

Following are administrative directives and administrative memoranda issued by Arkansas Community Correction with an effective date from April 1, 2018 through June 30, 2018.

Policy & Procedure Development AD 18-11 (effective 4/30/2018)

Internal Affairs AD 18-09 (effective 4/30/2018)

Research & Program Evaluation AD 18-19 (effective 5/24/2018)

Acceptance of Gifts, Grants and Donations AD 18-07 (effective 4/30/2018)

Health Care Co-Pay Program AD 18-22 (effective 6/25/2018)

Fraud, Waste and Abuse of Resources AD 18-21 (effective 6/11/2018) This replaced the "Resource Control" AD

Medication Assisted Treatment of Opioid Substance Use AD 18-04 (effective 4/9/2018)

Resident Conduct AD 18-01 (effective 4/16/2018)

Code of Ethics & Rules of Conduct AD 18-23 (effective 5/30/2018)

Performance, Goals and Compensation System (PGCS) AD 18-18 (effective 5/18/2018) This replaced the Employee Performance Evaluation AD

Equal Employment Opportunity & Affirmative Action Program AD 18-13 (effective May 28, 2018)

Procurement and Receiving AD 18-08 (effective March 16, 2018)

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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: ~~16-24~~18-11 Policy and Procedure Development

TO: Arkansas Community Correction Employees

FROM: Sheila Sharp, Director

SUPERSEDES: AD ~~15-12~~16-24

APPROVED: Signature on File
30, 2018

EFFECTIVE: ~~December 31, 2016~~ April

- I. **POLICY.** ACC will produce and maintain ~~sufficient policy~~polices and ~~procedure~~procedures to guide ~~the activities of staff~~, agents, and offenders; and where appropriate, visitors. Agents are volunteers, interns, contractors, and vendors.
- II. **EXPLANATION.** Written policy and procedures are essential to the operations, management and review of Arkansas Community Correction. All ACC policy must meet state and federal laws, Executive Orders, Board of Corrections' guidance and legislative requirements.
- III. **POLICY FORMATS.** Policy formats used by ACC include:

A. Administrative Regulations.

Administrative Regulations are official statements of general applicability that guide the agency. Administrative Regulations are the agency's rules and must be promulgated according to the Arkansas Administrative Procedures Act.

Administrative Regulations must be approved by the Board of Corrections, the Governor's Office pursuant to Executive Order 15-02, and the Arkansas Legislative Council prior to implementation.

B. Administrative Directives.

Administrative Directives are official statements for internal agency management that explain Administrative Regulations, laws and policies and set specific procedures for their implementation. Administrative Directives must be approved by the Director.

C. Administrative Memoranda.

Administrative Memoranda are official statements specifying procedures for applying an Administrative Regulation or Directive, a law or policy to a particular area of operation. An Administrative Memorandum may also be issued to establish day-to-day operational procedures not specifically covered by Administrative Regulations, law or policy. The Director, Chief Deputy Director, Deputy Director or Assistant Director responsible for operation of that area must approve or author the Administrative Memorandum.

D. Manuals.

Manuals are official statements that provide supplemental direction and procedures compatible with applicable law and policy.

E. Other Formats.

Other formats may be used where needed such as guides, handbooks, operating procedures and post orders.

IV. RULES – PERTAINING TO AGENCY DOCUMENTS

A “rule” means an agency statement of general applicability and future effect that implements, interprets, or prescribes law or policy, or describes the organization, procedure, or practice of an agency and includes, but is not limited to, the amendment or repeal of a prior rule.

"Rule" does not mean:

- ~~Statements concerning~~ a statement that concerns the internal management of an agency and that ~~does~~ not affect the private rights or procedures available to the public;
- ~~Declaratory rulings~~ a declaratory ruling issued pursuant to Arkansas law section 25-15-206; or
- Intra-agency memoranda.

A rule will expire after 24 years unless it is extended through the rule making process, pursuant to Arkansas law 25-15-402.

V. POLICY REVIEW, REVISION AND CREATION.

- A. Policy Review and Creation in General.** Policy creators and reviewers should consider how well the policy conforms to laws, Executive Orders, other ACC policy, ACA standards and efficient operation of the ACC. (2-CO-1A-05; 2-CO-1A-17; 4-ACRS-7B-08)

~~———— B. **Recommending and Processing Policy Revisions and New Policy.** Before preparing a recommendation to create or revise, employees may look on the agency intranet > Policy Review > Policy Review Committee website to see if a revision is already in progress so any recommendations can be considered in light of edits already proposed.~~

~~———— Either of the following procedures may be used by any employee:~~

~~———— 1. An employee may send recommended policy revisions through the supervision chain to the deputy director level. Supervisors in the chain are encouraged to comment on or clarify the recommendations. Deputy Directors forward approved recommendations to the Deputy Director of Communications and Public Affairs who will work with the Policy Section Manager to review, edit, coordinate and process as appropriate. (4 ACRS 7B-09)~~

~~———— 2. With Deputy Director approval, an employee may ask the Policy Section Manager to post a working copy of a policy on the agency intranet > Policy Review Committee page where the employee and appropriate others may collaborate on making proposed revisions.~~

~~———— The Policy Section Manager or another person designated by the Deputy Director of Communications and Public Affairs will be primarily responsible for managing the development and review of each policy on the Policy Review Committee website. Appropriate subject matter experts, supervisors and managers should be asked to review, edit and comment on the proposed policy revisions.~~

~~———— G. **B. Annual Policy Review.** The ACC Management Team must ensure Administrative Regulations, Administrative Directives and applicable manuals that pertain primarily to their areas of responsibility are reviewed annually. The “Annual Policy Review and Forms” page on the agency intranet list can be used to “view” the policies and manuals each Management Team member or their designee is responsible for reviewing: for the annual policy review.~~

This review must be documented using the form(s) available on the agency intranet. This review must be completed no later than June 1 for the proceeding 11-month period.

Deputy Directors, Assistant Directors, Area Managers and Center Supervisors must ensure written guidance they produce is reviewed annually, and this review is appropriately documented.

~~D.~~ C. Recommending and Processing Policy Revisions and New Policy. All Policies, Procedures and Manuals are posted to the Policy and Forms tab on the agency intranet. Management Team Members assigned to conduct the Annual Policy Review are responsible for submitting revisions to existing policies/rules/manuals or for development of any new policies/rules/manuals that may be deemed necessary. The agency intranet > Policy and Forms > Policy Review Committee website will include any revisions that may already be in progress so any recommendations for revisions can be considered in light of edits already proposed.

Any employee may submit proposed revisions through the supervision chain to the Deputy Director level. Appropriate subject matter experts, supervisors and managers may be asked to review, edit and comment on the proposed policy revisions prior to submission to the Policy Committee. Once revisions are made, the applicable Management Team Member must notify the Agency Policy Coordinator that the revised rule is ready for consideration by the Agency Policy Committee. (4-ACRS-7B-09)

The Policy Section Coordinator or another person designated by the Deputy Director of Communications and Public Affairs will be primarily responsible for coordinating the final review of each policy on the Policy Review Committee website.

D. Policy Review Committee. The ACC Director will appoint at least one member of each agency division to serve on a Policy Review Committee. The Policy Review Committee will meet as necessary to review changes to existing or new policies/rules. The Deputy Director of Communications and Public Affairs will serve as Chairperson of the Policy Review Committee. The Agency Policy Coordinator and/or Deputy Director of Communication and Public Affairs may make non-substantive edits to submissions to improve consistency, clarity, and accuracy.

The Agency Policy Coordinator will forward committee members an agenda containing link(s) to items to be reviewed at least 3 days in advance of the established meeting.

Committee members must read each proposed policy prior to the meeting. They should make any recommended edits using "track changes" and add their comments as appropriate.

At the meeting, the committee must decide to:

- accept the policy as submitted
- accept the policy with minor revisions or
- return to the Management Team Member to address concerns identified by the committee.

The Agency Policy Coordinator will route all items recommended for approval by the Policy Review Committee to the Chief Deputy Director and Director for final approval/signature.

E. During annual policy reviews, the Deputy Director of Communications and Public Affairs must ensure agency rules that will expire before the end of the next fiscal year due to the 24-year limit are reviewed and renewed through the Administrative Procedures Act process or the Director approves of allowing the rule to expire.

F. Review After Regular and Fiscal Legislative Sessions. (Arkansas Code 25-15-216)

As soon as practical after each regular session and fiscal session of the General Assembly, the Deputy Director of Communications and Public Affairs must review any newly enacted laws to determine whether:

- Any existing rule should be repealed or amended; or
- Any new rule should be adopted.

At the conclusion of each review, the Deputy Director must provide a written report of the review to the Director.

A copy of each report must be maintained as a public record by the agency.

G. Policy Writing and Reviewing Guidance.

Policies must be written using clear language and approved formats. For new and revised ARs, ADs and manuals, the Deputy Director of Communications and Public Affairs must:

- ensure appropriate review
- consider recommendations
- process pursuant to policy
- obtain appropriate approvals
- ask the Policy Section Manager to accomplish the following:
 - when applicable, process pursuant to the Administrative Procedures Act
 - publish ARs and ADs on the ACC public website
 - publish ARs, ADs, manuals and related forms on the intranet, and
 - notify appropriate staff and others of the new or revised policy.

E.H. Approval and Filing Requirement Details.

1. Rules.

Rules, as described above, must be processed pursuant to the Administrative Procedures Act (Arkansas law beginning at section 25-15-201), Governor's Executive Order 15-02, and guidance provided by the Secretary of State, Bureau of Legislative Research and State Library.

2. Administrative Regulations. The Deputy Director of Communications and Public Affairs must ensure Administrative Regulations are reviewed, approved and filed as follows:

a. Initial review by the appropriate Deputy Director, Director and then the Board of Corrections

b. In compliance with the Administrative Procedures Act and Governor's Executive Order 15-02, to include:

- public notice
- initial filing pursuant to Secretary of State guidance
- obtaining the Governor's approval
- initial filing with the Bureau of Legislative Research for presentation and approval by the Legislative Council (Rules and Regulations Sub-committee)
- final rule filing with the Secretary of State, Bureau of Legislative Research and State Library.

3. Administrative Directives.

The Deputy Director of Communications and Public Affairs must ensure Administrative Directives are reviewed, approved and filed as follows:

- the ACC Director must approve all Administrative Directives
- the Board of Corrections must approve the employee Code of Ethics and other documents as directed by the Board
- review and concurrence by the appropriate managers
- filing pursuant to the agency Records Management Administrative Directive.

4. Manuals must be approved by the Chief Deputy Director, Deputy Director or Assistant Director responsible for operation of the area that the manual addresses.

5. Law Library. The Deputy Director of Communications and Public Affairs must ensure distribution of the approved Law Library Policy Table of Contents.

FI. Supervisor Responsibilities for Distribution and Training.

Supervisors must ensure new and revised policy is provided in a timely manner to appropriate staff, agents and offenders. When appropriate, policy must be provided prior to implementation. (4-ACRS-7B-07 and 08)

VI. QUARTERLY POLICY REPORT FOR LEGISLATIVE COUNCIL.

The Deputy Director of Communications and Public Affairs must submit a quarterly report on behalf of the Board of Corrections to the Arkansas Legislative Council. The report must contain all new and revised Administrative Regulations, Administrative Directives and Administrative Memoranda issued in the previous quarter. (Arkansas law section 12-27-106)



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ADMINISTRATIVE DIRECTIVE: ~~09-01~~ INTERNAL AFFAIRS ~~18-09~~ Internal Affairs

TO: Arkansas Community Correction Employees

FROM: Sheila Sharp, Director

SUPERSEDES: ~~None~~ Page 1 AD 09-01

APPROVED: ~~Signature on File~~

EFFECTIVE: January 12, 2009

I. POLICY. ~~It is DCCACC policy~~ is to ensure the agency adheres to all local, state and federal statutes, as well as state and agency rules and regulations. Violations of statute and/or state or agency rules and regulations will be investigated in an objective and thorough manner. When appropriate, investigations are reported to and/or conducted by proper state and/or federal authorities and efforts are coordinated with other appropriate law enforcement agencies.

RESPONSIBILITIES OF THE ~~II.~~ INTERNAL AFFAIRS SECTION (IAS) ~~GUIDANCE.~~

A. The ~~IAS~~ Internal Affairs Section operates under the oversight of the Director and direction of the ~~DCCACC~~ Internal Affairs Administrator who reports directly to the Director.

B. The Internal Affairs Section is responsible for the following activities:

- ~~1. conducting initial and subsequent detailed background checks on all applicants for employment with the agency and communicating the findings to the proper hiring official;~~
- ~~2. coordinating and overseeing the agency drug testing activities for future and current employees;~~

1. investigating alleged violations of local, state or federal laws, agency policies, coordinating any activities or findings from an investigation with other law enforcement agencies;

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2. investigating incidents such as the discharge of a weapon, acts of misconduct such as discrimination, harassment, computer misuse, prohibited sexual activity, violations of the "whistle-blower" law or other incidents or allegations as requested by the Director;
3. ~~managing the Agency Certified Law Enforcement Officer Program for compliance with the State Office of Law Enforcement Standards and Training.~~

C. The Internal Affairs Administrator must initiate an internal investigation when

1. it is unclear from initial reports whether a crime occurred
2. the incident notification involves use of force in which the offender is seriously injured or in which the force used appears excessive
3. a departmental issue co-exists with an investigation by the Arkansas State Police or other law enforcement agencies
4. the department may be liable for damages in an accident
5. there is a PREA-related issue, and
6. when instructed to do so by the Director shall, or in the Director's absence, the appropriate Deputy/Assistant Director.

D. The Director must be apprised of all IAA investigations and progress therein-being conducted by the IAA.

E. The activities and findings of the IAA investigations are confidential except that when disclosure is required by state or federal law or ordered by a court.



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ADMINISTRATIVE DIRECTIVE: 18-19 Research and Program Evaluation

TO: Arkansas Department of Community Correction Center Employees

~~ADMINISTRATIVE DIRECTIVE: 13-10 RESEARCH AND PROGRAM EVALUATION~~

~~TO: DEPARTMENT OF COMMUNITY CORRECTION CENTER EMPLOYEES~~

FROM: Sheila Sharp, Director

SUPERSEDES: AD 06-11 PAGE
113-10

APPROVED: Signature on File EFFECTIVE: September 12, 2013
24, 2018 May

- I. ~~I.~~ **APPLICABILITY.** This policy applies to all ~~Department of Arkansas~~ Community Correction (~~DCC~~ACC) employees and people outside the agency who request and conduct research.
- II. ~~II.~~ **POLICY.** The Arkansas Department of Community Correction supports programs of research, evaluation, statistics, audit, and planning, including studies and evaluation of the performance of various functions and activities of the department and studies addressing treatment of offenders and programs. Researchers must protect the privacy of individual employees, offenders, and other involved parties and their records. Researchers must comply with agency policy guidance and all legally acceptable practices concerning research activities. (4-ACRS-7D-12; 4-APPFS-3D-36, 3D-37)
- III. ~~III.~~ **DEFINITION OF RECIDIVISM.** A criminal act that results in the rearrest, reconviction, or return to incarceration of a person with or without a new sentence during a three-year period following the person's release from custody. (Reference Arkansas ~~law~~Code 5-4-101; ACA 4-APPFS-3D-38)

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IV. ~~IV.~~ **GUIDELINES.**

- A. ~~A.~~ ~~The DCCACC~~ Management will encourage, permit and use research and evaluation activities conducted by qualified individuals.
- B. ~~B.~~ All Employees will cooperate with approved research efforts and bring to the attention of management any research activity that may adversely affect offenders.
- C. ~~C.~~ **Research Plan Requirement.** A research plan is required unless one of the following exceptions applies:
1. ~~1.~~ Employees Conducting Research. Research proposals are not required when employees perform research activities within the normal scope of their job duties.
 2. ~~2.~~ Employees Conducting Program Evaluation. When employees collect data for ~~DCCACC~~ approved reports (such as the Residential Jurisdiction Population report) or approved business systems (such as eOMIS or AASIS), a research plan is not required.
- D. ~~D.~~ **Recidivism Studies and Reports.** Researchers (including employees) conducting recidivism studies and reporting pursuant to Arkansas law, ~~section~~ Code 5-4-101 or 16-1-101, must comply with reporting requirements specified in the law.

~~E.~~ ~~1.~~ ~~1.~~ ~~Research Plan Development / Implementation.~~

1. ~~1.~~ ~~1.~~ Researchers must work with the Chief Deputy Director and other designated staff to decide what questions should be addressed, the data to be gathered, and how the data will be presented. Researchers must submit proposed research plans for review and approval/disapproval of the ~~DCCACC~~ using Form ~~AD-13-10 Form-1, Research Approval Request to Conduct Research~~ ~~Form~~, and submit that form to the Chief Deputy Director. Research plans must meet or exceed the review criteria outlined in agency policy. Changes to an approved research plan must be pre-approved by the ~~DCCACC~~. This includes any research design modifications or changes in scope, data collected, or the tools used in the collection of data. Researchers must follow approved plans. The Chief Deputy Director will request review and approval by the appropriate Deputy Director or Assistant Director. The ~~DCCACC~~ will consider comments/approvals, negotiate appropriate revisions, and will be the final approval authority for the plan.
2. ~~2.~~ ~~2.~~ The Department of Community Correction, Chief Deputy Director, is responsible for establishing standards for evaluation, ~~any forms necessary for completion to submit be submitted~~ with a request to conduct research, and a ~~protocol for the review of the proposals~~. Proposals submitted for review must be evaluated on the following:
 - a. ~~a.~~ ~~a.~~ Soundness of research design and methodology, including sampling procedures
 - b. ~~b.~~ ~~b.~~ Duplication with other projects currently proposed or underway
 - c. ~~c.~~ ~~c.~~ Relevance of the proposal in relation to the goals and objectives of the department
 - d. ~~d.~~ ~~d.~~ Amount and type of assistance required from departmental personnel. Under no condition will ~~DCCACC~~ approve research requests that pose a significant burden on employees or significant costs that ~~DCC~~ would incur in assisting with the project. ~~costs to ACC.~~
 - e. ~~e.~~ ~~e.~~ Impact on offenders/clients and whether or not offenders will be paid to participate in the study and the amount of that compensation.
 - f. ~~f.~~ ~~f.~~ Security of information and data collection system, to include verification (accuracy), access to, and protection of data. Any costs associated with system access, modification or collection of data shall be the responsibility of the researcher.

- g. ~~g.~~ Written description of the method for dissemination of research findings.
- h. ~~h.~~ A restatement or inclusion by reference of the information in this policy regarding protection of offenders involved in research projects. An equivalent statement may be acceptable.
- i. ~~i.~~ A statement that results will be published in a manner that protects the privacy and confidentiality of offenders and staff. Researchers must include a signed copy of the Non-Disclosure agreement, AD-13-10-Form 3, signed by ~~for~~ all individuals who will have access to confidential data.
- j. ~~j.~~ For external researchers associated with an institution of higher education, any and all research tools and methodology must have been approved by that institution's Institutional Review Board (IRB) before any research is conducted and documentation of ~~IRB~~ approval must accompany the request to ~~DCC~~.
~~ACC~~

F. ~~F.~~ Protection of Offenders Involved in Research Projects

- 1. ~~1.~~ Offender participation in research will be voluntary. Prior to participation in any research activity, researchers must obtain a completed ~~inform and signed "Informed Consent to Participate in Research, 13-10-Form 2, signed by" form from~~ each offender involved in the project. This form is not required when research is limited to review of offender records or general observations are made of offender activities where no record is made of a specific offender's activity.
- 2. ~~The department~~
- 2. ~~ACC~~ will not conduct nor allow others to conduct medical, pharmacological, cosmetic or other tests or experiments involving offenders, ~~excluding. This does not preclude individual treatment of an offender (based on his/her need) by means of for a specific medical procedure that is not generally available. If an offender's physician determines there is a need to treat the offender with a new medical procedure, it will be through an agreement between the offender and the physician with a full explanation of the positive and negative aspects of the treatment. Offenders may participate in other research activities only when the research does not place the participant at undue risk. (4-ACRS-4C-20)~~

G. ~~C.~~—Review, Approval, and Dissemination of Research Results

1. ~~4.~~—Prior to publication or dissemination, researchers must submit a draft of internal/external research results to the Chief Deputy Director and obtain the Director's approval.
2. ~~2.~~—The Chief Deputy Director will ensure that all research project results are reviewed by the appropriate Deputy Directors and others and will forward reviewed results to the director with a recommendation to approve, disapprove, or approve with specific revisions.
3. ~~3.~~—Researchers are responsible for the dissemination of their findings to the public and shall provide copies of their reports upon request to any person or entity requesting a copy.
4. ~~4.~~—Researchers ~~shall~~must provide at least four (4) copies of any publication derived from the research to ~~the Department of Community Correction, ACC~~ for retention and internal distribution.
- ~~5. The Information Technology Administrator will work with staff and researchers to conduct a cost and feasibility assessment of the request and report results to the Chief Deputy Director. With approval, the Information Technology Administrator will develop and implement appropriate computerized data-gathering systems to facilitate data collection, analysis, controlling data-gathering costs.~~
5. ~~6.~~—Managers/Directors Use of Research Results. Managers and Deputy Directors must make appropriate use of research results and program evaluation data. Uses for such information include analyzing the department's present activities as a basis for decision making and policy development.

