

Following are administrative directives and administrative memoranda issued by Arkansas Community Correction with an effective date from April 1, 2017 through June 30, 2017.

Document Title	Effective Date
American Correctional Association (ACA) Internal and External Audits AD 17-02	4/28/2017
Equipment Inventory, Transfer and Disposition AD 17-27	4/28/2017
Transportation of Offenders Released to Community Supervision and Discharge AD 17-15	4/14/2017
Volunteer Services AD 17-30	5/31/2017
Chaplaincy Services AD 17-29	5/31/2017
Community Transition and Furlough AD 17-18	4/19/2017
Offender Substance Abuse Testing AD 17-23	4/14/2017
Access to Residential Facilities AD 17-16	4/19/2017
Employee Training and Certification AD 17-25	5/5/2017
Employee Timekeeping and Compensation AD 17-26	6/1/2017
Resident Conduct AD 17-20	4/24/2017
Recruiting & Hiring AD 17-08	5/12/2017

✓ Stricken language would be deleted from and underlined language would be added to present law.  
Act 2 of the First Extraordinary Session

1 State of Arkansas  
2 ✓ 91st General Assembly  
3 First Extraordinary Session, 2017  
4

✓  
**A Bill**

Call Item 2

✓  
HOUSE BILL 1001

5 By: Representative Gillam ✓  
6 By: Senator J. Dismang ✓  
7

**For An Act To Be Entitled**

8  
9 AN ACT TO MAKE TECHNICAL CORRECTIONS TO ARKANSAS  
10 CONSTITUTION, ARTICLE 19, § 30, TO INTEGRATE AND  
11 INCORPORATE THE PROVISIONS OF ACTS 2017, NOS. 207,  
12 312, AND 1108 INTO ARKANSAS CONSTITUTION, ARTICLE 19,  
13 § 30; TO DECLARE AN EMERGENCY; AND FOR OTHER  
14 PURPOSES.  
15

16  
17 **Subtitle**

18 TO INTEGRATE AND INCORPORATE THE  
19 PROVISIONS OF ACTS 2017, NOS. 207, 312,  
20 AND 1108 INTO ARKANSAS CONSTITUTION,  
21 ARTICLE 19, § 30; AND TO DECLARE AN  
22 EMERGENCY.  
23

24  
25 ✓ BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:  
26

27 SECTION 1. LEGISLATIVE INTENT. (a) The General Assembly finds that:

28 (1) Arkansas Constitution, Article 19, § 30(d) empowers the  
29 General Assembly to amend Arkansas Constitution, Article 19, § 30, so long as  
30 the amendments are germane to the section and consistent with its policy and  
31 purposes;

32 (2) Three (3) separate acts of the regular session of the  
33 Ninety-First General Assembly, Acts 2017, Nos. 207, 312, and 1108, amended  
34 Arkansas Constitution, Article 19, § 30;

35 (3) All of these acts were enacted independently of the others,  
36 and the acts do not reflect the language added by the other amendatory acts;



(4) Arkansas Code § 1-2-207, which addresses codification upon the passage of multiple acts amending the same subject matter, only references amendments to the Arkansas Code and uncoded acts and does not address the treatment of acts amending the Arkansas Constitution;

(5) The applicability of Arkansas Code § 1-2-303(d)(1), concerning nonsubstantive technical corrections to provisions of the Arkansas Code and acts of the General Assembly made under the direction of the Arkansas Code Revision Commission, is equally uncertain;

(6) It is unclear whether the Arkansas Code Revision Commission may exercise its authority under Arkansas Code §§ 1-2-207 and 1-2-303 and make the customary technical corrections, such as changes to numbering and formatting, that are made by the Arkansas Code Revision Commission to acts of the General Assembly that amend the same section of law; and

(7) Without technical corrections to the conflicting language, Arkansas Constitution, Article 19, § 30, will not read coherently and will be difficult to interpret, utilize, and cite.

(b) The intent of this act is to:

(1) Supersede certain provisions of Acts 2017, Nos. 207, 312, and 1108 that conflict with or substantively duplicate the provisions of this act; and

(2) Enact certain provisions of Acts 2017, Nos. 207, 312, and 1108 in a format that integrates and incorporates certain provisions of the three (3) acts by restating certain provisions in a coherent, cohesive, and comprehensive manner.

(c) This act does not modify or supersede:

(1) Any emergency clause or effective date clause of Acts 2017, Nos. 207, 312, and 1108; or

(2) Sections within Acts 2017, Nos. 207, 312, and 1108 that are not within this act.

SUPP SECTION 2. Under the authority granted by Arkansas Constitution Article 19, Section 30(d), Arkansas Constitution, Article 19, Section 30(b), concerning definitions applicable to the section, is amended to integrate the provisions of Acts 2017, Nos. 207, 312, and 1108, to read as follows:

(b) As used in this section:

(1)(A) "Administrative action" means a decision on, or proposal,

1 consideration, or making of a rule, regulation, ratemaking proceeding, or  
2 policy action by a governmental body.

3 (B) "Administrative action" does not include ministerial  
4 action;

5 (2)(A) "Gift" means ~~any payment~~:

6 (i) ~~Any payment~~, entertainment, ~~advance~~, ~~services~~  
7 ~~service~~, or anything of value, unless consideration of equal or greater value  
8 has been given therefor; or

9 (ii) ~~Any advance or loan~~.

10 (B) "Gift" does not include:

11 (i)(a) Informational material such as books,  
12 reports, pamphlets, calendars, or periodicals informing a person elected or  
13 appointed to an office under subsection (a) of this section regarding his or  
14 her official duties.

15 (b) Payments for travel or reimbursement for  
16 any expenses are not informational material;

17 (ii) Gifts that are not used and which, within  
18 thirty (30) days after receipt, are returned to the donor;

19 (iii) Gifts from the spouse, child, parent,  
20 grandparent, grandchild, brother, sister, parent-in-law, brother-in-law,  
21 sister-in-law, nephew, niece, aunt, uncle, or first cousin of a person  
22 elected or appointed to an office under subsection (a) of this section, or  
23 the spouse of any of these persons, unless the person is acting as an agent  
24 or intermediary for any person not covered by this subdivision

25 (b)(2)(B)(iii);

26 (iv) Anything of value that is readily available to  
27 the general public at no cost;

28 (v)(a)(1) Food or drink available at a planned  
29 activity to which a specific governmental body is invited, including without  
30 limitation a governmental body to which a person elected or appointed to an  
31 office under subsection (a) of this section is not a member.

32 (2) If a committee of the General  
33 Assembly is invited to a planned activity under subdivision

34 (b)(2)(B)(v)(a)(1) of this section, only members of the committee of the  
35 General Assembly may accept food or drink at the planned activity.

36 (b)(1) As used in this subdivision

Read  
against  
Acts  
2017.  
No. 11  
08. §

1 (b)(2)(B)(v), "planned activity" means an event for which a written  
 2 invitation is distributed electronically or by other means by the lobbyist,  
 3 person acting on behalf of a lobbyist, or a person employing or contracting  
 4 with a lobbyist to the members of the specific governmental body at least  
 5 twenty-four (24) hours before the event.

6 (2) As used in this subdivision  
 7 (b)(2)(B)(v), "planned activity" does not include food or drink available at  
 8 a meeting of a specific governmental body for which the person elected or  
 9 appointed to an office under subsection (a) of this section is entitled to  
 10 receive per diem for attendance at the meeting.

11 (c) A lobbyist, a person acting on behalf of a  
 12 lobbyist, or a person employing or contracting with a lobbyist shall not  
 13 offer or pay for food or drink at more than one (1) planned activity in a  
 14 seven-day period;

15 (vi)(a) Payments by regional or national  
 16 organizations for travel to regional or national conferences at which the  
 17 State of Arkansas is requested to be represented by a person or persons  
 18 elected or appointed to an office under subsection (a) of this section.

19 (b) As used in this subdivision (b)(2)(B)(vi),  
 20 "travel" means transportation, lodging, and conference registration fees.

21 (c) This section does not prohibit the  
 22 acceptance of:

23 (1) Food, drink, informational  
 24 materials, or other items included in the conference registration fee; and

25 (2) Food and drink at events coordinated  
 26 through the regional or national conference and provided to persons  
 27 registered to attend the regional or national conference;

28 (vii) Campaign contributions;

29 (viii) Any devise or inheritance;

30 (ix) Salaries, benefits, services, fees,  
 31 commissions, expenses, or anything of value in connection with:

32 (a) The employment or occupation of a person  
 33 elected or appointed to an office under subsection (a) of this section or his  
 34 or her spouse so long as the salary, benefit, service, fee, commission,  
 35 expense, or anything of value is solely connected with the person's  
 36 employment or occupation and is unrelated to and does not arise from the

1 duties or responsibilities of the office to which the person has been elected  
2 or appointed; or

3 (b) Service as an officer, director, or board  
4 member of a corporation, a firm registered to do business in the state, or  
5 other organization that files a state and federal tax return or is an  
6 affiliate of an organization that files a state and federal tax return by a  
7 person elected or appointed to an office under subsection (a) of this section  
8 or his or her spouse so long as the salary, benefit, service, fee,  
9 commission, expense, or anything of value is solely connected with the  
10 person's service as an officer, director, or board member and is unrelated to  
11 and does not arise from the duties or responsibilities of the office to which  
12 the person has been elected or appointed; and

13 (x) A personalized award, plaque, or trophy with a  
14 value of one hundred fifty dollars (\$150) or less;

15 (xi)(a) The use of one (1) or more rooms or  
16 facilities owned, operated, or otherwise utilized by a state agency or  
17 political subdivision of the state for the purpose of conducting a meeting of  
18 a specific governmental body.

19 (b) As used in this subdivision (b)(2)(B)(xi):

20 (1) "Rooms or facilities" includes  
21 without limitation property belonging to a state agency or political  
22 subdivision used in connection with a meeting of a specific governmental body  
23 such as projectors, microphones, and computer equipment; and

24 (2) "State agency" means every  
25 department, division, office, board, commission, and institution of this  
26 state, including state-supported institutions of higher education;

27 (xii) Nonalcoholic beverages provided to attendees  
28 at a meeting of a civic, social, or cultural organization or group;

29 (xiii) Food and nonalcoholic beverages provided to  
30 participants in a bona fide panel, seminar, or speaking engagement at which  
31 the audience is a civic, social, or cultural organization or group; and

32 (xiv) Anything of value provided by a recognized  
33 political party when serving as the host of the following events to all  
34 attendees as part of attendance at the event:

35 (a) The official swearing-in, inaugural, and  
36 recognition events of constitutional officers and members of the General

✓  
1 Assembly; and

2 (b) An official event of a recognized  
3 political party so long as all members of either house of the General  
4 Assembly affiliated with the recognized political party are invited to the  
5 official event;

6 (3) "Governmental body" or "governmental bodies" means an  
7 office, department, commission, council, board, committee, legislative body,  
8 agency, or other establishment of the executive, judicial, or legislative  
9 branch of the state, municipality, county, school district, improvement  
10 district, or any political district or subdivision thereof;

11 (4)(A) "Income" means any money or anything of value received or  
12 to be received as a claim for future services, whether in the form of a  
13 retainer, fee, salary, expense, allowance, forbearance, forgiveness,  
14 interest, dividend, royalty, rent, or any other form of recompense or any  
15 combination thereof.

16 (B) "Income" includes a payment made under obligation for  
17 services or other value received;

18 (5) "Legislative action" means introduction, sponsorship,  
19 consideration, debate, amendment, passage, defeat, approval, veto, or any  
20 other official action or nonaction on any bill, ordinance, law, resolution,  
21 amendment, nomination, appointment, report, or other matter pending or  
22 proposed before a committee or house of the General Assembly, a quorum court,  
23 or a city council or board of directors of a municipality;

24 (6) "Legislator" means a person who is a member of the General  
25 Assembly, a quorum court of a county, or the city council or board of  
26 directors of a municipality;

27 (7) "Lobbying" means communicating directly or soliciting others  
28 to communicate with a public servant with the purpose of influencing  
29 legislative action or administrative action;

30 (8)(A) "Lobbyist" means a person who:

31 ~~(A)(i)~~ Receives income or reimbursement in a combined  
32 amount of four hundred dollars (\$400) or more in a calendar quarter for  
33 lobbying one (1) or more governmental bodies;

34 ~~(B)(ii)~~ Expends four hundred dollars (\$400) or more in a  
35 calendar quarter for lobbying one (1) or more governmental bodies, excluding  
36 the cost of personal travel, lodging, meals, or dues; or



1                   ~~(C)(iii)~~ Expends four hundred dollars (\$400) or more in a  
 2 calendar quarter, including postage, for the express purpose of soliciting  
 3 others to communicate with a public servant to influence any legislative  
 4 action or administrative action of one (1) or more governmental bodies unless  
 5 the communication has been filed with the Secretary of State or the  
 6 communication has been published in the news media. If the communication is  
 7 filed with the Secretary of State, the filing shall include the approximate  
 8 number of recipients.

312 9                   (B) "Lobbyist" does not include a recognized political  
 10 party;

11                   (9)(A) "Person" means a business, individual, union,  
 12 association, firm, committee, club, or other organization or group of  
 13 persons.

14                   (B) As used in subdivision (b)(9)(A) of this section,  
 15 "business" includes without limitation a corporation, partnership, sole  
 16 proprietorship, firm, enterprise, franchise, association, organization, self-  
 17 employed individual, receivership, trust, or any legal entity through which  
 18 business is conducted;

19                   (10)(A) "Public appointee" means an individual who is appointed  
 20 to a governmental body.

21                   (B) "Public appointee" does not include an individual  
 22 appointed to an elective office;

23                   (11)(A) "Public employee" means an individual who is employed by  
 24 a governmental body or who is appointed to serve a governmental body.

25                   (B) "Public employee" does not include a public official  
 26 or a public appointee;

27                   (12) "Public official" means a legislator or any other person  
 28 holding an elective office of any governmental body, whether elected or  
 29 appointed to the office, and shall include such persons during the time  
 30 period between the date they were elected and the date they took office; and

31                   (13) "Public servant" means all public officials, public  
 32 employees, and public appointees;

312 33                   (14)(A) "Recognized political party" means a political party  
 34 that:

35                   (i) At the last preceding general election polled  
 36 for its candidate for Governor in the state or nominees for presidential



electors at least three percent (3%) of the entire vote cast for the office;  
or

(ii) Has been formed by the petition process under §  
7-7-205.

(B) When a recognized political party fails to obtain  
three percent (3%) of the total votes cast in an election for the office of  
Governor or nominees for presidential electors, it shall cease to be a  
recognized political party; and

(15)(A) "Advance or loan" means a sum of money that is borrowed  
with the expectation that it be paid back, regardless of whether interest is  
charged.

(B) "Advance or loan" does not include an advance or loan  
made in the ordinary course of business by a:

(i) Financial institution; or

(ii) Business that regularly and customarily extends  
credit.

SECTION 3. EMERGENCY CLAUSE. It is found and determined by the  
General Assembly of the State of Arkansas that this act is intended to avoid  
difficulties in interpreting, utilizing, and citing Arkansas Constitution,  
Article 19, § 30, created by the passage of Acts 2017, Nos. 207, 312, and  
1108; that this act enacts certain provisions of those acts in a format that  
integrates and incorporates them by restating certain provisions of the three  
(3) acts in a coherent, cohesive, and comprehensive manner; and that to avoid  
confusion in the law, this act should be effective on the same date as Acts  
2017, Nos. 207 and 1108. Therefore, an emergency is declared to exist, and  
this act being necessary for the preservation of the public peace, health,  
and safety shall become effective on July 31, 2017.

APPROVED: 05/04/2017

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312

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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:** ~~07-16~~ ~~AMERICAN~~  
~~CORRECTIONAL~~ ~~17-02~~  
~~American Correctional~~ Association (ACA)  
Internal and External Audits

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

~~TO: Arkansas Community Correction Employees~~

~~FROM: G. DAVID GUNTARP, DIRECTOR~~ Sheila Sharp, Director

~~SUPERSEDES: AD 03-07-16~~

~~APPROVED: Signature on File~~  
~~EFFECTIVE: DECEMBER 3, 2007~~ April 28, 2017

- I. **APPLICABILITY.** This policy applies to ~~Department of Arkansas~~ Community Correction (~~DCCACC~~) employees.
- II. **POLICY.** It is ~~DCCACC~~ policy to ensure efficient and responsible operations through quality improvement practices that use the results of monitoring and evaluating activities as a basis for ongoing program improvement. (4-ACRS-2D-02) ~~(3-3023)~~; 4-APPFS-3D-09; 2-CO-1A-22
- III. **DEFINITIONS.** ~~Following are~~ AMERICAN CORRECTIONAL ASSOCIATION (ACA) AUDITS. ~~The American Correctional Association (ACA) definitions~~ conducts audits to determine whether ACA expected practices are met.
- ~~All managers/supervisors, the ACA Managers and ACA Coordinators must have a working understanding of key the ACA audit process as described in the front of the ACA manuals.~~
- ~~The ACC publishes policy which when followed will result in successful accomplishment of ACA expected practices so staff do not need to examine expected practices to determine what needs to be done. Staff involved in the ACA audit process look at protocols, expected practices and process indicators to ensure ACC compliance with each expected practice.~~

*"There is good in all people; how we deal with them determines how much of it we see."*

ACC staff conducts “ACA internal audits,” and the majority of this policy provides guidance for internal audits. “ACA external audits” are conducted by auditors assigned by the ACA.

All employees must document work as required by policy and cooperate with the ACA audit process to ensure documentation is correct and is made available to ACA Coordinators.

**IV. TERMINOLOGY.** The following ACA terms are used in ~~Performance-Based Standards~~ Manuals: this policy:

- A. Expected Practice(s).** Actions and activities that, if/when implemented ~~properly~~ (according to protocols), will produce the desired outcome. ~~What we think is necessary to achieve and maintain compliance with the standard—but not necessarily the only way to do so. These are activities that represent the current experience of the field, but that are not necessarily supported by research. As the field learns and evolves, so will practices.— Previously these were referred to as “standards.”~~
- B. ~~Goal Statement.~~** A general statement of what is sought within the functional area.

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*“There is good in all people; how we deal with them determines how much of it we see.”*

**C. Outcome Measures.** Measurable events, occurrences, conditions, behaviors, or attitudes that demonstrate the extent to which the condition described in the ~~performance-standard~~expected practice has been achieved. Outcome measures describe the ~~consequences~~results of the program's activities, rather than describing the activities themselves. Outcome measures can be compared over time to ~~indicate changes in the conditions that are sought. Outcome measure data are collected continuously but usually are analyzed periodically.~~track progress.

~~D. Process Indicators.~~ Documentation and other evidence that can be examined periodically and continuously to determine that practices are being implemented properly. These "tracks" or "footprints" allow supervisory and management staff to monitor ongoing operations.

~~E. C. Protocol(s).~~ Written instructions that guide implementation of expected practices, such as policies, ~~standard operating~~ procedures, post orders, ~~training curriculum, formats to be used such as logs and forms,~~ offender handbooks, ~~diagrams such as fire exit plans, internal inspection forms.~~

~~F. Standard.~~ A statement that clearly defines a required or essential condition to be achieved and maintained. A performance standard describes a "state of being" a condition, and does not describe the activities or practices that might be necessary to achieve compliance. Performance standards reflect the program's overall mission and purpose.

