mind that you are appealing the decision to the original grievance. Do not list additional issues, which are not part of your original grievance as they will not be addressed. Your appeal statement is limited to what you write in the space provided below.

WHY DO YOU DISAGREE WITH THE ABOVE RESPONSE?

Because Capt. Horres is Bluntoutly folsifying Cocuments and you know this is Whong a 20 minutes before Capt. Marris Shook me Down, Wh. 12 Sqt. Smith and Cot Clinton also Taking the The Informary. they Accident pulled the Chair from brown me Casing me to hit the Floor Head First or invalations of the Course I was Capted in the Front) our Capt. Horris that Officers to take a ficture of me course in they. So its a liet she Disant know of my medica Condition. This Capt. As a listing of Horroshing me. and I would like to be figure for ed and for action taken argainst the far falsifying Dockmatand, Cavel the Marris for the Marris Ungent med. needs, and a investigation of Marris Signature

ADC#

Date

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MAY I 4 2014

INMATE GRIEVANCE SUPERVISOR ADMINISTRATION BUILDING

15

LIUL 0 8 2014

IGTT430 3GD

East Achanana Regional Unit

Attachment VI

INMATE NAME: McAlphin, James R.

ADC #: 088328

6-26-201

GRIEVANCE#:EAM14-01278

CHIEF DEPUTY/DEPUTY/ASSISTANT DIRECTOR'S DECISION

Your complaint is on 04/08/2014; Captain Harris shift did not adhere to policy concerning your urgent medical needs and removed medical equipment from you.

After reviewing your appeal and all supporting documentation, I concur with the Warden's response in which he states in part, "Captain Harris stated a cell search was conducted and no information was given about doctor's orders at the time of the search. She also stated you got upside over the disciplinary from contraband and nothing was done to interfere with your medical condition and she is not retailating against you. Staff has been advised not to remove medical equipment from the inmate. I find your complaint with merit and correct action will be taken."

Appeal denied

Dato

UNIT LEVEL GRIEVANCE FORM (Attachment I)	
Unit/Center East out. Max Uni APR 28 2014	FOR OFFICE USE ONLY
Carland Carlot	GRV. # EAMIY-01278
	Date Received: 4-88-14
ADC# 88328 Brks # MAX 6/Job Assignment M/A	GRV. Code #: 803
(Date) STEP ONE: Informal Resolution	ORV. Codo II.
(Date) STEP TWO: Formal Grievance (All complaints/concerns should	d first he handled informally
If the issue was not resolved during Step One, state why $\langle h_{\alpha} \rangle$	Warra T Han 111 been
- WILL DIE GO OUST LEFT MA INDORAL OUT	M al al
(Date) EMERGENCY GRIEVANCE (An emergency situation is one i	n which you may be subject to
a substantial fisk of physical narm; emergency grievances are not for ordinary pro	hlems that are not of a serious
nature). If you marked yes, give this completed form to the designated problem-s	olving staff, who will gian the
attached emergency receipt. If an Emergency, state why:	Plant of a
Indifferent to Schious Mechael needs of Phison	(PS
Is this Grievance concerning Medical or Mental Health Services? If yes, a BRIEFLY state your one complaint/concern and be specific as to the complaint,	circle one: medical or mental
involved and how you were affected. (Please Print):	date, place, name of personnel
ON THE April 8, 2014 & weeks O GREWANNE again	: L 200
	t medical needs
ON Fet April 11, 2018 & was amoken by menta	I Health Mrs. Smith
my Heart was Rolling, I was dizzy and I Coole	1st Breath.
She asked if I Wonted to go to Influences	
confed the C. They Winnt about to take me, 3	
	eding Osas Lower the
10 00 back to Call and Protest my Chings	and TOLD me
The A State Hast shight County	#1 3
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that sue newer seeij w she ninde sit outsi	A Say formo Koroks
Hearty - Lours In Igharing Woctors Okdens will	this was Retuliation
T) (400 - 1)	
for in 11 polyme Auri	1 14,0019
Date /	9.60
If you are harmed/threatened because of your use of the grievance process, report it imm	nediately to the Warden or designee.
This form was received on (date), and determined to be Step One a	only
(Yes or No). This form was forwarded to medical or mental health?	(Yes or No). If yes, name
of the person in that department receiving this form:	Date
35T H Williams 3644 Of Heiltren	14-18-14
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature	Pate Received
Describe action taken o resolve complaint, including dates:	Ages She Was
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sin Gell Has been Sparched a line	iel chan little
Act Dwilliam 4.11-14 Day 10- 1	119nd, 4 DG/.
Staff Signature & Date Returned Immare Signature & Date	to Received
This form was received on 43 26.14 (date), pursuant to Step Two. Is it an Emerge	gency? (Yes or No).
Staff Who Received Step Two Grievance:	Date 4 16/14
Action Taken: Forwarded to Grievance Officer/Warden/O	ther) Date: 4
If forwarded, provide name of person receiving this form:	Date:
MA) F	4.76.4