V. ~~V.~~—FORMS.

~~—DCC AD 13-10 —18-19 Form 1, Research Approval Request to Conduct Research~~
~~DCC AD 13-10 —18-19 Form 2, Informed Consent to Participate in Research~~
~~DCC AD 13-10 —18-19 Form 3, Non-Disclosure Agreement~~
~~AD 18-19 Form 4, ACC Internal Review Notice of Decision~~

**Arkansas Community Correction
RESEARCH APPROVAL REQUEST FORM**

I. Primary Investigator (person submitting this request)

Full Name

Organization

Phone

Work:

Home (OPTIONAL):

E-mail

Address

II. Title of Research Proposal:

III. Is this research required to satisfy an academic requirement (i.e., master thesis, doctoral dissertation)? ☐ Yes ☐ No

If YES, please provide the following information regarding your research advisor:

Name

Title

Educational Institution

Phone:

Work:

Home (OPTIONAL):

E-mail:

Address:

Are you an employee of the Arkansas Community Correction? ☐ Yes ☐ No
If yes, Agency/Department: Position:

IV. BACKGROUND INFORMATION

Please list your qualifications to conduct the proposed research (e.g., previous research projects, academic background), or other related information that documents your qualifications. Attach curriculum vitae if available.

V. ADDITIONAL INVESTIGATOR(S) AND BACKGROUND INFORMATION

Please identify any additional individuals who will handle the data/information provided to you pursuant to this request (*this includes any persons who will have direct or indirect, initial or review, access to said data/information*):

NAME/TITLE	PHONE	E-MAIL
1.		
2.		
3.		

For certain types of information, it may be necessary for the Department to conduct a criminal history background check for any individual(s) who will be handling that information. Such background checks include, but are not limited to, ACIC, NCIC, and FBI records. If you are requesting criminal history data, specifically, you must also complete and include signed copies of ACC Form 3 – 'Non-Disclosure and Release of Information' for the Primary Investigator and all additional personnel who will handle the information provided by ACC.

VI. RESEARCH PROPOSAL (you may attach additional sheets as necessary)

A. Research Overview:

Please identify the specific topic, issue or problem under study, why it is important and describe the overall research approach. Please discuss: 1) the purpose of the research, 2) the specific research questions and hypotheses, and 3) briefly review previous research and theory on the topic and how your study relates to previous work.

VI. RESEARCH PROPOSAL (cont'd)

B. Research Design:

First, please describe in detail how the study will be conducted. This review must include a discussion of: 1) research subjects (e.g. inmates, staff), 2) the specific research methods to be employed, such as surveys, interviews, observation, etc. Please pay particular attention to sample selection and instrumentation (provide a copy of any instruments to be used), and 3) a brief review of proposed methods of data analysis and reporting.

Second, please provide a breakdown, by source (researcher vs. Department) of the costs/resources required to successfully conduct the proposed project.

Third, please outline a projected research time frame as well as any other pertinent information necessary to adequately describe the project.

VI. RESEARCH PROPOSAL (cont'd)

C. **Expected Outcomes:**

Please discuss the expected outcomes of your study, and how and by whom this research will be used. Additionally, please explain the anticipated benefits of the research to Arkansas Community Correction.

Arkansas Community Correction
INFORMED CONSENT TO PARTICIPATE IN RESEARCH

Title of Project:			
Primary Investigator			
Full Name: Organization: Phone: Email: Mailing Address:			
Project Start Date:		Expiration Date (if applicable):	
Purpose:			
Procedures:			
Benefits:			
Right to Withdraw			
Statement of Confidentiality: Any information obtained in connection with this research will be used in a manner that protects your privacy and maintains the confidentiality of your records in accordance with all applicable state and federal laws and ACC rules and regulations.			
THIS SECTION TO BE COMPLETED BY THE RESEARCH PARTICIPANT			
Participant's Consent: I have been satisfactorily informed of the above described research project and have read and understood the description provided herein. I understand that my participation in this research project is voluntary and I am free to stop participating at any time, without any consequences, even after signing this form.			
Participant Name (Print)	Participant Signature	Offender Number	Date Signed

**Arkansas Community Correction
NON-DISCLOSURE AGREEMENT**

This agreement is entered into between the Arkansas Community Correction (ACC), hereinafter referred to as the Agency, and:

(Printed Name of Researcher)

Herein after referred to as the Researcher, whereby ACC agrees to provide information or access to information for research, evaluation, or statistical activities to the researcher.

1. The Researcher will not use Agency information to the detriment of the Agency or the subjects of the research, or for any purpose other than those stated in the research plan, and will abide by the confidentiality, and security, and dissemination provisions of the Agency.
2. The Agency will provide access to offender records or other information as requested in the approved research request. The agency reserves the right to suspend immediately furnishing information under this agreement and to require the return of information already furnished when any rules, policy, procedure or law is violated or appears to be violated.
3. The Researcher will use secure destruction methods for any copies of source documents obtained when they are no longer needed for the purpose for which they were provided.
4. The Researcher will allow only the persons identified in the Research Request access to confidential Agency information and will not disseminate, further disclose, nor allow the persons listed to further disseminate or disclose the information.
5. The Researcher will implement procedures that will effectively protect Agency and offender information from unauthorized access, alteration, or destruction.
6. The Researcher will abide by the laws and regulations of this State, the agency, and the federal government and any present or future rules, policies, or procedures adopted by the same, to the extent they are applicable to information provided under this agreement. This includes complying with accepted professional and scientific ethics and issues of legal consent and release of information. The Researcher agrees to be subject to any civil or criminal penalties applicable to the use of confidential information accessed under this agreement under Arkansas or federal law.
7. If the agreement is to provide offender record information on a continuing basis, the Agency reserves the right to immediately suspend furnishing information under this agreement should any rule, policy, procedure, regulation, or law be violated or appear to the Agency to be violated.
8. The Researcher agrees to indemnify and save harmless the State of Arkansas, the Agency, other signatory agencies and their employees from and against any and all causes of actions, demands, suits, and other proceedings of whatsoever nature; against all liability to others, including any liabilities or damages by reason of or arising out of any files, arrest, or imprisonment or any cause of action whatsoever; and against any loss, cost, expense, and damage resulting there from, arising out of or involving any negligence on the part of Recipient in the exercise of enjoyment of this agreement.
9. The Agency or researcher may, upon written notice, terminate this agreement at any time.

AUTHORIZATION FOR RELEASE OF INFORMATION

- ☐ I authorize ACC to perform a criminal background check on me at the time of application and throughout the term of this agreement with ACC. Such criminal background checks include, but are not limited to ACIC, NCIC, and FBI records.
- ☐ I do not authorize ACC to perform a criminal background check on me.

Note: Refusal to authorize a criminal background check may result in the denial of access to certain protected classes of information. Similarly, granting authorization does not guarantee access to said information.

Researcher

ACC Authorized Representative

Name (Print)		Name (Print)	
Researcher Signature	Date Signed	Signature	Date Signed

Arkansas Community Correction
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Little Rock, Arkansas 72201-5731



ACC INTERNAL REVIEW NOTICE OF DECISION

This notice is to inform you of the results of the Arkansas Community Correction internal review of your proposed research project. If you have questions or comments, you may contact me via the email provided below. Please also see the following attached documents for additional information:

ACC Administrative Regulation 1.9 – Research and Program Evaluation
ACC Administrative Directive 13-10 – Research and Program Evaluation

ACC RESEARCH PROJECT NO:

ACC INTERNAL REVIEW TYPE: Expedited ☐ Full ☐

RESEARCH APPLICANT(S):

PROJECT TITLE:

PROJECT TIME FRAME:

APPLICATION DATE:

INTERNAL REVIEW DECISION: Approved ☐ Revision Required ☐ Denied ☐

INTERNAL REVIEW DECISION DATE:

REQUIRED ACTIONS (if applicable): None ☐ See Attachment ☐

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COMMENTS (if applicable): None ☐ See Attachment ☐

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FOR OFFICE USE ONLY	
Verified By:	Signature:
Research and Planning Administrator Arkansas Community Correction	
	Date:

Cell Number:	
Email:	



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: 18-07 Acceptance of Gifts, Grants and Donations

TO: Arkansas Department of Community Correction Employees

ADMINISTRATIVE DIRECTIVE: 09-17 ACCEPTANCE OF GIFTS, GRANTS AND DONATIONS

TO: DEPARTMENT OF COMMUNITY CORRECTION EMPLOYEES

FROM: G. DAVID GUNT HARPS Sheila Sharp, Director

SUPERSEDES: NONE PAGE 1 AD 09-17

APPROVED: Signature on File EFFECTIVE: November April 30, 2009 2018

I. **APPLICABILITY.** This policy applies to Department of Arkansas Community Correction (DCCACC) employees.

II. **POLICY.** The Department of Arkansas Community Correction (DCCACC) may accept tangible gifts, grants, expendable items (e.g. for example, stamped envelopes, or hygiene items) or other donations (excluding volunteer services) that enhance its ability to meet the agency mission. These donations may be accepted as authorized in this policy. Donations of volunteer services will be handled in accordance with the Administrative Directive on Volunteer Services.

III. GUIDELINES.

A. General-purpose items donated with no conditions or stipulations for use may be accepted on behalf of the DCCACC by the members of the Board of Corrections (BOC), the DCCACC Director (Director), Deputy and Assistant Directors, Center/Area Supervisors, and Administrators. General purpose donations will be used for purposes authorized by the Director.

- B.** Donations with conditions or restrictions may be accepted by the Director or a BOC member on behalf of the ~~DCC, ACC~~. They will be used only as stipulated by the donor. The donor must provide a complete written description of the item(s) donated, including the specific restrictions and/or conditions imposed concerning use. The Director will determine the appropriateness of the restrictions and forward acceptances of the restricted use item to the donor, with copies to the receiver and the ~~DDAS, Deputy~~ Director of Administrative Services. The receiver shall provide written confirmation of receipt to the Director, with a copy to the Deputy Director of Administrative Services (~~DDAS~~), providing a complete description of the item donated, and detailing its proposed use and location. The receiver is also responsible to maintain adequate records to demonstrate compliance with the conditions or restrictions imposed.
- C.** The ~~DDAS~~ Deputy Director of Administrative Service must ensure that an official receipt (signed by the Director) is provided to the donor for tax purposes with a copy to the receiver of the donated item(s); ensure the donation is documented appropriately (~~e.g. for example, added to~~ equipment inventory,) and a monthly statement of receipts of donations is provided to the Director for submission to the BOC.
- D.** The acceptance of donations shall not pose a conflict of interest and shall NOT be taken for personal use. The presentation of donations does not automatically require acceptance. Employees should refer to the Code of Ethics and Rules of Conduct for further guidance.



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ADMINISTRATIVE DIRECTIVE: ~~10-08~~18-22 Health Care Co-Pay Program

TO: ~~DEPARTMENT OF COMMUNITY CORRECTION (DCC) EMPLOYEES)~~

TO: Arkansas Community Correction (ACC) Employees

FROM: ~~DAVID EBERHARD, DIRECTOR~~ Page 1 Sheila Sharp, Director

SUPERSEDES: AD ~~02-07~~10-08

APPROVED: Signature on File
~~2010~~June 25, 2018

EFFECTIVE: ~~October~~ 29,

- I. **APPLICABILITY.** ~~Department of Arkansas~~ Arkansas Community Correction (~~DCC~~ACC) employees, residents confined in ~~DCC~~ACC residential centers, and contract health care providers.
- II. **POLICY.** It is ~~DCC~~ACC policy that ~~DCC~~ACC residents participate in economic sanctions programs for health care services to encourage responsible use of medical services.

III. DEFINITIONS.

- A. **Chronic Care.** Routine follow-up care for long-term medical conditions that may result in deterioration of one's general health condition, or possibly be life threatening if not monitored on a routine basis. Such conditions include, but are not limited to diabetes, cancer, heart disease, hypertension, and HIV.
- B. **Co-payment (co-pay).** The amount set by the Board of Corrections to be charged for resident-initiated services.
- C. **Emergency.** A condition or injury that may result in imminent risk of irreparable deterioration to body systems or death and requires immediate medical attention as determined by the health authority or responsible physician.
- D. **Follow-up.** Follow-up refers to any appointment initiated by health care staff subsequent to a previous examination or treatment.

E. Prosthesis/Orthotic. An artificial device to replace or augment a missing body part or to compensate for a defective body function, including, but not limited to the following:

1. artificial limbs
2. eyeglasses
3. dentures
4. hearing aids
5. orthopedic shoes or shoe inserts
6. crutches, braces, support bandages, girdles, etc.

F. Reasonable and Necessary Health Care. Medical, dental or mental health treatment that, if not provided, can be reasonably expected to result in irreparable harm to an individual as determined by the responsible health authority.

VI.IV. GUIDELINES.

A. Access to Services. Qualified health care personnel must act promptly on requests for health care services. Access to health care services must not be impeded or denied by a resident's inability to pay the co-pay fee.

B. Assessment of Fees. The ~~DCCACC~~ is authorized by the Board of Corrections to charge a fee for resident-initiated health care services as described below to encourage responsible use of medical services. Services must be provided or made available (in the case of a missed appointment) prior to assessment of a co-pay fee. Health care co-pay charges and exemptions are as follows:

1. Co-Pay Charges

- \$3.00 for each resident-initiated request for medical or dental care unless an exemption applies.
- \$3.00 each time a resident misses an appointment for, medical, dental or mental health care visits, including specialty referrals, unless the resident was not at fault
- Up to 100% of the REPLACEMENT cost for lost, stolen, damaged or destroyed prosthetic/orthotic devices excluding normal wear

Note: Medical staff should explain to the resident the estimated amount he/she is expected to pay for lost, stolen, damaged or destroyed prosthetic/orthotic devices before placing an order. For items such as eyeglasses, the resident may choose not to purchase the item. Charges for items such as a wheelchair must be assessed with an entry on the co-pay log.

2. Exemptions from Co-Pay Charges

- **INITIAL ASSESSMENTS** provided during the reception and classification process, classification, physical exams, intra-system transfer evaluations, pre-segregation screenings or periodic physical examinations.
- **EMERGENCY SERVICES** provided.
- **MENTAL HEALTH SERVICES**
- **INJURY** where the resident was NOT involved in horseplay, a fight or while committing a rule violation.
- **VISITS OR TESTS INITIATED BY A HEALTH CARE PROVIDER, INCLUDING THOSE BY MEDICAL, DENTAL AND MENTAL HEALTHY STAFF**
- **PERIODIC HEALTH EXAMS** such as annual or other similar routine periodic examination, or routine preventative care tests such as mammography, PSA, eye or dental exam, etc., not due to an acute condition.
- **ANY PROVIDER-INITIATED HIV**
- **HEALTH CARE VISITS SCHEDULED BY THE HEALTH CARE PROVIDER, AS OPPOSED TO INITIAL CARE REQUESTS SUBMITTED BY THE RESIDENT.** Such visits include but are not limited to written referrals, lab tests, x-rays, EKGs, dressing changes, suture removal or other procedures related to the initial problem.
- **DESIGNATED CHRONIC CARE CLINIC VISITS, OR FOLLOW-UP TREATMENT FOR CHRONIC CARE CONDITIONS.**
- **VISIT REQUESTED BY THE PROVIDER OR THE RESIDENT TO ORDER MEDICATION RENEWALS.**
- **INFIRMARY OR HOSPITAL CARE.**
- **ANY CARE RELATED TO PREGNANCY.**
- **THE COST OF A PROSTHESIS** while confined and there is enough time remaining before release to schedule evaluation, fabrication, fitting and delivery appointments.

FC. Charges and Deposits. Medical co-pay fees will be collected and deposited in a ~~DCC~~ACC account according to procedures established by the Deputy Director for Administrative Services.

1. When a medical co-pay fee is posted to the resident's account, the balance will not be reduced below five dollars (\$5.00). Any amount not charged to the resident for medical services due to an insufficient balance will be established as a medical co-pay debt owed by the resident.
2. Medical co-payment debts or charges must be deducted before commissary charges are allowed.
3. "Christmas funds," "Gate Money" or other funds provided by the State as maintenance pay may not be taken to offset medical co-pay debts.

V. PROCEDURES.

A. Orientation.

1. During the medical segment of the orientation program, each new resident must be informed of the medical co-pay program and must sign ~~AD 40-0818-22~~, Form 1, Resident Co-Pay Program Notice and Acknowledgment” If the resident refuses to sign, the refusal must be noted on the form and signed by two ~~DCCACC~~ correctional or medical personnel (witnesses).
2. The signed copy of the Offender Co-Pay Program Notice and Acknowledgment form will be placed in the resident’s institutional record.

B. Collection of Fees.

1. Residents will access, medical, dental, or mental health care services by completing and submitting ~~AD 40-08 Form 3~~, “the form titled “ACC Health Service Request.”
2. Upon completion of a medical, dental, or mental health care visit requiring a co-pay fee the resident’s number, name, and co-pay charge, will be entered on ~~AD 40-0818-22~~ Form 2, “Health Care Services Co-Pay Log.” The resident and Health Services Unit staff member will sign, attesting that the services were provided. If the resident refuses to sign, the Health Services Unit representative will enter “Refused to Sign” in the resident’s signature block, and will sign after the entry. Another Health Services Unit representative (or if not available, a Residential Supervisor) will sign.
3. The Health Services Administrator (HSA) must ensure the Health Care Services Co-Pay Log is completed for each 24 hour period (from 00:00 to 23:59) and taken to the Center Business Manager the morning of the next working day where the appropriate charges will be made to the resident’s account. A copy must be maintained in the Health Services Unit but must not be filed in the Medical Record.
4. When a resident or an inmate is transferred from one ~~DCCACC~~ or Arkansas Department of Correction (ADC) facility to another or to Parole/Probation status, the medical debt information will remain on the eOMIS banking record so that it may be collected.

C. Refund of Fees.

1. A resident who believes he/she was charged for medical services inappropriately should submit a written refund request to the HSA. The HSA will investigate the incident and determine if a refund is due. If the resident is dissatisfied with the findings of the HSA, he/she may follow the grievance process.
2. When a refund is necessary, the HSA will complete a separate Health Care Services Co-Pay Log sheet, annotate “REFUND ONLY,” and enter the amount of the refund. The HSA will forward the original Log sheet to the Center Business Manager the morning of the next working day for adjustments to the resident’s account. A copy of the Log sheet will be maintained in the Health Services Unit for reference purposes.

VI. FORMS.

~~AD 40-0818-22~~ Form 1 Resident Co-Pay Program Notice and Acknowledgment
~~AD 40-0818-22~~ Form 2 Health Care Services Co-Pay Log
~~AD 40-08 Form 3~~ ACC Health Care Service Request Form

**Arkansas Community Correction
RESIDENT CO-PAY PROGRAM NOTICE AND ACKNOWLEDGMENT**

I understand that in accordance with the Arkansas Community Correction Administrative Directive on the Health Care Co-Pay Program, I will be charged applicable health care co-pay fees and the amount will be deducted from my resident banking account. The fee amount is currently \$3.00, but this may be adjusted by the Board of Corrections. (Please refer to the Administrative Directive on the Health Care Co-Pay Program for a more in-depth description of “applicable” charges.)

I understand that if I have insufficient funds to cover the charge(s), the amount of the co-pay fee will be considered as an outstanding debt. Any subsequent funds deposited to my resident account will be used to pay this debt before commissary charges are allowed when the balance of my account rises above \$5.00.

I had an opportunity during orientation to ask questions concerning the co-pay policy. I understand that I will not be denied reasonable and necessary health care services because of inability to pay.

Resident's Name (Print)	Offender No.	Resident's Signature	Date
Witness Signature	Date	Witness Signature	Date

Arkansas Community Correction HEALTH CARE SERVICES CO-PAY LOG

Facility

Health Services Administrator

Date _____

The residents listed below incurred co-pay charges for health care services on this date.

[illegible]

ACC HEALTH SERVICE REQUEST FORM**MSF-202 C****Revised 2018**

Name (Last, First, MI)

ADC#

Date of Birth

Barracks

Date of Request

Job Assignment:

Description of Problem:

I consent to be treated for the above problem. I understand that in accordance with the Agency's Policy, I will be charged for healthcare services through deductions of applicable co-payment charges from my resident account, and that if I have insufficient funds to cover the charge, the amount of the co-pay will be set up as an outstanding debt

Inmate Signature:

Date:

FOR MEDICAL USE ONLY

FACILITY NAME:

DATE RECEIVED BY MEDICAL DEPT.:

PRIORITY 1: See within 24 hours-emergent need ☐PRIORITY 3: See within 72 hours-routine request ☐PRIORITY 2: See within 48 hours-urgent need ☐PRIORITY 4: Face to face visit not needed, respond to request in writing ☐

Date Triage:

Triage by (Name)

Title:

If the EHR is unavailable, enter nursing sick call notes in this area:

Vital Signs: BP

Pulse

Temp

Resp.

Wt

Protocol Used:

Subjective:

Objective:

Assessment:

Plan:

Education:

Refer to: ☐ Physician ☐ Mid-Level ☐ Mental Health ☐ Dental ☐ Other (List)

Medical Staff Name:

Medical Staff Signature:

Title:

Date/Time:

Unit:

Inmate Name:

ADC#

Date of Birth:



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ADMINISTRATIVE DIRECTIVE: ~~05-12 RESOURCE CONTROL~~ 18-21 Fraud, Waste and Abuse of Resources

TO: ~~DEPARTMENT OF~~ Arkansas Community Correction Employees

FROM: ~~G. DAVID GUNT HARPS~~ Sheila Sharp, Director

SUPERSEDES: ~~None~~ PAGE 1 AD 05-12

APPROVED: _____ Signature on File EFFECTIVE: November 15, 2005

I. **POLICY.** It is ~~DCC~~ACC policy to establish and maintain systems and procedures that aid in the prevention of fraud and support the ACC culture and environment of honesty and ethical behavior, consistent with R1-19-4-505 of the Arkansas Financial Management Guide.