~~IV. D. Process Indicators.~~ Documentation and other evidence that can be examined to determine whether expected practices are being implemented properly. Supervisors use this information to monitor ongoing operations.

## V. PROCESS, ROLES AND RESPONSIBILITIES.

### A. Center Supervisors and Area Managers.

Each Center Supervisor and Area Manager must:

1. designate an ACA Manager for each Center/Area
2. provide a qualified internal audit team to audit other Centers/Areas as needed
3. ensure a Welcome Book is prepared, as described below.

B. ACA Coordinators. The ACA Coordinators coordinate the overall internal and external accreditation process activities. There is one ACA Coordinator that handles Residential Services and Central Office, and another ACA Coordinator that handles Parole/Probation Services. ~~Responsibilities. Center Supervisors and Area Managers are responsible for the following include but are not limited to:~~

- ~~1. monitor, evaluate, and report progress toward attaining goals and objectives. Make appropriate program changes to facilitate goal/objective attainment.~~
- ~~2. ensure accurate~~

- ~~1. establishing electronic file folders for ACA documentation.~~
  - ~~2. providing program oversight to include training ACA Managers.~~
  - ~~3. ensuring timely and acceptable documentation is gathered.~~
  - ~~4. informing appropriate managers when there are perceived problems.~~
  - ~~5. work with the Center ACA Managers and timely data collection, analysis, and reporting~~
- ~~3. manage the monitoring and evaluating process in compliance with this guidance~~
  - ~~4. monitor operations Parole/ Probation Assistant Managers to ensure compliance with DCC policy, ACA expected practice, and documentation requirements for internal ACA audits~~
  - ~~5. train staff to collect, report, and analyze data and to conduct audits~~
  - ~~6. recommend trained staff to conduct internal ACA audits~~
  - ~~7. ensure compliance with guidance in this section~~
  - ~~8. respond to requests for information or assistance made by the DCC ACA Coordinator~~
- B. Electronic Offender Management Information System (eOMIS) Data Verification**
- ~~All eOMIS users must take reasonable precautions to verify the accuracy and reliability of data they enter. This is necessary to ensure subsequent decisions and evaluations are based on accurate information. (4-ACRS-7D-05[P])~~
- C. Audits of Offender Records.** The Deputy Director of Residential Services and Assistant Director of Probation/Parole Services must ensure their staff thoroughly reviews offender records.
- ~~1. Objective. The primary objective of supervision audits is to determine the quality, effectiveness, and adequacy of offender supervision and to provide a means for correcting deficiencies and recognizing significant accomplishments, innovations, and enhancements.~~
  - ~~2. Responsibilities. Audits of supervision activities of probation and parole offices and residential centers will be conducted by the appropriate area or center supervisor, their assistants, or another authorized supervisor. Under no circumstances will a supervisor audit activities for which he/she is directly responsible.~~
  - ~~3. Guidance. The appropriate Deputy or Assistant Director must provide written procedural guidance for conducting supervision audits delineating responsibilities, audit frequency, reporting, and providing for their consistent application.— Consistency must be maintained in the application of audit procedures.~~
- D. Goals and Objectives.** Center Supervisors, Area Managers, and others tasked to monitor and evaluate progress made toward achieving goals and objectives, must report progress and obstacles in the monthly input for the Director's report to the Board of Corrections. As necessary, program changes must be implemented in response to findings in the goals and objectives report. (4-ACRS-7D-02)

**E. Internal ACA Audit Responsibilities.** Internal ACA audits are audits conducted by qualified staff members to determine compliance with ACA standards.

~~1. Chief Deputy Director, Deputy Director of Residential Services and Deputy Director Probation/Parole Services.~~ The Chief Deputy Director, the Deputy Director of Residential Services and the Deputy Director Probation/Parole Services will ensure an annual "internal ACA audit" of all ACA documentation is conducted by a qualified internal audit team from a different Center/Area unless the audit is waived by the appropriate Deputy Director. The schedule must allow timely identification and resolution of problems prior to an audit by ACA auditors and/or the annual report to the ACA. An ACA Accreditation Manager must be designated for each residential facility and Probation/Parole office. Audit teams must be qualified and each team must have a lead auditor.

~~2. DCC ACA Coordinator.~~ The DCC ACA Coordinator coordinates the overall internal and external accreditation process activities.

~~3. ACA Manager.~~ The Center and Probation/Parole Services ACA Manager

~~6. preparing a request for audit for the appropriate Deputy Director or Director to submit to ACA, pursuant to ACA guidance in the manual.~~

~~7. in preparation for an ACA external audit, preparing other documentation prescribed by ACA to include as appropriate: the expected practice compliance presentation, release of information permission form, and personnel and offender records.~~

~~8. in preparation for an ACA external audit, post/provide notice to staff of the audit so staff are available to discuss specific issues or conduct tours. Also advise staff of the scheduled audit at least 30 days in advance.~~

~~9. ensure ACA Managers at each Center prepare the ACA Annual Reports in a timely manner, get the Center Supervisor's approval then forward the report to the ACA Coordinator who must forward it to ACA. The Parole/Probation ACA Coordinator must prepare the annual report for Parole/Probation Services, get approval of the "Parole/Probation Services Deputy Director and then forward it to ACA.~~

**C. ACA Managers.** ACA Managers are primarily responsible for managing the ACA accreditation process. He/she must work with staff to ensure sufficient documentation is available for ACA audits and keep supervisors and appropriate managers/administrators apprised of problems. Responsibilities of the ACA Manager include the following for their Center/Area; responsibilities include:

- ~~a. Establishing folders with ACA documentation using an approved format.~~
- ~~b. 1. placing policy excerpts in the ACA presentation folders to show the written requirement that fulfills the ACA standard (expected practice). Highlighting the appropriate text with a yellow high lighter. Only highlighting compliance with each ACA expected practice. The policy excerpts must include the front page of each policy and relevant pages where the text shows compliance with the expected practice. The text showing compliance must be highlighted. Only highlight the minimum words necessary to demonstrate compliance. Yellow high lighting is required because it allows documents to be copied cleanly. Other high lighters will show dark marks after photocopying If a cited policy changes during the~~



year, add the new policy front page and excerpts above the existing material and, as appropriate, add a header indicating the audit year(s) for which the policy excerpts apply.

e.

The latest copy of any policy must be present in the file folder. New policy may mean limited documentation. If practice has changed, proof of practice should be evident by process indicators. When documentation collected before the policy change does not adequately show compliance with the expected practice, appropriate action should be taken such as a note of explanation, and if appropriate, a copy of the old policy.

2. when an expected practice (standard) has a list of requirements, include process indicators (secondary documentation) in the same order as the items in on the list. Number the items in the expected practice and process indicators to allow easy association.

4. Audit Team Chairperson. The chairperson of 3. ensuring the audit team will fulfill the following duties:

- a. Conduct an entrance and exit meeting with key facility staff.
- b. Assign each team member specific areas to be audited.
- c. Assign mentors to new audit teams as observers.
- d. Serve as spokesperson for the team.
- e. Serve as final authority in regard to compliance/non-compliance issues.

The above duties files are not applicable to Central Office.

5. Internal complete prior to ACA Auditors. Staff selected to perform internal ACA and external audits must follow applicable guidance in this section.

6. All employees. All employees must support the ACA accreditation process through such means as providing timely and adequate documentation and cooperating with the ACA Accreditation Manager and auditors. All employees involved in the ACA audit process will follow applicable guidance in subsequent paragraphs.

F. ACA Internal Audit Process. The American Correctional Association (ACA) sends an audit team for initial accreditation and, when we meet standards, subsequently every three years for re-accreditation. If there are problems, our accreditation status could be withheld or made conditional based on progress noted in additional audits. Although there may be an occasional reference to ACA audits conducted by the ACA, in this section, "audits" primarily refers to "internal ACA audits" conducted by DCC staff to determine the likelihood of DCC passing an audit by the ACA auditors and to identify and resolve problems.

G. ACA Internal Audit Requirement. Annual internal ACA audits at CCCs will be conducted by a qualified team of auditors from another center. Annual internal ACA audits of Probation/Parole Services Areas will be conducted by qualified auditor(s) from another Area and/or by the Probation/Parole Administrator in charge of the Area. At CCCs, usually four auditors are needed and the audit process takes one full day plus report preparation time. Auditors may be accompanied by staff from either the auditing or audited center/area for training purposes.

#### H. ACA Internal Audit – Qualified

D.

#### ACA Internal Audit - Auditor-~~Qualified~~ Qualifications.

1. All auditors for internal ACA audits must understand:

- a. the operation(s) being audited to include related policies and procedures;
- b. the ACA system of expected practices, protocols ~~(primary documentation),~~ and process indicators ~~(secondary) documentation;~~
- c. the audit process described ~~here;~~in this policy and
- d. report writing. ~~For audits at CCCs, auditors with special expertise are recommended so they may focus on~~

2. Some Residential Services expected practices ~~in their area of expertise in addition~~ require “qualified individuals” to inspect and document compliance with certain safety and sanitation inspections. A “qualified individual” is a person whose training, education and/or experience specifically qualifies him /her to ~~conducting a physical facility inspection and interviewing staff and offenders.~~ At CCCs, auditors with the following expertise are recommended: do the job indicated in the standard. The Residential Service ACA manual provides additional detail about this. For the purpose of ACA internal audits, the auditor who audits such standards should be a “qualified individual.”

1- 3. At Centers, auditors with the following expertise are required:

- 1. a. Food and Sanitation Auditor. The qualified individual must be trained in the ~~Administrative Procedures of the Arkansas State Board of Health and the applicable~~ Arkansas Department of Health, ~~rules and regulations to include~~ “Communicable Disease (Tuberculosis)” and “Food Service Establishments.” The qualified individual must be able to inspect ~~every building, room, or other place occupied or kitchen utensils, equipment and all areas~~ used for the production, storage, sale, or distribution of food, ~~and all utensils and appurtenances relating thereto.~~ The auditor must also be able to determine whether staff and residents working in food service comply with all applicable rules and regulations. This includes commissary operations.
- 2- b. Fire Safety Auditor. The qualified individual must be trained in the prevention, ~~and~~ detection, ~~and protection~~ of fires in accordance with the National Fire Prevention Life Safety Code Handbook. A qualified individual will be familiar with the special challenges associated with protecting incarcerated individuals.
- 3- c. Chemical Control Auditor. The qualified individual must be trained according to specific guidelines for storage, use, and disposal of toxic, flammable, and combustible liquids under the Federal Hazardous Substances Act and be capable of determining substantial compliance with applicable requirements. A qualified auditor ~~would be~~ expected to ~~assure~~ensure constant inventories are kept and maintained for all toxic, flammable and caustic ~~material~~materials used in each department.

#### 4. Internal File Review

d. Treatment Auditor. The qualified individual must meet be a Treatment Supervisor or Treatment Coordinator.

E. Internal ACA Audit Team Leader. The Internal ACA Audit Team Leader must:

1. assign each team member specific areas/expected practices to be audited; and task them to audit the requirements outlined above for all electronic ACA documentation and to complete the Audit Checklist before the on-site audit
2. ensure auditors understand their responsibilities
3. when appropriate, assign prospective auditors to shadow and learn from the team
4. conduct an entrance meeting with key center/area staff
5. serve as spokesperson for the team
6. serve as final authority in regard to compliance/non-compliance determinations
7. gather input from each auditor is responsible for reviewing accreditation files, personnel records, and offender records, as assigned by the team chief; and review and clarify as appropriate

I. Staff Preparation for ACA Audits. Some of the preparation requirements are described here. The ACA Manager must ensure appropriate documentation is available. The Center Supervisor and Probation/Parole ACA Manager must provide the audit team chief with the following information to be used in the final report, note this is for the "real" audit, not audits by our staff: current information regarding operations and programmatic description, offender population, personnel statistics, organization charts, etc. for use in the "agency narrative" section of the report. Also provide a litigation summary limited to case number, cause of action, and resolution of class action suits and consent decrees. When there is a decree of judgments, information should be detailed and include the scope and specific requirements. Individual actions need not be included. The Center Supervisor/Area Manager gives a brief presentation to the audit team at the entrance meeting. At this time, he/she may want to provide information the audit team chief

8. conduct the exit meeting with key center/area staff
9. within 10 business days of the audit, prepare a final audit report and provide copies to the Center Supervisor/Area Manager and ACA Coordinator.

Note: At Centers, usually four auditors are needed and the audit process takes one full day to audit the electronic files and one day to conduct the internal audit at the center/area.

F. Internal Audit Team Auditing Process Overview. The following is an overview of key aspects of the internal ACA audit process. This process is similar to the process used by ACA.

1. Before the on-site visit. Before the on-site visit, the Team Leader assigns each auditor specific expected practices and asks the auditors to audit the electronic ACA documentation and complete the Audit Checklist.
2. Arrival. Upon arrival at the facility or area, the members of the audit team will meet

with the Center Supervisor/Area Manager for introductions. The Team Leader will ask whether there are any specific areas needing review or potential problem areas.

3. Entrance Meeting. An entrance meeting with selected staff will then be conducted. At this meeting, the Center Supervisor/Area Manager will provide the audit team with a description of the Center/Area Office, accomplishments, introduction of key staff, and designated primary liaison. He/she may want to provide information the audit team leader can use in the important part of the report concerning "quality of life." The quality of life statement that the ACA auditor must include in his/her report addresses consideration of staff training, room size, time outside room, current population, adequacy of medical services, offender programs, recreation, food service, classification, sanitation, use of segregation, crowding, and reported and/or documented incidents of violence. The facility representative/presenter will also supply the Team chief/Leader with a copy of the last accreditation or annual audit report and where applicable a copy of the facility outcome measures.

**J. — Audit Team Auditing Process Overview.** Following is an overview of key aspects of the internal ACA audit process. This process parallels the process used by ACA.

1. Arrival. Upon arrival at the facility or area, the members of the audit team will meet with the center supervisor or area manager for introductions and the team chief will ask whether there are any specific areas needing review or potential problem areas.
2. Entrance Meeting. An entrance meeting with selected staff will then be conducted. At this meeting the facility representative will provide the audit team with a description of the unit, accomplishments, introduction of key staff, and designated primary liaison. Next, the team chief introduces the audit team.  
Next, the Team Leader introduces the audit team members to include a brief summary of their work experience and credentials, then describes the audit purpose and planned audit activities/schedule. Following this the facility administrator will give a brief tour. As part of the tour the facility administrator will show the team where the required documentation can be found. For the "real" ACA audit, this includes items mentioned in paragraph 7-12 above. At this point audit team members go with an assigned staff person to conduct the audit.
3. Auditor Tasks. Auditors will follow guidance in paragraphs 7-14 and 7-15. Auditors will write reports and may be tasked to conduct follow up audits.

4. Exit Meeting. Audit team members will give a report of the areas they inspected. Areas/problems that do not meet ACA expected practices will be identified. The Team Leader will summarize the audit team chief will conduct an exit meeting with key staff to briefly cite findings in order to facilitate and note if there are any areas that require immediate corrective action.

**K.**

- G. ACA Internal Audit Guidance for Auditors and Staff.** The following guides auditors in evaluating and documenting compliance. ~~This information is provided to ensure adequate—but not excessive—documentation is placed in the ACA files for review by ACA.~~

auditors.

1. General. Components of the facility review include the following:

- a. Direct observation of physical evidence.
- b. Verbal evidence obtained by interaction and interviews with staff and offenders.
- c. Written evidence to include policy, procedures, inspection reports, and offender records.
- d. Audit of all standards/expected practice files and accompanying documentation to ensure proper evaluation of compliance, non-compliance levels, or non-applicability.
- e. Conducting employee and/or offender interviews as needed.
- f. Any mandatory standard thought to be in non-compliance or a serious breach of safety or security will immediately be reported to the facility or area administrator for corrective action.
- g. Prior to a final finding of non-compliance, the standard will be reviewed by all team members.
- h. All agency program records, personnel, and properties relevant to the audit being conducted will be made available to the audit team.

2. Exceptions. In some situations, corrective action is not necessary for accreditation standards/expected practices where State statute and/or physical plant limitations preclude the agency from meeting a particular standard(s). In addition, corrective action is not required if an accreditation waiver is in place for any standard/expected practices. Auditors must report all standards/expected practices that are not met for such reasons and provide the Area Manager/Center Supervisor's explanation. For example, if a deficiency is found in square footage, the amount of square feet must be indicated.

3.

1. Review of Personnel and Offender Records. Auditors must review a random selection of personnel and offender files to ensure forms are completed properly and records are up to date. ~~(2-CO-1E-09)~~ to-date. For Parole/Probation offender records, the auditor must use the regular case file audit form.

4. Review of Outcome Measures. Outcome measures must be examined early in the audit process. If the outcome measures or related analysis by the facility staff suggest potential problems, auditors must look for procedures and factors that contributed to the poor numbers. All outcome measures must be submitted to the Accreditation Coordinator prior to ACA audits. Individual Centers or offices cannot submit outcome measures directly to ACA.

5. 2. Review of ACA Audit Electronic File Folders. Auditors will assess the adequacy of file documentation prepared by DCGACC staff.

a. Parole/Probation/Parole Services maintains one set of electronic accreditation folders in each Area and these are audited during internal audits.

b. The Parole/Probation Services ACA Coordinator maintains another set of electronic accreditation folders for the entire Parole/Probation/Parole Services division rather than having separate folders for each area. These folders must be



~~reviewed annually by both Probation/Parole Administrators, consisting of documentation from various Areas, and this documentation is audited during external audits.~~

- c. In addition, a checklist approved by the Deputy Director of ~~Parole/~~Probation/~~Parole~~ Services ~~will~~must be used as a basis for auditing each Area. ~~These area audits will be conducted by an Area manager from a different area and the Probation/Parole Administrator from the area being audited.~~
- b.d. The first step in reviewing ACA documentation folders is to determine whether the expected practice (standard), ~~to include relevant aspects in the comment, is adequately addressed in the protocols (primary documentation; usually as expressed in a policy).~~ The next step is to determine whether the expected practice (standard), ~~to include relevant aspects in the comment, is being done, has been met~~ as evidenced by the process indicators (secondary documentation). ~~When the highlighted portion of the protocol/policy requires more than the ACA standard the process indicators (secondary documentation) must reflect compliance with the protocol/policy. For example, if the expected practice is to conduct one emergency drill each quarter, but agency policy requires one drill each month, then the process indicators (secondary documentation) must show monthly drills to be considered adequate.~~
- e. ~~Auditors should interpret standards strictly; it is detrimental to the audit process to give the benefit of the doubt to the facility or area office. If a conclusion is questionable or a standard/expected practice is not fully documented, the auditor should conclude non-compliance. Auditors will typically bring non-compliance issues to the attention of the facility representative or designee during the audit to allow the representative time to find and provide more complete documentation when available.~~
- d. ~~Re-accreditation will require staff to maintain file documents over a three-year period. The three-year period begins the date accreditation is awarded by the ACA Commission on Corrections. The latest copy of any policy must be present in the file folder. New policy may mean limited documentation. If practice has changed, proof of practice should be evident by process indicator documentation (secondary documentation). When documentation collected before the policy change does not adequately show compliance with the expected practice, appropriate action should be taken such as a note of explanation, and if appropriate, a copy of the old policy.~~
- e. ~~Documentation of expected practices pertaining to "environmental conditions" is required only once during the three-year period unless there is a substantial change in the environment. Documentation is usually done in the third year of accreditation for expected practices pertaining to environmental conditions.~~
- f. ~~For those standards/expected practices that are not re-occurring events over the three-year period, a memo should be available indicating that the condition(s) has not occurred.~~

~~g. Compliance with physical plant requirements.~~

~~h. Accuracy and completeness of staff and client records.~~

✚ In Area Offices, emphasis is placed on those files that address parolee/probationer/~~parolee~~ supervision, case record maintenance to include eOMIS and paper records, and caseload management.

