Following are administrative directives and administrative memoranda issued by Arkansas Community Correction with an effective date from January 1, 2018 through March 31, 2018.

Document Title	Effective Date
Procurement and Receiving AD	3/12/2018
Self-Governed Housing AD (new)	2/28/2018
Use of Restraints AD	3/12/2018
Naloxone Protocol AD (new)	3/26/2018

Arkansas Community Correction



Arkansas Community Correction

Two Union National Plaza Building 105 West Capitol, 3rd Floor Little Rock, AR 72201-5731 501-682-9510 (office) 501-682-9513 (fax)

ADMINISTRATIVE DIRECTIVE: <u>18-</u>08-07 PROCUREMENT AND DISPOSITION ACTIVITIES Procurement and Receiving

TO: **DEPARTMENT OF**<u>Arkansas</u> Community Correction Employees

FROM: G. DAVID GUNTHARPSheila Sharp, Director

SUPERSEDES: AD 00-04

PAGE 118-03

APPROVED: <u>Signature on File</u>

EFFECTIVE: April 30,

- I. APPLICABILITY. This policy applies to <u>Department of Arkansas</u> Community Correction (<u>DCCACC</u>) employees involved in procurement and <u>disposition of receiving</u> commodities and services.
- **II. POLICY.** It is **DCC**<u>ACC</u> policy to process documents for procurement and **disposition of**<u>receiving</u> commodities and services in compliance with applicable state and federal laws and **procedures and**-Board of Corrections (Board) guidelines. Direction regarding procurement and **disposition**<u>receiving</u> activities requiring prior Board approval is contained in this administrative directive.

III. DEFINITIONS.

- A. Disposition. Disposal, sale, or transfer of surplus or unserviceable commodities.
- **B.** Emergency Procurement. Acquisition of commodities or services costing \$10,000 or more, which, if not immediately initiated, will endanger human life or health, state and/or federal property, or the functional ability of a state and/or federal agency.
- **CB. Procurement.** Purchasing, buying, renting, leasing, contracting, or otherwise obtaining commodities or services.

Arkansas Community Correction AD 18-08 Procurement and Receiving Page 1 **DC.** Sole Source Procurement. Acquisition of commodities or services which, that by virtue of specifications, is are available only from a single source.

IV. GUIDELINES.

- A. **Procurement** <u>Purchasing</u> of Commodities and Services.
 - Procedures for procurement and dispositionreceiving of commodities and services shall beare governed by applicable state and federal laws and procedurespolicies of agencies with authority to administer these activities. Such authority, as may be appropriate, shall be included in the Standard Operating Procedures for Purchasing and made available to employees involved in resource management or procurement activities.
 - 2. Procurement actions within approved operating budgets, which are not identified as being subject to other authorizations, may be approved by the Chief Deputy Director, the Deputy Directors and <u>the</u> Assistant Directors.
 - Resident Services Cash Fund. Procurement from the Resident Services Cash Fund of merchandise for resale and food items may be procured by the Center Supervisor. Other procurement actions from the Resident Services Cash Fund require from the Resident Services Cash Fund requires the following approvals:
 - a. Purchases costing \$1,000 or less require prior approval of the applicable Center Supervisor and the Purchasing Manager.
 - b. Purchases costing more than \$1,000 but less than \$10,000 require further approval of the Chief Deputy Director or appropriate deputy director and the DCCDeputy Director (Director).of Residential Services.
 - eb. Purchases of \$10,000 or more also require approval of the Director and Board.
 - 4. Emergency procurements shall<u>must</u> be approved by the Director or, in his/her absence, the Chief Deputy Director or <u>a</u> Deputy Director in collaboration with the Deputy Director of Administrative Services.
 - 5. Sole source purchase of equipment requires approval of the Director. Sole source purchase of equipment exceeding \$50,000 also requires approval of the Board.
 - 6. Procurement of capital equipment items from all fund sources requires the Director's approval; however, the Director may delegate approval authority to the Chief Deputy Director or <u>the</u> appropriate Deputy or <u>Assistant</u> Director for procurement of specific capital equipment items and/or for specific dollar amounts.
 - Procurement of commodities and services required for authorized construction/ renovation projects shallmust be approved by the Chief Deputy Director, and the Deputy or Assistant Director designated by the Director to oversee each project.