II. GUIDELINES.

A. The ~~DCC~~ACC Code of Ethics and Rules of Conduct (~~found in Administrative Directive 05-13~~) represent ~~DCC's~~ACC's commitment to the culture of ethical and efficient provision of services. The Code of Ethics describes the expected behavior of ~~DCC~~ACC employees providing services; and supports the culture of ethical and efficient service provided to the citizens of the State.

1. ~~HRS shall introduce~~ New employees are introduced to the Code by briefing them as to its content during orientation sessions of Ethics when completing the on-line New Hire Orientation course. Each employee receiving completing orientation shall must sign and date an initial Orientation Acknowledgement statement (AD 05-13, Form 1 Employee Training and Certification policy), signifying he/she received a copy.
2. Additionally, each supervisor shall explicitly discuss with each employee under his/her supervision the DCC requirement that they report fraudulent conduct and transactions that violate ethical provisions, read and provide reporting options. To verify that employees have received a copy of understand the Code, each employee must sign and date an annual acknowledgement statement (AD 05-13, Form 1) each year during performance review or promotion for classified employees, and on or around January 3 for unclassified employees.

~~3. The original signed affirmation~~ 2. Employees must have access to the Code of ~~the initial~~ Ethics and ~~subsequent statements shall~~ Rules of Conduct policy and must review and sign a statement acknowledging the policy during their annual performance review. The acknowledgment must be maintained in the ~~DCC employee personnel files in sent to the Human Resources section (HRS), with a copy to the employee for his/her~~ for inclusion in the employee's personnel file.

~~4. Further, the Central Training Section shall train the initial staff and incorporate a session regarding the Code and the requirement to report fraudulent conduct into all basic training programs.~~

~~B. Background Checks.~~ Prior to extending job offers to persons who have applied for positions that require the handling of cash or negotiable assets, a criminal history check shall be obtained from the Arkansas State Police. The DCC Internal Affairs Administrator shall fully investigate applicants by obtaining records from the Arkansas and National Crime Information Centers and the courts for all locations where the applicant has previously lived.

~~C. Investigations.~~ DCC

~~B. Investigations.~~ ACC is committed to a thorough investigation of alleged ethical violations, fraud, waste and abuse. The Office of Accounting's Internal Audit Section is responsible for coordinating all investigations and is authorized to request assistance from ~~DCC~~ ACC employees that have the experience required to assist or perform such investigations (i.e. ~~internal affairs administrator~~). Investigations will be conducted in a confidential manner. If an investigation indicates that a loss of state funds has occurred, the amount of loss ~~shall~~ must be reported to the Division of Legislative Audit in accordance with ~~R1-19-4-2004~~ of the Arkansas Financial Management Guide. In addition, any loss of state funds involving criminal activity ~~shall~~ must be reported to the Arkansas State Police for a criminal investigation.

1. ~~DCC~~ ACC employees ~~shall~~ must not be retaliated against for reporting in good faith, occurrences of ethical violations, fraud, waste and abuse of government resources, as stated in the Arkansas Whistleblower Act (~~ACA~~ Arkansas law sections 21-1-601-609).
2. Employees may report allegations of ethical violations or fraud to the Arkansas State Employees' Fraud, Waste, and Abuse Report Center or to the Office of Accounting – Internal Audit Section ~~by telephone.~~ As described on the poster for reporting fraud, waste and abuse.

~~D~~ C. Evaluation of Anti-Fraud Processes and Controls.

1. In accordance with R1-19-4-505, ~~DCC~~ ACC will reduce fraud opportunities by identifying fraud risks, mitigating fraud risks and implementing preventive and detective internal controls.
2. The identification of fraud risks will be conducted through an agency-wide fraud risk assessment, coordinated by the Deputy Director for Administrative Services, ~~every two years.~~ The initial agency-wide risk assessment ~~will~~ must be completed by

~~December 31, 2005~~ conducted in the first quarter of each even-numbered year and ~~every two years thereafter.~~ ~~DCC~~ the report prepared no later than March 31st. ACC management will implement appropriate internal controls and change business processes when feasible to reduce fraud risks.

3. The Office of Accounting – Internal Audit Section ~~shall~~ must review the internal controls and changes made to business processes to determine if the control activities identified in the risk assessment are properly designed to mitigate the risk of fraud, waste and abuse of resources. This ~~shall~~ must specifically include the internal control activities that are designed to prevent or detect fraud.

E. D. Performance of Risk Assessment (including Fraud). ~~R1-19-505~~ of The Arkansas Financial Management Guide contains additional discussion on the risk assessment process and the Risk Assessment and Control Activities Worksheet that ~~DCC~~ ACC Administrative Services will provide to document the risk assessment process. The Administrator for the Office of Accounting will coordinate the process and establish deadlines as needed to ascertain that the risk assessment is completed. The Internal Audit Section will be available to facilitate and consult with offices as they go through the process.

1. Identification of ~~DCC~~ ACC Activities. In support of the ~~DCC~~ ACC mission, each administrator or supervisor has his/her own formal or informal set of overall goals and objectives. Therefore, the first step of the risk assessment process is the identification of activities performed in each administration that supports the achievement of its overall goals and objectives. The listing of activities of each administration will be consolidated to a reasonable number of activities, which cover the major processes in that administration.
2. Listing Objectives for ~~a~~ Each Activity. Business objectives ensure that ~~DCC~~ ACC operates in an efficient and effective manner and accurately processes financial transactions to ensure proper financial reporting and compliance with state and federal laws and rules and regulations. These objectives will also assist in safeguarding state assets. Therefore, a list of all operational objectives of each activity identified in the first step will be made. Objectives may support more than one activity. Finally, the elimination of fraud, waste, and abuse of assets will be considered for each activity.
3. Identification of Risk. ~~DCC~~ ACC will identify all risks that would keep the agency from meeting its objectives. Risks can be both internal and external and may include fraud, poor process design, technology, knowledge and skills of current employees, natural events, etc.
4. Rating Risk. Each risk will be rated as to the significance or impact that the risk has on defeating ~~DCC~~ ACC objectives if the threat is realized. This part of the process is subjective. Therefore, ~~DCC~~ ACC will ~~rely on past experiences to properly rate each~~ review the objectives and identify any possible risk, and will use Large, Moderate, or Small as the levels of significance/impact. Next, each risk will be rated by the likelihood of its occurrence and labeled as High (probable), Medium (reasonably possible) or Low (remote).

5. List Control Activities Designed to Mitigate Risk. For each risk with a Large or Moderate impact and High (probable) or Medium likelihood of occurrence, DCCACC will list control activities present that will mitigate the risk. Control activities may include physical control over vulnerable assets, segregation of duties, access restrictions to transactions and records, top level management review of performance reports, controls to measure customer satisfaction, etc. If additional controls are needed to mitigate the risk to an acceptable level, DCCACC will indicate an action plan and a timeline for implementing the additional control activities. (See Attachment 4 for hypothetical example of how the Risk Assessment and Control Activities Worksheet will be completed.

~~— F~~

~~E. Reporting Suspected Fraud.~~ DCC employees shall not be retaliated against for reporting, in good faith, occurrences of ethical violations, fraud, waste or abuse of DCC resources. Investigations to substantiate reported allegations will be conducted in a confidential manner. Allegations of ethical violations or, fraud, waste or abuse may be reported to the Arkansas State Employee's Fraud, Waste, and Abuse Report Center (1-800-952-8248) or the Office of Accounting – Internal Audit Section (501-682-0370) by completing the DF&A Complaint Form ~~a complaint form (AD-05-12, Form 1 or as obtained at)~~ or as described on the Poster for Reporting Fraud, Waste and Abuse and mailing it directly to the Office of Accounting – Internal Audit Section, Department of Finance and Administration, 1515 W. 7th Street, Room 215, Little Rock, AR 72201.

~~G~~ An employee with supervisory fiduciary responsibility over all fiscal matters is required to report a loss of public funds to Arkansas Legislative Audit (Legislative Audit) within five business days of discovering the loss. The report can include apparent or unauthorized disbursements of public funds or apparent theft or misappropriation of public funds or property. An employee who purposely fails to report is guilty of a Class A misdemeanor.

~~F. Code of Ethics and Rules of Conduct (3-3068-69).~~ The DCCACC Code of Ethics and Rules of Conduct are found in Administrative Directive 05-13 Code of Ethics and Rules of Conduct. It shall must be reviewed, along with this policy, and discussed by each supervisor with each employee they supervise. A signed original shall be forwarded to HRS initially and discussed annually thereafter and included with performance reviews and promotions for classified positions on or around January 3, for unclassified positions. Employees are responsible for being familiar and complying with the Code, and for annually signing the Code acknowledgement statement.

~~H~~ G. Posters Concerning Fraud, Waste and Abuse of Resources. Supervisors should ensure that the Fraud, Waste, and Abuse poster (Attachment 1) or other document containing the same information is placed in conspicuous places, accessible to employees.

III. ATTACHMENTS/REFERENCES/FORMS.

Poster for Reporting Fraud, Waste and Abuse (this is on the DF&A website)

Complaint Form — Attachment 1 Poster for Reporting Fraud

~~— AD-05-12 Form 1 Fraud Complaint Form~~

Arkansas State Employees' Fraud, Waste & Abuse Report Center

The

Report Center and Internal

*Audit cannot address complaints or grievances involving wages, working conditions,
discrimination or other personnel issues. These issues should be reported to your agency's
Human Resource Manager.*

(this is on the DF&A website)



Arkansas Community Correction

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ADMINISTRATIVE DIRECTIVE: 17-20-18-01 RESIDENT CONDUCT

TO: Arkansas Community Correction Employees

FROM: Sheila Sharp, Director

SUPERSEDES: AD 14-1317-20

APPROVED: Signature on file **EFFECTIVE:** April 24, 2017

I. APPLICABILITY. This policy applies to Arkansas Community Correction (ACC) Residential Services Division employees and residents.

II. POLICY. ACC employs a system of graduated sanctions, aimed at modifying behavior, for resident conduct violations. Center rules and regulations must be enforced through the use of Modified Therapeutic Community (MTC) techniques and the disciplinary process described in this and other ACC policy. To maintain a safe and secure environment and teach respect for self and others, rules must be enforced in a manner which encourages positive and constructive resident behavior and is not punitive in nature but for the purpose of correcting unacceptable behavior. Behavior that is injurious, illegal, or threatening to the Center safety and/or good order will result in sanctions that are substantial and swift. Otherwise, sanctions should be progressive as the severity and/or frequency of resident behavior escalates and intended to correct unacceptable behavior. (4-ACRS-6C-03 and 6C-04)

III. DEFINITIONS.

A. Booking Slip. A form or slip of paper used by residents or staff to document an infraction of a major rule or to document behavior when a pull-up is considered to be an ineffective way of resolving a house rule violation or poor attitude.

B. Consequences. Something that logically or naturally follows an action or condition. Logical consequences are imposed for the purpose of correcting behavior and are not intended to punish, although they may be perceived as such by the recipient. Natural consequences are subsequent actions or conditions which occur without human action or intervention.

C. Disciplinary Detention. Restricting a resident to an area of a Center, such as the dorm or a locked cell, as sanction for a cardinal rule violation, as adjudged by the Disciplinary Hearing Committee (DHC).

- 42 **D. Hearing Assistant.** A Center staff member appointed to assist certain accused residents in
43 understanding the charges against them, the possible consequences and the procedures
44 involved in the disciplinary hearing process.
45
- 46 **E. Inquiry Status.** A temporary non-punitive duty status that may be assigned by the Senior
47 Residential Supervisor to an accused resident during an inquiry or adjudication of alleged
48 misconduct. The status requires a closer level of supervision appropriate for the specific
49 circumstances of an incident and may include escorting during movement, temporary job
50 reassignment, modification of the schedule of activities, or restriction to an area of a Center
51 such as the dorm or a locked cell.
52
- 53 **F. Learning Experience (LE).** A situation or circumstance or exercise/assignment which
54 allows a person to learn the purpose or value of an action or concept.
55
- 56 **G. Modified Therapeutic Community (MTC).** A therapeutic approach to behavior
57 modification through assigning roles to residents and holding them accountable for following
58 prescribed rules, values, and norms.
59
- 60 **H. Poor Attitude.** Displays defiant, sullen, uncooperative, or apathetic behavior.
61
- 62 **I. Privilege.** A special advantage or benefit granted to a select individual or group upon
63 achievement of a targeted level of competence on a job or in a program and demonstration of
64 the ability to assume greater responsibilities.
65
- 66 **J. Pull-Up.** An immediate verbal correction of an observed house rule violation or poor
67 attitude designed to bring the situation to the attention of the offender in a positive way.
68
- 69 **K. Cardinal Rule Violation Report and Notice to Accused Resident.** A form used to
70 document allegations of cardinal rule violations for processing by the DHC and inform the
71 accused resident of charges against him or her.
72
- 73 **L. Sanction.** A logical consequence imposed by the DHC when a resident pleads or is found
74 guilty of a Cardinal rule violation.
75

76 IV. RESIDENT CONDUCT. 77

- 78 **A. General.** Resident conduct rules will be made available to residents and staff by providing
79 access to such materials as a Resident Handbook and policy made available in the Center Law
80 Library. Centers operate as modified therapeutic communities causing residents to practice
81 pro-social roles, behaviors, and attitudes so they can live successful, law-abiding lives while at
82 the Center and upon return to society. MTC authority and decision making responsibility
83 rests with Center staff. Residents are assigned various areas of responsibility and
84 accountability in the functioning of the community. In fulfilling responsibilities, residents are
85 accountable to peers and staff for their performance, attitude, and behavior. All residents are
86 responsible for complying with community rules and meeting or exceeding community
87 norms. Residents are responsible for calling attention to behavior of peers which conflicts
88 with community rules and norms.
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B. Categories of Rules. The categories of rules are cardinal, major, and house rules.

1. Cardinal Rules. Cardinal rules are those which address threatened or actual harm to the physical and/or psychological safety of community members. They govern resident conduct and discipline at all Centers. Violations of these rules are the most serious. Alleged cardinal rule violations are handled by the DHC during a disciplinary process and may result in sanctions imposed. Cardinal rules are listed on Attachment 1, "Cardinal Rules" and sanctions are listed on Form 2, "Explanation of the Disciplinary Process."
2. Major and House Rules. Major and house rule violations are not handled by DHC. These violations are handled by the MTC through treatment techniques (consequences) in the form of learning experiences and peer pressure to positively influence behavior. (4-ACRS-6C-01)
 - a. Major Rules. "Major Rules" are rules which help in developing resident pro-social living skills. Major rule violations are less serious than cardinal but more serious than house rule violations. ~~Additions or changes to major rules may be made by the Deputy Director of Residential Services with input from Center Supervisors.~~ Revisions to major rules may be made following the process for policy revisions described in the Policy and Procedure Development administrative directive.
 - b. House Rules. "House Rules" are rules designed to facilitate harmony and cooperation among residents. House rule violations are less serious than cardinal and major rule violations. Additions to house rules for a particular center may be proposed by the Resident Management Team and approved by the Center Supervisor.

C. Consequences.

Learning experiences (LEs). LEs are assigned by the MTC and are not punitive in nature. They are instructive action(s) which address the behavior or conduct to be corrected. Even though treatment measures are not intended to punish, they may be perceived as punishment by the recipient. In addition to any possible sanctions imposed by the DHC, the MTC may also provide treatment of behavior or attitudes resulting from cardinal rule violations. Assigned LEs must not be intentionally degrading or humiliating. They must not be dangerous, inflammatory, or verbally or physically abusive. Examples of LEs are as follows:

- | | | |
|---------------------------|---------------------|--------------------------|
| a. Loss of privileges | e. Talk contract | i. Reduction in Status |
| b. Extra work | f. Glue contract | j. Others as appropriate |
| c. Seminar | g. Ban | |
| d. Verbal before speaking | h. Sergeant at arms | |

Note: Procedures for treatment of major and house rule violations are found in the Administrative Manual for the Modified Therapeutic Community.

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V. DISCIPLINARY HEARINGS FOR CARDINAL RULE VIOLATIONS.

A. **Procedure.** All parties should be treated impartially and fairly. The basic elements of the procedure in the Center disciplinary hearing are as follows:

1. Written notice of the claimed violation, an explanation of the disciplinary process, and the appeal process is provided to the accused resident at least 24 hours in advance of the hearing. Hearings may be held in less than 24 hours if the resident waives in writing (Form 1, Cardinal Rule Violation Report and Notice to Accused Resident) his/her right to 24 hours advance notice.
2. The right for the accused to be present at his/her hearing as provided for in this directive, unless removed for poor behavior, or waived by the resident.
3. An opportunity to identify witnesses (not necessarily to appear in person) and present evidence in his or her behalf except when it would be unduly hazardous to institutional safety or correctional goals. However, a resident may not confront and cross-examine witnesses.
4. Provision for the resident to ask questions regarding any aspect of the hearing that is unclear.
5. A decision made by an impartial hearing body.
6. A written statement, following the hearing, as to the evidence relied upon and the reason(s) for the decision.

B. **Disciplinary Hearing Committee (DHC).** The DHC is a group which adjudicates alleged cardinal rule violations. It meets to conduct hearings and impose sanctions when appropriate.

1. **Membership.** DHC members are the Assistant Center Supervisor (chairperson), Treatment Supervisor, and Senior Residential Supervisor. Center Supervisors may authorize, in writing, alternates for these positions.
2. **Committee Responsibilities.**
 - a. In hearings and when administering the disciplinary process, ensure there is no bias in favor of the accuser or accused; there is no presumption of guilt; there is a reliable method of determining whether an infraction has occurred; there is no partiality which may stem from prior knowledge, involvement, bias, or personal interest in a particular case; a ACC staff member does not serve on the DHC convened for a violation he or she witnessed; when an RMT determines that a history of lesser violations constitute a Cardinal Rule Violation, the RMT member who alleges the violation is excluded from the DHC; and a trained designee is appointed to serve in place of a DHC member who is involved in the case as a witness or in a capacity which might pose a conflict of interest.

- 186 b. Review and be knowledgeable of ACC policies and procedures as they relate to
187 residents of Centers.
188
189 c. Give careful and impartial consideration to the facts and circumstances presented
190 during hearings and render fair judgments of guilty or not guilty based solely on
191 information obtained during hearings including statements of the offender charged,
192 other witnesses, and evidence.
193
194 d. Review the Hearing Summary Report, Form 5, for completeness and accuracy and
195 sign, as appropriate.
196
197 c. Make a request to the Center Supervisor to be excused from a hearing if a member
198 believes there is a conflict of interest or inability to set aside prior knowledge or
199 involvement in an incident or other concerns that may prevent him or her from
200 rendering a fair judgment.
201
202 f. Ensure prior disciplinary records of residents are not considered during a disciplinary
203 hearing, except when determining sanctions.
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205 g. As appropriate, write booking slips on residents found guilty of cardinal rule
206 violations so they may also be put before the MTC for therapeutic treatment to
207 correct the unacceptable behavior.
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209 h. For the purpose of disciplinary action, a good faith report of sexual abuse based upon
210 a reasonable belief that the alleged conduct occurred must not constitute falsely
211 reporting an incident or lying, even if an investigation does not establish evidence
212 sufficient to substantiate the allegation. (PREA 115.278(f))
213
214 i. When considering sanctions when there was sexual contact between a resident and
215 staff, sanctions must NOT be imposed unless there was a finding that the staff
216 member did not consent to such contact. When considering sanctions, consider the
217 range of available sanctions, the determination of guilt, and any mitigating and
218 extenuating circumstances. Also consider whether a resident's mental disabilities or
219 mental illness contributed to his or her behavior when determining what type of
220 sanction, if any, should be imposed. Then choose sanctions that are commensurate
221 with the nature and circumstances of the abuse committed, the resident's disciplinary
222 history, and the sanctions imposed for comparable offenses by other residents with
223 similar histories. (PREA 115.278)
224
225 3. Chairperson Responsibilities.
226
227 a. Ensure the Administrative Review Officer (ARO) properly tape records hearings
228 noting date, times, persons present during phases of the hearing and announces tape
229 recorder meter numbers when appropriate.
230
231 b. Ensure all appropriate procedures are followed.
232
233 c. Review guilty pleas entered during the hearing to determine whether the resident
clearly understands the plea and the consequences of the plea.