~~j-f~~ ACA requires neat and legible ~~file~~ copies. Accreditation Managers must not over document. The ACA has indicated that documentation could be reduced by as much as 60 to 70 percent ~~in many cases~~ and still be sufficient to support compliance with ~~a standard or an~~ expected practice.

k. ~~ACA has stated that there is no need to go beyond the requirements of the standard or expected practice when supplying ACA documentation. Copies should be attached to the file folders, allowing sufficient space for easy reading of documents without removal. Copies should be in portrait orientation, avoiding landscape printing unless there are no other alternatives. All legal size documents should be reduced to letter size.~~

~~1. ACA prefers singled sided copies because they can be reviewed more efficiently.~~

~~m. The most recent primary documentation available must be used.~~

**n. Accreditation:** ACA Managers should choose a method of proving compliance and remain consistent. Ideally, the same method should be used at each Center.

~~e. Auditors should ask staff for additional documentation when documentation is insufficient. Staff may provide documentation from existing files. h.~~  
Staff must not create additional documentation once the external ACA audit has begun (per ACA guidance).

p.

i. Be aware of problematic ~~standards, expected practices.~~ Ensure documentation reflects compliance with the entire ~~standard. For example, evacuation drill documentation should reflect all areas of the facility were evacuated at least quarterly on each shift when the majority of offenders are present.~~ expected practice.

## L.

## H. Reports and Follow-up Audits.

1. **4.—Audit Report.** Each auditor will provide ~~their~~his/her report to the Team ~~chief~~Leader within ~~three (3-work)~~ business days. Reports must include all expected practices (~~standards~~) found to be in noncompliance, citing the reference number, then the finding including recommended corrective action where deficiencies are noted. Although not required, additional observations may be included.



The audit team ~~chief leader~~ must prepare a final written audit report within ~~10 work~~ 30 business days of the site visit. Audit reports identify each subject area inspected and departure from established policy or procedural guidance. Other appropriate content includes the following: effective practices and programs, enhancements and accomplishments and, recommended corrective action where deficiencies are noted.

2. ~~2. Initial Follow-up Report and Actions.~~ The audited Area Manager/Center Supervisor must submit an initial ~~response to the~~ report within 30 ~~calendar~~ days. For each audit finding, the report must indicate agreement or disagreement with the finding, corrective action taken/planned or an explanation why correction is unnecessary, when corrective action was or will be taken, and the person responsible for implementing the action(s).
3. ~~Subsequent Progress Reports.~~ Subsequent progress reports must be made monthly until problems are adequately resolved. The audited Area Manager/Center Supervisor must ensure timely resolution of identified problems.
4. ~~Distribution of Reports.~~ Send all audit reports to the Center Supervisor/ Area Manager, appropriate ~~deputy/assistant director, with a copy to the audited Area Manager, Parole/ Probation/ Parole Administrator or Center Supervisor, and DCC ACA Accreditation Coordinator.~~
5. ~~Follow-up Audit.~~ The DCC ACA Accreditation Coordinator, audit team chief, audited area manager/center supervisor, or audited Probation/Parole Administrator may recommend a follow-up audit. Follow-up audits will be authorized by the Assistant Director, appropriate Deputy ~~assistant director, Director and ACA Coordinator.~~
3. Follow-up to Resolve Failed Expected Practices. For internal audits, the responsible Center Supervisor or Area Manager must ensure appropriate action is taken to resolve all failed expected practices and must submit a progress report quarterly through the supervision chain to the Deputy Director with a copy to the ACA Coordinator until resolved.

The ACA Managers must monitor progress on resolving failed expected practices to help ensure timely resolution.

## VI. WELCOME BOOK FOR ACA EXTERNAL AUDITS.

Staff responsible for preparing a Welcome Book must have it reviewed and approved through the supervision chain to the Deputy Director in sufficient time so any necessary corrections can be made and the final copy can be sent to the ACA external auditors no later than two (2) weeks before a scheduled external audit.

The Welcome Book must include at a minimum:

- an appropriate cover page
- history of the agency and Center or Parole/ Probation. This may include newspaper articles and descriptions of programs and accomplishments

- agency documents to include:
  - ACC Mission Statement, philosophy and motto
  - ACA “Organization Summary” (an ACA form)
  - “Self Evaluation Report” (using ACA format) that includes:
    - Self Evaluation Report cover sheet (an ACA Form)
    - Compliance Tally (an ACA form)
    - Not Applicable Expected Practices (an ACA form)
    - Noncompliant Expected Practices (an ACA form)
    - The applicable “Outcome Measures Worksheet” (an ACA form)
    - Significant Incident Summary (an ACA form)
- Facility Information. For Centers, this includes a facility description, facility schedule, map/diagram of the residential and administrative buildings and facility menu.
- Staffing. This includes an organization chart, staff contact information, and may include positions authorized/filled/vacant
- “ACA Auditor Information Sheet” (an ACA form)
- For Central Office audits, a litigation summary limited to case number, cause of action, and the resolution of any class action suits and consent decrees. When there is a decree, information should be detailed and include the scope and specific requirements. Individual actions need not be included.



## Arkansas Community Correction

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### ADMINISTRATIVE DIRECTIVE: 17-27 Equipment Inventory, Transfer and Disposition

**TO:** Arkansas Community Correction Employees

**FROM:** Sheila Sharp, Director

**SUPERSEDES:** None

**APPROVED:** Signature on file **EFFECTIVE:** April 28, 2017

- I. APPLICABILITY.** This policy applies to all Arkansas Community Correction (ACC) employees.
- II. POLICY.** ACC policy is to properly account for equipment by following proper inventory, transfer and disposition policy guidance.
- III. GUIDANCE.**
  - A. Equipment Inventory Requirements.**
    1. Weapons, computers, laptops, and AWIN radios (Arkansas Wireless Information Network) must be on the AASIS inventory regardless of the cost, but any other equipment valued at \$500 to \$2,500 does not need to be on AASIS inventory.
    2. Equipment that is a fixed or movable tangible asset with a useful life greater than a year and a unit cost of \$5,000 or more must be on the AASIS inventory.
    3. Low Value Equipment with a useful life greater than one year and a unit cost between \$2,500 and \$5,000 must be on the AASIS inventory.
    4. Area Managers and Center Supervisors must keep a supplemental inventory apart from AASIS for computers, signature pads, weapons, vests, cell phones, vehicles and vehicle radios.
    5. Equipment procured for an amount less than the threshold amounts above (established on July 1, 2001) that is currently on the department's asset master records must remain on inventory until proper disposition.

**B. Equipment Not Tracked.** The following items do not need to be on inventory:

- **Replacement Parts.** Replacement parts for an inventory item such as a motor or an air conditioner compressor will not be entered into inventory.
- **Integral Parts of a System.** Items that constitute an integral part of a system such as a pump or motor or chemical mixer for water or sewer systems are capitalized as part of the building or structure.
- **Permanent Fixtures.** An item that is a permanent fixture, such as a hot water heater, range vent-a-hood, walk-in freezer, or built-in heating and air conditioning is capitalized as a part of the building or structure, and not shown in AASIS as capital equipment.

**C. Accountability, Roles and Responsibilities**

Employees are responsible for proper care, use and protection of agency property. Property includes physical property items such as buildings, vehicles, computers, guns, and supplies, and other property such as software and offender records whether or not such property is on inventory records. Any employee can be made to pay for lost, stolen, or damaged property when reasonable care was not taken to properly use and protect the property.

Any employee may have another employee sign a temporary property transfer receipt when property is borrowed. However, permanent property transfer records in AASIS must be updated when property is transferred. Any employee who regularly uses an item on the inventory list must sign form "Receipt of ACC Property," or "Authorization and Receipt for Weapons and Security Equipment," and provide it to the designated Local Resource Control Officer and/or Weapons Control Officer. Employees must make their Local Resource Control Officer aware of inventoried property when it is relocated permanently by providing a copy of the appropriate transfer form.

**D. Deputy Directors / Area Managers / Center Supervisors**

Deputy Directors must perform or delegate these inventory accounting responsibilities for their equipment/staff at Central Office and ensure Area Managers and Center Supervisors are fulfilling their responsibilities.

Area Managers and Center Supervisors must:

- Perform the duties of, or assign and supervise, a Local Resource Control Officer and, when applicable, a Weapons Control Officer
- Ensure inventories are conducted properly
- Ensure inventory records are maintained, and
- Ensure compliance with this policy and the Weapons and Security Equipment policy.

#### **E. Local Resource Control Officer**

The Local Resource Control Officer performs administrative functions on behalf of the responsible supervisor. The supervisor may assign the following responsibilities to this person:

- Receipt, inventory and transfer of acquired equipment
- Obtaining completed forms “Receipt of ACC Property” or “Receipt for and Authorization to Carry Weapons and Security Equipment” from each employee who regularly uses equipment on the AASIS and ACC inventory lists
- Conducting an initial investigation when property cannot be found, and timely reporting such property to the appropriate supervisor.

#### **F. Central Physical Asset Control Officer**

The Central Physical Asset Control Officer is located in the Administrative Services division at Central Office and is responsible for the following:

- Training Local Resource Control Officers
- Assisting area offices/centers with annual inventories
- Processing the required forms and transactions for AASIS inventory transactions that are not assigned to the Local Resource Control Officers
- Removing equipment from asset listing upon authorization from the DFA Marketing and Redistribution section (M&R)
- Report to Arkansas Legislative Audit a loss of public funds that amounts to one thousand dollars (\$1,000) or more in one calendar year, including without limitation:
  - Apparent unauthorized disbursements of public funds; or
  - The apparent theft or misappropriation of public funds or property (Arkansas law section 25-1-124).

#### **G. Weapons Control Officer**

The Weapons Control Officer follows guidance in the weapons policy to control and inventory weapons.

#### **H. Receipt and Inventorying of Acquired Equipment**

The Local Resource Control Officer of the area/center must:

- update AASIS equipment records, including description, serial number, room number, license plate number and date last inventoried fields. This requires Asset Technician role mapping in AASIS. To update the AASIS asset master record, use the transaction

AS02 and the asset shell number. To obtain the equipment's asset shell number, review the account assignment tab on the applicable purchase order in AASIS:

- General Tab
    - “Serial Number” - Enter equipment's serial number
    - “Inventory” - Enter the ACC tag number
  - Time-Dependent Tab
    - “Room Number” - Enter area of the physical assignment location of the equipment
    - “License Plate Number” - Enter any additional location information
- affix an ACC tag number to the equipment upon receipt

#### **I. Transfer of Equipment to another Area Office, Center or Central Office**

The Local Physical Asset Control Officer must use the “Equipment Transfer” form when inventoried equipment/property is transferred to another ACC Area, Correction Center or the Central Office. The form must be filled out completely and be signed by the Local Physical Asset Control Officer. Included on the form must be the AASIS asset shell number, description serial numbers and property tag numbers. However, the sending location must not update the room number field for the new location of the equipment. The sending location must send the original form with the equipment being transferred and retain a copy for their records.

The receiving location must verify the information on the form, sign and return a copy to the sending location for their files and send a copy to the Central Physical Asset Control Officer. The receiving location must update the room number in AASIS to reflect the new location of the equipment.

#### **J. Disposal of Equipment**

It is a violation of State law to dispose of any equipment without the authorization of Department of Finance Administration, Marketing & Redistribution Division (M&R). Broken, inoperable, or obsolete equipment must be safeguarded and kept on inventory the same as any serviceable equipment item until it is disposed of as described in this section.

When equipment is no longer needed or is unused, the Local Resource Control Officer must ask other ACC departments if they can use it unless the equipment is obviously of no use, is beyond repair, or is too expensive to repair.

If unable to relocate surplus equipment within the department and for non-working equipment that is beyond repair or too expensive to repair, the following must occur:

1. The Local Resource Control Officer must submit an Equipment Disposal Request form to the Central Physical Asset Control Officer.

2. The Central Physical Asset Control Officer must process Equipment Disposal Request forms as follows:
  - for computer and electronic equipment, forward the form to the Information Technology section.
  - for other equipment, submit an electronic request to the state Marketing and Redistribution office (M&R) asking for approval to dispose of the equipment.
3. The Information Technology section, upon receipt of an “Equipment Disposal Request form, will determine whether the equipment needs to be redistributed within the agency, turned in to Information Technology for processing or turned in to M&R.

Note: The intent of Arkansas law sections 25-34-101 through 111 is to achieve the maximum possible benefit from use of agency owned computers, electronics, and peripherals; to achieve maximum benefit from the sale of surplus agency assets; and to protect the public health, safety, and the environment by mandating steps be taken to address the solid waste management of computers and other electronic solid waste statewide.

The Information Technology section has 30 days evaluate whether the computer or electronic equipment can be put to further use by the agency. Before making a determination that equipment should be disposed of, the Information Technology section must determine that the agency does not anticipate using the equipment within the next six months and that the equipment is not needed by the agency. (Reference: Department of Information Systems policy guidance)

The Information Technology section must ensure all hard drives of surplus computer equipment are degaussed, cleared of all data and software, and are otherwise prepared for sale within 90 days after replacement. (Arkansas law section 25-34-104)

The Information Technology section may keep a back stock of computer hardware and electronics for the purpose of parts harvesting for the repair, maintenance, and upgrade of computers in use. This back stock must not exceed ten percent of the number of state employee computers in the agency. (Arkansas law section 25-34-104)

4. M&R will send to the Central Physical Asset Control Officer an approved “Certificate of Property Disposal” form stating the approved type of disposal, which may differ from the requested method. The form will be forwarded to the Local Physical Asset Control Officer for appropriate action.
5. The Local Physical Asset Control Officer must follow instructions provided by M&R and use the Equipment Transfer form.
6. If equipment is turned in to M&R, the M&R office will send electronic notice to the Central Physical Asset Control Officer informing him/her the equipment has been “REC” (received) and then the equipment may be removed from inventory.



7. If equipment is approved by M&R to be disposed of locally, the Local Physical Asset Control Officer must follow M&R guidance for disposal and documentation; and process the Equipment Transfer form. The Central Physical Asset Control Officer will in-turn process the paperwork with M&R to obtain approval to remove the equipment from inventory.

#### **K. Lost/Stolen Equipment on AASIS and ACC Inventory**

Any equipment deemed to be lost or stolen must immediately be reported to the appropriate Area Manager, Center Supervisor, Deputy Director, Internal Auditor and Central Physical Asset Control Officer.

For lost or stolen weapons and security equipment, also see the Reporting and Investigating Incidents, Hazards and Maltreatment policy and Weapons and Security Equipment policy.

For equipment that is on the AASIS inventory, when a report of an item deemed to be lost or stolen is received, the Central Physical Asset Control Officer must ensure actions described in the DFA Financial Management Guide are taken in a timely manner. The Central Physical Asset Control Manager must ensure the responsible Deputy Director is aware of the process and he/she manages the process to ensure requirements are met.

#### **L. Physical Inventory of Equipment**

Deputy Directors, Area Managers and Center Supervisors are responsible for the safeguarding and the accountability of the equipment assigned to their physical location. Physical equipment inventories must be made upon changes in key personnel.

All locations within the department must conduct an annual physical equipment inventory during the months of January, February and March. The inventory must be coordinated through the Administrative Services Section, which will report the results to the Management Team.

### **IV. REFERENCE / FORMS.**

AD 17-27 Form 1, Receipt of ACC Property  
AD 17-27 Form 2, Equipment Transfer  
AD 17-27 Form 3, Equipment Disposal Request



## **Arkansas Department of Community Correction**

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### **ADMINISTRATIVE DIRECTIVE: 06-23-17-15 TRANSPORTATION OF OFFENDERS RELEASED TO COMMUNITY SUPERVISION AND DISCHARGE**

**TO: ~~DEPARTMENT OF ARKANSAS~~ COMMUNITY CORRECTION  
EMPLOYEES**

**FROM: ~~G. DAVID GUNTARP~~ SHEILA SHARP, DIRECTOR**

**SUPERSEDES: ~~NONE~~ AD06-23**

**PAGE 1**

**APPROVED: Signature on File EFFECTIVE: NOVEMBER 8, 2006**

**I. POLICY.** It is Department of Community Correction (DCC) policy ~~to assist and work in cooperation with the Arkansas Department of Correction (ADC)~~ to ensure a safe, timely and smooth transition of offenders released from custody to the community.

#### **II. GUIDELINES PROCEDURES.**

**A. ~~Offenders~~ Residents** are responsible for arranging their release transportation from the correctional units/centers.

**B. Residents must arrange for an authorized family member, or friend either of which must be on the resident's approved visitation list to provide transportation from the center to the supervision plan location.**

**BC. If resident is unable to secure transportation with an authorized family member or friend. Public non-departmental transportation will be arranged on the day designated by the Center Supervisor, to the supervision plan location.**

**~~The Institutional Release Officer (IRO) will work with offenders to ensure transportation arrangements are made for each offender to be released. Staff will work in cooperation and coordination with the ADC and other DCC divisions to ensure~~**

***"We provide opportunities for positive change."***

~~the availability of offender transportation to their homes or other approved locations.~~

~~CD.~~ The actual release of an ~~offender resident~~ to DCC community supervision is subject to the availability of transportation to the supervision plan location.

~~E.~~ There are some instances where an offender ~~granted release is unable to secure non-departmental transportation to the release plan location.~~ In such instances, the following procedures should be followed:

- ~~1. IRO will notify the Center Supervisor/Warden (or designee).~~
- ~~2. The Center Supervisor, or designee, will contact the appropriate Parole/Probation Area Manager to determine a date and time for a Residential Services Transportation Officer to transport the resident to the Parole/Probation Office nearest the resident's supervision plan.~~
- ~~3. Following arrival of a resident at the Parole /Probation Office, a Parole/Probation Officer will notify the offender of the arrival of his/her transportation, secure commercial transportation, or transport the offender to the approved plan address. If the offender must await non-departmental transportation, staff shall remain at the location of the offender until his/her transportation arrives and departs.~~

~~DE.~~ Arrangements for transportation must be confirmed no later than the day before and must be made by noon on the day designated by the Parole/Probation Manager.

~~G.~~ The Institutional Release Officer (IRO) will work with residents to ensure transportation arrangements are made for each resident to be released. Staff will work in cooperation and coordination with the ADC and other DCC divisions to ensure the availability of offender transportation to their homes or other approved locations.

~~H.~~ The Center Supervisor is the authority for assigning transportation duties within residential services and may establish a pool of transportation officers from among center staff.

~~EI. Parole/Probation Managers are the authorities for assigning transportation duties in the field and may establish a pool of transportation officers from among the certified law enforcement officers.~~

~~FH.~~ Existing DCC policy and procedures shall guide transportation activities, incidents, etc.