 B. <u>Receiving Notification</u>. Each Area Manager, Center Supervisor, and Central Office Departmental Manager should delegate the responsibility of receiving to one person and along with a back-up person. Receiving reports must be submitted to the Procurement Office within 48 hours of receiving item(s) or services, and submitted reports should be made on actual material received, not on shipping tickets or purchase orders.

<u>C.</u> Disposition of Commodities. Sale or disposition of buildings and land and sales contracts exceeding \$50,000 require Director and Board approval. Demolition of any building requires the Director and Board approvals regardless of the building's value.

C. D. New and Renewal and New Leases.

- 1. Lease of office and storage space requires approval of the Director, however, if a new lease/purchase agreement will exceed \$50,000 or an existing lease agreement will increase by more than 5% per year, Board approval is also required.
- 2. Lease of office space resulting in relocation requires the Director and Board approvals.
- 3. Lease of equipment over 210,000 per year requires the Director's approval.
- 4. Lease of land or buildings to house offenders require approval of the<u>requires</u> Director and the Board <u>approvals</u>.
- **DE**. **Procurement of Land, Buildings, Construction and/or Renovation Projects.** Procurement of land, buildings, construction and/or renovation projects require the following approvals:
 - Procurement of land, buildings, construction and/or renovation underless than \$50,000 requirer approval of the Director.
 - 2. Procurement of land, buildings, construction and/or renovation projects at or exceeding \$50,000 require both-Director and Board approvals
- **EF. Contracts:** Administered by ACC. The list below reflects the approvals required for contracts. Amendments which that adjust the amount of fees, the percentages of the total amounts to be paid; or the scope of services or that increase the cost per offender per day contract bid rate previously approved require the same approvals required<u>as</u> initially required.
 - 1. Professional and/or Consultant Services- require the Director's approval. Contracts of \$50,000 or more also require Board approval.

- 2. Architectural and/or engineering services for new construction and renovationsrequire Board selection and approval. The Board may choose to select and approve contractors by participating on an interview committee or based upon the Director's recommendation.
- 3. Medical Services require Board selection and approval, In addition to the amendments above, any changes in the method of calculation of compensation, and other adjustments to fees to be paid require Board approval.
- 4. Outside legal services for agency representation require Board approval.
- 5. <u>PrisonResidential</u> facility operation services require Board approval. In addition to the amendments above, changes in the method of calculation of compensation, and other adjustments to fees to be paid also require Board approval.
- 6. All contracts require legal review by the <u>staff attorneyACC general counsel</u> prior to submission to the approval authority.
- **F**<u>G</u>. Emergency Board Approval. Should an emergency situation necessitate immediate procurement of commodities or services that require Board approval-as outlined herein, the Director will contact the Board Assistant to request a special meeting by telephone for Board the Board's consideration and approval.
- **GH. Reports.** The Director shallwill provide monthly Board-reports to the Board of new and/or renewed contracts of \$10,000 or more.
- V. STANDARDS. <u>Arkansas Code section 19-11-101</u>; American Correctional Association (ACA) Standards for Adult Community Residential Services, fourth edition, standard 4-ACRS-7D-26.



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ADMINISTRATIVE DIRECTIVE: 17-1218-05 Use of Restraints

TO: Arkansas Community Correction Employees

FROM: Sheila Sharp, Director

SUPERSEDES: AD 00-01 17-12

APPROVED: <u>Signature on File</u>

EFFECTIVE: March 10, 201712, 2018

- I. APPLICABILITY. Arkansas Community Correction employees.
- **II. POLICY.** Restraints will <u>only</u> be used <u>only</u> when <u>necessaryappropriate</u> and by trained employees as prescribed in this directive and in accordance with "Use of Force" policy. <u>(4-ACRS-6A-03)</u>

III. GUIDANCE.

A. Situations when Restraints may be appropriate. Appropriate circumstances for using restraints include protection of self or others, deterrence from escape, control of significant behavioral problems or for medical reasons at the direction of a physician or psychiatrist. Following are examples of situations where restraints may be appropriate:

III. DEFINITIONS.

A. Restraints. Security equipment used to restrict movement of offenders to include handcuffs, leg irons, security belts and emergency restraint chairs.

B. Offenders. Persons in custody or under supervision of Arkansas Community-

Arkansas Community Correction Use of Restraints AD 18-05 – Page 1

Correction by order of the courts or Parole Board.