- d. Afford the resident an opportunity to speak in his or her own behalf and to present any relevant documented evidence which the resident may wish to submit.
- e. Guide the activities of participants to ensure a fair and impartial hearing.
- f. Ensure no effort is made to unduly influence opinions or votes of other committee members when voting guilty or not guilty or administering discipline.
4. Support Functions. The ARO, who provides administrative support to the DHC, performs the following functions:
- a. Manage administrative activities associated with processing violations referred for DHC consideration. Ensure actions have been properly reviewed by appropriate supervisors, are complete, and assign a control number for use in associating documents generated for each specific case (i.e., all forms for a charged offender have the same control number for a particular incident).
- b. Coordinate with the DHC chairperson for scheduling charges to be considered by the DHC and properly announce hearing times to DHC members, the accused, and others as appropriate.
- c. Prepare meeting dockets and case packets, assign meeting locations and gather necessary equipment.
- d. Participate in the hearings and afterward record and properly inform all participants (including the accused resident) of decisions of the DHC.
- e. Ensure the Hearing Summary Report clearly indicates the evidence relied upon, and supporting reasons for the DHC decision, and that the report is signed by all DHC members. Names/identities of witnesses must not be disclosed to the accused resident.
5. DHC Scheduling. The DHC must meet as often as necessary, between the hours of 6:00 a.m. and 6:00 p.m., to discharge its duties as expeditiously as possible. It is recommended that the DHC meet at least one day each week. Form 4, The Disciplinary Hearing Committee Docket, completed by the ARO, should be used to schedule agenda items for committee hearings. The DHC should avoid convening on weekends and holidays. However, if security considerations mandate such meetings, or if the Center Supervisor deems it necessary, the DHC may convene on a weekend or holiday to perform its functions. In such cases, the DHC should restrict business to that which is necessary to alleviate the concerns expressed by the Center Supervisor.
- C. Evidence.** Physical evidence pertaining to alleged violations will be confiscated, labeled, and secured in designated areas in accordance with ACC administrative regulation on Searches for, Control and Disposition of Contraband and Evidence and Center standard operating procedures (SOPs). Evidence submitted by residents must not include witness statements other than the resident's own statement in his or her own behalf. Evidence will be properly stored or disposed of following the hearing and any appeals.
- D. DHC Witnesses.** Written witness statements for use by the DHC will be obtained only by ACC staff. Witnesses may be disqualified if statements or testimony are not material to the alleged violation, e.g. for example, character witnesses. The DHC chairperson may set reasonable limitations on the number of resident and staff witnesses. When such limitations are imposed, the ARO must document the reasons in Part I (remarks section) of the rule

violation report form. If information is required from witnesses who did not submit written statements at the time of the incident, the choice of how to obtain these statements (in writing, orally, or by telephone) is at the discretion of the ARO based on guidance from the DHC chairperson. However, the ARO may recommend and DHC members may choose to hear oral testimony from residents or staff. The DHC also may request oral testimony and call additional witnesses during proceedings in an effort to provide a fair and impartial hearing. When testimony is obtained from a witness during a DHC hearing, the accused resident and any assigned hearing assistant must not be allowed in the room during such testimony. If a witness for either side is not readily available to provide additional testimony, an extension for further inquiry may be granted by the DHC chairperson.

E. General Guidance.

1. Authority to Excuse DHC Members. The Center Supervisor has authority to excuse members of the DHC for cause or upon receipt of a request to designate a replacement member in order to ensure an impartial hearing.
2. Entering Pleas and Waiving Hearing Appearance. Bargaining for a guilty plea or dismissal of charges is prohibited. An accused resident may waive the right to appear at the DHC hearing. In waiving the right to appear, the resident has the option of pleading guilty or not-guilty. The ARO should ensure that if the resident does not or refuses to enter a plea or indicates that he is unsure of his plea, a plea of not guilty is entered. If a resident waives the right to appear, or enters a plea of guilty during a hearing, he or she loses the right to appeal the DHC determination concerning guilt but retains the right to appeal the sanctions imposed. If the guilty plea is entered during a hearing, it must be voice recorded. If a resident waives his or her right to appear at a hearing the appropriate portion of Form 3, "Hearing, Appearance Waiver, and Plea," must be completed, then signed by the resident, a staff witness, and when required pursuant to the form, a second witness.
3. Hearing Participation.
 - a. Appropriate persons involved in the disciplinary process, i.e., accused resident and any assigned assistant (unless hearing appearance was waived in writing or resident was removed due to poor behavior), DHC members, the ARO and witnesses, are responsible to attend and participate in hearings, presenting input with dignity and honesty. The accused resident and hearing assistant must be present only during appropriate portions of the hearing. The hearing assistant is authorized to be present only when the resident is present. They must not be present during witness interviews, reading of witness statements (although he or she will be advised of the general content of statements), or DHC deliberations.
 - b. Residents have no right to cross-examination of witnesses during a DHC hearing.
4. Incidents. Except for gathering witness statements, conducting official inquiries and necessary counseling, incidents pertinent to the hearing may not be discussed in advance of the hearing.
5. Removal from Hearings. A resident may be removed from a hearing for poor behavior. Such removal must be noted for the record and the hearing must continue.

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6. Duty Status. When appropriate, the Senior Residential Supervisor will place a resident accused of a cardinal rule violation on inquiry status or continue the resident's normal duty status depending upon the security needs of the center. During the absence of the Senior Residential Supervisor, the Shift Supervisor will make the determination of appropriate status and notify the Senior Residential Supervisor immediately upon return to duty. Final authority for any restrictive status is with the Center Supervisor who must be notified as soon as possible but no later than 24 hours (or next duty day in case of a weekend or holiday) from the time the status is assigned. Any restrictive status should be for no longer than necessary to inquire into alleged violations, maintain security or, when appropriate, conduct a DHC hearing. Specific approval of the Center Supervisor is required if a restrictive status will exceed 72 hours without a DHC hearing. The assigned status will remain in effect until changed by the Senior Residential Supervisor or Center Supervisor, or completion of the DHC hearing, at which time the imposed sanction, if any, will go into effect, unless the DHC has suspended imposition of the sanctions. In the event a resident is placed on inquiry status and is subsequently assessed disciplinary detention resulting from the rule infraction, the DHC may, in its discretion, credit the time spent on inquiry status to the sanctions imposed.

350 **F. Appeals of DHC Actions.**

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1. Notice of Right to Appeal. During a DHC hearing resulting in a finding of guilt, the resident must be informed of his or her right to appeal.
 2. Filing Appeals. The resident must submit an appeal on a Disciplinary Hearing Appeal Form, Form 8. In all steps of the appeals process, the resident must set forth in detail the grounds for the appeal. If the resident fails to receive a response within the appeal time frame, he or she may appeal to the next level.
 3. Center Supervisor's Review and Response. Any appeal by the resident must be submitted to the Center Supervisor within fifteen (15) calendar days from receipt of the written results of the hearing. The Center Supervisor must review the appeal and may affirm, modify, or reverse the DHC action. The Center Supervisor must respond to the resident within ten (10) days, excluding weekends and holidays, from receipt of the appeal.
 4. Deputy Director's Review and Response. If the resident is not satisfied with the Center Supervisor's response, he or she may make a written appeal to the Deputy Director of Residential Services within three (3) days, excluding weekends and holidays, from receipt of the Center Supervisor's decision. The Deputy Director of Residential Services must respond within thirty (30) days, excluding weekends and holidays. The decision of the Deputy Director Residential Services is final. In cases where a rule violation report is written by a Center Supervisor or the Center Supervisor is directly involved as a witness in the incident, the resident may appeal directly to the Deputy Director of Residential Services. In this case the appeal may be further appealed to the Chief Deputy Director, if necessary.
 5. Sanctions. Sanctions must NOT be increased during the appeals process.

380 **G. Extension of Hearing Time Lines.**

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- 382 1. Hearing Extension Authority. The DHC Chairperson may grant an extension of time for
- 383 a hearing only if additional information or inquiry is needed to arrive at a fair decision.
- 384 Extensions for other reasons require the approval of the Center Supervisor. An
- 385 extension may be granted for up to five (5) additional days, excluding weekends and
- 386 holidays. If additional time is needed, the extension must be renewed and subsequent
- 387 extensions must not exceed five (5) days, excluding weekends and holidays, per extension.
- 388 The ACC Director must approve any extension over thirty (30) days total. The Center
- 389 Supervisor may give an extension of more than thirty (30) days without the Director's
- 390 approval in situations where the resident is absent from the Center. In all cases except
- 391 resident absence, a copy of any approved hearing extension (Form 9) must be forwarded
- 392 to the resident charged. Requests for limited extensions of time may be prepared and
- 393 submitted by the ARO and granted by the Center Supervisor.
- 394
- 395 2. Grounds for Extensions.
- 396
- 397 a. The resident escaped and is not in custody. A Disciplinary Hearing Extension (Form
- 398 9) must be initiated after an escape indicating "The resident is not in custody." When
- 399 a copy of the arrest warrant is obtained, the DHC need not hold a hearing to
- 400 determine guilt, only to determine sanction(s). The arrest warrant is all that is
- 401 necessary to support a finding of guilt. A copy of the arrest warrant must be attached
- 402 to the Hearing Summary Report as evidence. The sanction hearing will be conducted
- 403 within ten (10) days of receipt of the arrest warrant unless an extension of this time is
- 404 obtained from the Deputy Director of Residential Services. The presence of the
- 405 escapee is not required when the DHC determines sanction(s). The DHC sanction
- 406 hearing is an administrative process and does not preclude prosecution in the courts
- 407 for violation of the law pertaining to escape and/or other appropriate charges.
- 408 b. The resident is out to court, the hospital or is otherwise away from the Center.
- 409 c. The resident is awaiting a decision of the prosecuting attorney regarding filing of a
- 410 criminal charge.
- 411 d. The case requires more extensive inquiry.
- 412 e. An emergency situation exists at the Center;
- 413 f. The volume of rule violations scheduled for hearing is excessive and additional time is
- 414 needed to ensure a fair determination in each case.
- 415 g. Availability of staff or other situation requiring extension.
- 416

417 **H. Resident Hearing Assistance.** Residents have no right to an assistant or retained counsel,

418 however, a staff representative (hearing assistant) will be appointed to assist an accused

419 resident when the need is identified.

420

- 421 1. Determining the Need for Resident Hearing Assistance. The following guidelines should
- 422 be used in determining when a hearing assistant may be assigned to aid a resident in
- 423 processing a rule violation and/or appeal:
- 424
- 425 a. An accused resident has an I.Q. of 75 or less or a reading level below fourth grade;
- 426 b. Issues involved in a disciplinary proceeding are so complex that the resident is not
- 427 likely to understand the nature of the charges;

- c. The accused resident is unable to understand and speak the English language;
 - d. The accused resident is assigned to a mental health program for treatment of mental disorder or mental retardation; and/or
 - e. The resident has special needs, ~~e.g. because of such things as~~ hearing or sight impairment.
2. Designation of Hearing Assistant. The Center Supervisor must designate and prepare a list of staff members approved to serve as hearing assistants. The ARO must notify assistants (through the supervisory chain) of case assignments. When the need for an assistant is determined by the DHC at the hearing, the chairperson must immediately recess or postpone the disciplinary hearing so the assistant may have an opportunity to meet with the accused resident prior to entering of a plea.
3. During Hearing. Hearing assistants have no voice in the decision making of the DHC. Additionally, when the assistant performs the required duties for a resident in a disciplinary hearing, the assistant must not remain in the hearing room when the resident is excused.
4. Refusal of Hearing Assistance. All residents have the right to refuse the services of an assistant. Residents who refuse assistance for any reason, however, will not be afforded the opportunity to have a different person assigned. Any refusal is a waiver of access to assistance, which should be noted on tape, if during the hearing, or on the Cardinal Rule Violation Report and Notice to Accused Resident, along with the resident's signature in the bottom portion of part II, if prior to the hearing. The hearing should proceed. When completed, the Hearing Summary Report will also indicate the refusal of assistance.
5. Extensions. In the event an assistant requires additional time to explain the necessary information to the resident for a fair determination of the charge, the chairperson may, on request from the hearing assistant, grant an extension of time for additional information or further inquiry.
6. Appeal Assistance. Once the DHC has made a decision and advised the resident of the appeal procedure, the assistant will be responsible for aiding the resident in the appeal process if the resident requests such assistance.

VI. DISCIPLINARY PROCEDURES. The Modified Therapeutic Community deals constructively with failures. When applying Cardinal Rules to any one violation, the resident's positive and negative behavioral history will be considered.

A. Cardinal Rule Violation. When a staff member has a reasonable belief that a Cardinal Rule was broken, the disciplinary procedures described below must be followed.

- 1. The staff person who develops a reasonable belief that a Cardinal Rule has been violated must perform the following:
 - a. If there is an incident over which control needs to be taken, ensure appropriate action is taken to provide for security and safety. When warranted, notify the Shift Supervisor so additional support can be provided and/or the emergency plan can be activated;

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- b. Make a list of persons who may be potential witnesses with regard to the incident;
 - c. Have persons with relevant knowledge of the facts related to the alleged violation complete an Incident or Hazard Report/Witness Statement form associated with the administrative directive about reporting incidents and hazards, ensuring they record their observations or facts, not their opinions, conclusions or interpretations; and
 - d. Complete Parts I and III of Form 1a, attaching all incident reports/witness statements. Forms must be forwarded to the Shift Supervisor or Senior Residential Supervisor as soon as possible but no later than the end of the shift, unless additional time is allowed by the shift supervisor or the shift supervisor cannot be contacted.
2. The shift supervisor must perform the following:
- a. Ensure appropriate action is or has been taken to provide for security and safety;
 - b. Make appropriate notifications to the supervisory chain;
 - c. Review all incident reports for clarity and completeness. Complete, or have the appropriate person complete, any required Rule Violation Report. Get clarification of witness statements if needed, without influencing the statement, and by requesting witnesses to record only observations and facts as opposed to opinions, conclusions or interpretations; and
 - d. Log each Incident Report/Witness Statement in the duty log. If there is a Rule Violation Report, forward the original along with all associated Incident Report/Witness Statements to the Senior Residential Supervisor as soon as possible prior to leaving for the day. If there is no Rule Violation Report, forward Incident Report/Witness Statements directly to the Senior Residential Supervisor.
3. The Senior Residential Supervisor must perform the following:
- a. Ensure appropriate action is or has been taken to provide for security and safety and emergency plans have been initiated when warranted;
 - b. Make appropriate notifications to the chain of supervision;
 - c. When appropriate, designate an inquiry officer to collect information regarding the incident;
 - d. Review all incident reports for clarity, completeness, and quality control of inquiry reports; and complete, or have the appropriate person complete, any required Rule Violation Report;
 - e. Forward the Rule Violation Report with all related statements to the ARO within 48 hours of ~~the determining that the incident occurred~~ (excluding the date of the report, weekends, and holidays). Enter the resident's name in the ARO's Cardinal Rule Violation Report Log, Form 6, if the ARO is unavailable;

- 526
- 527 f. Inform the ARO of the name of the inquiry officer, if designated; and
- 528
- 529 g. Monitor the activities of the Shift Supervisor and ARO to ensure prompt and proper
- 530 processing.
- 531
- 532 4. The Administrative Review Officer must perform the following:
- 533
- 534 a. Log the Rule Violation Report and assign a control number;
- 535
- 536 b. Review the Rule Violation Report to ensure completeness and accuracy;
- 537
- 538 c. Obtain additional information through appropriate inquiry, if necessary;
- 539
- 540 d. Schedule a time and date for the hearing before the DHC and complete the
- 541 Disciplinary Committee Hearing Docket, Form 4 within the 5-day period following
- 542 receipt of the Cardinal Rule Violation/disciplinary packet from the Senior Residential
- 543 Supervisor (excluding weekends and holidays). Ensure the resident has 24 hour
- 544 notice of the scheduled hearing unless he or she waives the requirement for 24 hour
- 545 notice. An extension must be obtained if a hearing cannot be held within 5 days
- 546 (excluding weekends and holidays) of receiving the DHC packet from the Senior
- 547 Residential Supervisor following the inquiry;
- 548
- 549 e. Complete Form 7, "Amendment of Cardinal Rule Violation Report," when the DHC
- 550 chairperson determines a more appropriate rule should be cited in the Cardinal Rule
- 551 Violation Report or to correct administrative errors. Recommendations to amend a
- 552 charge to a major or house rule violation, or to dismiss a charge, require Center
- 553 Supervisor approval. Feedback should be provided to the officer preferring the
- 554 charge whenever amendments are approved;
- 555
- 556 f. Provide assistance to the designated inquiry officer and ensure the resident charged
- 557 has received notice of the rule violation charge, Form 1a, but not Form 1b which
- 558 names witnesses. Also ensure the resident is provided with Form 2 and, when
- 559 appropriate, Form 3.
- 560
- 561 g. Coordinate with the DHC Chairperson and the accused resident to review and
- 562 process any plea of guilty entered prior to a hearing;
- 563
- 564 h. Obtain, or have an inquiry officer obtain, any additionally required witness
- 565 statements;
- 566
- 567 i. Advise DHC members, accused resident(s) and the hearing assistant, if assigned, of
- 568 the time and date of the hearing and control number of the Cardinal Rule Violation
- 569 Report so members may review reports in advance of the meeting;
- 570
- 571 j. Attend DHC hearings, or ensure the presence of a designee approved by the Center
- 572 Supervisor, and read the charges and possible sanctions when called upon by the
- 573 chairperson, tape record meetings and take appropriate notes; and
- 574

- 575 k. Complete the Hearing Summary Report, Form 5, following the hearing and process
576 (distribute and file) completed actions.
577

578 5. The Inquiry Officer or ARO must perform the following:
579

- 580 a. No later than 24 hours prior to the DHC hearing, use Form 1 Parts I and II, to advise
581 the accused resident(s) of the alleged violation(s); read to the resident from Form 2a
582 & b his/her rights, DHC procedures, the appeal process, and possible sanctions; and
583 ensure that he/she understands. Obtain the resident's signature on Forms 1a and 2a.
584 (4-ACRS-6C-02)
585 b. Ensure the accused resident understands the full impact of waiving his/her right to
586 appear at a hearing (see Section V.E.2). If the resident indicates a desire to do so,
587 escort him/her to the ARO for further processing.
588
589 c. Obtain a list of requested witnesses from the accused, Part II of the form, and advise
590 the resident that he or she is expected to be at the hearing unless he or she waives
591 appearance in writing, or is removed due to poor behavior.
592
593 d. Review the list of persons who have relevant knowledge of the facts related to the
594 alleged violation and obtain any additionally required witness statements;
595

596 6. The Hearing Assistant must perform the following:
597

- 598 a. Immediately before a disciplinary hearing, review with the accused resident his/her
599 rights, DHC procedures, and the appeal process (Form 2 a & b) and answer any
600 questions he/she may have.
601
602 b. Provide general assistance to the accused resident before and after the hearing but
603 may not testify or argue for the resident or give the resident advice;
604
605 c. Be present at hearings only during the portions requiring the resident's presence,
606 unless the resident waives (in writing) the right to appear or is removed due to poor
607 behavior;
608
609 d. Under certain circumstances, assist with the presentation of evidence on the resident's
610 behalf at the disciplinary hearing and any subsequent proceedings;
611
612 e. Aid the resident in the appeals process.
613

614 **B. Disciplinary Hearing.**
615

616 The DHC can choose to suspend the imposition of sanction(s) for up to 90 days during
617 which time the resident must commit no further Cardinal Rule violations. If the resident
618 commits new infractions during the suspension period, the suspended sanction will be put
619 into effect along with any sanction imposed for the new violation.
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VII. DISCIPLINARY RECORDS MANAGEMENT.

- A. Process.** Except during deliberations, all activities of the DHC hearing must be ~~tape~~ recorded. Written statements, whether taken prior to the hearing or obtained at the request of the committee, must be read into the tape and a copy attached to the disciplinary records. In cases where there are numerous witness statements and there is no substantial difference among the statements, one or more representative statement(s) may be voice recorded and the ARO will indicate the names of the other witnesses and the fact that their statements are cumulative. The record of the DHC hearing will indicate the hearing decision and supporting reasons and a copy must be provided to the resident. Clerical errors during any part of the process will not invalidate the action. Corrections to clerical errors will be made and noted as such, and, when appropriate, the resident will be allowed 24 hours extension prior to the hearing, unless waived, if the alteration results in a change to the alleged violation.
- B. Information File.** The ARO must be responsible for maintaining an instructional folder containing information on the proper procedures for holding disciplinary hearings, rules and regulations of the center, and other pertinent information helpful in implementing this and related policies and procedures. The folders will be available to persons who have a valid reason for such review.
- C. Records.** The ARO and others as appropriate must handle and store disciplinary records in accordance with the Offender Records policy with the exception of audio tapes. Audio tapes may be stored separately and may be degaussed and reused or destroyed after one year.

- VIII. TRAINING.** Center Supervisors must ensure DHC members, designees, AROs, inquiry officers, hearing assistants and other staff involved in implementing this policy are trained (initially and annual refresher) on the disciplinary process and their roles prior to assuming responsibilities. Initial training may include "practice hearings" to allow members to become familiar with their roles and responsibilities during hearings.