~~III. PROCEDURES. There are some instances where an offender granted release is unable to secure non-departmental transportation to the release plan location. In such instances, the following procedures should be followed:~~

- ~~— A. IRO will notify the Center Supervisor/Warden (or designee).~~
- ~~— B. The Center Supervisor/Warden (or designee) will contact the Parole/Probation Manager and arrange for an ADC or DCC (as appropriate) Unit Transportation Officer to transport the offender to the Parole/Probation Area Office nearest the offender's home plan area on a date approved by the DCC Parole/Probation Manager.~~
- ~~— C. Following arrival of an offender at the Parole/Probation Office, a Parole/Probation Officer will notify the offender of the arrival of his/her transportation, secure commercial transportation, or transport the offender to the approved plan address. If the offender must await non-departmental transportation, staff shall remain at the location of the offender until his/her transportation arrives and departs.~~



## 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: ~~13-09 VOLUNTEER SERVICES~~ 17-30 Volunteer Services

~~TO: DEPARTMENT OF COMMUNITY CORRECTION EMPLOYEES~~

~~TO:~~ Arkansas Community Correction Employees

FROM: Shelia Sharp, Director

SUPERSEDES: AD ~~11-09~~ Page 113-09

APPROVED: Signature on File  
31, 2017

EFFECTIVE: ~~April 1, 2014~~ May

Note, some revisions made to forms will NOT be marked up to show revisions. This is because Microsoft Word software does not create markup text in tables when we use the "compare documents" function, and we usually create forms in tables. Occasionally we use a table in the body of a policy. Portions of the forms associated with this policy are created in tables.

- I. ~~1.~~ **APPLICABILITY.** This policy applies to all Arkansas Community Correction (ACC) ~~staff~~employees. In a manner generally interpreted to be appropriate, this policy also applies to ACC agents. (4APPFS-3C-02) and ~~people from the community~~individuals who participate in the Volunteer Program.
- II. **POLICY.** The ACC will administer a Volunteer Program that encourages, supports, and recognizes the value of community involvement;; expands and enhances client services and opportunities;; and benefits; and supports the ACC mission. (2-CO-1G-04; 4-APPFS-1C-04)

### III. DEFINITIONS.

- A. ~~A.~~ **Occasional Volunteer.** A volunteer who provides services to or on behalf of the ACC ~~three or fewer times per calendar year~~ and is supervised and escorted at all times while ~~with offenders in the office or facility.~~
- B. ~~B.~~ **Regular Volunteer.** A volunteer, including interns and mentors, who provides services to or on behalf of the ACC ~~more than three times per calendar year~~ on a recurring basis.
- C. **Mentor.** A volunteer, including eligible offenders, who provide assistance to residents/offenders who are transitioning to the community.

### IV. GUIDANCE.

A. **Recruiting Volunteers.** Volunteers should be recruited from all cultural and socioeconomic segments of the community without discrimination. Volunteers may serve as advisors, interpreters, and similar direct service roles. (2-CO-1G-01; 4-ACRS-7F-08; 4-APPFS-1C-05; 4-APPFS-1C-03)

#### B. Volunteer Requirements.

1. Prospective volunteers must disclose any criminal history and be subjected to a criminal background check.
  - a. Mentor Volunteers may be approved while on active supervision after completing a minimum of 12 months of supervision with the recommendation of the appropriate Area Manager and the approval of the Assistant Director of Reentry.
  - b. Individuals not on supervision but with a criminal conviction within the last ten (10) years must be approved by the Chief Deputy Director or designee.
2. A volunteer must NOT work in a community correction center if he/she is related to a current resident at the facility in which he/she is requesting to volunteer.
3. If necessary, a volunteer must provide documentation of professional qualifications, such as professional licenses or certifications.
4. A volunteer must complete the appropriate Volunteer Application, sign the Waiver of Liability form, and complete volunteer training and orientation.

#### C. Volunteer Responsibilities. Volunteers are responsible for the following:

1. Complying with the volunteer and other applicable guidelines for specific volunteer program.

2. Documenting volunteer hours on the Monthly Volunteer Time Sheet (AD 17-30 Form 4) and ensure the Volunteer Coordinator has the information on the last day of each month.

3. Submitting appropriate suggestions, comments, and ideas for program improvement to the Volunteer Coordinator. (2-CO-1G-09; 2-CO-1G-10)

**D. Volunteer Training.** Regular volunteers and mentors must complete a three-hour training that includes all topics outlined on the Regular Volunteer Training Checklists, including specific training for the program to which they are assigned. Occasional Volunteers must complete a one-hour orientation that includes all topics outlined on the Volunteer Orientation Checklist.

#### **IV. ROLES AND RESPONSIBILITIES. (2-CO-1G-03; 4-ACRS-7D-04; 4-ACRS-7B-05)**

**~~Chief Deputy A.~~ Assistant Director of Reentry.** The ~~Chief Deputy Assistant~~ Director of Reentry provides oversight and direction for volunteer services consistent with ACC policy and procedures. He/she ensures the development and implementation of procedures for communicating with volunteers and for gaining volunteer input for program evaluation.

**B. Volunteer Program Manager.** The Volunteer Program Manager (VPM) reports to the Assistant Director of Reentry Services and is responsible for managing and coordinating the statewide volunteer program. The VPM organizes and fosters re-entry coalitions; solicits input for the volunteer program from employees, volunteers, clients, and the community; and monitors volunteer activities throughout the state. The VPM must develop and maintain generic volunteer job descriptions, report volunteer and religious activities, and collect and process suggestions-evaluations. The VPM must consult with designated chaplains and volunteer coordinators at least annually to review procedures guiding ministers, volunteer coordinators, and volunteers; and review and evaluate the volunteer services program. (2-CO-1G-02; 2-CO-1G-10)

**C. Center Supervisors & Parole/Probation Managers.** Center Supervisors and Parole/Probation Area or Assistant Area Managers must designate an employee to serve as the Volunteer Coordinator for their area of responsibility. Center Supervisors and Parole/Probation Area Managers must notify the Volunteer Program Manager of any changes to the volunteer coordinator.

**~~D. Employees Volunteering.~~** ~~ACC employees must NOT perform volunteer work for ACC.~~

**~~E. Volunteer Coordinator.~~** The Volunteer Coordinator is responsible for the following:

~~1. Coordinating volunteer activities and services with the VPM.~~

~~2. Acting as a liaison between the VPM and the Center or Area.~~



- ~~3. Determining the need for ALL volunteers in their areas of responsibilities and coordinating with the VPM concerning needed services.~~
- ~~41. Reporting volunteer hours as requested by the VPM.~~
- ~~5. 2. Conducting a criminal record check checks on regular all volunteer applicants in accordance with state and federal laws. This record will include comprehensive identifier information to be collected and run against law enforcement indices to determine whether there are A criminal convictions that may adversely affect job performance or service delivery. If conviction does not automatically preclude a volunteer from participating in the volunteer program.~~
- ~~a. Forwarding any suspect information returned during criminal records checks on matters with a potential terrorism connection is returned, it must be forwarded to the ACC Internal Affairs Administrator for remitting to the local Joint Terrorism Task Force or the Arkansas State Police.~~
- ~~b. If there is a substantive criminal history, provide providing the information with the application when reviewed by the Center Supervisor or Area Manager. (4-ACRS-7B-05, 4-APPFS-3A-02)~~
- ~~6. Conducting a reference check on regular volunteer applicants.~~
- ~~73. Ensuring each regular volunteer has a relevant job description. Generic job descriptions provided by the VPM may be tailored training is accomplished pursuant to fit a particular job this policy.~~
- ~~8. Ensuring a volunteer supervisor is assigned for each volunteer.~~
- ~~9. Ensuring occasional volunteers do not work more than 3 times in a calendar year.~~
- ~~10. Ensuring each occasional volunteer is informed of the volunteer guidelines and complete the Volunteer Guidelines and Release and Waiver of Liability form (AD 13-09 Form 2) before providing volunteer services.~~
- ~~11. Ensuring efforts are made to recruit and retain volunteers.~~
- ~~12. Maintain 4. Maintaining required certificates or licenses of volunteers in accordance with the Records Retention policy.~~
- ~~13. Ensure training is accomplished pursuant to guidance in the "Volunteer Orientation Checklist."~~

~~14. For regular volunteers, the Volunteer Coordinator must:~~

- ~~a. ensure each volunteer successfully completes orientation according to the Volunteer Orientation Curriculum and Volunteer Orientation Checklist form and receives training necessary to enable him/her to safely, efficiently, and effectively fulfill the job responsibilities prior to assignment. (2 CO 1G-07; 4 ACRS 7F-09)~~
- ~~b. ensure the volunteer applicant signs the "Volunteer Guidelines, Release & Waiver of Liability Agreement," (AD 13-09 Form 2) during the orientation session. Keep the signed original with the application and give a copy to the applicant. (2 CO 1G-08; 4 APPFS 1C-06; 4 APPFS 1C-07)~~
- ~~c. ensures the volunteer receives a position description and it is explained before beginning duties.~~
- ~~d. volunteers may not have access to sensitive or confidential client data without authorization from an ACC Assistant Director, Treatment Director, or higher and they must have signed the Volunteer Orientation Acknowledgement form to indicate their agreement to abide by confidentiality requirements and applicable policies. (4 APPFS 1C-07; 4 APPFS 3C-03)~~
- ~~e. Where required, ensure tests are completed and results indicate adequate understanding of the material.~~

~~F. Volunteer Supervisor(s). The person assigned to supervise a volunteer must ensure/accomplish the following:~~

- ~~1. Conduct an initial informal interview with prospective volunteers to assess interests, motivation, job related knowledge, skills and abilities, training needs, job interests, expectations, and coordination of any service activities. Placement of volunteers should be in jobs where the volunteer can be successful and assist the agency in achieving its mission or fulfilling its responsibilities. Student volunteers should be provided duties and responsibilities that serve their educational goals while supporting the agency mission.~~
- ~~2. When a new volunteer is approved, an email must be sent to the VPM requesting an ID badge. If the volunteer is an intern, a digital photo must be included. The VPM will ask HRS to make and provide an ID badge that clearly identifies the person as a volunteer. All volunteers must wear their identification badge. (2 CO 1G-06 4 ACRS 7F-10)~~
- ~~3. Within the scope of the job description, define volunteer duties and designate the frequency in which they will be performed during a specific period.~~
- ~~4. Work with the Volunteer Coordinator to ensure initial orientation and training are accomplished as described in the Volunteer Orientation Checklist; assess further training needs and provide for on-the-job training.~~

- ~~5. Supervise the volunteer's day-to-day work, as appropriate.~~
  - ~~6. Ensure volunteers record the date(s) and hours worked. The Volunteer Time Sheet (AD 13-09 Form 4) may be used.~~
  - ~~7. Update all volunteers on new or revised policies that affect them.~~
  - ~~8. Provide monthly reports, as established by the VPM, to the Volunteer Coordinator for reporting.~~
  - ~~9. Provide support, routine consultation and clarification of policies and procedures for the volunteers.~~
  - ~~10. Upon request or as established with the educational program, supervisors of intern volunteers must provide the instructor with a written evaluation of the intern volunteer's performance.~~
  - ~~11. Ensure volunteers do not directly perform professional services unless specifically and lawfully credentialed to do so, for example, performing medical services or social work. (4 ACRS 7B-03)~~
  - ~~12. Distribute, collect, and forward any suggestions or input from a volunteer to the VPM. Evaluation should be a routine part of the volunteer experience; however, when a volunteer gives notice that they will no longer volunteer with the agency, an evaluation form should be provided at the exit interview.~~
  - ~~13. Perform an exit interview with the volunteer, if conditions permit, to solicit feedback about the volunteer's experience and suggestions for improvement, using the Volunteer Program Suggestion and Evaluation form.~~
  - ~~14. If a volunteer or intern is unable to provide adequate services or does not comply with policies, the supervisor must take appropriate action including terminating services. Supervisors should consider establishing an end date for the regular volunteer's services. Others in the supervision chain may also take action to terminate a volunteer's services.~~
  - ~~15. Consider safety and security when selecting volunteers and assigning duties.~~
- ~~**G. Recruiting Volunteers.** Volunteers should be recruited from all cultural and socioeconomic segments of the community without unfair discrimination. Volunteers may serve as advisors, interpreters, and similar direct service roles. (2 CO 1G-01; 4 ACRS 7F-08; 4 APPFS 1C-05; 4 APPFS 1C-03)~~
- ~~**H. Volunteer Application & Approval Process.** Occasional volunteers are not required to complete an application or have a background check. Occasional volunteers are limited to working a maximum of three times per calendar year; in order to work more they must meet the requirements for a regular volunteer.~~

- ~~— A supervised group of volunteers (such as a choir) is not required to meet the qualifications of a regular volunteer. However, each group member must complete the Volunteer Guidelines and Release and Waiver of Liability form (AD 13-09 Form 2).~~
- ~~— With approval from the Center Supervisor, former center residents may volunteer at the centers provided they meet the same criteria as other occasional or group volunteers.~~
- ~~— Persons wanting to be regular volunteers must submit a Volunteer Application (AD 13-09 Form 1). The Volunteer Coordinator must complete both the background and reference check and indicate completion. The Volunteer Coordinator will give the application and background check to the appropriate supervisor.~~
- ~~— The supervisor will contact the volunteer applicant and schedule an interview. The volunteer supervisor will review volunteer applications to determine suitability as ACC volunteers. (2-CO-1G-05;)~~
- ~~— The volunteer supervisor will record a recommendation on the application (AD 13-09 Form 1) and forward it to the Center Supervisor or the Area Manager who will make a final decision and return the application to the Volunteer Coordinator. The review and approval process must be completed on all volunteer requests within 15 days of receiving the volunteer application. The Volunteer Coordinator will notify the applicant of the decision. If the application is denied, it will be kept in a file marked "Denied Volunteer Applicants".~~
- ~~— The Volunteer Coordinator must keep on file the applicant's application, background check, waiver, and a copy of the position description and documentation of recognition activities. A record of volunteer hours should be kept.~~
- ~~— If an approved volunteer completed all orientation processes and wishes to extend his/her activities outside of the initial volunteer site, the volunteer is not required to complete duplicative paperwork. Upon request, the Volunteer Coordinator with the original documents will provide copies of the application, the liability waiver form, the background check and the orientation checklist to any other ACC Volunteer Coordinator at subsequent sites. The Center Supervisor or Area Manager still needs to authorize the volunteer for the additional service sites.~~
- ~~— **I. Volunteer Requirements & Responsibilities.** Volunteers are responsible for the following:~~
  - ~~— 1. Comply with the volunteer guidelines.~~
  - ~~— 2. Document volunteer hours on the Monthly Volunteer Time Sheet (AD 13-09 Form 4) or an alternate method and ensure the Volunteer Coordinator has the information on the last day of each month.~~
  - ~~— 3. All regular volunteers must complete required forms and orientation.~~
  - ~~— 4. All volunteers are encouraged to submit suggestions, comments, and ideas for program improvement to the Volunteer Manager. (2-CO-1G-09; 2-CO-1G-10)~~

~~J~~ 5. Ensuring each volunteer has an appropriate supervisor assigned to oversee routine volunteer activities.

6. Being involved in the community and in the recruitment of volunteers.

~~E~~. **Staff Training.** The ~~Chief Deputy Assistant~~ Director ~~of Reentry~~ must ensure training on this policy is available to appropriate staff.

~~K~~

~~F~~. **Volunteer Exemptions.** Volunteers are exempt from all provisions of the law relative to employee compensation and benefits.

~~LG~~. **Drug Testing.** Volunteers will be drug/alcohol tested upon reasonable suspicion, and following approval of the appropriate Manager/ Supervisor, Assistant/Deputy Director or Chief Deputy Director.

## V. ATTACHMENTS.

AD ~~13-0917-30~~ Form 1 Volunteer Application

AD ~~13-0917-30~~ Form 2 Volunteer Guidelines, Release & Waiver of Liability Agreement

AD ~~13-0917-30~~ Form 3 Occasional Volunteer Orientation ~~Checklists~~ Checklist

AD ~~13-0917-30~~ Form 4 Regular Volunteer ~~Time Sheets~~ Training Checklist

AD ~~13-0917-30~~ Form 5 Volunteer Time Sheets

AD 17-30 Form 6 Volunteer Program ~~Suggestions and~~ Evaluation ~~Form~~



**ARKANSAS COMMUNITY CORRECTION**  
**Volunteer Application**

**Instructions:** Use this form to apply to volunteer at an Arkansas Community Correction (ACC) center or office. Background checks are required for all volunteers.

Name				
Home/Cell Phone			Work Phone	
Street Address	City		State	Zip
Email Address				
Organization/Agency Representing (if applicable):				

**BACKGROUND CHECK INFORMATION:**

Driver's License Number	State Issued	DOB / /
Social Security Number:		

**VOLUNTEER PREFERENCES:**

**Volunteer Type: (Check all that apply)**

- |                                    |   |  |
|------------------------------------|---|--|
| <input type="checkbox"/> Mentor    | <input type="checkbox"/> Faith-based                | <input type="checkbox"/> Clerical/Administrative |
| <input type="checkbox"/> Treatment | <input type="checkbox"/> Education (Student/Intern) |  |

**Volunteer Preference:**

- ☐ Direct contact with Residents/Offenders
- ☐ No direct contact with Residents/Offenders

**Availability: (Check all that apply)**

- |                                   |                                    |                                   |                                    |
|-----------------------------------|------------------------------------|-----------------------------------|------------------------------------|
| <input type="checkbox"/> Sunday   | <input type="checkbox"/> Monday    | <input type="checkbox"/> Tuesday  | <input type="checkbox"/> Wednesday |
| <input type="checkbox"/> Thursday | <input type="checkbox"/> Friday    | <input type="checkbox"/> Saturday |                                    |
| <input type="checkbox"/> Morning  | <input type="checkbox"/> Afternoon | <input type="checkbox"/> Evening  |                                    |

**Please provide a few sentences about your motivation for volunteering with ACC:**

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**PROFESSIONAL OR PERSONAL REFERENCES:**

Name/Job Title	Relationship	Phone Number
Name/Job Title	Relationship	Phone Number

**CURRENT EMPLOYMENT (most recent within the last three years)**

Employer Name and Address	Supervisor	Phone Number
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**SCHOOL INFORMATION: (Student/Interns only)**

College	
Degree Program	Academic Advisor
Advisor's Phone Number	Advisor's Email

I hereby give permission for ACC staff to conduct a background check and contact my references and/or academic advisor.