IV. GUIDELINES.

A. Situations when Restraints may be used.

- 1. When an offender is being arrested;
- 2. When an offender is being transported. Exceptions may be made when transporting for work crew/detail, work study, sports competitions, medical appointment of residents and other situations specified by Residential Center Supervisors;
- 3. When an offender has threatened violence or shown a propensity for violence or self injury;
- 4. When a judge or the Parole Board requires the offender to wear restraints while in court, at a hearing or otherwise;
- 5. When necessary to protect staff, offenders or others from harm or to deter the possibility of escape;, or
- 6. When necessary to render medical or mental health care.

B. Use of Restraint Equipment.

1. All Offenders.

a. Mechanical Restraints should<u>must only</u> be applied only by employees trained to use restraints and in accordance with **Policy on the** Use of Force <u>policy</u>.

<u>b2</u>. Unless circumstances indicate removal is appropriate, restraints should not be removed until the offender is placed in a secure area or delivered to the receiving authority as specified by the Center Supervisor, Area Manager or court/Parole-Board authority and a receipt is received.

 Restraints shall not be placed around the neck of an offender or applied in anyway which inflicts physical pain or restricts blood circulation or breathing.

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Use of restraints in a cell shall<u>must</u> be determined by the Center Supervisor in consultation with medical/mental health authority.

e<u>4</u>. Restraints <u>shallmust</u> not be used as punishment and <u>shallmust</u> not be used longer than necessary.

2. Residential Center Residents.

Emergency Restraint Chair (ERC). The ERC may be used in residential centers to help control combative, self destructive or potentially violent residents. Violent behavior may mask dangerous medical conditions; therefore, detained residents must be monitored for and provided with medicalor mental health treatment when needed. When the ERC is used, the staffperson authorizing use of the ERC must notify the Medical Department. Medical personnel will quickly respond to assess the restrained resident's condition. Assessment will be for appropriate circulation and will occur everyfifteen (15) minutes until release. Circulation (in areas where straps orrestrictive devices inhibit movement), ability to breathe appropriately, skincolor, and other medical signs (as appropriate) will be observed and documented in the Medical Record. Only the Center Supervisor or Duty-Officer are authorized to approve placement of a resident in the ERC. Residents shall not be restrained in the ERC for more than 2 hours without being allowed to stand and move about under appropriate supervision. Otherappropriate restraints (e.g., handcuffs and leg irons) may be used during thistime. If the Crisis Intervention Team determines after the two (2) hours that the resident continues to exhibit violent behavior which may result in selfinjury or harm to others then they may continue restraints and review the decision to allow the resident to stand in conjunction with the fifteen (15)minute checks. The resident will only be re-restrained if necessary to protectthe resident or others from potential harm. All Residential security staff willbe trained to properly use the ERC and must receive annual refresher training.-The Senior Residential Supervisor shall ensure proper training of employeesand storage and accountability of the ERC.

5. Pregnant Residents. Reasonable and prudent correctional practices shall<u>must</u> be applied to pregnant residents. The use of security restraint devices, such as handcuffs/shackles, etc., shall<u>must</u> be in accordance with established policy. At no time shall<u>must</u> any such device be applied to a pregnant resident during the final stages of active labor, while occupying a delivery room, or if such application is

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determined by a physician to be a health risk to the unborn child or the health status of the resident. In situations where there exists a valid concern as to the appropriate level or degree of security restraint device(s) to be applied to a pregnant resident, the Deputy Director of Residential Services shallmust be contacted.

6. Use of Restraint Chair. The Restraint Chair must be used as described in the form titled "Checklist for Restraint Chair Use."

C. Transporting or Escorting Restrained Offenders.

- 1. If restraints are used, employees shall<u>must</u> ensure security procedures and safety precautions are followed while escorting or transporting offenders (e.g. appropriate restraints properly applied, isolation from others during arrest, proper wearing of identification and weapons, use of well-maintained vehicle for transport) while escorting or transporting offenders.
- 2. When possible, at least one employee of the same gender as the offender should be present when transporting a restrained offender.
- **D.** <u>Visits</u> <u>3</u>. To avoid a security breach, restrained offenders are not permitted visits when being transported or escorted.

 V. STANDARDS. American Correctional Association (ACA) Standards for Adult Community Residential Services, 4th Edition 4 ACRS 6A 03
 IV. FORMS.