IX. ATTACHMENTS.

Attachment 1 Cardinal Rules

Attachment 2 Major Rules

Attachment 3 House Rules

Form 1 Cardinal Rule Violation Report and Notice to Accused Resident

Form 2 Explanation of the Disciplinary Process

Form 3 Hearing Appearance Waiver and Plea

Form 4 Disciplinary Hearing Committee Docket

Form 5 Hearing Summary Report

Form 6 ARO Cardinal Rule Violation Report Log

Form 7 Amendment of Cardinal Rule Violation Report

Form 8 Disciplinary Hearing Appeal Form

Form 9 Disciplinary Hearing Extension Form

Supplement Disciplinary Hearing Guide

**Arkansas Community Correction
CARDINAL RULES**

- CR 01 Residents must not escape and/or attempt escape or take a hostage.** Unauthorized departure from the center, failure to return from work assignments outside the Center compound and/or return from furlough. Holding an unwilling person captive, with or without threatening harm, is considered as taking a hostage.
- CR 02 Residents must not commit or attempt arson.** The willful, reckless or negligent act of attempting, causing, or starting a fire which potentially or actually damages or destroys life or property, or causes disruption to the safety and security of the center and/or inhabitants.
- CR 03 Residents must not commit an assault.** Engaging in conduct that creates substantial danger of death or serious injury to another person.
- CR 04 Residents must not commit battery.** Engaging in conduct that causes death or serious physical injury to another person.
- CR 05 Residents must not possess or use weapons.** The possession or concealment of a weapon (commercially manufactured or handmade) on one's person, within one's property or within one's assigned room or other area or the use of a weapon.
- CR 06 Residents must not commit sexual abuse.** Sexual abuse of a resident by another resident includes any of the following acts ~~sexual act~~ if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:
~~a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;~~
~~b. Contact between the mouth and the penis, vulva, or anus;~~
~~c. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and~~
~~d. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.~~
Sexual abuse is described further in the Prison Rape Elimination Act (PREA) policy.
- CR 07-A Residents must not engage in sexual harassment.** Sexual harassment includes repeated and unwelcome sexual advances, requests for sexual favors or comments, gestures, or actions of a derogatory or offensive sexual nature by one resident directed toward another person.
- CR 07-B Residents must not engage in sexual misconduct.** Sexual misconduct includes consensual sex between residents. Sexual misconduct includes kissing, visible displays of affection, love letters to another resident or staff, and other sexually-oriented activity that is generally considered inappropriate in a residential center.
- CR 08 Residents must not possess or use controlled substances or alcohol.** The possession, concealment, or use of any mind-altering substances not prescribed by a physician, including alcoholic beverages and unauthorized possession or use of prescription drugs.
- CR 09 Residents must not refuse to submit to substance abuse testing; residents must not attempt to foil or defeat a drug or alcohol screening test.** The refusal to submit to a test administered in accordance with agency guidance on substance abuse testing.
- CR 10 Residents must not violate laws.** Any act or acts defined as felonies or misdemeanors by the State of Arkansas and Federal government. NOTE: Violations of law are subject to criminal prosecution, regardless of disciplinary action taken by ACC.

Arkansas Community Correction
CARDINAL RULES (continued)

- CR 11 Residents must not engage in gang activity and/or representation.** The recognized representation whether real or not, of any gang affiliation through use of known gang signs, dress, mannerisms, etc.
- CR 12 Residents must not refuse to follow orders by staff.** The refusal by a resident to follow an order given by a staff member (see also, House Rule 3).
- CR 13 Residents must not tamper with safety or security devices.** The tampering with, adjusting, modifying or attempting to modify any mechanical device used for fire safety, security, or communications purposes (~~e.g. for example,~~ fire extinguishers, sprinkler systems, locks, alarms, smoke detectors).
- CR 14 Residents must not engage in repeated violations constituting non-compliance.** The refusal to participate in programs, complete learning experiences and comply with treatment instructions. Obtaining numerous minor violations of major or house rules in non-compliance with community values and norms of behavior.
- CR 15 Residents must not submit false or misleading official statements.** Knowingly giving or filing statements which allege facts which are not true or failing to state the full true facts, deliberately intending to mislead staff. (See also, Major Rule 2 regarding unofficial statements.)
- CR 16 Residents must not threaten, intimidate, bribe, or abuse a staff member, including contract or volunteer staff.** Threats, intimidation, or abuse of a staff member through actions, gestures, or language (see also, Cardinal Rule 17).
- CR 17 Residents must not threaten, intimidate, bribe, or abuse a non-staff member.** Threats, intimidation, or abuse of a non-staff member through actions, gestures, or language (see also, Cardinal Rule 16).
- CR 18 Residents must not evade detection or actively attempt to sabotage the taking of a count.** Hiding, creating a significant diversion, or disruption during the taking of a count (see also, House Rules 1c, 6, 8, and 9).
- CR 19 Residents must not leave his/her authorized area for the purpose of engaging in or promoting illicit activity.** Being found in an unauthorized area with evidence of an illicit activity such as alcohol distilling components (see also, House Rules 5, 6, and 8).
- CR 20 Residents must not steal.** Taking, controlling, receiving, concealing, or displacing others' property ~~valued at more than \$10.00.~~
- CR 21 Residents must not possess, conceal, or use contraband.** Possession, concealment, or use of any item not authorized for possession by the resident.
- CR 22 Engaging in injurious behavior.** Marking, rubbing, burning, scratching, or cutting one's self or the body of another person for the purpose of producing a tattoo, mark, friction burn, brand, or injury or for any other purpose (*see also, Cardinal Rule 03 regarding assault*).
- CR23 Damaging or destroying property.** The unauthorized use of equipment or supplies or purposefully damaging, destroying, or defacing state or other property, regardless of the value.
- CR 24 Residents must not break the law or any rule while on furlough.** An infraction of any law or rule while on furlough.
- CR 25 Inciting or encouraging another resident to violate a rule.** Contributing in any manner which causes another resident to violate a rule.
- CR 26 Residents must not possess or use currency or communication devices.** Residents must not possess or conceal currency. Residents must not possess or use any communication device or its components such as cell phones, cell phone chargers, pagers, or regular phones other than the "blue phones" authorized for collect calls.

**Arkansas Community Correction
MAJOR RULES**

- MR 01** ~~Residents must not steal. The taking, controlling, receiving, concealing or displacing of others' property valued at \$10.00 or less.~~ **No horse play.** Residents must not participate in any action that may be considered rowdy or could possibly escalate to a level of confrontation, cause injury, or cause unsafe conditions.
- MR 02** **False accusations or reporting.** Residents will not falsely accuse others. Residents must not give false alarms or reports including false reports of safety hazards (*see also, Cardinal Rule 15 regarding official statements*).
- MR 03** **Failure to follow safety requirements.** Residents must follow safety guidance and apply common sense to ensure the safety of themselves and others. This includes using appropriate safety equipment such as safety glasses, gloves, and guards on equipment.
- MR 04** **Residents must not engage in a fight.** The resident will not physically attack a person or, if defending him/herself, continue the fight after his/her assailant is subdued. (*See Cardinal Rules 03 and 04, fights that constitute assault or battery*.)
- MR 05** **Trafficking or trading.** Residents must not sell, loan with the intent of gaining interest in any manner, or trade as in a barter system.
- MR 06** **Failure to wear appropriate identification.** Residents are to wear their correct ID badge at all times when not in their assigned sleeping area.
- MR 07** **No gambling.** Residents must not engage in any activity for the purpose of betting or gambling for money, favors, privileges, commissary products, or other rewards.
- MR 08** **Failure to follow visitation rules and guidelines.** Residents will follow all rules for visitation at all times.
- MR 09** **Giving inappropriate feedback to staff.** Residents must not respond to staff direction in an inappropriate manner by using profanity, sarcasm, arrogance, and/or snide remarks, or making inappropriate gestures to staff (*see also, Cardinal Rule CR 16*).
- ~~**MR 10** **No horse play.** Residents must not participate in any action that may be considered rowdy or could possibly escalate to a level of confrontation, cause injury, or cause unsafe conditions.~~

**Arkansas Community Correction
HOUSE RULES**

HR 01 Be Professional. Residents must demonstrate professionalism as described below:

*Exhibit Courteous,
Patient, and
Respectful Attitudes.*

Residents must be patient, courteous, and respectful when dealing with others. Residents must be tactful when performing duties, control his or her temper, exercise patience and not become involved in arguments, even in the face of provocation.

*Use Appropriate Gestures
and Language.*

Residents must not use gestures or language that is profane, offensive, rude, sassy, insulting, or disrespectful (see Cardinal Rules CR 06 regarding official statements, CR 16 regarding threats/abuse directed toward staff, CR 17 regarding threats/abuse directed towards non-staff, and Major Rule 09 about responding to staff direction).

Act Appropriately.

Residents must not engage in horseplay, fighting, practical jokes or other conduct that endangers the safety of employees, offenders, or others. (See Cardinal Rules 3 regarding assault, 4 regarding fights, 25 regarding injurious behavior and Major Rule 12 distinguished from this rule by the degree of severity.)

HR 02 Be Punctual.

Residents must be on time in accordance with schedules and instructions.

HR 03 Obey Rules, Policies, Procedures and Orders.

Residents must not commit or omit acts which he or she knows, or should know, would constitute a violation of any written rules, regulations, procedures, directives, memoranda, and verbal orders.

HR 04 Use Privileges Appropriately.

Residents must not partake or benefit from a privilege unless the privilege has been earned and approved by the Resident Management Team or appropriate staff.

HR 05 Do Not Practice Slick and/or Devious Behavior.

Residents must not be involved in activities, conversations, or behaviors with the purpose of misleading or tricking another, or avoiding any rule, assignment or directive.

HR 06 Be in an Authorized or Assigned Area.

Residents must be in their scheduled location unless they have permission from a staff member to be in another location. When not scheduled to be in a particular activity, residents may move within permitted areas. Reasonable travel to areas adjacent to an assignment, such as to a restroom or to carry out an assigned task, does not require permission.

HR 07 No Harassing, Insulting, or Manipulating Others.

Residents must not deliberately harass, insult, or attempt to manipulate another resident, through conversation or any other interaction. Residents must refrain from using sarcasm, making snide remarks and/or acting arrogantly (see Major Rule 09 regarding responding to staff direction)

HR 08 Comply with ACC Therapeutic Programs.

Residents must fully participate in all assigned programs by being in their assigned place, at the scheduled time, with the appropriate material and with proper preparation for scheduled activity (see Cardinal Rule 18 regarding the taking of counts).

HR 09 Disruptive Behavior.

Residents are not to band together or congregate in a manner which is disruptive to the Center or Community's normal function or activity.

Arkansas Community Correction
CARDINAL RULE VIOLATION REPORT & NOTICE TO ACCUSED RESIDENT

PART 1

Instructions: Complete both sides of this form. Please submit completed forms promptly to the Shift Supervisor. The Inquiry Officer or ARO will provide a copy of **SIDE A** to the accused and SOD.

Accused Resident's Name (Print)	Resident's Number	Incident Date	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Location
Description of Alleged Incident		Continuation Sheets Attached:	pages, or <input type="checkbox"/> NONE	

Alleged Cardinal Rule(s) Violated (Violation Code Number & Description):

Remarks (ARO: Document any limitations on witnesses and the reason):

Certification: I certify that the above description of the incident is true and accurate to the best of my knowledge and belief.

Reporting Employee Name (Print)

Date of Report

Reporting Employee Signature

PART 2 NOTICE OF RULE VIOLATION

STAFF MEMBER READ TO ACCUSED:

This is notice that you are accused of the rule violation described above. You are ordered not to attempt to influence anyone to make untrue or misleading statements on your behalf, or to speak to anyone concerning this incident other than your counselor, hearing assistant (if assigned), inquiry officer, or others acting in an official capacity, concerning this incident. If you want the Disciplinary Hearing Committee to hear from any witnesses on your behalf, you must list those witnesses in the space below at this time. The appointed staff inquiry officer will obtain statements from all witnesses. You are not to discuss this incident with witnesses or attempt to obtain statements from them. Your hearing on this matter is scheduled for:

☐ AM ☐ PM on (Day/Date): at (location):

Note to Staff Member:

Also have the resident complete **Form 2, "Explanation of the Disciplinary Process."**

If the resident indicates a desire to waive his/her right to attend the hearing, complete **Form 3, "Hearing Appearance Waiver and Plea."**

☐ I agree to waive the 24 hour advance notice for a hearing and accept the date and time indicated.

Resident's Signature

List the names of your witnesses. Witnesses must be identified at the time of this notification.

Signature of Resident

Signature of Notifying Officer

Date/Time of Notice

Was a Hearing Assistant refused by resident?

☐ YES ☐ NO If yes, signature of Resident:

CONTROL NUMBER:

Arkansas Community Correction
CARDINAL RULE VIOLATION REPORT & NOTICE TO ACCUSED RESIDENT (continued)

PART 3

INSTRUCTIONS: List the names of persons involved or witnessing the incident, including staff, and identify whether they are accused or a witness.

Names (Print)	Resident Number (N/A if Staff)	Check Appropriate Box	
		<input type="checkbox"/> Accused	<input type="checkbox"/> Witness
		<input type="checkbox"/> Accused	<input type="checkbox"/> Witness
		<input type="checkbox"/> Accused	<input type="checkbox"/> Witness
		<input type="checkbox"/> Accused	<input type="checkbox"/> Witness
		<input type="checkbox"/> Accused	<input type="checkbox"/> Witness
		<input type="checkbox"/> Accused	<input type="checkbox"/> Witness
		<input type="checkbox"/> Accused	<input type="checkbox"/> Witness
		<input type="checkbox"/> Accused	<input type="checkbox"/> Witness
		<input type="checkbox"/> Accused	<input type="checkbox"/> Witness

Remarks by reporting employee: _____

PART 4 SHIFT SUPERVISOR'S SECTION

Disciplinary detention or inquiry status was imposed. ☐ YES ☐ NO

If so, approved by whom? _____

Reason for detention: _____

REVIEWED BY: _____

Shift Supervisor's Name (Print)	Shift Supervisor's Signature	Date	Time
---------------------------------	------------------------------	------	------

PART 5 SENIOR RESIDENTIAL SUPERVISOR'S SECTION

REVIEWED BY: _____

Senior Residential Supervisor's Name (Print)	Senior Residential Supervisor's Signature	Date	Time
--	---	------	------

PART 6 ARO SECTION

RECEIVED BY: _____

ARO's Name (Print)	Date	Time
--------------------	------	------

ARO: Is Hearing Assistant appointed? ☐ YES ☐ NO ☐ Refused If Yes, Name: _____

If appointed, reason for appointment: _____

CONTROL NUMBER: _____

Arkansas Community Correction
CARDINAL RULE VIOLATION REPORT & NOTICE TO ACCUSED RESIDENT (continued)

Accused Resident's Name

Resident Number

Incident Date

PART 7 CONTINUATION PAGE

CONTROL NUMBER: _____

Arkansas Community Correction
EXPLANATION OF THE DISCIPLINARY PROCESS

Resident's Rights

1. You have a right to appear before the Disciplinary Hearing Committee for alleged Cardinal Rule violations. Any disruptive behavior on your part will result in your removal from the hearing and the hearing will continue in your absence.
2. You have a right to name witnesses and present evidence on your behalf. You do not have a right to question witnesses or be present during the reading of witness statements or questioning of witnesses.
3. If found guilty you have a right to appeal the finding of guilt, the sanctions imposed, or both the finding of guilt and the sanctions imposed (see the exception to this in item #5).
4. If you waive (give up) your right to appear before the Disciplinary Hearing Committee a hearing will be held without you unless you have entered a plea of guilty.
5. If you enter a plea of guilty (on the "Hearing Appearance Waiver and Plea" form or at the hearing), you understand that your plea is an admission that you have done what is alleged in the stated charge(s), and that the Disciplinary Committee will decide the sanctions you will be given. The sanctions which can be imposed are listed on the back side of this form (**these will be read & explained to the resident**). If you enter a plea of guilty, you waive your right to appeal the finding of guilt, but retain your right to appeal the sanctions imposed.
6. The Disciplinary Hearing process is described in the Arkansas Community Correction (ACC) Administrative Directive titled "Resident Conduct" which you may review in the Center library.

Disciplinary Hearing Committee Procedures

1. You will be asked if you received this form explaining your rights, the disciplinary hearing procedures, and the appeal process.
2. The rules you allegedly violated will be read. You will be asked if you understand the charges.
3. You will be asked whether you plead guilty or not guilty for each alleged rule violation.
4. If you plead guilty to any charge, the committee will determine what sanctions will be given.
5. If you plead not guilty to any charge, you will be given an opportunity to make a statement and/or present evidence.
6. You will be asked to leave the room while witness statements are read to the committee members.
7. The voting members will make a determination of guilty or not guilty for each charge.
8. You will be recalled and informed of the decision.
9. If found guilty, you will be given an opportunity to present matters in extenuation (partial justification - a partial excuse) or mitigation (information that may be considered for fairness or mercy) prior to the committee determining sanctions. You will then again be excused. The voting members of the committee will determine sanctions and you will be recalled.
10. You will be informed of your sanctions and the appeals process will be explained. The ARO will present you with an appeals form if so desired. This will conclude the hearing.

Appeal Process

If found guilty of any charge, you have a right to appeal to the Center Supervisor. If you choose to exercise this right you will submit your appeal within 15 calendar days after receiving the "Hearing Summary Report." In all steps of the appeal, you must set forth in detail grounds for the appeal. If you do not receive a response within 10 days (excluding weekends and holidays) of receipt of your appeal by the Center Supervisor, or if you are not satisfied with the answer to your appeal by the Center Supervisor, you may appeal to the next level within 3 days of receiving the Center Supervisor's decision or the due date of that decision, whichever is sooner. The next level in the appeal process is the Deputy Director of Residential Services. The decision of the Deputy Director is final.

At no point in the appeals process must the sanction be increased. If you file an appeal in which you allege facts that are not true, knowing the statements are not true, or in which you fail to state true facts, deliberately intending to mislead the Center Supervisor or Deputy Director, you must be in violation of center rules and must be dealt with accordingly.

I, Resident (Print Name): _____ acknowledge that I have read or had read to me an explanation of the disciplinary process including my rights, the hearing procedures, sanctions which may be imposed, and the appeal process. I fully understand these rights, possible sanctions, and procedures.

Resident's Signature

Date

Staff Witness Signature

Date

Arkansas Community Correction
EXPLANATION OF THE DISCIPLINARY PROCESS (continued)

Allowable Range of Sanctions for Cardinal Rule Violations

The DHC can choose to suspend the imposition of sanction(s) for up to 90 days, during which time the resident must commit no further Cardinal Rule violations. If the resident commits new infractions during the suspension period, the suspended sanctions will be put into effect along with any sanction imposed for the new violation. The allowable range of sanctions which can be imposed by the DHC for resident violations of Cardinal Rules are as follows:

1. Submit a violation report recommending revocation of probation or suspended imposition of sentence (SIS), or recommending transfer to the Arkansas Department of Correction, as appropriate.
2. Disciplinary detention for up to 30 days.
3. Extra duty up to two hours per day for up to 60 days.
4. Restitution of actual cost of lost, damaged or destroyed property, not to exceed the depreciated value of the property. Resident will not be allowed to spend any monies in his/her commissary funds until full restitution is achieved.
5. Change of job assignment, and/or change of room or housing unit assignment.
6. For residents eligible for good time, loss of up to 365 days of earned good time. For violations of escape/absconding, loss of all good time is required by law.
7. Reduction in class level.
8. Loss of commissary, telephone, visitation, and/or privileges not to exceed 60 days.

Resident's Signature

Date

Staff Witness Signature

Date

Note: a Cardinal Rule violation may result in a decision by the Resident Management Team to deny early release.

Arkansas Community Correction
HEARING APPEARANCE WAIVER AND PLEA

Instructions: This form is completed before a hearing when a resident chooses to waive his/her right to appear before the Disciplinary Hearing Committee. A plea at the hearing is handled differently.

RESIDENT

I, _____ have been advised of my right to appear before the Disciplinary Hearing Committee (DHC) on (date): _____ and I hereby waive my right to appear.

Further, I enter the following plea(s) with the understanding that a plea of guilty is an admission that I have done what is alleged in the Rule Violation Report and Notice to Accused Resident form and the Disciplinary Hearing Committee will meet to decide sanctions I will be given.

A plea of "Not Guilty," indicates I did not do what is alleged in the stated charge(s). If I have any reservations about entering a plea of guilty, I have entered a plea of "not guilty."

Regarding Rule Violation Report and Notice to Accused Resident form, control number _____

Cardinal Rule # _____	Violation, I plead	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty
Cardinal Rule # _____	Violation, I plead	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty
Cardinal Rule # _____	Violation, I plead	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty
Cardinal Rule # _____	Violation, I plead	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty
Cardinal Rule # _____	Violation, I plead	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty

I understand that by waiving my right to appear I also give up my right to appeal the decision of the DHC concerning my guilt, but retain my right to appeal the sanction(s) imposed.

Resident's signature Resident number Date

Staff Witness Signature Date

STAFF

I advised resident _____ at _____
Resident's Printed Name Date Time

_____ of his/her right to appear before the

Resident's Location upon Notification, ~~e.g. such as~~ floor, cell number

Disciplinary Hearing Committee on _____ however, the resident declined to
Date

appear and ☐ entered the plea shown above; ☐ refused to enter a plea and was advised that a not-guilty plea would be entered on his/her behalf.

Staff Printed Name Date Staff Signature

Second Staff Witness Printed Name Date Second Staff Signature

(Obtain second witness if resident refuses to sign waiver)

Orig: DHC Hearing Packet Copy: Resident

**Arkansas Community Correction
HEARING SUMMARY REPORT**

This form is used by the ARO to document action taken by the Disciplinary Hearing Committee (DHC).

Instructions: Attach the Rule Violation Report before forwarding to the Records Section for input into eOMIS and filing. A copy with supporting documentation (e.g. for example, witness statements) must be maintained from the hearing date for any subsequent official access (e.g. for example, attorney/client request for review). Ensure that the control number for this action is placed at the bottom and that it agrees with supporting documents. Provide a copy of this form to the SOD.