DISTRIBUTION: YELLOW & PINK - Inmate Receipts; BLUE-Misyance Officer: ORIGINAL-Given back to Inmate After Completion of Step One and Step Two.

ADMINISTRATION BUILDING

(Exhibit-B)

IGTT410 3GS

INMATE NAME: McAlphin, James R.

ADC #: 088328D

GRIEVANCE #: EAM13-01892

WARDEN/CENTER SUPERVISOR'S DECISION

Inmate McAlphin, you grieve on 06/14/2013 you were escorted back from yard call and left in restraints for over an hour. Your complaint is noted. Corporal Randle stated you were double cuffed and the restraints were removed leaving a single handcuff on your right wrist. He also stated you did not notify any one until he noticed the A-band wrist wrap which you were covering up. Sergeant Williams stated you did tell him you needed to speak with him but it was not an emergency while he was escorting the nurse for pill call. He also stated no one heard you calling to let them know you were still in restraints, but you were seen by medical on that day. Documentation reflects you were in fact seen by medical on 06/14/2013. Although I find your complaint with merit; you should have notified staff that the second set of restraints was still on your wrist. Staff should not have left you in restraints; therefore, corrective action will be taken.

Signature of Warden/Supervisor or Designee Title Date

INMATE'S APPEAL

If you are not satisfied with this response, you may appeal this decision within five working days by filling in the information requested below and mailing it to the appropriate Chief Deputy/Deputy/Assistant Director along with the Unit Level Grievance Form. Keep in mind that you are appealing the decision to the original grievance. Do not list additional issues, which are not part of your original grievance as they will not be addressed. Your appeal statement is limited to what you write in the space provided below.

WHY DO YOU DISAGREE WITH THE ABOVE RESPONSE?

Inmate Signature ADC# Date

IGTT430 3GD





Attachment VI

INMATE NAME: McAlphin, James R.

ADC #: 088328

GRIEVANCE#:EAM13-01892

CHIEF DEPUTY/DEPUTY/ASSISTANT DIRECTOR'S DECISION

Inmate McAlphin, I have received your formal grievance dated 6/16/2013, where you allege on 6/14/2013, you were escorted back from yard call and you were left in restraints for over (1) hour.

After reviewing all supporting documentation, I find Corporal Randle stated the restraints were removed leaving a single handcuff on your right wrist. He also stated you did not notify any one until he noticed the A-band wrist wrap which you were covering up. Sergeant Williams stated while he was escorting the nurse for pill call you did tell him you needed to speak with him but it was not an emergency. He also stated no one heard you calling to let them know you were still in restraints. It was staff responsibility to insure your restraints were removed. Therefore, I concur with the Warden's response.

By way of this response, I will instruct the unit Warden to forward a copy of Corrective Actions taken to my office.

Appeal denied

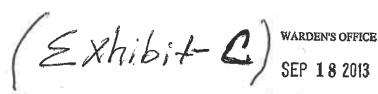
Director Strate Chang Jo

9-12-13

LOF

Date

Page 1 of 1



IGTT430 3GD

East Arkansas Regional Unit

Attachment VI

INMATE NAME: McAlphin, James R.