Volunteer Signature Date

**For ACC Staff use:**

Background Check Complete:    /    /   

Reference/Advisor Check Complete:    /    /   

Volunteer Coordinator Signature Recommend Do Not Recommend

Center Supervisor/Area Manager Signature Date





**Arkansas Community Correction (ACC)  
VOLUNTEER GUIDELINES, RELEASE & WAIVER OF LIABILITY AGREEMENT**

1. I will follow Volunteer Guidelines and ACC policy that would reasonably be considered applicable.
2. I will perform my volunteer services in compliance with the ACC Code of Ethics and Rules of Conduct ~~policy~~.
3. I will not bring onto ACC property any of the following items: cell phones, explosive devices, firearms or other weapons, ammunition, alcoholic beverages, tobacco products, narcotics, or objects or materials of any kind that might be used to compromise the security and safety of the facility.
4. I will not participate in ACC activities or be on ACC property while under the influence of illegal drugs or alcoholic beverages. I understand that I am subject to drug and alcohol testing upon reasonable suspicion and approval of the Center Supervisor or Parole/Probation Manager.
5. I will leave my purse and unnecessary objects locked in the trunk of my vehicle when on ACC property. I understand that my person, personal items, and vehicle are subject to screening and/or search. I will provide a photo ID or ACC volunteer badge upon request by ACC personnel. I will wear ~~aan~~ ACC volunteer badge at all times while on ACC property.
6. I will dress appropriately while on ACC property. I understand that miniskirts, short dresses, shorts, halter tops or halter dresses, see through clothing, tight clothing, or other provocative clothing will not be allowed. My clothing will not promote alcohol or drugs, illegal actions, racial comments, vulgarity, sexual implications, or profanity.
7. I will not exchange any material with a ~~client (resident or offender)~~ such as notes, correspondence, money, food, or gifts I will not participate in a personal relationship with a ~~client resident~~ or offender nor will I divulge personal information. I understand that this action could place me at risk.
8. I will keep all ~~client (resident or offender)~~ information confidential. I will not commit ACC to any financial obligations. I will not speak on behalf of nor act as a representative of the ACC.
9. I will obey all safety and security instructions including all facility procedures. I will work within my job duties and my physical assignments. I will follow supervisory guidance.

For the good and valuable consideration of participating in the Arkansas Community Correction (ACC) Volunteer Program, I, for myself, my successors, heirs, assign, executors, administrators, spouse, and next of kin, do hereby understand and agree to the following:

1. My participation as a volunteer may involve risk of serious injury or harm.

2. I hereby assume any and all liability and risks of injury or harm, including permanent or partial disability, medical bills, death, damage to my property, or death caused by or arising from my participation in the volunteer program.
3. I will not, nor will any person or entity on my behalf, initiate, pursue nor participate in a lawsuit or claim, including any for personal injury, property damage, or wrongful death, against the State of Arkansas, DCC, its employees, officers, agents, volunteers, the Parole Board, or the Board of Corrections, for damages arising out of or attributable to my participation in the volunteer program.
4. I release and discharge the ACC, its employees, officers, agents, volunteers, the Parole Board, and the Board of Corrections from any liability, loss, damage, claim, demand, or any cause of action against them arising out of or attributable to my participation in the volunteer program, whether the same arises from negligence or otherwise.

I, \_\_\_\_\_, agree to serve in the Arkansas Community Correction Volunteer Program. I commit to performing my assigned volunteer duties to the best of my ability and to follow ACC guidelines, policies, and procedures. I have read this document and understand that I am waiving substantial rights. I voluntarily sign this document and by doing so, assume all risks attendant and pertaining to participating in the ACC volunteer program.

\_\_\_\_\_  
Volunteer Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Coordinator Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Arkansas Community Correction**  
**OCCASIONAL VOLUNTEER ORIENTATION CHECKLIST**

Item	Who	When & Where	Source
<b>About the organization:</b>			
1. History			Lecture, Ppt, Group Exercises, Discussions, Handouts, Exam
2. Mission			
3. Programs and Services			
4. Benefits of Volunteering			
<b>The Facility:</b>			
1.Explanation of Local Office Divisions			
2.Emergency Plan			
3.Reporting & Investigating Incidents, Hazards and Maltreatment Policy			
4.Personal Safety			
5.Facility, Premises, or Site Rules			
6.Parking			
7.Supplies and Office Machines			
8.Access to Building or Office Areas			
9.Escort			
<b>Policy:</b>			
1.Code of Ethics and Rules of Conduct			Lecture, Ppt, Group Exercises, Discussions, Handouts, Exam
2.Drug-Free Workplace			
3.Offender Records (confidentiality)			
4.Sexual Harassment			
5.Dress Code and Appearance			
6.Tobacco (Smoke-Free Workplace)			
7.Prison Rape Elimination Act			
<b>Volunteer:</b> I confirm that I have completed all items in the volunteer orientation checklist and where indicated understand the policies and procedures.  Print Name: _____ Signature: _____ Date: _____			
<b>Volunteer Supervisor:</b> I confirm that all items in the volunteer training checklist, including policies and procedures have been explained.  Print Name: _____ Signature: _____ Date: _____			

**Arkansas Community Correction  
REGULAR VOLUNTEER TRAINING CHECKLIST**

Item	Who	When & Where	Source
<b><i>About the organization:</i></b>			
1. History			Lecture, Ppt, Group Exercises, Discussions, Handouts, Exam
2. Mission			
3. Programs and Services			
4. Benefits of Volunteering			
<b><i>The Facility:</i></b>			
1.Explanation of Local Office Divisions			
2.Emergency Plan			
3.Reporting & Investigating Incidents, Hazards and Maltreatment			
4.Personal Safety			
5.Facility, Premises, or Site Rules			
6.Parking			
7.Supplies and Office Machines			
8.Access to Building or Office Areas			
9.Escort			
<b><i>The Role:</i></b>			
1.Job Description, Duties, and Assignment			
2.Supervision of Activity, Clients, Residents			
3.Supervisor Chain-of-Authority			
4.Who and how to contact them			
5.Volunteer Input			
6.Evaluations and Suggestions			
7.Employment Opportunities			
8.Volunteer Guidelines, Release & Waiver of Liability Agreement Form			
<b><i>Policy:</i></b>			
1.Code of Ethics and Rules of Conduct			Lecture, Ppt, Group Exercises, Discussions, Handouts, Exam
2.Drug-Free Workplace			
3.Offender Records (confidentiality)			
4.Sexual Harassment			
5.Dress Code and Appearance			
6.Tobacco (Smoke-Free Workplace)			
7.Prison Rape Elimination Act			
<b><i>Client Dynamics:</i></b>			
1.Criminogenic Risk Factors			Lecture, Ppt, Group Exercises, Discussions, Handouts, Exam
2.Prison Culture and Sensitivity			

**Volunteer:** I confirm that I have completed all items in the volunteer training checklist and where indicated understand the policies and procedures.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Volunteer Supervisor:** I confirm that all items in the volunteer training checklist, including policies and procedures have been explained.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Arkansas Community Correction  
VOLUNTEER TIME SHEET

Name: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Office/Center: \_\_\_\_\_ Report Month: \_\_\_\_\_

Date	Time In	Time Out	Total Hours	Supervisor Initials

**Arkansas Community Correction**  
**VOLUNTEER PROGRAM ~~SUGGESTIONS AND~~ EVALUATION**

~~The~~ Arkansas Community Correction (~~ACC~~) appreciates and values your volunteer service. Please tell us ~~how we~~ about your experience as a volunteer with ACC. Your responses to the evaluation are ~~doing by completing this survey or send a memo. Tell us where there are problems anonymous.~~ You may provide your name and ~~what recommendations /or contact information if you have for improving our programs, policies, and procedures.~~

wish. Please complete this ~~form~~ evaluation and return ~~it to~~ to the volunteer coordinator in the office/center.

~~Volunteer Program Manager~~  
~~Two Union Plaza~~  
~~105 West Capitol Ave, 3rd Floor~~  
~~Little Rock, AR 72201-5731~~

1. ~~Are or~~ Were you given clear duties and responsibilities for the services you perform(ed)? performed?

1. ~~YES~~ \_\_\_\_\_ b. ~~NO~~

2. ~~Is or~~ Was there a clear line of authority?

2. ~~YES~~ \_\_\_\_\_ b. ~~NO~~

3. ~~Are or~~ Were you encouraged to communicate with supervisors?

3. ~~YES~~ \_\_\_\_\_ b. ~~NO~~

4. ~~Are or~~ Were you allowed to use your area of expertise?  
~~YES~~ \_\_\_\_\_ b. ~~NO~~

5. On a scale of 1 (~~very low~~) to 6 (~~best ever~~), how rewarding ~~do or~~ did you find your experience with ACC?

1 (~~very low~~) ..... 2 ..... 3 ..... 4 ..... 5 ..... 6 (~~best ever~~)

~~If you do or did not find the experience the best ever, what can be done to improve it?~~

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6. On a scale of 1 (~~least~~) to 6 (~~most beneficial~~), how beneficial do you think your services ~~contribute or~~ contributed to ACC or the ~~clients?~~ residents/offenders?

4. ACC: 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6

The Clients: 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6

7. Would you volunteer ~~your time and services~~ with ACC again?

5. ~~YES~~ ..... ~~b. NO~~

IF NO, why:

(Continued on other side)

What

- 2) ~~Do you have any suggestions or improvements or suggestions about existing or additional programs/services or policies, procedures and practices do that you think believe would improve the program for everyone (volunteers, clients, and make the agency)?~~

TELL US ABOUT .... You:

\_\_\_\_\_ FEMALE \_\_\_\_\_ MALE

AGE \_\_\_\_\_

RACE \_\_\_\_\_

Do you volunteer through an organization or agency? \_\_\_\_\_ No \_\_\_\_\_ YES (if yes, please provide name of organization, agency, or religious institution). \_\_\_\_\_

How long (months) have you been a volunteer with ACC? \_\_\_\_\_

8. Where do you volunteer (check one)? ~~program~~ more effective?

~~At a residential center~~ \_\_\_\_\_ or at a Parole/Probation \_\_\_\_\_ or Central Office \_\_\_\_\_

Thank you for your time and for volunteering with ACC.

Volunteer signature: \_\_\_\_\_ Date: \_\_\_\_\_

Optional:

Name: \_\_\_\_\_ Volunteer Location: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_



## 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:** ~~07-21~~ 17-29 Chaplaincy Services

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

**FROM:** ~~G. DAVID GUNTARP~~ Sheila Sharp, Director

**SUPERSEDES:** ~~06-17~~ 307-21 PAGE 1 of

**APPROVED:** Signature on File **EFFECTIVE:** ~~DECEMBER 26, 2007~~ May 31, 2017

**I. APPLICABILITY.** This policy applies to all staff, residents, ministers and volunteers carrying out ministries inside an agency facility, and any spiritual advisor or minister providing ongoing linkage between a religious group and a ~~Department of an~~ Arkansas Community Correction (~~DCC~~ ACC) resident.

**II. POLICY.** It is ~~the ACC policy of the DCC~~ to allow residents access to the opportunities and means to learn about religions and to practice a religion of choice without undue restriction. ~~Staff and residents of a DCC facility shall not be subjected to coercion, harassment or ridicule from staff, volunteers or other residents due to their religious affiliation or beliefs. (2-CO-5E-02) Religious programming for residents will include the use of community resources, and religious facilities and equipment. Resources will be distributed among faith groups authorized to meet, commensurate with their representation within the population, including the use of facilities and equipment. (2-CO-5E-01) (2-CO-5E-01, 2-CO-5E-02)~~

### **III. DEFINITIONS.**

- ~~A. Minister. An individual ordained or otherwise recognized, according to the precepts of the religion represented, who is qualified to teach religious precepts, provide spiritual counsel, and conduct religious services.~~
- ~~B. Restrictions. Generally diminished rights consistent with incarceration and specific limitations on religious conduct deemed necessary to meet legitimate penological goals.~~
- ~~C. Volunteer. An individual having the approval of a religious group or authority, approved through the procedures of the Department, and trained in applicable regulations and expectations of conduct to be followed inside the Department, who provides for, or assists in providing for, the religious needs of offenders.~~

#### ~~IV~~

### III. RESPONSIBILITIES AND GUIDANCE.

A. The Center Supervisor at each ~~DCCACC~~ residential facility is responsible for the oversight and direction of Chaplaincy Services and will ensure they are available to residents at each facility. Each Center Supervisor is responsible for the coordination of day-to-day Chaplaincy Services at respective centers. ~~The chaplain is responsible for coordinating all ministry activities within the center and working with center staff to address special dietary needs or special conditions. (2-CO-5E-02)~~ and ensuring the chaplain has access to all areas of the facility.

~~B~~ B. The chaplain is responsible for coordinating all ministry activities within the center; working with center staff to address special dietary needs or special conditions; and coordinating with the Volunteer Manager in the use of religious volunteers and community resources. The chaplain should ensure equitable distribution of religious resources among faith groups commensurate with the number of residents practicing to include the use of religious facilities and equipment. The chaplain must ensure an updated directory of all faiths in the community is available to facilitate continued religious practice upon release.

The chaplain must ensure residents have:

- opportunities to practice his/her faith individually or with others, as authorized
- information available about religious programming
- access to approved publications related to religious beliefs and practices
- the ability to observe authorized practices pertaining to diet, holy day ceremonies, work restrictions and communal sacramental rights - provided such rites do not conflict with policy/procedures or jeopardize the security and orderly operation of the facility.
- access to the directory of faiths in the community. (4-ACRS-5A-22)

~~C~~ C. The dietitian, in coordination with the Deputy Director for Residential Services (DDRS), shall, must coordinate and approve additional or substitute food items involved in the observation of religious tenets. Fasts or dietetic restrictions are permitted. Food or beverage items that would otherwise be contraband must have prior approval of the ~~DDRS-Deputy Director for Residential Services~~. Application for approval of visits by volunteers should follow normal visitation procedures but special visits by outside ministry groups or volunteers should be channeled through the chaplain of the facility who will make a recommendation to the Center Supervisor. ~~(2-CO-5E-02)~~

~~CD~~ D. Center intake personnel are responsible for allowing each resident to identify their religious orientation and to submit said information to the chaplain. Center intake personnel ~~shall~~must inform residents that they are free to change the designation of their religious orientation by notifying the chaplain. ~~(2-CO-5E-02)~~

~~DE.~~ Staff ~~shall~~must not show ~~no~~ favoritism toward nor selectively impose restrictions against a particular religion and all resident participation in religious activities ~~shall~~must be voluntary. ~~(2-CO-5E-02)~~

~~EF.~~ Center staff should involve Chaplaincy Services, as appropriate, when notifying offenders of family emergencies and notifying families of offender mishaps.

~~F.~~ ~~DCC shall~~G. ACC must not purchase religious materials but may arrange access to donated religious materials through the chaplain or appropriate staff, in consultation with the appropriate Center Supervisor ~~and DDRS~~. The chaplain will inform offenders about the availability of donated religious materials.

~~G.~~ H. Residents must not be subjected to coercion, harassment or ridicule from staff, volunteers or other residents due to their religious affiliation or beliefs. Religious programming for residents will include the use of community resources and religious facilities and equipment. Resources will be distributed among faith groups authorized to meet, commensurate with their representation within the population, including the use of facilities and equipment.

~~I.~~ Center staff will receive training regarding religious practices at the Residential Services Basic Academy.

#### ~~VIV.~~ RESTRICTIONS.

~~A.~~ A. Incarcerated individuals may have generally diminished rights consistent with incarceration and specific limitations on religious conduct deemed necessary to meet legitimate penological objectives. Restrictions of religious practice may be placed on clearly defined groups of offenders, based on their security status and the actual or potential breach of security that allowing those practices would entail. Such restrictions ~~shall~~must apply evenly to all offenders of the same security status. Where consistent with good security, alternative opportunities for the practice of religion ~~shall~~must be afforded.

~~B.~~ Any proposed restrictions on the practice of religion will be considered by the DDRS Deputy Director for Residential Services. A representative of the affected religion may appeal the DDRS's Deputy Director for Residential Service's restriction to the DCCACC Director.

~~B.~~ C. Whenever restrictions are necessary, the least severe acceptable restriction will be used, and a substantive equivalent, if available and not imposing an undue burden on DCCACC residential center officials, will be provided for the restricted activity.

D. Any religious activity ~~which involves~~involving inflammatory statements about the characteristics, beliefs or practices of another group;; threats against the order and safety of the facility;; or instigation of conflict among the group members ~~which~~that compromises the safety of the group or the safety of others may be curtailed immediately with the approval of the senior security officer on duty.

E. Communications between a resident and ~~clergy shall~~others are governed by the following:

1. To be considered as "privileged under the following conditions. (2 CO 5E-02)

~~1. The~~1. communication must be between a resident and an ordained member of the clergy. ~~Communications between lay members of a church, non-ordained missionaries or other volunteers is not considered privileged.~~

2. The communication between a resident and an ordained member of clergy ~~does not establish pre knowledge by the clergy of~~is NOT privileged communication when it involves:

- planned or future criminal acts, whether inside or outside of the center;;
- violations of DCCACC Center rules or where the safety and security of other residents ~~or~~; center staff or the public may be jeopardized;; or

~~3. The communication between a resident and an ordained member of clergy does not establish knowledge by the clergy of~~3. The communication between a resident and an ordained member of clergy does not establish knowledge by the clergy of prior criminal activity by the resident or associates of the resident, whether known or unknown by law enforcement officials.

3. Communication between lay members of a church, non-ordained missionaries or other volunteers is not considered privileged.



## Arkansas Community Correction

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

### **ADMINISTRATIVE DIRECTIVE: ~~15-10-01~~17-18 COMMUNITY TRANSITION AND FURLOUGH**

**TO: ARKANSAS COMMUNITY CORRECTION EMPLOYEES**

**FROM: SHEILA SHARP, DIRECTOR**

**SUPERSEDES: AD ~~15-10-01~~ and AD-10-02**

**APPROVED: Signature on file EFFECTIVE: ~~August 1, 2015~~April 19, 2017**

- I. APPLICABILITY.** This policy applies to all Arkansas Community Correction (ACC) employees, eligible residents, and their sponsors.
- II. POLICY.** ACC will provide for temporary supervised furlough of residential center residents for certain emergencies and authorized community transition activities. ACC will provide community transition opportunities and administer furloughs in a way that guards against illegal activity in the community.
- III. TRANSITIONAL ACTIVITY GUIDELINES.** As a part of the services and programs provided to meet resident needs, Center Supervisors are responsible for planning and implementing transitional activities that are responsive to the needs of the resident population. Transitional activities should be offered within three months of the resident's earliest possible release date. (4-ACRS-5A-20)
  - A.** Center Supervisors must provide information, training, and skill-building programs addressing, at minimum, the following employment-related topics:
    1. Job acquisition, retention, and appropriate behavior on the job
    2. Vocational placement, assessment, or job locator services
    3. Everyday living skills.
  - B.** For an employable resident who has no job, staff ~~whom~~designated by the Center Supervisor ~~designates~~ will coordinate with the Arkansas Department of Workforce Services or other appropriate agencies or services to identify jobs available in the area



to which he ~~or~~/she will be released and make this information available to the resident.

- C. Information and skill-building programs designed to aid other aspects of successful community reintegration such as the topics listed below may also be provided.
1. Social Security, Veterans, and other benefits application and assistance
  2. Banking and financial management
  3. Community-based substance abuse treatment and mental health services
  4. Legal issues
  5. Housing assistance
  6. Orientation to community supervision services and programs.

#### IV. FURLOUGH GUIDELINES.

- A. **Authority to Approve Furloughs.** Only at the Center Supervisor, his/her designee Assistant Center Supervisor, Deputy Director of Residential Services, Chief Deputy Director or the Director is authorized to approve furloughs.
- B. **Eligibility Criteria.** To be eligible for a furlough, in the judgment of the approval authority, the resident must meet the applicable criteria listed on AD ~~15-10~~17-18 Form 5, "Emergency Furlough Criteria Checklist" or "AD ~~15-10~~17-18 Form 6, "Community Transition Furlough Criteria Checklist."
- C. **Terms/Conditions of Furlough.** The resident must agree to comply with the furlough terms/conditions as described on the Furlough Certificate. The approval authority may order GPS monitoring as a special term of any furlough.
- D. **Violations.**
1. Violating the terms and/or conditions of a furlough constitutes a cardinal rule infraction. In addition, the violation itself may subject the resident to additional disciplinary action in accordance with ACC rules and regulations on resident conduct. Violation(s) must result in immediate termination of the furlough and return to the Center. The resident will not be eligible for further furlough, for any reason, for the duration of his or her ACC confinement.
  2. If a resident fails to report back by the appointed time, promptly initiate escape procedures.
- E. **Costs.** ACC will not assume any costs associated with furloughs such as for transportation, food, housing, medical, or other costs. Such expenses are the responsibility of the resident.