Resident's Name (Print)	Offender No.	Hearing Date	Hearing Location
			<input type="checkbox"/> AM <input type="checkbox"/> PM
Tape Number	Beginning Meter Reading	Ending Meter Reading	Beginning Time <input type="checkbox"/> AM <input type="checkbox"/> PM
			Ending Time
Hearing Assistant was:			<input type="checkbox"/> Not Designated
Hearing Assistant's Name (Print) If Designated			<input type="checkbox"/> Refused by Resident

CARDINAL RULES THAT RESIDENT IS ACCUSED OF VIOLATING

Rule No.	Short Title of Cardinal Rule Violated	Resident Pleads	DHC Finding
		<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> No Plea	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty
Rule No.	Short Title of Cardinal Rule Violated	Resident Pleads	DHC Finding
		<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> No Plea	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty
Rule No.	Short Title of Cardinal Rule Violated	Resident Pleads	DHC Finding
		<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> No Plea	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty
Rule No.	Short Title of Cardinal Rule Violated	Resident Pleads	DHC Finding
		<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> No Plea	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty

Summary of Evidence relied upon to make a decision:

SANCTIONS:

DHC Chairperson Signature	SRS Signature	Treatment Supervisor Signature
Resident Signature (for Receipt of a Copy)	ARO Chairperson Signature	

CONTROL NUMBER:

Arkansas Community Correction

Facility Name:

Month:

Year:

Center:

[illegible]

**Arkansas Community Correction
AMENDMENT OF CARDINAL RULE VIOLATION REPORT**

TO:

Resident's Name (Print)

Resident's Number

The charge in your Rule Violation Report Dated: _____

Control Number: _____

The charge in your Rule Violation Report has been amended:

From: _____

To: _____

I hereby acknowledge that I have been notified of the amended charge.

Resident's Signature

Date

Time

☐ AM ☐ PM

Serving Employee's Name (Print)

Serving Employee's Signature

Remarks or Other Amendments: _____

**USE THIS SECTION TO OBTAIN CENTER SUPERVISOR APPROVAL
IF A CHARGE SHOULD BE CLASSIFIED AS A MAJOR OR HOUSE RULE**

Charge Recommended to be: ☐ MAJOR or ☐ House Rule DHC Chair Initials: _____

☐ Approved

☐ Disapproved

☐ See Comments Below

Comments: _____

Center Supervisor's Signature

CONTROL NUMBER: _____

DISTRIBUTION OF APPROVED AMENDMENT: Original to Official Record

Copies to: Accused Resident, Center Supervisor, ARO, SOD

**Arkansas Community Correction
DISCIPLINARY HEARING APPEAL FORM**

To: **Center Supervisor**

Date: _____

From: _____

Resident's Name (Print) _____

Resident's Number _____

Instructions

You must first file your appeal with the Center Supervisor within fifteen (15) calendar days of receipt of the **Hearing Summary Report** notifying you of a finding of guilt and sanctions. State the nature of your appeal, indicating the specific reason that you believe the finding of guilt and/or the sanctions in your case should be reversed or modified. It is not necessary to attach any documents associated with your hearing. You may use the back side of this form, and may attach no more than one 8 ½ x 11" page as an attachment.

Concerning the Hearing conducted on (date): _____ by the ACC Disciplinary Hearing Committee,
I am appealing the following:

- ☐ **Finding of Guilty or**
☐ **Sanction Imposed or**
☐ **Both Findings and Sanctions as they pertain to my alleged offense.**

In support of my Appeal, the following information is provided for your consideration *(you may also use back of this form)*:

I certify that the information provided in this Appeal is true and correct to the best of my knowledge and belief.

Resident's Signature _____

Date _____

Center Supervisor's Response to Appeal (Due within 10 days of receipt of the appeal)

Date Appeal Received: _____ ☐ **Affirm** ☐ **Reverse** ☐ **Modify as Indicated Below**

Remarks: _____

Reason For Action: _____

Center Supervisor's Signature _____

Date _____

Deputy Director's Response to Appeal (Due within 30 days of receipt of the appeal)

I acknowledge receipt of the response to my appeal from the Center Supervisor. I ☐ **DO** ☐ **DO NOT** wish to continue my appeal to the Deputy Director of Residential Services (DDRS). I understand that the decision of the Deputy Director is final. **NOTE: Further appeal to the DDRS must be within 3 days of receipt of the Center Supervisor's decision.**

Date of Center Supervisor's Response: _____

Date of Appeal to DDRS: _____

Resident's Signature _____

Date _____

Indicate any addition comments to support why you believe that your appeal should be upheld: _____

Deputy Director's Response to Appeal (Due within 30 days or receipt of the appeal)

Date of Receipt of Appeal: _____ ☐ **Affirm** ☐ **Reverse** ☐ **Modify as Indicated Below**

Remarks: _____

Reason Action Taken: _____

Deputy Director's Signature _____

Date _____

CONTROL NUMBER: _____

DISCIPLINARY HEARING APPEAL FORM (continued)

DATE: _____

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

CONTROL NUMBER: _____

**Arkansas Community Correction
DISCIPLINARY HEARING EXTENSION FORM**

TO: _____ DATE: _____

FROM: _____

RE: **RULE VIOLATION** Rule Violation **DATED:** _____ **CONTROL NUMBER:** _____

Request extension of the disciplinary hearing for resident (Print Name): _____

for a period of _____ additional days (excluding weekends & holidays), until (date): _____

for the reasons indicated below:

- ☐ The resident is not in custody.
- ☐ Resident is out to court/hospital, or is otherwise away from the residential center.
- ☐ Awaiting the decision of the prosecuting attorney regarding the filing of a felony charge.
- ☐ The alleged violation requires additional inquiry.
- ☐ An emergency situation exists at the residential center.
- ☐ The volume of rule violations requires rescheduling to ensure a fair hearing.
- ☐ Availability of staff or other situation requiring extension (explain).
- ☐ Escape, arrest warrant was received on: _____ at _____ ☐ AM ☐ PM

Remarks: _____

Signature of Requestor

Decision of Center Supervisor

Request for extension is **APPROVED** until (date): _____

OR is ☐ **DISAPPROVED**

Center Supervisor's Signature

Date

NOTE: An extension may be granted for up to five (5) working days. Should additional time be required the extension must be renewed and will not exceed five (5) additional days per extension. The Arkansas Community Correction Director must approve extensions when the total will exceed thirty (30) days. The Deputy Director of Residential Services (DDRS) must approve any extension of time to conduct a sanction hearing pertaining to escape.

Decision of Director or Deputy Director of Residential Services

Request for extension is **APPROVED** until (date): _____

OR is ☐ **DISAPPROVED**

Director's Signature

Date

Deputy Director of Residential Services Signature

Remarks: _____

CONTROL NUMBER: _____

DISTRIBUTION: Original to ARO

COPIES: Accused Resident, Center Supervisor, DHC Chairperson, and SOD

AD 17-2018-01 Form 9

**Arkansas Community Correction
DISCIPLINARY HEARING GUIDE**

Explanation of This Guide

This hearing guide should be used to conduct disciplinary hearings in order to assure resident rights are provided for as outlined in agency policy. Use of this guide will also enhance uniformity among centers. This guide is a publication of the Deputy Director of Residential Services and any changes must be made by his/her office. The DHC Chairperson and ARO use this guide when conducting rule violation hearings. Most sections are designed to be read aloud as a script. Some text is only for the information of the DHC Chairperson and ARO and is set off in brackets [] or parentheses ().

[NOTE: Prior to convening the Hearing, the Chairperson should verify with the ARO the presence of the accused resident, the resident's Hearing Assistant (if appointed), the Senior Residential Supervisor, and the Treatment Supervisor. Also, ensure that the DHC members have read the appropriate Rule Violation Reports, for the purpose of ensuring they have the ability to make an impartial judgment in each to be heard by the Committee. In those cases where an alternate member may be required, arrangements for an approved alternate should be made in advance.]

CHAIRPERSON: Will the ARO please turn on the tape recorder and open the hearing?

ARO: The meter reads _____ on tape number _____

The date is _____ and the time is _____ ☐ AM ☐ PM.

This hearing is on charges brought against

Resident _____ Resident No. _____

Case Control No. _____

My name is: _____ and I am serving as the

Administrative Review Officer and providing support for this hearing.

The voting members of the Disciplinary Hearing Committee are:

the Assistant Center Supervisor _____ Who serves as the Chairperson

the Senior Residential Supervisor _____ and

the Treatment Supervisor _____

CHAIRPERSON: [Read for the Record] Do any voting members believe that they cannot render an unbiased opinion in the case we are about to hear? If so, please so indicate at this time and we will obtain a replacement. Are there any voting members who request to be excused at this time? [If **no**, continue as indicated below]

CHAIRPERSON:

Resident _____ did you receive a form that explained the disciplinary process, including your rights, the hearing procedures, sanctions which may be imposed, and the appeals process? Do you understand the rights you are afforded at this disciplinary hearing? Do you understand the disciplinary hearing proceedings, and do you know what to expect at this hearing? Do you understand how the appeal process works in the event you are found guilty after a plea of not guilty? Do you understand the possible sanctions?

[Allow the resident to respond to each question. If the resident does not understand, attempt to clarify.]

[Indicate for the record that the Explanation of Disciplinary Process form, has been signed by the resident and is part of the DHC packet. If the resident waived his or her right to be present during the hearing, verify that the ARO has a signed hearing appearance waiver. If the resident entered a guilty plea on the hearing appearance waiver for all charges, proceed to the sanctions phase.]

CHAIRPERSON:

Resident _____ you are charged with the following
Cardinal Rule Violation(s):

1. **Cardinal Rule** _____

2. **Cardinal Rule** _____

3. **Cardinal Rule** _____

A description of the alleged incident is as follows:

[Read the "Alleged Cardinal Rule(s) Violated" and "Description of Alleged Incident" sections of the Rule Violation Report and Notice to Accused Resident (Form 1a).]

Resident _____ do you understand the charges and the violation that you are alleged to have committed?

[Note. If the Resident states that he does not understand, attempt to determine what is not understood and clarify.]

Resident _____ if at any time during this hearing you do not understand points addressed, you should say so and I will attempt to clarify.

Resident _____ if you have been charged with a violation of a law, you may also be taken to a court of law, tried, and if found guilty, be subject to a sentence imposed by the court, regardless of the findings at this hearing.

Resident _____ for each charge, you must enter a plea of **NOT GUILTY** or **GUILTY**.

How do you plead to the charge of: **Cardinal Rule** _____

How do you plead to the charge of: **Cardinal Rule** _____

How do you plead to the charge of: **Cardinal Rule** _____

*[Note: If the resident does not or refuses to enter a plea or indicates that he is unsure of his plea, a plea of not guilty will be entered on the record by the Chairperson. If the resident or Chairperson enters a plea of not guilty to any of the charges, continue with the process that follows. **If a guilty plea is accepted for ALL charges, skip ahead to the → (arrow)***

CHAIRPERSON: Resident _____ statements have been gathered from witnesses, both staff and/or other residents, subject to any limits allowed by administrative directive. These statements will be read after you make your statement and/or present evidence. The witness statements will be read while you are out of the room. If you wish to make a statement or present evidence on your behalf, please do so at this time.

[Note. Resident may respond here]

CHAIRPERSON: Resident _____ you will now leave the room while the witness statements are read, and deliberations are conducted by the committee.

[Ask the resident and hearing assistant (if assigned), to leave the room, then proceed.]

[Note: The accused resident should not be located where he or she can view any witness called.]

CHAIRPERSON: Will the ARO please read all witness statements contained in the DHC packet?

ARO: *[Read witness statements, bring in witnesses to state their observations.]*

CHAIRPERSON: All committee members are reminded of their obligation to render a fair and impartial judgment, based solely on the statements, facts, and evidence which was presented at this hearing. To ensure credibility of the hearing process, a finding of not guilty should be made unless there is reasonable evidence that the accused resident committed the alleged rule violation. Committee members are reminded that any part of the resident's prior disciplinary record must not be considered in determining whether the resident is guilty or not guilty.

CHAIRPERSON: At this time, will the ARO please turn off the recorder and leave it off during deliberations concerning whether the resident is guilty or not guilty.

[Witness statements can be read again if needed or requested]

[Note: be sure to take notes listing the primary facts or evidence which results in the committee's findings.]

[Note: The ARO will turn off the tape recorder and is excused during deliberations. Following appropriate discussion, a vote must be taken. A secret written ballot may be used at the discretion of the Chairperson. Use precut slips of paper for this process. During deliberations for findings of guilty or not guilty, the Chairperson or another member, should keep brief notes of the "primary evidence relied on to reach their decision." The description of the primary evidence relied on should not include identities of witnesses. The DHC is attempting to reach consensus on the verdict; however, consensus is not mandated; majority rules. When the Chairperson is satisfied that a fair discussion and hearing has been held, he or she will ask the ARO to recall the accused resident (and hearing advisor, if appointed).]

CHAIRPERSON: Will the ARO please turn on the tape recorder and open the hearing?

ARO: This is a continuation of the hearing for Resident _____
Resident Number: _____ and Case Control Number: _____
All persons present when the hearing adjourned are again present.

CHAIRPERSON: Resident _____ the Disciplinary Committee has considered and discussed the evidence presented, and with at least two-thirds of the voting members concurring, has determined the following findings:

For the charge of: Cardinal Rule CR- _____
[Read the title of the charge.]

The Committee finds you: _____

For the charge of: Cardinal Rule CR- _____
[Read the title of the charge.]

The Committee finds you: _____

For the charge of: Cardinal Rule CR- _____
[Read the title of the charge.]

The Committee finds you: _____

[Note. The chairperson will read the above for each charge ruled on.]

[Note. If the resident was found guilty on any of the charges, announce the following:]

CHAIRPERSON: The primary evidence relied on for this/these finding(s) is as follows:
[State what the evidence relied on was.]

→ [If a guilty plea was accepted for ALL charges, continue proceedings at this point]

CHAIRPERSON: Resident _____ you now have the opportunity to present matters in extenuation (this is a partial justification or a partial excuse for committing the violation), or to present matters of mitigation (this is information that may be considered fairness or mercy) prior to the DHC determining an appropriate sanctions.

Do you have such information to offer?

[Note. Resident may respond here.]

CHAIRPERSON: Resident _____ (and hearing assistant if appointed)
you may now leave the room while the Hearing Committee deliberates on the sanctions
to be imposed.

[Consider designating a place for the resident to wait.]

CHAIRPERSON: Will the ARO please turn off the recorder for the deliberations phase?

[The ARO may be excused during deliberations]

[NOTE: At this time, the committee can review the resident's prior disciplinary record to assist them in determining what the sanctions should be. Sanctions imposed by the DHC and options for suspending the impositions of sanctions are guided by the policy on Resident Conduct.]

[NOTE: The sanctions should be determined by a majority decision. However, if the Chairperson believes that the majority of the committee has determined sanctions which are too liberal, too severe, or not progressive in nature, the Chairperson may require the committee to reconsider its decision to ensure appropriate sanctions.]

[After deliberations, bring back the resident, hearing assistant (if appointed), and ARO.]

CHAIRPERSON: Will the ARO please turn on the tape recorder and open the hearing?

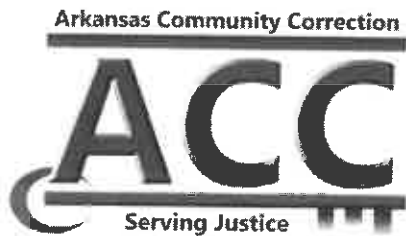
ARO: This is a continuation of the hearing for Resident _____
Resident Number: _____ and Case Control Number: _____
All persons present when the hearing adjourned are again present.

CHAIRPERSON: Resident _____ the Disciplinary Committee has
considered the information offered in extenuation or mitigation as well as your previous
disciplinary record, and has determined the following sanctions:
(Read the sanctions)

Resident _____ you were advised of your appeal rights in writing
prior to this hearing and given a copy of these rights. If you do not understand the
appeal process, you may ask the ARO for assistance in filing an appeal in accordance with
the policy on disciplinary appeals.

The ARO will now announce the final meter reading and turn off the recorder and that
will conclude this hearing.

ARO: The final tape meter reading for Case Control Number _____
is _____



Arkansas Community Correction

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ADMINISTRATIVE DIRECTIVE: ~~CODE OF ETHICS AND RULES OF CONDUCT~~

~~ADMINISTRATIVE DIRECTIVE: 17-34~~ 18-23 Code of Ethics and Rules of Conduct

TO: Arkansas Community Correction Employees

FROM: Sheila Sharp, Director

SUPERSEDES: AD ~~16-09~~ 17-34

APPROVED: Signature on File
July 17, 2017

EFFECTIVE:

- I. APPLICABILITY.** This policy applies to Arkansas Community Correction (ACC) employees. In a manner generally interpreted to be appropriate, this policy also applies to ACC agents. Agents include volunteers, interns, contractors and vendors. (4-APPFS-3C-02)
- II. POLICY.**

It is ACC policy to create and maintain a secure, professional, and productive work environment, where employees and agents conduct themselves in a manner that does not impair ACC operations and does not compromise their authority or erode public confidence. Employees and agents are expected to obey laws and departmental policies; uphold generally recognized standards of professional ethics and conduct as described in this directive; and demonstrate respect for the safety, rights, and dignity of others.
- III. GUIDANCE.** The Code of Ethics and Rules of Conduct, at Attachment 1, represents ACC's commitment to ethical and efficient provision of services. It describes the expected behavior of ACC employees and agents. The agency encourages people to focus on positive character traits and actions to serve as positive role models for offenders. Supervisors must provide a copy or access to a copy of this policy initially and again during performance reviews. Employees must review this policy annually prior to signing their performance evaluation.
- IV. ~~ATTACHMENTS~~ ATTACHMENT.**

Attachment 1 Code of Ethics and Rules of Conduct

**Arkansas Community Correction
CODE OF ETHICS AND RULES OF CONDUCT**

CODE OF ETHICS

As an ACC employee or agent I will adopt and uphold the agency's ethics as follows:

1. I will strive to enhance public safety by enforcing state laws and court mandates through community partnerships and evidence-based programs that hold offenders accountable while engaging them in opportunities to become law-abiding, productive citizens.
 2. I will make a dedicated effort to conduct my official and private life in a manner that fosters public confidence in me and ACC.
 3. I will adhere to agency policy.
 4. I will follow applicable directives of the Arkansas Board of Corrections and Arkansas Parole Board.
 5. I will develop and encourage relationships with colleagues to promote mutual respect within the profession and to enhance service quality.
 6. I will follow law and policy regarding confidentiality and release of public records.
 7. I will manage each case with appropriate concern for both the offender and public safety.
 8. I will uphold the civil and legal rights of all individuals.
 9. I will respect, promote and contribute to a work place that is safe, healthy and free of harassment in any form.
 10. I will report any illegal or unethical behavior that could affect either an offender or the agency.
 11. I will comply with law and policy pertaining to procurement, campaigning, lobbying, and political activities.
 12. I will refrain from making public statements critical of colleagues or the agency that create disharmony, are disruptive, undermine operations, or impair working relationships within the agency or with other entities.
 13. I will comply with law and agency policy pertaining to sexual behavior.
 14. I will NOT discriminate against any employee, prospective employee, or offender on the basis of race, color, religion, sex (including pregnancy), national origin, age (40 or older), disability or genetic information.
 15. I will NOT use my official position to secure personal privileges or advantages for myself or others.
 16. I will NOT solicit or accept any gift, favor or preferential treatment that could be interpreted as influencing my judgment or decisions in the performance of my duties.
 17. I will NOT enter into any formal or informal activity or agreement that presents a conflict of interest or is inconsistent with the conscientious performance of my duties.
- (4-APPPFS-3C-02)

RULES OF CONDUCT

- R-1. Punctuality.** An employee must be punctual in all of his or her official engagements.
- R-2. Reporting for Duty.** An employee must report for duty at the time and place required by assignment or orders and must be physically and mentally fit to perform his/her duties. A non-exempt employee may not work beyond his/her regular day without prior supervisory approval. He/she must be properly equipped and cognizant of information required for proper performance of duty so that he/she may immediately assume his/her duties.
- R-3. Area of Assignment.** An employee assigned a Community Correction Center function must not leave any post, assignment, duty, or area without permission from his/her supervisor.
- R-4. Absenteeism.** An employee must not falsely report illness or injury, misuse sick leave or otherwise deceive or attempt to deceive agency officials about his/her health.
- R-5. Work Performance.** In fulfilling job responsibilities, an employee must act competently, with reasonable diligence, and a commitment to professional service. An employee has a duty to fully understand his or her job responsibilities and is obligated to seek assistance from superiors in matters of technicality or principle when unclear. Dereliction of duty or misrepresenting job performance violates this standard and subjects an employee to disciplinary action.
- R-6. State Property.** State property must be used only for State business. Employees and agents must accept responsibility for the proper care, accountability, and maintenance of State property. Employees and agents must not misuse, abuse, or allow misuse or abuse of State property.
- R-7. Gathering and Processing Property and Evidence.** Property or evidence that has been discovered, gathered or received in connection with ACC responsibilities will be processed in accordance with established ACC procedures. An employee or agent must not convert to his or her own use, or manufacture, conceal, falsify, destroy, remove, tamper with, or withhold any property or evidence.
- R-8. Employee Telephone Numbers.** An employee must notify his or her supervisor within seventy-two (72) hours of a change in the employee's home/cell telephone number. Employees must not give other employees' non-work telephone numbers to non-employees.
- R-9. Changes in Employee's Personal Information and Attributes.** Employees must promptly notify their supervisor of changes in phone numbers, address, emergency contacts, and any attributes associated with the Arkansas Continuity of Operations (ACCOOP) program.
- R-10. Attentiveness.** An employee must remain alert at all times during business hours.
- a. **Prohibition of Sleeping.** An employee must remain awake while on duty. If unable to do so, and in danger of falling asleep, he or she must report to a supervisor, who must immediately release the employee from duty, and place him/her in appropriate leave status pending further supervisory review and appropriate action.
 - b. **Inattentiveness.** While on duty, an employee must not engage in any activities or personal business that causes him or her to neglect or be inattentive to his or her assigned tasks.