ADC #: 088328

GRIEVANCE#:EAM13-02039

CHIEF DEPUTY/DEPUTY/ASSISTANT DIRECTOR'S DECISION

Inmate McAlphin, I have received your formal grievance dated 6/23/2013, where you allege on 6/15/2013, you submitted a grievance concerning inmate abuse and harassment in violation of the PREA Act. You claim this grievance was given to Sgt. Smith, who said he gave it to Capt. McNary who supposedly gave it to Lt. Heath to run an investigation and notify him. You also claim the next evening Sgt. Smith brought a copy of it back to you saying he found it just laying on the hall desk.

After reviewing all supporting documentation, it was determined that your grievance EAM13-01884 was a PREA issue and should have been investigated handled as an emergency due to your allegations. Officer Smith states in part," I did sign his informal and turned it over to Captain McNary for investigation and did find it at the hall desk the next day and took it back to the inmate to proceed to step two." Captain McNary states in part, "No, I did not know of this allegation." Due to the evidence submitted in your appeal and conflicting staff statements, I find this issue was not handled according to policy, therefore, I find your appeal with merit.

Appeal upheld

By way of this response I will instruct the unit Warden to take corrective actions and forward a copy to my office.

Date

A.C.A. § 19-10-210

West's Arkansas Code Annotated <u>Currentness</u>
Title 19. Public Finance (<u>Refs & Annos</u>)

*☐ <u>Chapter 10</u>. Claims Against the State

*☐ <u>Subchapter 2</u>. Arkansas State Claims Commission (<u>Refs & Annos</u>)

→§ 19-10-210. Hearings--Notice--Procedure

- (a) The Director of the Arkansas State Claims Commission shall notify each claimant and also the head of each state agency, department, or institution against which a claim is filed of the time and place set for the hearing thereof.
- (b)(1) In conducting hearings, the Arkansas State Claims Commission shall not be bound by the formal rules of evidence and shall conduct all hearings publicly and in a fair and impartial manner, giving the parties full opportunity for presentation of evidence, cross-examination of witnesses, and argument.
 - (2) To the extent practicable, the commission shall adopt the procedure used by the circuit courts, and its hearing shall be conducted in a judicial manner.

CREDIT(S)

Acts of 1949, Act 462, § 4; Acts of 1951, Act 373, § 2; Acts of 1983, Act 470, § 4; Acts of 2005, Act 1962, § 88, eff. Aug. 12, 2005.

Formerly A.S.A. 1947, § 13-1404.

HISTORICAL AND STATUTORY NOTES

Arkansas Code Revision Commission

Technical changes were made in 2005 to conform with the official Arkansas Code of 1987 as approved by the Arkansas Code Revision Commission.

CROSS REFERENCES

Workers' compensation, definitions, see § 11-9-102.

LIBRARY REFERENCES

<u>States</u> ← 184.29. Westlaw Topic No. 360. C.J.S. States §§ 510 to 512.

A.C.A. § 19-10-210, AR ST § 19-10-210

Current through 2014 2nd Ex. Sess. and the Nov. 4, 2014, election, including changes made by the Ark. Code Rev. Comm. received through 3/1/2015. Also included are 2015 Regular Session laws effective through March 27 from the 2015 Reg. Sess. of the 90th Arkansas General Assembly.

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END OF DOCUMENT

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STATE CLAIMS COMMISSION DOCKET OPINION

Amount of Claim \$ 15,000.00	Claim No. 15-0033-CC
	Attorneys
James McAlphin, #088328 Claima	nt Pro se Claimant
AR Dept. of Correction State of Arkansas Responde	nt Lisa Wilkins, Attorney Respondent
Date Filed July 18, 2014	Type of Claim Failure to Follow Procedure, Negligence, Pain & Suffering,
	Loss of Property

FINDING OF FACTS

The Claims Commission hereby unanimously denies Claimant's "Motion for Reconsideration" for the Claimant's failure to offer evidence that was not previously available. Therefore, the Commission's March 13, 2015, order remains in effect.

IT IS SO ORDERED.

(See Back of Opinion Form)

CONCLUSION

The Claims Commission hereby unanimously denies Claimant's "Motion for Reconsideration" for the Claimant's failure to offer evidence that was not previously available. Therefore, the Commission's March 13, 2015, order remains in effect.

Date of Hearing July 9, 2015	
Date of Disposition July 9, 2015	Mu Apollus Commissioner
**************************************	Commissioner