## V. PROCEDURES FOR FURLOUGHS.

**A. Staff Responsibilities in General.** The Center Supervisor will clarify which people or positions are authorized and responsible for processing a furlough request. Most of the furlough requirements, such as eligibility requirements, are described in the forms rather than in the body of this policy.

### B. Processing an Application for an Emergency Furlough Overview.

1. ~~1.~~ In cases of a verifiable death or critical illness of a resident's immediate family member, when a furlough application has been approved, a resident who meets eligibility criteria should be allowed to go to the funeral/bedside escorted by the sponsor. ~~(4 ACRS 5A-18-1 [P])~~ For this purpose, "immediate family member" means the father or stepfather, mother or stepmother, sister or stepsister, brother or stepbrother, spouse, child or stepchild, grandchild of a resident, or other person where relationship with the resident has been verified as that of a guardian.  
~~2 (4-ACRS-5A-18-1 [P])~~
2. Emergency furloughs are limited to the amount of time necessary for the resident to travel to/from the funeral/bedside and attend the service/visit. There will not be overnight stay unless approved by the Deputy Director of Residential Services.
3. To apply for an emergency furlough, the resident must do the following:
  - a. Complete the "Applicant" portion of Form I, "Furlough Application."
  - b. Identify a sponsor that meets the requirements.
  - c. Have the proposed sponsor complete the "Sponsor Agreement" form and return it to the primary processor. If there is insufficient time for the application to be mailed to the sponsor, the primary processor may obtain the required information from the sponsor by phone or email.
  - d. Submit the completed application and Sponsor Agreement forms to the counselor as soon as possible after learning of the emergency.
4. Unless prior arrangements are made and approved by the Center Supervisor, the sponsor must be the person who picks up the resident at the beginning of the furlough and returns the resident at the end.

5. Other than Certified Law Enforcement, the sponsor must be an immediate family member of the resident requesting furlough and must be on the resident's approved visitation list. For this purpose, "immediate family member" means the father or stepfather, mother or stepmother, sister or stepsister, brother or stepbrother, spouse, child or stepchild, grandchild of a resident, or other person where relationship with the resident has been verified as that of a guardian.
6. Sponsors must be capable of ensuring the resident under their supervision abides by the terms and conditions of the furlough and be a positive influence/role model for the resident..
7. Current background checks/investigations must be completed on all proposed sponsors. Sponsor applicants must not have a felony conviction or Class A misdemeanor conviction; or pending charges of the same.

#### **C. Processing an Application for a Community Transition Furlough Overview.**

To apply for a community transition furlough, the resident must do the following:

1. Complete the "Applicant" portion of Form 1, "Furlough Application"
2. Have the proposed sponsor complete the "Sponsor Agreement"
3. Work with his/her counselor to develop a "Community Transition Plan" form; instructions are provided with the form, ~~and~~
- ~~2,3.~~ 4. Provide these forms to the resident's counselor.
4. The address and location the resident is requesting for activity participation or overnight stay must be the same as identified and approved as the resident's home plan on their release plan. There will not be an overnight stay unless approved by the Deputy Director of Residential Services.
5. A Community Transition Furlough will not begin or end on a holiday, nor be conducted over a holiday weekend, or during a holiday week.

#### **D. Notification of Law Enforcement and Victim.**

The IRO or other designated staff must notify law enforcement as described on Form 7, "Furlough Notification of Local Law Enforcement~~2.~~" within the timeframe described therein. Document law enforcement notification by completing the form.

If there is a victim notification requirement and the resident has requested an emergency furlough, the IRO or other designated staff must notify the victim as soon as possible and the sponsor must be an active Arkansas certified law enforcement

officer. If there is a victim notification requirement, and the resident has requested a community transition furlough, the resident does not meet these criteria; indicate this on the criteria checklist.

- E. Approval of Furlough.** Considering the investigation results, comments, recommendations, and input (if any) from the Resident Management Team, local law enforcement, and victims where applicable, the approval authority will approve, approve with additional stipulations, or deny the furlough request and return the decision to the resident's primary processor. The primary processor will inform the resident of the decision.
- F. Furlough Certificate.** When the approval authority has approved a furlough, authorized staff must provide the resident with a properly prepared and signed "Furlough Certificate" form authorizing his-~~or~~-her furlough. The certificate must indicate the beginning and ending dates and times of the furlough, the address at which the resident will lodge overnight (if an overnight stay is authorized), the name of a Center staff to be contacted in the event the resident is questioned by law enforcement officers regarding a crime or suspected crime, special terms, and any conditions of the furlough. Rules and regulations for furlough conduct will be explained to the resident and his/her sponsor prior to leaving for furlough. Staff must obtain the sponsor's signature on the Furlough Certificate and provide a copy to the sponsor so ~~they~~he/she can monitor the resident with the terms of the furlough.
- G. Training.** Supervisors must ensure appropriate staff ~~is~~are trained on the guidelines and procedures of this. Also, policy. The Center Supervisor must ensure ~~that~~ information about furloughs and the community transition program is provided to residents during orientation.

## VI. FORMS.

~~AD 15-10~~ Form 1 Furlough Application  
~~AD 15-10~~ Form 2 Sponsor Agreement  
~~AD 15-10~~ Form 3 Sponsor Agreement Review  
~~AD 15-10~~ Form 4 Community Transition Plan  
~~AD 15-10~~ Form 5 Emergency Furlough Criteria Checklist  
~~AD 15-10~~ Form 6 Community Transition Furlough Criteria Checklist  
~~AD 15-10~~ Form 7 Furlough Notification of Local Law Enforcement  
~~AD 15-10~~ Form 8 Furlough Certificate

**Arkansas Community Correction  
FURLOUGH APPLICATION**

**Instructions.** Resident, complete this form and give it to the staff person designated to handle this. Also process a Sponsor Agreement form. If this is for a community transition furlough, work with your counselor to develop a Community Transition Plan.

Furloughs are limited in duration, as determined by the Center Supervisor, to the amount of time necessary for travel and attendance of the service/bedside visit/activity participation only. There will not be overnight stay unless approved by the Deputy Director of Residential. Ensure you understand the instructions on the Sponsor Agreement form.

☐ Community Transition Furlough      ☐ Emergency Furlough      Date Prepared: \_\_\_\_\_

I, \_\_\_\_\_ Resident # \_\_\_\_\_ request to leave the Correction Center  
(Resident's Name - Printed)

at \_\_\_\_\_ ☐ a.m. ☐ p.m. on \_\_\_\_\_ and return before  
(Time) (Date)

\_\_\_\_\_ ☐ a.m. ☐ p.m. on \_\_\_\_\_  
(Time) (Date)

so that I may (choose ONE of the following four reasons):

- ☐ Participate in community transition activities and return to the CCC by 6:00 P. M. **OR**,  
☐ Participate in community transition activities and stay overnight with sponsor at the following address **OR**

\_\_\_\_\_ Street Address \_\_\_\_\_ Town \_\_\_\_\_ Zip Code

- ☐ Visit critically ill/injured relative named below **OR**  
☐ Attend the funeral of the immediate family member named below:

\_\_\_\_\_ (Family member's name) \_\_\_\_\_ (Relationship)

\_\_\_\_\_ Name of Facility (Hospital or Funeral Home to allow verification)

\_\_\_\_\_ Facility Phone Number / Address (if Known)

- ☐ I have provided a "Sponsor Agreement" form.  
☐ If this request is for a community transition furlough, I have attached my approved "Community Transition Plan" form.

\_\_\_\_\_ Resident's Signature \_\_\_\_\_ Date

After considering the above and the "Sponsor Agreement Review" form, "Community Transition Plan" form (when applicable), "Emergency (or Community Transition) Criteria Checklist" form and "Furlough Notification of Local Law Enforcement" form;

- ☐ I Do NOT approve  
☐ I Approve

Additional Special Terms (if any): \_\_\_\_\_

\_\_\_\_\_ Center Supervisor/Designee \_\_\_\_\_ Date

AD 17-18 Form 1

**Arkansas Community Correction  
SPONSOR AGREEMENT**

**Community Correction Center**

**Center Phone Number:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**Resident's Name:** \_\_\_\_\_ **ADC Number:** \_\_\_\_\_

**SPONSOR:** If you agree to sponsor the above-named Resident during a furlough, in compliance with the rules outlined below, complete and return this form to the Center at the address shown at the top of this form within 5 days. If the resident has a victim notification requirement or is in a technical violator program, the sponsor must be an active Arkansas certified law enforcement officer (no exceptions); and the family member is responsible for finding an acceptable officer and paying the officer if payment is required.

Please discuss the best date/time for this furlough with the resident. He/she will work with staff to establish a reasonable schedule and he/she is responsible for informing you of the approved schedule.

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Street address)

\_\_\_\_\_  
(Town/City, State)

\_\_\_\_\_  
(Zip Code)

\_\_\_\_\_  
(Telephone Number)

\_\_\_\_\_  
(Social Security Number)

\_\_\_\_\_  
(Driver's License  
Number)

\_\_\_\_\_  
(Sponsor's Date of Birth)

☐ I am not OR ☐ I am an active Arkansas certified  
law enforcement officer at: \_\_\_\_\_

At the request of the above-named Resident at an Arkansas Community Correction (ACC) facility, I agree to serve as Sponsor for his/her furlough. I agree to make every effort to ensure that the resident abides by the furlough conditions and returns to the Center at or before the date and time specified. If unforeseen circumstances may cause me to return later than agreed, I will contact the center and request approval for an extension. If, at any time, I am uncertain of the location of the resident's whereabouts or observe the resident engaging in illegal activity, I will contact the Center immediately. I understand that ***I must continuously supervise the resident which means*** being continually in the company of the resident throughout the furlough. I also understand that by agreeing to be the sponsor, I am also accepting the responsibility to provide for the resident's transportation to and from the Community Correction Center. If staying overnight, the resident will lodge with me:

- ☐ At my residence shown above or  
☐ At the following address:

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
(Town)

\_\_\_\_\_  
(Zip Code)

\_\_\_\_\_  
(Telephone Number)

**By signing this form, I hereby authorize ACC to conduct an investigation into my background, and in so doing, they may contact any person, law enforcement agency, or others, as it desires. I authorize the release to ACC of any information regarding criminal convictions that may exist on my record.**

\_\_\_\_\_  
(Signature of Proposed Sponsor)

\_\_\_\_\_  
(Date)

AD 17-18 Form 2

**Arkansas Community Correction  
SPONSOR AGREEMENT REVIEW**

Sponsor's Name	Resident's Name	ADC Number
----------------	-----------------	------------

I have investigated the above potential sponsor for suitability and documented this below and have found:

1. ☐ Sponsor is active Arkansas certified law enforcement officer (verified at agency): \_\_\_\_\_ OR

2. ☐ ACIC/NCIC check was done on: \_\_\_\_\_ by: \_\_\_\_\_  
Date Signature of Staff Who  
Checked revealed the following:

☐ Yes or ☐ No: the sponsor has a felony conviction; date and details are as follows:

\_\_\_\_\_  
☐ Yes or ☐ No: the sponsor has a Class A misdemeanor conviction; date and details are as follows:

\_\_\_\_\_  
AND

4. Additional notes/comments:

\_\_\_\_\_  
Staff Investigator's Signature

\_\_\_\_\_  
Date

Sponsor applicants must NOT have a felony conviction or Class A misdemeanor offense. Other offenses and circumstances may be considered on a case-by-case basis by the approval authority.

I hereby ☐ APPROVE ☐ DISAPPROVE this sponsor.

\_\_\_\_\_  
Center Supervisor/Designee Signature

\_\_\_\_\_  
Date



**Arkansas Community Correction  
COMMUNITY TRANSITION PLAN**

Instructions for this form are on the next page of this form.

Resident name (print)

Resident number

Resident's Housing Area

1. Please state your reintegration goals, for which transitional activity is sought, such as maintaining family ties, maintaining sobriety, securing employment, or meeting financial obligations.

2. Specific activities accomplished or to be accomplished in house, such as written inquiries or attending a pre-release seminar.

3. Specific activities that cannot or should not be accomplished from the community correction center, such as personal interviews; indicate planned dates and timeframe for accomplishing activities.

Residents Signature

Date

The activities indicated above appear to be reasonable and necessary, and within the capability of the resident to accomplish in the time available.

Counselor's Signature

☐ Recommended

☐ Not Recommended

Date

The Resident Management Team has reviewed the above plan and considers the resident to be deserving of the opportunities represented by the activities of the plan.

Resident Management Team Chair's Signature

☐ Recommended

☐ Not Recommended

Date

☐ Approved

☐ Not Approved

Center Supervisor/Designee

Date

**Arkansas Community Correction**  
**COMMUNITY TRANSITION PLAN continued**

**Instructions for the Community Transition Plan form.** For community transitional activities, the resident must work with his or her counselor to develop a Community Transition Plan

1. Community transition activities must be consistent with one or more of the resident's Master Treatment Plan goals and will include the following:
  - Reintegration goal(s) for which transitional activity is sought.
  - Planned dates and, when possible, specific appointment times for accomplishing activities.
  - Specific activities that cannot be accomplished at the Center or would be better done in the community, such as the activities listed below. (4-ACRS-5A-16)

**Note,** the resident is responsible for making furlough arrangements. He/she may be assisted by designated staff. **Specific meeting or interview times should be verified by appropriate staff when possible.** Residents must make designated staff aware of arrangements they are making and must do so in a timely manner.

**Note, this requirement,** on the first or second community transition furlough, the resident must visit the Parole/Probation Office and meet with the officer to whom he or she will be reporting after release or a designee if an officer has not yet been assigned.

2. If necessary to accomplish a resident's community transition goal, one or more of the activities listed below (or similar activities) may be included in a resident's community transition plan. (4-ACRS-5A-16)
  - Employment
    - Employment applications assistance, job location assistance, testing for job skills or aptitude
    - Job interviews
    - Employment-related medical exams
    - Driver's license testing or application for identification card
  - Education Preparation
    - Apply for grants, stipends, scholarship, loans
    - Register for classes and purchase books and other materials
    - Apply for admission to an educational/vocational program
    - Talk to an educational counselor
  - Vocational/Educational Classes by special agreement. Residents may attend vocational/educational classes only when the school has entered into an agreement with the ACC for such classes.
  - Personal Responsibility. Appointments with agencies such as the following are appropriate when they serve reintegration purposes:
    - Arkansas Department of Workforce Services
    - Internal Revenue Service
    - Child Support Enforcement
    - Social Security Office (supplemental income/other support programs)
    - Housing assistance agency
    - Veterans Administration
    - Other public or private human services agencies providing support or services (for example, employment assistance, Supplemental Nutrition Assistance Program (SNAP) (formerly food stamps), Medicaid, WIC, case management, referrals for treatment/support such as alcohol and drug abuse, mental health or family services)
  - Maintaining Family/Community Ties
    - Visit with family
    - Attend a significant family event

**Arkansas Community Correction  
EMERGENCY FURLOUGH CRITERIA CHECKLIST**

Resident's Name: \_\_\_\_\_ Resident's ADC Number: \_\_\_\_\_

Date on Furlough Application: \_\_\_\_\_ Resident's Housing Area: \_\_\_\_\_

Staff Person's Name: \_\_\_\_\_ (Person primarily responsible for processing this)

**Instructions for the staff person responsible for processing this furlough:** check with appropriate people and/or eOMIS to determine whether the eligibility criteria below are met. Follow center procedures for processing the application.

**Criteria Met?**

**Emergency Furlough Criteria Checklist Items**

YES NO

**For emergency furlough:**

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Resident is a judicial transfer or in the Technical Violator Program<br>Note, ACC cannot authorize a furlough for residents with a "probation-plus" or short-term drug court sentence. For these residents a court order is required.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Resident does not have any outstanding detainers or warrants.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Resident has provided a DNA sample.   |
| <input type="checkbox"/> | <input type="checkbox"/> | The Furlough Application time period has been established by the Center Supervisor. There will not be overnight stay unless approved by the Deputy Director of Residential Services.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Resident has not previously violated furlough terms.  |
| <input type="checkbox"/> | <input type="checkbox"/> | The proposed sponsor has been approved/verified (as evidenced on attached "Sponsor Investigation" form).  |
| <input type="checkbox"/> | <input type="checkbox"/> | There is a verified critical illness/injury and/or death in his or her "immediate family." [Verify through local law enforcement, Parole/Probation Officer, medical facility or other credible means].<br>For this purpose, "immediate family member" means the father or stepfather, mother or stepmother, sister or stepsister, brother or stepbrother, spouse, child or stepchild, grandparent, grandchild, of a resident, or other person whose relationship with the resident has been verified as that of a guardian. |
| <input type="checkbox"/> | <input type="checkbox"/> | If the resident is in the Technical Violator Program, the sponsor is active Arkansas certified law enforcement officer (required, no exceptions)  |
| <input type="checkbox"/> | <input type="checkbox"/> | If the resident has a victim notification requirement, the sponsor is active Arkansas certified law enforcement officer (required, no exceptions)   |

**Arkansas Community Correction**  
**COMMUNITY TRANSITION FURLOUGH CRITERIA CHECKLIST**

Resident's Name: \_\_\_\_\_ Resident's ADC Number: \_\_\_\_\_

Date on Furlough Application: \_\_\_\_\_ Resident's Housing Area: \_\_\_\_\_

Staff Person's Name: \_\_\_\_\_ (Person primarily responsible for processing this)

**Instructions for the staff person responsible for processing this furlough:** check with appropriate people and/or eOMIS to determine whether the eligibility criteria below are met. Follow center procedures for processing the application.