- R-11. Insubordination.** An employee must promptly obey any lawful order of and follow all reasonable instructions issued by a supervisor or superior.
- R-12. Truthfulness.** An employee or agent responding to various persons involved in agency fact-finding or other internal or external administrative processes must cooperate fully and truthfully. Reports submitted by an employee must be truthful, complete, timely, and in accordance with established ACC report writing procedures. No employee or agent must knowingly enter or cause to be entered inaccurate, false or improper information nor improperly alter or intentionally omit pertinent information on any document prepared in the performance of his/her job duties.
- R-13. Abuse of Process/Retaliation.** An employee or agent must not knowingly make false accusations of misconduct or initiate any action against other employees, agents or offenders in retaliation for their filing of a lawsuit, grievance, report (to include a report filed on alleged infractions), cooperation with an investigation, or for any other purpose.
- R-14. Garnishments and Unresolved Debt.** Employees are expected to honor their legal debts and avail themselves of services such as debt counseling to avoid garnishments. Failure to honor debts acknowledged by an ACC employee to be valid or reduced to judgment by a court is a rule of conduct violation. Multiple garnishments, for different debts, against an employee's wages will subject an employee to progressively more severe disciplinary action. ~~Four~~ Three garnishments ~~each for a different debt-debts~~ within a two-year period are grounds for an employee's termination: with the first garnishment resulting in a written warning. If a garnishment is the result of another person's failure to honor a debt (for example, employee co-signed for a relative), disciplinary action may be reduced accordingly. However, ACC will in no circumstance act as a collection agency or determine the validity or amount of contested debts.
- R-15. Possession and Use of Drugs.** Employees and agents must not possess or use any controlled substance in violation of state or federal law or ACC policy. Employees and agents taking prescription drugs must notify their immediate supervisor of any physical or pharmacological condition that causes physical or cognitive impairment that could affect their ability to perform the essential functions of their duties safely. Impairment is considered to be a condition that can affect judgment, reaction time, or motor skills, as it may affect the ability to perform certain duties safely and proficiently or to operate a motor vehicle safely. In instances where an employee or agent believes and/or medical personnel indicate that a medication may affect judgment and/or reaction time, authorization to perform certain essential duties and/or operate a motor vehicle will be suspended. Authorization will be reinstated upon the cessation of the effects of the medication. An employee may be required to take sick leave if the medication prevents the employee from doing his or her job.
- R-16. Use of Alcohol While on the Job.** Employees and agents must not perform duties under the influence of alcohol nor consume alcohol during work hours, on or off state-owned or state leased property, including lunch and break periods.
- R-17. Citizen Complaints and Information Requests.** An employee must courteously and promptly accept, and if needed record in writing, a citizen's request for information or a complaint/concern about the agency, any ACC employee, or an offender under ACC supervision. An employee may attempt to resolve a complaint, but must never attempt to dissuade any citizen from lodging a complaint and must immediately inform his or her supervisor of any complaint. All requests for information must be handled pursuant to ACC policy/procedure and state and federal law.

R-18. Conduct Toward All Persons. ACC subscribes to a policy of professionalism, equality and fairness in the provision of services and the discharge of authorized duties. An employee or agent must respect and protect the civil and legal rights of all persons. Employees and agents must treat offenders with dignity and must not verbally, physically or mentally abuse them or subject them to corporal punishment, humiliation, or punitive interference with their daily functions of living, such as eating or sleeping. The use of corporal punishment is contrary to humane standards of care and professional correctional practices and as such is absolutely prohibited. Corporal punishment is striking, pushing, shoving, kicking, improperly using chemicals, or engaging in any act to cause bodily pain and discomfort to an individual for the purpose of disciplining or correcting that individual's behavior. This provision in no way prohibits a staff member or agent from using that force necessary to protect him/herself from injury or to prevent injury to other employees, agents, or residents. This provision in no way prohibits an employee from preventing property damage or escape or achieving compliance with a reasonable and lawful order. (4-ACRS-6A-03)

R-19. Abusive/Intimidating Behavior and Harassment. Physical abuse of other employees, agents, offenders, or other persons is prohibited. Fighting, assault, battery, threats, abusive language, intimidation, sexual misconduct, sexual abuse, sexual harassment, non-sexual harassment, reckless or disorderly conduct or conduct that places employees, agents or other persons in fear of harm is prohibited. An employee or agent must not bargain with other employees or agents for sexual favors, nor make or infer job benefits or advantages contingent upon acceptance of such an offer. Employees and agents must not act in a way that creates or contributes to an intimidating, hostile, or offensive work environment. Employees and agents must refrain from behaviors or speech that a reasonable person would consider to be unwelcome or offensive. (4-ACRS-6A-05)

R-20. Firearms and Other Weapons. The unauthorized possession of firearms, explosives, or other weapons during work hours is prohibited. This applies to employees and agents.

R-21. Social Media. Even when not at work or on duty, ACC employees and agents remain representatives of ACC. As such, they must act responsibly when making public comments and when using social media and other networked communication platforms such as Facebook, Myspace, Twitter, Instagram, Snapchat, YouTube, blogs, and forums. Employees are free to express themselves on social media within the scope of policy guidance, but they should be aware that posts on social media may compromise their safety and the safety of others and posts may be used to discredit them in court.

Employees and agents will be held accountable for the content that appears on their social media or social networking sites whether or not the content was posted by the individual.

Examples of content that must not be posted on social media or on networked communication platforms include:

- Prohibited: Posting content that is inconsistent with the ACC Code of Ethics and Rules of Conduct and related policy, rules/regulations, and laws.
- Prohibited: Posting on social media confidential information or information protected by law or policy.
- Prohibited: Cyberbullying. Cyberbullying is using information and communication technologies to support deliberate and hostile behavior by an individual or group with the intention of harming another person. Cyberbullying is also hurtful or harassing text messages or emails; rumors sent by email or posted on social networking sites; and embarrassing pictures, videos, websites, or fake profiles.

- Prohibited: Posting information or pictures on social media that actually or potentially compromise staff/public safety, undermine operations, or cause disruption or disharmony in the workplace.
- Prohibited: Posting, transmitting, reproducing, or disseminating unauthorized information (texts, pictures, official training, work assignments, video, audio, etc.) to the Internet or any other public or private forum that would tend to discredit or reflect unfavorably upon its employees/agents, the agency or other criminal justice / law enforcement agencies or impairs working relationships within the agency or with other entities.
- Prohibited: Creating an unauthorized site that appears to be an official ACC site. Also prohibited, posting images of agency logos, emblems, badges, and patches that specifically identify ACC in such a manner that would lead a viewer to believe the site was an official ACC site or was sanctioned by the agency; unless authorized by the Director or designee.

R-22. Contraband. Employees and agents must not introduce or attempt to introduce any illegal or unauthorized item (for example, cell phones or other communication devices or their components, tobacco products, drugs, weapons, etc.) into a facility owned, operated or contracted by ACC.

R-23. Safety. Employees and agents must observe fire prevention and other safety rules. The employees and agents must also drive safely and avoid accumulating excessive points on their driving record, otherwise, they may be prohibited from using a State vehicle, receiving personal vehicle mileage reimbursement, or employment may be terminated if driving is an essential function of their job.

R-24. Travel Reimbursement. Employees who travel on agency business must ensure that their travel plans have advance approval from their supervisor and that travel reimbursement requests are reasonable, accurate, and made in compliance with ACC policy.

R-25. Conflicts of Interest.

a. Employees must comply with Arkansas law section 21-8-304, which describes the following prohibited activities:

a. 1 An employee must not use or attempt to use his or her official position to secure special privileges or exemptions for himself or herself or his or her spouse, child, parents, or other persons standing in the first degree of relationship, or for those with whom he or she has a substantial financial relationship that are not available to others except as may be otherwise provided by law.

b. 2 An employees must not accept employment or engage in any public or professional activity while serving as a public official which he or she might reasonably expect would require or induce him or her to disclose any information acquired by him or her by reason of his or her official position that is declared by law or regulation to be confidential.

c. 3 An employees must not disclose any such information gained by reason of his or her position, nor shall he or she otherwise use such information for his or her personal gain or benefit.

- b. A Parole/Probation Officer must not directly supervise an offender who is a family member or an offender with whom the officer has had a close personal relationship.
- c. If an employee becomes involved in or is aware of a prohibited activity, the employee must immediately communicate the facts to his/her immediate supervisor.

R-26. Relationships.

- a. Business Relationships. To avoid any conflict of interest, employees must adhere to Arkansas law section 19-11-705 in their relationships with businesses that provide services and supplies for state agencies. In addition, an employee who has or obtains any benefit from a state contract with a business in which the employee has a financial interest must make a disclosure to the Director of the Department of Finance and Administration (DFA) in accordance with Arkansas law section 19-11-706 and the DF&A Rules and Regulations for Implementing Governor's Executive Order 98-04.
- b. Employees and agents must not engage in sexual contact during assigned work hours or while on ACC premises or in ACC vehicles. Intimate contact by ACC employees while on duty is prohibited.
- c. Employees must not knowingly enter into a private business relationship or partnership, including financial transactions, with an offender or his/her family member while the offender is in ACC custody or under ACC supervision, unless the employee and offender are related. Agents are encouraged to abide by this.
- d. Employees must not enter into or continue associations or dealings with persons whom the employee knows or should know are reputed to be involved in criminal behavior, with the exception of associations or dealings necessary to perform official duties or when family relationships make such associations or dealings unavoidable. Agents are encouraged to abide by this.
- e. An employee must not knowingly establish or continue a social relationship with an offender who is not a family member as long as the offender is in ADC or ACC custody or under its supervision and for two years following the offender's release from custody or supervision unless the employee and offender are related.
- f. The ACC standard is zero tolerance for all forms of sexual abuse, sexual harassment and other harassment.

Any sexual contact, intercourse or deviant sexual activity between an offender under ACC supervision and an employee or agent — with or without the offender's consent — is expressly prohibited, unless the employee or agent is the spouse of the offender under ACC supervision. (Arkansas law sections 5-14-126 and 5-14-127)

Any sexual abuse of an offender under ACC supervision by an employee or agent is prohibited and is a violation of policy and Prison Rape Elimination Act (PREA) standards. Any attempt, threat, or request by an employee or agent to engage in sexual abuse activities is also prohibited.

- g. Business and intimate personal relationships between supervisors and subordinates are prohibited. Personal relationships include dating; cohabitation; touching; ogling, requiring some sexual performance for sexual gratification—even if it does not involve touching; and sexual relationships. Business relationships include loaning and borrowing money and business partnerships. ACC employees at different levels of the same chain of supervision must not engage in social relationships that are prejudicial to or compromising of good order and discipline.

R-27. Organizing Funds and Other Assets. Employees and agents who have access to ACC funds in any form must follow the prescribed procedures for recording, handling, and protecting money as detailed in DFA's Financial Management Guide and other official guidelines.

R-28. Agency Records and Communications. Employees and agents must not make or engage in any false record or communication, internal or external, such as false expense, attendance, production, financial or similar reports and statements; and false advertising, deceptive marketing practices, or other misleading representations. ACC books and records must reflect accurate and timely recordings of all business transactions.

When communicating publicly on matters that involve ACC business, employees and agents must not speak for ACC on any topic unless they are certain the views they express are those of ACC management and that it is ACC management's desire that such views be expressed publicly.

R-29. Partisan Political Activity. Employees and agents are encouraged to participate in election processes, but only on their own time. Annual, compensatory or holiday leave may be taken for this purpose. However, an employee must not endorse candidates in his or her official capacity as a State employee or engage in partisan political activity during the hours he/she is performing work for the state of Arkansas. Political banners, posters, literature, or any other political materials must not be displayed on State property (4-ACRS-7E-13).

R-30. Privacy and Confidentiality. An employee or agent must not disclose to any unauthorized person any information declared by law, policy, or regulation to be confidential nor use such information for his or her personal gain or benefit. When handling financial and personal information about those with whom ACC has dealings, the following principles must be observed:

- a. Collect, use and retain only the personal information necessary for ACC business. Whenever possible, obtain any relevant information directly from the person concerned. Use only reputable and reliable sources to supplement this information.
- b. Retain information only for as long as necessary or as required by law and policy. Protect the physical security of this information.
- c. Limit internal access to personal information to those with a legitimate business reason to have the information. Use personal information only for the legitimate business purpose for which it was obtained. Release of any information to persons not involved with the stated business purpose should be made by the Communications Office in response to a Freedom of Information Act request.

R-31. Discriminatory Behavior Prohibited. ACC does not condone, permit or tolerate discrimination of employees, applicants, agents, offenders, or members of the public. An employee or agent who knowingly permits, engages in or incites illegal discrimination, interferes with an investigation, or retaliates against anyone who has filed a complaint will be subject to disciplinary action up to and including termination of ACC employment. The agency's full non-discrimination policy statement is located in the "Equal Employment Opportunity and Affirmative Action Program" policy.

R-32. Professionalism. While on the job, an employee, or agent must demonstrate professionalism as follows:

- a. Courteous, Patient, and Respectful Attitudes. An employee or agent must be patient, courteous and respectful. An employee or agent must be tactful in the performance of his or her duties, control his or her temper, exercise patience and discretion, and not become involved in inappropriate arguments even in the face of provocation.
- b. Inappropriate Language and Gestures. An employee or agent must not use violent, profane, or insolent language or gestures while on duty and while on ACC property.
- c. Inappropriate Actions. An employee or agent must not engage in horseplay, fighting, practical jokes, or any other conduct that endangers the safety of any individual.

R-33. Private Conduct. An employee or agent must conduct him/herself at all times, both on and off the job, in a manner that reflects favorably on ACC. Conduct that is unbecoming includes that which damages the ACC image as a law enforcement/criminal justice agency or reflects discredit upon the character of the employee or agent as a member of ACC or impairs ACC operations.

R-34. Conformance to Laws and Rules. An employee or agent must not commit or omit acts that he or she knows, or should know, would constitute a violation of any written rules, regulations, procedures, directives, memoranda or ACC orders. ACC will not condone conduct that either violates or has the appearance of violating law and ethical provisions, such as receiving payments for illegal acts, indirect contributions, rebates or bribery.

An employee or agent arrested for a violation of law must immediately report that fact to a member of his/her supervisory chain. A conviction or admission of any violation that interferes with or impairs an employee's or agent's duties, public trust or the operations or efficiency of ACC must be considered some evidence constituting a violation of this policy. However, lack of a criminal complaint, charge, or disposition or an acquittal of a violation of law must not preclude internal administrative investigation and disciplinary action.

R-35. Responsibility to Report Ethics Violations, Fraud, Waste and Abuse. ACC employees and agents have a responsibility to report occurrences of ethical violations, fraud, waste or abuse of ACC resources that can be verified through investigation.



Arkansas Community Correction

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ADMINISTRATIVE DIRECTIVE: 13-02 ~~EMPLOYEE PERFORMANCE~~

EVALUATION 18-18 Performance, Goals and Compensation System (PGCS)

TO: ~~DEPARTMENT OF COMMUNITY CORRECTION (DCC)~~ Arkansas Community Correction (ACC) Employees

FROM: Sheila Sharp, Director

SUPERSEDES: AD 11-11

PAGE 113-02

APPROVED:

Signature on file

October 1, 2013

EFFECTIVE:

- I. **APPLICABILITY.** This policy applies to ~~Department of all~~ Arkansas Community Correction all (DCC(ACC)) employees.
- II. **POLICY.** It is ~~DCC~~ Arkansas Community Correction policy to ~~administer and evaluate~~ employee performance in accordance with state guidelines. The Performance, Goals, and Compensation System (PGCS) establishes statewide performance evaluation (PE) system that allows criteria and a rating scale to provide salary increases as determined by law and in accordance with funding as determined by the Chief Fiscal Officer of the State. All state agencies must adhere to expected performance rating distribution guidelines or provide sufficient justification for annual review of aggregate employee job performance and encourages communication between raters and the employees ratings that are lower or exceed the expected range, and ratings may need to be adjusted accordingly if they supervise. The employee PE system will operate within legal parameters and guidelines published by the Office fall outside of Personnel Management (OPM). Nothing contained in DCC policies, handbooks, applications, or other documents, or the granting of any interview or the placement in a probationary status or any other administrative act creates, constitutes, or implies a contract between an individual and DCC for either employment or the provision of benefits. The DCC does not guarantee continued employment for any specific period and employment can be terminated with or without cause, and with or without notice, at any time, at the option of either the DCC or the employee pursuant to the at-will employment doctrine.
- expected range. (4-ACRS-7B-06; 2-CO-1C-21; 4-APPFS-3D-17)

III. DEFINITIONS.

- ~~A. **Executive.** The DCC Director, Chief Deputy Director, Deputy Director Parole/Probation Services, Deputy Director Residential Services, and Deputy Director Administrative Services.~~
- ~~B. **Merit Pay.** Payment made for satisfactory or better job performance.~~
- ~~C. **Rater.** The supervisor responsible for evaluating employee job performance.~~
- ~~D. **Reviewing Official.** The rater's supervisor or a higher-level supervisor designated to review performance evaluation plans and ratings.~~
- ~~E. **Senior Management.** Assistant Director of Parole/Probation Services, Assistant Director Treatment Services (P/P & Residential), Center Supervisors, Information Systems Administrator, Comptroller, Attorney Specialist, DCC Planning and Management Services Administrator, DCC Project & Enterprise Program Management Administrator, Training Administrator, and Human Resources Administrator (HRA).~~

IV. GUIDELINES.

- ~~A. **Job Tasks, Duties, and Responsibilities.** The Department of Finance and Administration (DFA), OPM develops generic specifications for each job classification which include general examples of duties that might be performed. Supervisors (raters) develop functional job descriptions with tasks to communicate the specific DCC functional activities. The functional job description and tasks (primary tasks, duties, and responsibilities) and performance factors are meant to guide the employees during the rating period and are not intended to address every minute of the workday. Employees are responsible for contacting their supervisors for clarification when needed.~~
- ~~B. **Rating Employees.** A rater must have the ability to determine the quality and quantity of employee work; complete the PE training conducted or approved by the OPM within 6 months of assuming supervisory duties;~~
 - ~~A. **Rating Employees.** A rater must be familiar with the duties and responsibilities to be performed by the employees to be evaluated; and be in a position to periodically observe, review, and document employee job performance. Throughout the evaluation period, the rater should monitor performance and provide appropriate feedback to the employee. It is important that employees have the opportunity to provide input regarding the performance review process. The employee may provide performance input which will be considered by the rater along with employee achievements. PE ratings require prior approval and sign-off of the reviewing official before discussion with the employee. Afterwards, the rater must discuss the approved PE with the employee, secure the employee's signature, and forward all original documents to the Human Resource Section (HRS).~~

~~C. Performance Levels and Performance Factors.~~ Performance levels are used to indicate an employee's achievement on each performance factor. The four performance levels are Exceeds Standards, Above Average, Satisfactory, and Unsatisfactory. Performance levels and performance factors are described in detail on the performance evaluation form. During the rating period, supervisors should counsel employees, encourage, and assist them in increasing their performance level. Unsatisfactory performance on any factor or level may result in disciplinary action.

~~B. Merit Pay~~

~~Merit pay~~ _____ **B. Performance**
Compensation.

~~1. Performance compensation~~ is dependent upon meeting established criteria and the availability of funds.

~~1. Eligibility Requirements.~~

~~2. To be eligible for merit pay~~ performance compensation the employee:

~~a. must have completed at least 12 months of continuous employment, full or part-time, in a regular salaried classified or unclassified position with the State AND~~

~~a. b. must have met or exceeded the annual American Correctional Association (ACA) training requirements AND~~

~~b. employees in a position designated to be a certified law enforcement officer must maintain all required training AND~~

~~c. must NOT have received a written warning or greater disciplinary action during the 12-month rating period AND~~

~~d. supervisors must have a obtained a score of "satisfactory" or above in each not all deadlines pertaining to performance factor AND~~

~~e. Supervisors additionally must have evaluation processing as set by Human Resources. If notification is received from OPM of a performance evaluation not submitted all PE reviews to HRS only the employees he/she supervises at least 30 days prior deadlines, the supervisor may be subject to the employee's merit eligibility date or within an extended time approved pursuant to this policy disciplinary action as determined by the director.~~

23. Promotions/Voluntary Demotions/Transfers. Employees who transfer and

employees who have been promoted or demoted are eligible for merit payperformance compensation if they meet the eligibility criteria.

34. Extended Leave (Military Leave/Extended Military Leave/Catastrophic Leave/LWOP). Employees on any type of extended leave ~~who miss their eligibility date will be~~ eligible for a merit payment upon their returnperformance compensation.