AD 18-05 Form 1 Checklist for Restraint Chair Use

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Arkansas Community Correction CHECKLIST FOR RESTRAINT CHAIR USE

Instructions. The Restraint Chair must only be used to prevent or intervene in high-risk situations such as to help control combative, self-destructive or potentially violent residents. Violent behavior may mask serious medical conditions; therefore, restrained residents must be monitored and provided with medical and/or mental health treatment when needed.

When use of the Restraint Chair is appropriate this checklist must be followed.

	Involved Employee(s):	
1	Call for assistance when necessary	
2	When possible, before using the Restraint Chair get approval from the Center Supervisor or Assistant Center Supervisor	
3	Before using the Restraint Chair, inform medical of the intent to use the Restraint Chair. However, if delay would add to the risk of injury, notify Medical Services as soon as the resident/scene is secured	
4	The resident will be placed in the Restraint Chair by staff, at least one of whom has been trained in Restraint Chair use	
5	Ensure aid is given to any injured person	
6	Have a person who is trained in Restraint Chair use – who is NOT the person who applied the restraints – check each restraint to ensure the restraints are sufficiently tight for safety, but do not impair blood circulation	
7	If not already done, obtain approval from the Center Supervisor or Assistant Center Supervisor	
8	If not already done, inform Medical Services	
9	If not already done, inform the Shift Supervisor	
	Employees Standing by:	
10	If there are employees who are not directly involved in subduing the resident, one of them should get the video camera & record the incident to include placement in the Restraint Chair	
	The Shift Supervisor must:	
11	Ensure the above checklist items have been completed	
12	Make a note of the time and assign a staff member who has been trained in Restraint Chair use to begin monitoring the resident	
13	Ensure the staff person monitoring the resident understands and is following procedures	
14	Work with the staff person who is monitoring the resident in the Restraint Chair and other staff to ensure procedures are followed. In particular, make a timely decision on when to release the resident from the Restraint Chair	
15	 The Shift Supervisor must ensure an incident report and security log is completed on all uses of the Restraint Chair that includes the following information: Behavior leading to the use of the Restraint Chair Name of person authorizing use of the Restraint Chair Time the resident was placed in the Restraint Chair Names of staff involved in securing and managing the resident in the Restraint Chair Description of the resident's behavior and status at fifteen-minute intervals 	

Comment [RussC-1]: This entire checklist is NEW !

AD 18-05 Form 1

Arkansas Community Correction CHECKLIST FOR RESTRAINT CHAIR USE		
	 Actions of medical and/or mental health providers Relief breaks and other significant incidents Time of release from the Restraint Chair 	
	The staff person assigned to monitor the restrained resident must:	
16	If Medical Services states that the Restraint Chair places the resident at risk due to a medical condition, place the Restraint Chair in the medical area and ask medical staff to monitor and document the health condition of the resident. If this is not prudent, consider alternatives. If placed in the medical area, residential staff must continue to monitor	
.7	 If the Restraint Chair is not placed in the Medical Services area, to the extent possible, ensure it is in a place that is: Placed away from contact with other residents and in an area secured from unauthorized entry In clear view of a security post or under continuous video monitoring or a member of staff must be assigned to supervise the resident in the Restraint Chair 	
8	Observe the restrained resident at a minimum every 15 minutes to ensure the restraints are sufficiently tight for safety, and they are not impairing blood circulation. Make a record of each observation to include the time. This check must be done even when Medical Services staff is observing the resident	
19	With each 15-minute observation consider whether the resident should be released from the Restraint Chair. The Restraint Chair must NOT be used any longer than necessary to ensure that the resident has regained the ability to control the violent or destructive behavior	
02	 Every two hours: Obtain approval from the Center Supervisor to authorize continued use of the Restraint Chair Ensure Medical Services conducts a physical assessment every two hours; this assessment must include: vital signs mental status circulation status/conditions Provide for access to toilets facilities using appropriate alternative restraints. If the resident continues to be so violent that this cannot be safely done, a urinal or bedpan may be obtained from medical services Give the restrained resident the opportunity for unrestrained movement/exercise of hands and feet. This may be done in the Restraint Chair, one limb at a time, if the resident is violent or threatening. Other appropriate restraints such as handcuffs and leg irons may be used during this time Provide food and drink as the behavior of the resident allows Consider asking Center treatment staff and/or the Chaplain to meet with the restrained resident Staff involved in the incident:	
21	Staff involved in the incident: Staff involved in the incident must follow policy guidance for "Reporting and Investigating	
	Incidents, Hazards and Maltreatment	

Comment [RussC-1]: This entire checklist is NEW !