Criteria Met?		Community Transition Furlough Criteria Checklist Items
YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	<b>For community transition furlough:</b>
<input type="checkbox"/>	<input type="checkbox"/>	Request is a weekday.
<input type="checkbox"/>	<input type="checkbox"/>	Resident is a judicial transfer. Note, ACC cannot authorize a furlough for residents with a "probation-plus" or short-term drug court sentence. For these residents a court order is required.
<input type="checkbox"/>	<input type="checkbox"/>	Resident does NOT have a victim notification requirement.
<input type="checkbox"/>	<input type="checkbox"/>	Resident has an approved Community Transition Plan
<input type="checkbox"/>	<input type="checkbox"/>	Resident does not have any outstanding detainers or warrants.
<input type="checkbox"/>	<input type="checkbox"/>	Resident has provided a DNA sample.
<input type="checkbox"/>	<input type="checkbox"/>	Resident has not previously violated furlough terms.
<input type="checkbox"/>	<input type="checkbox"/>	Resident will be within 3 months of release when the transition activities are to take place.
<input type="checkbox"/>	<input type="checkbox"/>	The proposed sponsor has been approved.
<input type="checkbox"/>	<input type="checkbox"/>	No cardinal rule convictions within sixty (60) days of submission of the furlough request.
<input type="checkbox"/>	<input type="checkbox"/>	<b>Resident Management Team determination of the following:</b>
<input type="checkbox"/>	<input type="checkbox"/>	Resident constitutes no known security risk, is capable of abiding by the terms and conditions of a furlough and, to the best of our knowledge, there is no evidence that he/she will be endangered nor endanger another.
<input type="checkbox"/>	<input type="checkbox"/>	Resident has made acceptable progress in the Modified Therapeutic Community program.
RMT members concur with the above determination. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Initials or Signature → </div> <div style="text-align: center;"> Treatment Supervisor </div> <div style="text-align: center;"> Senior Residential Supervisor </div> <div style="text-align: center;"> Assistant Center Supervisor </div> </div>		
<b>Comments or concerns by RMT that the approval authority should consider:</b>  		

## Arkansas Community Correction

Center Phone Number: \_\_\_\_\_ Community Correction Center  
Address: \_\_\_\_\_

### FURLOUGH NOTIFICATION OF LOCAL LAW ENFORCEMENT

**ACC Instructions:** Local law enforcement in the county to which the Resident is being granted a furlough must be notified 48 or more hours before the Resident is scheduled to begin the furlough (as soon as possible for an emergency furlough). The following information will be included in the notification: Resident's name, pre-incarceration address, Sponsor's name, address and phone number, the location where the Resident will be staying overnight.

This notification may be done by phone, fax, email or mail, allowing sufficient time for the law enforcement agency to comment. Although we are not asking the law enforcement agency to approve of the furlough, we are open to comments they may have. If the local law enforcement authority wishes to object or to place conditions on the furlough, write their comments on this form. The ACC approval authority will review comments and approve or disapprove any changes in planned activities.

**Local Law Enforcement:** Arkansas Community Correction plans to allow the resident identified below to go on a brief furlough in your area of responsibility. Please know that our staff follows a detailed protocol to ensure that the resident has an assigned sponsor on whom we have conducted a background investigation. Also, the furlough is either because of a family emergency or death or to accomplish specific tasks that ensure a smoother transition back to their community when they are released. Our criteria for allowing a community transition furlough include a requirement to be within 3 months of release and to have completed a significant portion of our treatment program and to the best of our knowledge this person will not cause any problems. Emergency furloughs have slightly reduced criteria requirements. If this is an overnight furlough, the Resident will be on curfew and is required to physically be at the furlough location between the hours of 10:00 pm and 6:00 am. If you have any concerns about this resident going on furlough, please advise us promptly.

Resident's Name	Resident's Number	Resident's Pre-Incarceration Address
Sponsor's Name		Sponsor's Address
Sponsor's Telephone Number	City	State Zip
from _____	<input type="checkbox"/> AM <input type="checkbox"/> PM	on _____
Furlough will be:		Month/Day/Year
until _____	<input type="checkbox"/> AM <input type="checkbox"/> PM	on _____
		Month/Day/Year

The following law enforcement agency was notified by me of the furlough information indicated above:

Name of Law Enforcement Agency	Person Notified	Telephone Number
Name of ACC Employee Making Notice (Print)	Signature of ACC Employee Making Notice	Date

COMMENTS/REQUESTED CONDITIONS OF LOCAL LAW ENFORCEMENT AGENCY:

**Arkansas Community Correction  
FURLOUGH CERTIFICATE**

I, \_\_\_\_\_ am under the jurisdiction and custody of the Community Correction  
(Resident's Name) (Resident #)

Center at (location): \_\_\_\_\_ Telephone#: \_\_\_\_\_

I have been granted a furlough beginning at (Time): \_\_\_\_\_ ☐ a.m. ☐ p.m. On (Date): \_\_\_\_\_

ending at (Time): \_\_\_\_\_ ☐ a.m. ☐ p.m. On (Date): \_\_\_\_\_

for the purpose of: ☐ A family emergency OR ☐ Community transition activities

The specific activities authorized by this furlough are: \_\_\_\_\_

\_\_\_\_\_  
Sponsor's Name

\_\_\_\_\_  
Sponsor's Relationship

\_\_\_\_\_  
Sponsor's Telephone

\_\_\_\_\_  
Sponsor's Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State/Zip Code

\_\_\_\_\_  
Approved address for service, visit or overnight stay ( if different from above address)

\_\_\_\_\_  
City

\_\_\_\_\_  
State/Zip Code

I agree to abide by the following conditions under which my furlough is authorized:

1. I will keep a copy of this Certificate of Furlough on my person at all times.
2. I will not leave the state or the county (ies) to which I am released during the furlough. I will proceed directly from my authorized designated area to the center from which I was released and will arrive at or before the time indicated above.
3. For an Emergency Furlough, I will proceed directly to the authorized destination of the funeral service/bedside visit; and proceed directly from the authorized activity location to the center where I will arrive on or before the time indicated above.
4. I will abide by my curfew which requires me to remain at the location designated above and available to answer one or more confirmation calls between 10:00 p.m. and 6:00 a.m.
5. If I am arrested or questioned by law enforcement officers regarding any crime or suspected crime, I will show this Certificate of Furlough to the law enforcement officer. I will immediately get in touch with (Name:) \_\_\_\_\_ at the Community Correction Center phone number shown above. If this person is not available, ask for the Duty Officer.
6. I will not purchase, possess, use, consume, or administer any illegal drugs, marijuana, alcoholic beverages, or tobacco products of any kind.
7. I will not operate a motor vehicle of any kind unless testing to obtain a driver's license.
8. I will comply with Federal, State, County, and municipal laws.
9. I will abide by Arkansas Community Correction rules, policies, and regulations.
10. I will not knowingly associate with persons having a criminal record, bad reputation, or with those engaged in questionable occupations unless such association is unavoidable because such persons are also present at an approved event.
11. I am aware that I cannot change my marital status without prior approval of the Center.
12. I will not have any non-emergency medical procedures, exams, medication, tattoos, piercings, and so forth without prior approval of the Center's health authority. If I require emergency medical or dental attention while on furlough, I will contact the unit/center staff person designated below as soon as possible. Upon returning to the Center, I will deliver to the Center Supervisor a doctor's statement describing medical treatment and/or any drug therapy received. Costs incurred as a result of such treatment are my responsibility and not that of Arkansas Community Correction.
13. I will assume responsibility for all costs incurred while on furlough.
14. While on furlough, I will not try to abscond or evade supervision.
15. While on furlough, I will be with my sponsor at all times
16. While on a community transition furlough I will engage only in activities authorized by my Community Transition Plan and my sponsor
17. Special terms set by the Center Supervisor (if any): \_\_\_\_\_
18. I will remain continually in the company of my sponsor throughout the furlough.

I understand that my furlough only extends the limits of my confinement, and that I remain in the custody of Arkansas Community Correction. If I willingly fail to remain within the extended limits of this confinement, or fail to return to the Center within the time prescribed, I will be deemed an escapee from the custody of Arkansas Community Correction punishable as prescribed by law. I have read, or have had read to me, and understand the above conditions governing my furlough and will abide by all rules. In agreeing to be a **Sponsor**, I will closely supervise the resident throughout this furlough as provided for in this document and in the Sponsor Agreement.

\_\_\_\_\_  
Signature of Duty Officer or IRO

\_\_\_\_\_  
Date

\_\_\_\_\_  
Center Supervisor/Designee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Resident

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Sponsor

\_\_\_\_\_  
Date



## 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: ~~14-15~~17-23 OFFENDER SUBSTANCE ABUSE TESTING

**TO: ARKANSAS COMMUNITY CORRECTION EMPLOYEES**

**FROM: SHEILA SHARP, DIRECTOR**

**SUPERSEDES: AD ~~08-12~~14-15**

**APPROVED: Signature on File EFFECTIVE: ~~July 28, 2014~~April 14, 2017**

- I. APPLICABILITY.** This policy applies to Arkansas Community Correction (ACC) employees and offenders.
- II. POLICY.** ACC is committed to drug testing, sanctions and treatment interventions for substance abusing offenders. ACC policy is to maintain a zero tolerance for substance abuse. All drug tests are performed solely for the purpose of determining offender compliance with the terms of supervision and not for the purpose of providing information for the diagnosis, prevention or treatment of any disease or impairment of, or the assessment of the health of the offender. ACC enforces the terms of offender supervision by administering an offender substance abuse testing program to enforce supervision conditions, reduce recidivism and to enhance safety for the public and staff. (4-APPFS-2D-04)
- III. DEFINITIONS.**
  - A. Chain of Custody.** A procedure that governs the collection, testing, handling, storage, and transportation of a urine specimen.
  - B. Confirmation Test.** A test used to verify positive results from an initial screening test. This test uses Gas Chromatography/Mass Spectrometry to provide a greater margin of accuracy.
  - C. Observer.** An authorized individual designated to collect (at the direction of an ACC testing officer) or observe the collection of urine specimens in accordance with this policy. ACC employees, court personnel or Arkansas law enforcement officers may be designated as observers. Observers are not authorized to perform other aspects of drug testing.



- D. Prohibited Drug.** A prohibited drug is any substance having psychological and/or physiological effects on a human being and that is not a prescription or nonprescription medication, including controlled substances and controlled substance analogs or volatile substances that produce the psychological and/or physiological effects of a controlled dangerous substance through deliberate inhalation, injection or ingestion; any drug ~~which~~that is inconsistent with or unrelated to accepted medical practices; and alcohol or tobacco when an offender is so directed to refrain from consumption.
- E. Random Testing.** Selecting offenders for substance abuse testing using a mechanism that results in an equal probability that any offender, from a group of offenders subject to the selection mechanism, will be selected and subsequently tested.
- F. Substance Abuse Test.** A test administered for the purpose of determining the presence or absence of a prohibited drug or the metabolites of a prohibited drug in a person's bodily fluids.
- G. Testing Officer.** An ACC employee trained and authorized to conduct substance abuse testing.

#### **IV. GUIDELINES.**

- A. Substances to Be Tested and Methodology.** On-site urinalysis testing is authorized to be administered to an offender for a variety of substances to include cocaine, THC/marijuana, opiates, heroin, amphetamines, meth-amphetamines, barbiturates, benzodiazepines, PCP, methadone, and synthetic drugs such as the THC synthetics "Spice" and "K2." On-site urinalysis and saliva testing are authorized for detecting alcohol and tobacco use.
- B. Notice of Substance Abuse Testing Program.** At intake, offenders must be asked to sign the Notice of Substance Abuse Testing, AD ~~14-15~~17-23 Form 1, to indicate understanding of the testing program and a copy must be offered to the offender.
- C. Employee Safety.** Employees should adhere to the following minimum safety precautions when administering a drug or alcohol test:
1. Use rubber or latex gloves when handling specimens;
  2. Avoid contact of the chemicals/reagent with eyes and skin and if contact occurs, take the following actions:
    - a. For eye contact, flush with plenty of water (for at least 15 minutes), and; if eyes become irritated, contact a physician;
    - b. For contact with skin, flush with plenty of water, wash areas with soap and water, and if skin is irritated, contact a physician.
  3. Do not eat, drink or smoke at the test site;
  4. Use only the mechanical pipetting device to place urine on test slides;
  5. Do not refrigerate food or beverages where specimens are stored;

6. Practice thorough hand washing after handling specimens/chemicals;
7. Refer to the manufacturer's Material Safety Data Sheet (MSDS) for information regarding the test;
8. Have the offender clean up his/her spills using diluted chlorine bleach and soapy water (1 ~~tbsp~~tablespoon of bleach per ~~gal~~gallon of water);
9. Have the offender flush remaining specimen (if a confirmation will not be requested);
10. When testing in the office, use a plastic-lined trash receptacle for the disposal of drug/alcohol testing items; and
11. Ensure appropriate supplies are available and accessible only to authorized individuals. ~~Testing~~ supplies should include, at minimum, test kits, seals, labels, rubber gloves, specimen bottles, security tape, mailing containers and chain of custody forms.~~Testing~~.

#### **D. Substance Abuse Testing.**

1. Testing must not be used for harassment or as a means of punishment or discipline, nor must it be based on an offender's race, color, religion, gender, age or national origin.
2. ACC offenders are subject to substance abuse testing at any reasonable time if one or more of the following circumstances exist(s):
  - a. Parolees or Probationers. In accordance with a condition or lawful order set forth by a court or the Parole Board;
  - b. ~~CCC Residents, Additionally, CCC~~Community Correction Center residents are subject to substance abuse/use testing under the following circumstances:
    - (1) Under reasonable suspicion that an offender is using, has used or possesses prohibited drugs, alcohol or tobacco based on specific objective and articulated facts and reasonable inferences, and the basis for the suspicion is documented; ~~or~~
    - (2) A Center Supervisor orders (in writing) all offenders in a particular housing unit or work crew to submit to testing. This authority may not be delegated;
    - (3) The resident is selected for testing in accordance with an approved ~~computerized~~ methodology for random testing. Use of this methodology requires the following:
      - (a) Center Supervisor designation of a person to be responsible for generating lists of randomly selected offenders to be tested. The list must be kept confidential (unannounced) by the designee until testing, at which time only appropriate staff responsible for directing the selected residents' movement and the Center Supervisor will be notified.

- (b) Center Supervisor ensures that at least 25% of the center population is testing during each quarter.
- (c) Offenders selected for random testing will not be disqualified for testing based upon the fact that they were recently tested for other reasons.
- (d) The methodology used must not give ~~an~~-employee discretion to waive the selection of any offender.

~~(4)~~ (4) The Resident is being admitted into a residential center:

(5) The resident is being released from a ~~CCC~~residential center to community supervision; or

~~e.~~ (6) The court requests testing of an adult criminal defendant.

**V. DISCLOSURE OF SUBSTANCE ABUSE TEST RESULTS.** Appropriate confidentiality of information must be maintained. Requests for disclosure of test results should, when possible, be made in writing and must be properly documented as to the action taken and to whom and when disclosure was made. Authorization to release results of substance abuse tests is as follows:

- A. To the offender
- B. To other persons with the offender's prior written consent, AD ~~14-15~~17-23 Form 3
- C. Pursuant to court order
- D. To medical personnel to meet medical emergencies of the offender
- E. To agency personnel on a "need to know" basis
- F. To other criminal justice agencies on a "need to know" basis.

## **VI. TESTING PROCEDURES, CONFIRMATION AND DOCUMENTATION.**

**A. Initial Screening (On-Site Testing).** Urine specimens must be collected in a manner reasonably calculated to address privacy considerations, while preventing the substitution, contamination and adulteration of specimens. Chain of custody procedures must be followed to preclude the likelihood of erroneous identification of test results. Testing officers and observers must adhere to the following testing procedures:

1. Be of the same gender as the offender when observing urine specimen collections and position ~~himself~~him/herself in such a manner as to verify at least 30 ml. of urine specimen passes directly from the offender's body into the specimen bottle. Observation must be direct and continuous.
2. Test one offender at a time.
3. Upon the offender's arrival at the collection site, ask the offender to present photo identification unless the offender is known by the testing officer.

4. Ask the offender to remove any unnecessary outer garments and set aside purses or other hand held items to reduce the potential for or appearance of tampering with a specimen. ~~Care must be taken to~~ Allow the offender to safeguard personal belongings.
5. If deemed necessary, conduct a ~~frisk~~pat search of the offender to determine if adulterants are stored on the offender's body or clothing. The collection area must be inspected and any potential contaminants removed.
6. Require the offender to remain in the testing ~~officer's~~observer's presence throughout the entire testing process.
7. Conduct quality control of drug testing machine reagents in accordance with the manufacturer's test kit instructions.
8. Allow the offender to wash his/her hands after the specimen has been submitted and keep the specimen in view of the testing officer and offender at all times throughout the process.
9. Conduct the drug test in the presence of the offender and according to the manufacturer's testing kit instructions. NOTE: Drug testing kits must not be used beyond the expiration date on the package.
10. If the test is positive, complete Section 1 of the Offender Confession / Chain-of-Custody Form, AD ~~14-15~~17-23 Form 2, which must serve as the positive result record and Chain of Custody form. A copy of this form must be designated "Confidential" and retained in the offender's record.
11. Ask the offender to sign Section 1 of the Drug/Alcohol Test form. A failure to sign the form must not invalidate the results of any substance test.
12. Parole/Probation ~~employees must document drug tests in eOMIS. and~~ Community Correction Center employees must document drug ~~test pursuant to center guidance; optionally~~tests in eOMIS. Center employees must also document drug tests on the Offender Substance Abuse Testing Log, AD ~~14-15~~17-23 Form 4 ~~may be used.~~
13. Require an offender unable to provide a specimen to remain at the collection site until 30 ml. of urine is collected or for two (2) hours, whichever comes first. The offender may be allowed to drink ~~fluid~~eight (8) ounces of water while waiting to provide a sample.
14. If a specimen is not provided within two (2) hours of being ordered to do so, it will be considered a refusal to provide a specimen, which may result in a sanction.

15. Reject specimens if use of adulterants or tampering is suspected or observed. Document the decision to reject the sample and administer another test at the testing officer's discretion. Contamination of specimens through the use of adulterants, tampering with or attempts ~~of the same to do so~~ will be considered the same as a positive result.
  16. When testing is completed, require the offender to flush any remaining specimen and discard the container if a confirmation will not be requested.
- B. Confirmation of Drug Screening Results.** If, at the discretion of the officer, confirmation of a drug test is desirable and a confession of use cannot be obtained from an offender, the initial specimen must be used for confirmation. This confirmation test may be done on an ACC drug testing machine. A confession does not require confirmation. If further confirmation is required, the initial specimen must be conducted by a NIDA approved and legally certified laboratory using the Gas Chromatography/Mass Spectrometry (GS/MS) process. The following procedures ~~will~~must be followed when a determination to confirm has been made:
1. Keep the specimen and custody documents in the offender's view at all times until the specimen is labeled and sealed.
  2. The testing officer and the offender must complete Section 1 of the Offender Confession / Chain-of-Custody Form (Form 2), which must serve as the ACC Chain of Custody form. This provides a Chain of Custody up to the point of sending a sample for confirmation. A failure of the offender to sign the form must not invalidate the results of any drug/alcohol test. Community Correction Center procedures ~~may~~ require the testing officer to complete the optional Offender Substance Abuse Test Log (Form 4).
  3. The offender, or the testing officer in the offender's presence, must break the seal on the Department of Transportation (DOT) approved confirmation mailing kit so that both parties may inspect the container to confirm it is not contaminated.
  4. In the offender's presence, the testing officer must pour the offender's urine specimen into the confirmation bottle and secure the cap.
  5. The testing officer must instruct the offender to affix an identification label to the specimen container (or the testing officer will do so in the offender's presence) and have the offender initial the identification label. The offender will sign Section 3 (Confirmation Test Statement) of the Offender Confession / Chain-of-Custody Form (Form 2). A failure to sign the form must not invalidate the test results.
  6. In the offender's presence, the testing officer must prepare the specimen for mailing according to the NIDA-approved laboratory's confirmation kit instructions and ensure the package is properly secured to prevent tampering or leakage. The laboratory-provided Chain of Custody form must also be properly

completed. This form continues the Chain of Custody for the sample when sent for confirmation. The testing kit must be mailed, or the pickup agent contacted on the same day the specimen is obtained. If storage is unavoidable, the specimen must be refrigerated at a temperature of 33-42 degrees Fahrenheit for a period not to exceed 72 hours. The refrigerator must be located in an area inaccessible to unauthorized persons.