~~1. Payment Time Table~~

- ~~a. Merit pay for eligible classified employees in the Career Service Pay Plan ("C" Grades) are paid in a lump sum at the end of the fiscal year.~~
- ~~b. Merit pay for eligible classified and unclassified employees in the Professional and Executive Pay Plan ("N" Grades and "U" Classes) receive merit pay in a lump sum payment during the last pay period of the fiscal year. The merit pay will not be considered as exceeding the line item maximum for the position.~~
- ~~c. Merit payments are considered as salary for the purpose of retirement eligibility.~~

(Revised 11/10/2013)

~~V~~ **C. Performance Evaluation (PE) Forms.** Raters must use the rating groups and measurements as determined by the ACC Human Resources Section.

- ~~1. Each rating group contains categories, which are referred to as "measurements."~~
- ~~2. Human Resources will inform supervisors which rating groups are used for the following employee categories:~~
- ~~a. Senior Management which includes the ACC Director, Chief Deputy Director, Deputy Directors, General Counsel, Assistant Directors, Area Managers, Center Supervisors, and others as approved by the Director.~~
- ~~b. Supervisory which includes employees who supervise staff who are NOT listed as senior management. Supervisory employees must approve leave/time and conduct performance evaluations or be in a Sergeant classification and supervise employees.~~
- ~~c. Non-Supervisory which includes all staff not included in senior management or supervisory positions.~~

IV. PROCEDURES.

- A. Employee.** An employee should ~~maintain records of~~ may provide his/her supervisor with input regarding job duties performed, recognition, training and other accomplishments; and provide desired input using Form 2, "Performance Evaluation Input" to the supervisor prior to the review. prior to the performance evaluation.

Employees are responsible for meeting training requirements during the training period described in the Employee Training policy. Employees may be allowed additional time to complete training equal to the amount of time off if they were off for Family Medical Leave, Catastrophic Leave, or Worker's Compensation

- B. Rater.** Raters (supervisors) manage the performance evaluation process as follows:

- ~~1. Functional Job Description and Tasks. Supervisors must ensure each subordinate has a current Functional Job Description and Tasks; use Form 1 for this purpose. Supervisors must review this annually and update it when there are significant changes. If a significant revision is made a revised copy must be promptly forwarded to the employee. When making revisions, supervisors should consider employee questions, concerns or recommendations regarding the job description; however, the supervisor has the final authority to define and assign job duties and tasks. Employee and supervisor signatures are affixed to indicate understanding.~~
- ~~2. PE Forms. The forms attached to this policy will be used for documenting DCC employee performance as follows: Form 4 for Executive staff; Form 5 for Senior Management; and Form 3 for all other DCC employees.~~
1. At the beginning of the rating period, supervisors are encouraged to work with employees to create a development plan with goals and objectives. The development plan can be entered into EASE (Empowering Arkansas State Employees application).
2. During the rating period supervisors may enter notes and upload supporting documentation in EASE.
3. Interim Reports.
 - ~~a. General.~~

~~The interim PE is an abbreviated review completed and processed in the same manner as an annual report but with a shorter review period. Supervisors must consider interim reports as supplementary information when writing an annual PE.~~
 - b. for Parole/Probation Services Staff. Six months after being hired into a Parole/Probation Services position, the supervisor must prepare and process a PE and

submit it to HRS no later than seven (7) months after employment in the position. ~~This does not apply to promotions from PPO I to PPO II to Agent. (4-APPFS-3D-18)~~

4. Background Checks. Supervisors must complete a background check on their employees each year in March. Only background checks that reveal new information need to be printed. These are to be reviewed by management to see if any action is required. A list of names will be provided by the HRS to managers. The manager is to return the list to the HRS indicating that an employee's background check was performed. This is to be forwarded to the Human Resources Administrator.
5. Raters must complete an evaluation for ALL employees, even those who have only been on the job for a few days. If an employee was in another state position earlier in the rating period, the rater should attempt to get input about the prior performance and use this in rating the employee. An evaluation must be done even though an employee is on leave without pay, FMLA, or military duty.
6. The rating scale is as follows:

Rating Description	Rating
Employee's performance is exceptional and serves as a model for other employees. The employee made a major positive impact on the agency.	5 Stars = Role Model
Employee's performance consistently surpasses established standards. The employee accomplished tasks and duties above requirements and made a positive impact on the agency.	4 Stars = Highly Effective
Employee's performance meets all requirements for the position in a competent and proficient manner. This represents the expected level of performance as established by the agency director or supervisor.	3 Stars = Solid Performer
Employee's performance periodically falls short of requirements or the employee requires development in the position.	2 Stars = Needs Development
Employee's performance is inadequate and employee has demonstrated an inability or unwillingness to improve or meet requirements.	1 Star = Unacceptable

4. Annual Performance Rating Period. An employee's annual rating period begins on his/her merit eligibility date and ends 12 months later. The performance report must be received by the HRS 30 days before the merit eligibility date. Supervisors must ensure employees have or have access to a copy of the appropriate "PE" form and the Functional Job Description at the beginning of the rating period.

5. Training Requirements.

7. Written justification to support the rating must be entered in EASE for each rating group assigned by Human Resources.

Employees are responsible for meeting who received a written disciplinary action during the rating period are ineligible to receive an overall rating of Highly Effective or Role Model.

If an employee does not meet his/her required training requirements during the training period described in the Employee Training hours, supporting documentation must be uploaded in EASE.

8. Raters at Community Correction Centers. Raters at Community Correction Centers must have employees complete the Qualification Inquiry form and provide it to the center's Human Resources personnel. (PREA 115.217 [P])

9. Discuss the results of the evaluation with the employee after the Human Resources Administrator has authorized the release.

Important: Raters must NOT provide the employee with results of the evaluation until the Human Resources Administrator has authorized release of the evaluations, which may be up to two months after evaluations are entered in EASE.

10. During the evaluation discussion, have the Code of Ethics and Rules of Conduct policy; available for the employee to review and have the employee sign the Code of Ethics and Rules of Conduct acknowledgment form.

6.

Deadline for Submitting

Annual PEs. Supervisors

C. Center Human Resources Personnel. The center's Human Resources personnel must ensure scan in the completed annual performance evaluations are received by the Central Office, HRS no later than 30 days before the employee's merit eligibility date; the appeal process describes an exception.

7. Conclusion of the Rating Period. The rater must perform the following:

- a. For Residential Services staff, obtain a signed copy of the Residential Services Qualification Inquiry forms; ensure all center staff have completed the form; and include it with the Performance Evaluation. (PREA 115.217 [P])
- b. Prepare an annual PE for all employees. If there is any question about the need for a PE, contact the HRA for guidance. Accurately rate the employee's performance on the PE form considering any employee performance input, contents of the supervisor's file, and the rater's assessment of how well the

~~employee performed the job. All scores above or below satisfactory must be justified in writing. Compare the employee's knowledge, skills, and abilities to job requirements and identify needs for additional education or training.~~

~~c. Prior to any performance review with the employee, forward the completed PE with the employee PE input, if submitted, to the reviewing official for comment and signature. Make appropriate adjustments based on reviewing official comments.~~
forms to the ACC Human Resources Section.

~~d. Review the PE with the employee and obtain his/her signature and any comments.~~

~~e. Forward the Functional Job Description and Tasks (only if revised), and PE to HRS within the required timeframe, using Form 7, "Performance Evaluation Transmittal Letter."~~

~~8. Revising a Completed PE. If a supervisor or reviewing official determines there is reasonable cause to revise a PE that has been submitted to HRS, the revised PE must be provided to the HRS before the rated employee's merit eligibility date.~~

~~C. Processing Delays and Untimely PE Reports~~

~~1. As soon as a supervisor realizes that a PE appeal will delay submission beyond the date due, he/she must notify the HRA.~~

~~2. The HRA must ensure compliance with the following requirements:~~

~~a. PE timeliness and notification to the Director of tardy submissions; and~~

~~b. Forfeiture of merit pay for raters who fail to complete a timely evaluation of an employee (including extension due to appeal).~~

~~3. If a rater has extenuating circumstances for a tardy submission, he/she may choose to submit a request through the supervision chain to the Director to waive the forfeiture of merit pay. If a waiver is allowed, the Director will notify the HRA.~~

D. Reviewing Official. A supervisor who supervises others who supervise employees is a reviewing official. The responsibilities of the reviewing official are as follows:

1. ensure duty areas his/her supervisory staff understand and tasks are clearly expressed, aligned comply with the job classification, and lead to established goals, objectives, mission, expected practices and outcomes this policy.

2. ensure ratings are timely entered on time, are fair, and consistent with, and include recorded performance results.

3. ensure employee comments concerning the evaluation are appropriately addressed,

appeals are resolved, and documentation justifies the ratings.

- ~~3. Ensure employee concerns are appropriately addressed, resolved, and the appeals process is used properly.~~

E. Administering the Overall Performance Evaluation Process.

- ~~1. The HRA is responsible for managing, monitoring, evaluating, reporting, tracking ratings, and submitting reports of any unusual patterns to the Chief Deputy Director. The Chief Deputy Director will report general and unresolved issues to the appropriate Deputy Director and notify the Director, as appropriate, ensuring the preparation and submission of OPM reports, maintenance of appropriate files, and provision of technical assistance to supervisors appropriate Deputy Director.~~

- ~~2. DCC PE activity is subject to reporting by OPM to the Legislative Council when a supervisor fails to prepare and submit an employee evaluation at least once in a twelve (12) month period for each employee he/she supervises. Also, DCC raters and the Director are subject to appear before the Arkansas Legislative Council to explain questionable ratings identified by the OPM.~~

F. Appeal.

1. General Information. Unless alleging unlawful discrimination, performance evaluations may not be appealed through the Employee Grievance Procedures; however, PEs for non-probationary employees may be appealed through the provisions of this policy. ~~The Equal Employment Opportunity (EEO)/Grievance Officer will coordinate the PE appeal process and provide guidance when necessary. The Director or Reviewing Official may intervene at any step in the process to resolve the appeal. Once a written appeal is submitted, it cannot be amended. An appealed PE is an issue between the employee and the rater and no representation for either party is allowed. The appellant, rater or reviewing official may submit relevant information at any step of the appeal process. Relevancy of information requested or submitted will be determined by the EEO/Grievance Officer. An appeal may be terminated at any stage when an agreement between the parties is reached.~~

2. Process.

- a. Employee. A non-probationary employee may initiate an appeal of his/her PE by completing and submitting an "Appeal of Performance Evaluation" Appeal form to the DCC ~~EEO/Grievance Officer~~ his/her supervisor within five (5) business days of receiving the rater's performance rating. ~~The EEO/Grievance Officer will provide a copy of the appeal to the supervisor and reviewing official.~~
- b. ~~Reviewing Official. The reviewing official~~ Immediate Supervisor Who Receives an Appeal. The immediate supervisor who receives an appeal has ten five (5)

business days to make a decision on the appeal and may choose to meet with the employee and/or rater in an effort to resolve the situation. The reviewing official/supervisor will complete the appropriate block of the appeal form indicating one of the following decisions:

(1) Consensus was reached between the rater and employee and a revised or replacement evaluation or other solution satisfactory to both parties will be taken; OR ;

(2) An agreement cannot be was not reached and a Director's decision is requested to resolve the matter.

~~c. EEO/Grievance Officer. Upon receiving an appeal packet, the EEO/Grievance Officer will take one of the following actions:~~

~~(1) Close the appeal action if the reviewing official or rater successfully resolved the appeal, or~~

~~(2) Schedule a meeting with the employee, rater and reviewing official and gain consensus, or~~

~~(3) Convene an appeals committee hearing following the time lines in the Administrative Directive on Employee Grievance procedures, and/or~~

~~(4) Make an appropriate recommendation to the Director, Chief Deputy Director or Deputy Directors, as appropriate, to resolve the situation.~~

~~d. Appeals Committee. The EEO/Grievance Officer may activate an appeal committee when the supervisory chain is unable to resolve an appeal, as appropriate. The appeal committee consists of 3 members selected by the EEO/Grievance Officer from the pool of employees designated for this purpose and the EEO/Grievance Officer who serves as a non-voting chairperson. Meetings should not exceed one (1) hour with the time divided equitably between the employee and the rater/reviewing official. A summary of the committee recommendation will be forwarded to the Director or appropriate Deputy Director for approval or modification as considered appropriate. A decision of the Director or appropriate Deputy Director will be given to the EEO Grievance Officer within 15 business days. The decision is final and binding on all parties. The EEO/Grievance Officer will notify the reviewing official, rater, and employee of the decision. The EEO/Grievance Officer will maintain completed paperwork as appropriate reviewing official.~~

~~G. Verification~~

~~The Center Supervisor at each center must ensure a signed copy of the Residential Services Qualification Inquiry form is included with each performance evaluation.~~

~~VI. ATTACHMENTS.~~

V. FORMS.

~~AD 13-02-18-18 Form 1~~ ~~Functional Job Description and Tasks~~
~~AD 13-02 Form 2~~
~~Performance Evaluation Input~~
~~AD 13-02 Form 3 Performance Evaluation~~
~~AD 13-02 Form 4~~ ~~Performance Evaluation~~
~~Executive~~
~~AD 13-02 Form 5 Performance Evaluation~~ ~~Senior Management~~
~~AD 13-02 Form~~ ~~6 Performance Evaluation~~
~~Appeal~~
~~AD 13-02 Form~~ ~~7 Performance Evaluation~~
~~Transmittal forms are in the Empowering Arkansas State Employees (EASE) computer~~
~~system~~
~~AD 13-02 Form~~
~~8 Promotion Recommendation~~



Arkansas Community Correction

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ADMINISTRATIVE DIRECTIVE: 1118-13 **Equal Employment Opportunity and Affirmative Action Program**

TO: ~~DEPARTMENT OF COMMUNITY CORRECTION (DCC) EMPLOYEES~~

TO: Arkansas Community Correction (ACC) Employees

FROM: ~~DAVID EBERHARD~~ Sheila Sharp, Director

SUPERSEDES: AD ~~01-07~~

PAGE 111-13

APPROVED: Signature on File
~~30, 2011~~ May 28, 2018

EFFECTIVE: November

- I. APPLICABILITY.** This policy applies to ~~Department of Arkansas Community Correction (DCCACC)~~ employees.
- II. POLICY.** The ~~DCCACC~~ is an equal opportunity employer providing equal employment opportunities without regard to race, color, gender, creed, religion, age, genetic information, national origin, disability or other biases prohibited by State or federal law. This commitment is supported by practical good faith efforts to implement and maintain a policy and practice of employing minority group members, women, and members of other protected classes, on a non-discriminatory basis. This policy and practice relates to all phases of employment, including, but not limited to recruiting, hiring, placement, promotion, transfer, layoff, recall, termination, rates of pay or other forms of compensation, training, use of facilities and participation in ~~DCCACC~~-sponsored employee activities and programs. The ~~DCCACC~~ desires to employ individuals who are dependable, sincerely interested in serving the mission of the Department, and who can handle agency matters in a professional manner. ~~DCCACC~~ will comply with the non-discrimination provisions of all applicable State and federal regulations and all personnel actions will be carried out on a non-discriminatory basis. (~~2-CO-1C-09, 3-APPFS-3052~~) The following types of discrimination are prohibited by law: age, disability, equal pay/compensation, genetic information, harassment, national origin, pregnancy, race/color, religion, retaliation, sex, and sexual harassment. (~~2-CO-1C-09, 3-APPFS-3052, 4-ACRS-7E-05~~)

III. GUIDELINES.

A. Information Dissemination. Supervisors and managers are responsible for implementing and administering this policy, applying these principles in good faith for meaningful progress in the employment of minorities, women and members of other protected classes. Following are some ways in which the ~~DCCACC~~ Equal Employment Opportunity (EEO) policy statement above will be communicated:

1. The above policy statement will be referenced in all issues or reissues of employee handbooks, and recruiting brochures.
2. Information will be made accessible to applicants, key members of business, educational and community organizations and institutions through employment advertisements containing assurance of equal employment opportunity,
3. Employment and recruiting sources will be provided a copy of the ~~DCCACC~~ policy statement, and
4. Job openings will be posted in such places as the Arkansas Government Jobs Web Site, local newspapers when needed, and ACC's social media sites when deemed appropriate.

B. Additional Employment Law Information.

Additional information about federal employment law is summarized on the posters titled: "Equal Employment Opportunity is the Law" and "Your Rights Under USERA: The Uniformed Services Employment and Reemployment Rights Act" at each ~~DCCACC~~ office.

C. Implementing and Administering the EEO Program/Affirmative Action Plan.

1. The Human Resources Section Administrator (HRSA) must monitor employment trends and document an annual review of minority employment. If it is determined that deficiencies exist regarding practices for employment of minority groups and women, the HRSA must document the implementation of an affirmative action program that is approved by the Office of Personnel Management. (2-CO-1C-09)
2. The HRSA will confer with and assist supervisors in understanding and meeting EEO/Affirmative Action Program responsibilities.
3. Special attention will be given to recruiting efforts for positions that are difficult to fill and/or have an under representation of minorities and women. Requests will be made to each recruiting source to lend a special effort in the recruiting and referral of members of the ~~under-represented~~ underrepresented group.

4. Increased emphasis will be given to seeking and encouraging applicants from minority groups where such applicants with the necessary qualifications or potentials are available. Organizations assisting the ~~DCCACC~~ in obtaining employees will be notified of the adoption of this affirmative action program.
5. Supervisors are encouraged to employ qualified minority group individuals in available positions.
6. Supervisors will advise staff of increased interest in qualified members of minority groups for job assignments where they have not been employed previously.
7. Supervisors will ensure minority group employees receive equal consideration whenever promotional or incentive opportunities occur.

D. Training. Training programs supported or sponsored by the ~~DCCACC~~ will continue to be open to all employees, as appropriate, on the basis of qualifications, job relatedness and other non-discriminatory reasons. Such employees who appear to have management potential will be encouraged to seek advancement into supervisory or other management positions.

E. Hiring, Placement, Transfer, Promotion, Lay-off, Recall, Retention, Termination. The ~~DCCACC~~ recognizes that to accomplish the long-range objectives of this EEO/Affirmative Action Program, action must be taken to ensure that job opportunities of all kinds are made available to members of minority groups and communities and that qualified members of minority groups should be offered positions on the same basis as all other applicants or employees. To assure achievement, employment practices will be reviewed periodically with top management by the HRSA.

F. Compensation. All employees will receive compensation in accordance with the same standards. Opportunities for performing overtime work or otherwise earning increased compensation, when available, will be afforded to all qualified employees.

G. Liaison. The HRSA will serve as liaison to enforcement agencies and minority, women and community organizations that are concerned with equal employment opportunity.



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**ADMINISTRATIVE DIRECTIVE: ~~18-08-07~~ PROCUREMENT AND DISPOSITION
ACTIVITIES** Procurement and Receiving

TO: ~~DEPARTMENT OF~~ Arkansas Community Correction Employees

FROM: ~~G. DAVID GUNT HARPS~~ Sheila Sharp, Director

SUPERSEDES: AD 00-04

PAGE 118-03

APPROVED: Signature on File
~~2008~~ March 16, 2018

EFFECTIVE: April 30,

I. APPLICABILITY. This policy applies to ~~Department of~~ Arkansas Community Correction (~~DCC~~ ACC) employees involved in procurement and ~~disposition of~~ receiving commodities and services.

II. POLICY. It is ~~DCC~~ ACC policy to process documents for procurement and ~~disposition of~~ receiving commodities and services in compliance with applicable state and federal laws and ~~procedures and~~ Board of Corrections (Board) guidelines. Direction regarding procurement and ~~disposition~~ receiving 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.~~

~~**C. Procurement.** Purchasing, ~~buying,~~ renting, leasing, contracting, or otherwise obtaining commodities or services.~~

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~~Purchasing of Commodities and Services.

1. Procedures for procurement and ~~disposition~~receiving of commodities and services ~~shall be~~are governed by applicable state and federal laws and ~~procedures~~policies 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 the Assistant Directors.
3. 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 DCC Deputy Director (Director) of Residential Services.~~
 - c. Purchases of \$10,000 or more also require approval of the Director and Board.
4. Emergency procurements ~~shall~~must be approved by the Director or, in his/her absence, the Chief Deputy Director or a 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 the appropriate Deputy ~~or Assistant~~ Director for procurement of specific capital equipment items and/or for specific dollar amounts.
7. Procurement of commodities and services required for authorized construction/renovation projects ~~shall~~must be approved by the Chief Deputy Director, ~~and the Deputy or Assistant~~ Director designated by the Director to oversee each project.

B. Receiving Notification. 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.

C. 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~~ requires Director and ~~the Board approvals.~~

DE. Procurement of Land, Buildings, Construction and/or Renovation Projects. Procurement of land, buildings, construction and/or renovation projects require the following approvals:

1. Procurement of land, buildings, construction and/or renovation ~~under less than~~ \$50,000 ~~require~~ requires 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

EE. 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 as~~ 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 renovations require 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. ~~Prison~~Residential 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 ~~staff attorney~~ACC general counsel prior to submission to the approval authority.

FG. 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 ~~shall~~will provide monthly ~~Board~~reports to the Board of new and/or renewed contracts of \$10,000 or more.

V. STANDARDS. Arkansas Code section 19-11-101; American Correctional Association (ACA) Standards for Adult Community Residential Services, fourth edition, standard 4-ACRS-7D-26.