7. At Community Correction Centers, when confirmation results are received, the Confirmation Test Results portion of the Offender Substance Abuse Testing Log (Form 4) must be completed, recording "pos" for positive and "neg" for negative test results. Plus (+) or minus (-) sign entries must not be made.

#### **C. Documentation.**

1. Testing activity must be supported by appropriate documentation. Results of substance abuse screening and confirmation tests, where appropriate, and type of substance detected, if any, must be entered on the Offender Substance Abuse Testing Log by offender number, not name, and in the offender's chronological record, where it should remain for the period of supervision.
2. Area Managers/Center Supervisors must ensure accurate records of testing activity.

**VII. SANCTIONS FOR POSITIVE TEST RESULTS.** Appropriate sanctions for positive testingtest results must be determined in accordance with policy. Recommendations for revocation for violation of drug abuse policy must follow established procedures. At Centers, the Center Supervisor or his or her designee must interview residents to determine the source of prohibited drugs. Such interviewinterviews must be documented.

**VIII. TRAINING.** Staff conducting drug testing must be appropriately trained to collect specimens and conduct on-site substance-abusedrug tests. Training will be coordinated and documented in accordance with the Administrative Directive on Employee Training. Substance abuse testing must be incorporated in basic training programs or provided, as appropriate, during initial orientation and in annual in-service training programs.

#### **IX. ATTACHMENTS.**

1. AD ~~44-15~~17-23 Form 1 Notice of Substance Abuse Testing
2. AD ~~44-15~~17-23 Form 2 Offender Confession / Chain-of-Custody Test Form
3. AD ~~44-15~~17-23 Form 3 Authorization for Release of Drug Test and Results Information
4. AD ~~44-15~~17-23 Form 4 Offender Substance Abuse Testing Log



**Arkansas Community Correction  
NOTICE OF SUBSTANCE ABUSE TESTING**

**ORIENTATION**

As an offender under the supervision of Arkansas Community Correction, you may be required to submit urine and/or saliva specimens for testing at times specified by your Parole/Probation Officer or Residential Supervisor. Specimens will be collected under continuous and direct observation. Any action on your part to adulterate or attempt to adulterate a specimen will result in the specimen being considered compromised and will be treated as a violation of the conditions of parole, probation, release or Community Correction Center rules.

Refusal to provide a urine or saliva specimen may constitute a violation of your conditions of parole, probation, release, or custody, and you may be subject to appropriate penalties. A confirmation test by an independent lab may be requested if necessary. If a parolee or probationer requests a confirmation test, he/she must pay for the test. Refusal to sign the offender confession of illegal substance use statement (on the drug alcohol test form) does not invalidate the positive results of any substance abuse test.

**OFFENDER STATEMENT**

I have been informed of the requirements of the Substance Abuse Testing Program as outlined above. As part of the sample collection process, I will inform the testing officer if I have taken any prescription medication within the previous four (4) weeks that may cause a positive test result. I will provide positive proof of any physician-ordered prescription. I will show proper photo identification when requested by the drug testing officer.

\_\_\_\_\_  
Offender Name (Print)

\_\_\_\_\_  
ACC Officer Name (Print)

\_\_\_\_\_  
Offender Signature

\_\_\_\_\_  
ACC Officer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date



**Arkansas Community Correction**  
**OFFENDER CONFESSION / CHAIN-OF-CUSTODY**

**Section 1**

Offender Name (Print)

Offender Number

Date

Time

☐ AM ☐ PM  
of Collection

**OFFENDER'S STATEMENT:** I certify the urine sample I provided is my urine and NOTHING has been done to alter it. I certify that I have not taken any drugs or medication in the past four weeks, other than those listed below. I certify I have NOT consumed any alcohol within the past 24 hours. I understand that giving false or misleading information constitutes a violation of my supervision conditions, or community correction center rules.

List any drugs or medications used: \_\_\_\_\_

**SCREEN TEST RESULTS**

Tested positive for

☐ OPIATES ☐ BENZODIAZEPINES ☐ PCP ☐ AMPHETAMINES

☐ Offender Refused to produce sample

☐ COCAINE ☐ BARBITURATES ☐ THC/MARIJUANA ☐ NICOTINE

☐ Specimen Not Produced in a Timely Manner

☐ ALCOHOL \_\_\_\_\_ % ☐ OTHER: \_\_\_\_\_

☐ Offender Attempted To or Did Compromise Specimen Integrity

Offender Name (Print)

Offender Signature

Officer's Name

Officer's Signature

**CHAIN OF CUSTODY**

**NOTE:** This section is completed only if it is necessary for someone other than the offender and testing officer to take possession of the specimen. All persons who handle the specimen will complete this section.

RELEASED BY	RECEIVED BY	PURPOSE OF CHANGE/REMARKS	DATE	TIME
Print Name	Print Name			
Signature	Signature			
Print Name	Print Name			
Signature	Signature			
Print Name	Print Name			
Signature	Signature			

**Section 2**

**OFFENDER CONFESSION OF ILLEGAL SUBSTANCE USE**

I acknowledge that I have used the following substances within the past four (4) weeks or alcohol within the past 24 hours:

Offender's Signature

Date

Officer's Signature

**Section 3**

**CONFIRMATION TEST STATEMENT**

I hereby certify that the urine sample taken at \_\_\_\_\_ ☐ AM ☐ PM on \_\_\_\_\_ (date) is my own.  
I have sealed or witnessed the sealing and taping of the specimen container.

Offender Signature

Testing Officer/Witness Signature

The above-referenced drug screen was administered solely for the purpose of determining compliance with lawful orders or conditions imposed by the Courts or the Parole Board and not for the purpose of providing information for the diagnosis, prevention or treatment of any disease or impairment of, or the assessment of the health of the offender.

**Arkansas Community Correction**  
**AUTHORIZATION FOR RELEASE OF DRUG TEST & RESULTS INFORMATION**

**CONFIDENTIAL**

**PROHIBITION REGARDING DISCLOSURE**

This information has been disclosed to you from records whose confidentiality is protected by federal and state laws prohibiting you from making further disclosure of this information, except with the specific written consent of the person to whom it pertains. A general authorization for the release of medical or other information, if held by another party, is not sufficient for this purpose.

I, \_\_\_\_\_  
Offender Name (Print) Offender Date of Birth

authorize \_\_\_\_\_  
Releasing Department, Circuit, or Area

to disclose the following information (specify the nature and extent of information to be released):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To: \_\_\_\_\_  
Name of Person Requesting Information

\_\_\_\_\_  
Requesting Department/Agency

\_\_\_\_\_  
Street Number/Address

\_\_\_\_\_  
City State Zip Code

For the purpose of: \_\_\_\_\_  
State Purpose of Disclosure

This authorization and consent are made for the purpose of reporting my drug/alcohol test(s) result to the above-designated individual and/or organization. This authorization and consent are subject to revocation by the undersigned at any time except the extent that actions taken in reliance thereon. If not earlier revoked, this consent terminates on: \_\_\_\_\_

(Month / Day / Year)

Releaser, its agents, and its employees are hereby relieved of any responsibility and liability that may arise from the release or reproduction of such records and/or information.

\_\_\_\_\_  
Offender Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date

## Arkansas Community Correction

NAME OF OFFICER SUBMITTING REPORT:

**MONTH:**

**YEAR:**

☐ PAROLE

PROBATION

**CENTER**

**Circuit:** \_\_\_\_\_

**Area or Center:** \_\_\_\_\_

[illegible]



## 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: ~~08-1517-16~~ ACCESS TO RESIDENTIAL FACILITIES

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

FROM: ~~G. DAVID GUNTARP~~SHEILA SHARP, DIRECTOR

SUPERSEDES: AD ~~04-02~~

PAGE 18-15

APPROVED: \_\_\_\_\_ Signature on file \_\_\_\_\_ EFFECTIVE: ~~November 15, 2008~~April 19, 2017

- I. **APPLICABILITY.** This policy applies to DCCACC employees.
- II. **POLICY.** It is ~~Department of Arkansas~~ Community Correction (~~DCC~~ACC) policy to control entry and exit at DCCACC residential centers to maintain security, order, and discipline. All persons enter residential centers at their own risk and ~~shall be~~are required to meet the security and control measures for persons, vehicles, tools, equipment, and supplies. (4-ACRS-5A-16[P])
- III. **GUIDELINES.**
  - A. Entry to ~~a DCC~~an ACC residential center will be granted to individuals for operational necessities, resident visitation, and other activities as approved by DCCACC policy, Center Supervisors, or designees.
  - B. ~~Entry points to DCC residential centers for all individuals will be as described in Attachment 1, Facility Access and Reception Area. Exceptions may be authorized by the Center Supervisor or designee.~~
  - ~~C.~~ All persons entering ~~a DCC~~an ACC residential center will be required to comply with applicable DCCACC policies and procedures.
  - D. Entry-to and exit-from ~~a DCC~~an ACC residential center will be controlled to maintain security, order, and discipline. (4-ACRS-2A-01 [P])

- ED.** Upon arrival and departure, Center employees will register their presence using the electronic time clock if the Center has one. Center staff will ensure visitors, including employees from another location, sign in and out. Visitor logs will be retained for a minimum of one year.

#### IV. FACILITY ACCESS PROCESS.

- A. Contractor and Volunteer ID Cards.** With approval from the Center Supervisor or designee, and following a system of control prescribed for the center, staff may issue a ~~DEC~~An ACC ID card to a "contractor" or "volunteer." A record of issued cards should be maintained at the main entry point.

**B. Processing Facility Visitors.**

1. A visitor may be allowed access following appropriate screening and sign-in, provided he or she has a legitimate purpose for visiting. Screening may include searches as described in the ~~policy that addresses searches~~"Searches for, Control and Disposition of Contraband and Evidence" administrative directive, an electronic metal and/or drug detector screening, examining ID cards, checking dress-code compliance, checking paperwork, and asking appropriate questions such as the purpose for the visit.  
Note: Employees are not allowed to visit the facility when not on duty unless granted permission by the Center Supervisor or designee.
2. The employee screening visitors must determine that the visitor has a legitimate purpose as follows:
  - a. On the approved resident visitors list (visitors must be on the list prior to visiting individual residents) or approved by the Center Supervisor by memo.
  - b. Attorney for a resident or is seeking to represent a resident.
  - c. Valid work or delivery order. Staff may choose to verify legitimacy of a visitor by contacting his or her employer or requesting additional information to include information necessary to run a background check. A driver or passenger accompanying a visitor may be allowed access with the approval of the Center Supervisor, his or her designee, or the Shift Supervisor.
  - d. ~~A DEC~~An ACC employee conducting business.
3. When requirements are met, staff should view the visitor's photo ID, issue a visitor badge and have the visitor sign-in. Upon departure, ~~obtain~~retrieve the temporary visitor's badge and have the visitor sign-out.
4. Follow guidance provided by the Center Supervisor for such areas as escorting visitors and tool/key control.

### C. Visits with Individual Residents.

1. Visits with residents ~~shall~~must be continuously supervised by staff (4-ACRS-2A-02)
2. Searches ~~shall~~must be conducted according to ~~policy titled~~the administrative directive, "Searches for, Control and Disposition of Contraband and Evidence"
3. Staff must apply the guidance provided for visitors in the administrative regulation-~~titled,~~ "Resident Visitation." That policy includes guidance on visitation conditions, restrictions, special visits, and enforcing visitor rules. ~~(4-ACRS-2A-02 and -5A-18)~~
4. ACIC/NCIC Background Check. The Records Section Supervisor (or other certified person designated by the Center Supervisor) ~~shall~~must conduct an ACIC/NCIC information check for visitor applicants and take appropriate action as follows:
  - a. If there is no criminal history, add the applicant to the Approved Visitor List.
  - b. If the applicant is not currently on Parole/Probation, but has a criminal history, forward the request and a copy of the ACIC/NCIC report to the Center Supervisor for review and approval consideration.
  - c. If the applicant is on Parole/Probation, ask the supervising Parole/Probation Officer whether the applicant should be allowed to visit. If the officer indicates ~~that~~ visitation should be allowed, complete Form 2 with the officer's name and date contacted. If the officer recommends against visitation, ask ~~to the~~ officer to provide a completed Form 1, "Report Regarding Residential Center Visitation," attach the ACIC/NCIC report and forward the request to the Center Supervisor for a decision.
  - d. The Center Supervisor will review applications when the ACIC/NCIC check shows a criminal history and indicate approval or disapproval on Form 2. Unless there is an indicator that an applicant poses a safety or security threat, visits should be approved. Examples of circumstances that may cause an applicant to be denied visitation privileges for posing a threat to safety or security are as follows: the applicant was released from prison within the past year; 2 was convicted of a drug related crime within the past two years; 1 was convicted of a violent crime within the past three years; 1 or has pending charges for a violent or drug-related crime. (4-ACRS-5A-17)
- e. Form 5, Results of Application for Visitation Privileges, may be used by the Records Supervisor or designee to inform residents of applicants approved or disapproved for visitation.

f. Visitor Records.

- (1) Completed, Forms 1 and 2 ~~shall~~must be maintained as confidential records.
- (2) The Records Supervisor ~~shall~~or designee must maintain a record of approved visitors on Form 3 or ~~a computer-generated~~an electronic equivalent.
- (3) All visitors will be required to show identification and complete appropriate portions of the Visitation Log, Form 4. Unusual incidents will be recorded in the visitation log by the staff member supervising visits. Any incident reports written will be referenced on the visitation log.

5. Transport - Law Enforcement Officials.

- a. ~~Official(s)~~Officials transporting a resident(s) ~~shall be required to~~must secure all weapons and ammunition in their vehicle or in a pre-designated area approved by the Center Supervisor.
- b. ~~Official(s)~~Officials will be given directions by the gate or access control officer for entry into the facility.
- c. The identification of the ~~official(s),~~officials, if unknown, ~~shall~~must be verified. If residential center staff are unable to make a positive identification of the ~~official(s),~~officials, direct contact with ~~the official's~~their agency ~~shall~~must be made to clarify discrepancies. The Shift Supervisor of the facility will be contacted if a positive identification cannot be made after contacting the ~~official's~~officials' agency.

6. Vehicles.

- a. ~~A vehicle(s)~~Vehicles assigned to the facility will be granted entry to the residential center grounds as required for facility operations and authorized by the sally port gate supervisor.
- b. A search for contraband and unauthorized personnel may be conducted of a vehicle entering and exiting the secure perimeter prior to actual entry or exit.
- c. An emergency vehicle(~~s~~) authorized by the shift supervisor or designee that enters or exits the secure perimeter will be expedited by a quick visual search to verify authorized individuals and equipment.
- d. A vehicle log ~~shall~~must be maintained by each facility to record all vehicles that enter and exit the secure perimeter.
- e. A vehicle may remain on the facility grounds for as long as is required for the driver and/or passenger(s) to accomplish the intended purpose(s).



7. Tools and Equipment.

- a. Entry and exit of all tools and equipment into the secure perimeter of a facility requires approval of the shift supervisor.
- b. All tools and equipment will be searched prior to entry and exit of the secure perimeter.
- c. All tools and equipment approved to enter the secure perimeter on a temporary basis will be inventoried prior to entry and accounted for upon exit from the facility as prescribed by the Center Supervisor.

8. Supplies.

- a. Entry of all supplies onto a secure perimeter of a facility will require approval of the shift supervisor or designee.
- b. Supplies will be searched for contraband prior to entry or exit of the secure perimeter. Sealed containers may be opened for inspection. Any item large enough to conceal a person ~~shall~~must be searched before leaving the secure perimeter.

**V. ATTACHMENTS.**

- ~~Attachment 1 Facility Access and Reception Area~~
- ~~AD 08-15~~ Form 1 Report Regarding Residential Center Visitation by Offender
- ~~AD 08-15~~ Form 2 Request for Review of Applicant for Visitation Privileges
- ~~AD 08-15~~ Form 3 Approved Visitor List
- ~~AD 08-15~~ Form 4 Visitation Log
- ~~AD 08-15~~ Form 5 Result of Application for Visitation Privileges

Arkansas Community Correction

MEMORANDUM CONFIDENTIAL

TO: ☐ SWCCC (Texarkana) Records Supervisor  
☐ ECACCC (West Memphis) Records Supervisor  
☐ CACCC(Little Rock) Records Supervisor  
☐ NECCC (Osceola) Records Supervisor  
☐ NWACCC (Fayetteville) Records Supervisor  
☐ Omega TVP (Malvern) Records Supervisor

FROM: PAROLE/PROBATION OFFICER: \_\_\_\_\_

RE: REPORT REGARDING RESIDENTIAL CENTER VISITATION BY OFFENDER

DATE: \_\_\_\_\_

**Background Information:** This form letter is used by Parole/Probation Officers to provide information about Parolee or Probationer progress when requested by a ACC residential center representative. It is used when a Parole/Probation Officer recommends against allowing an offender visitation privileges due to potential for disrupting the security of the facility or potential for causing someone harm. The information is used by the Center Supervisor to assess whether visitation privileges should be granted.

**Instructions:** If the Parole/Probation Officer believes there is undue risk involved with having the parolee/probationer visit the residential center, this form must be completed promptly and sent to the residential center. If there is no such concern, the officer should inform the residential center representative.

☐ Parolee ☐ Probationer Name: \_\_\_\_\_ ACC Number: \_\_\_\_\_

The most recent drug screen conducted on (date): \_\_\_\_\_ for the above named offender was

☐ POSITIVE or ☐ Negative or ☐ Drug screens not required for this offender.

The above named offender ☐ HAS (or) ☐ HAS NOT been complying with any mandated programs, e.g. AA, NA, GED, etc.

☐ I believe this offender may be a threat to residents, employees, or Center operations.

Comments: \_\_\_\_\_

\_\_\_\_\_  
Parole/Probation Officer's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number

Arkansas Community Correction

CONFIDENTIAL

MEMORANDUM

**TO: CENTER SUPERVISOR**

**FROM: \_\_\_\_\_ (Records Supervisor or Designee)**

**RE: REQUEST FOR REVIEW OF APPLICANT FOR VISITATION PRIVILEGES**

**DATE: \_\_\_\_\_**

Please review this application package for applicant: \_\_\_\_\_

Indicate whether the person should be granted visitation privileges.

☐ This applicant for visitation privileges has a Criminal History, refer to the attached confidential ACIC/ NCIC printout,

☐ This applicant for visitation privileges is NOT currently on Parole/Probation or:

☐ The Parole/Probation Officer informed me they do not have a concern that the applicant would be likely to cause undue harm; **OR**

☐ The Parole/Probation Officer does not recommend approval of the offender for visitation (see Form 1, attached, and the ACIC/NCIC report).

\_\_\_\_\_  
Name of Parole/Probation Officer

\_\_\_\_\_  
Date/Time Contacted

**TO: RECORDS SUPERVISOR**

**FROM: CENTER SUPERVISOR**

**RE: REPLY TO VISITATION PRIVILEGE REQUEST**

**DATE: \_\_\_\_\_**

☐ The applicant is approved for visitation,

☐ The applicant is NOT approved for visitation,

☐ Other: \_\_\_\_\_

\_\_\_\_\_  
Center Supervisor Signature

\_\_\_\_\_  
Date

## Arkansas Community Correction APPROVED VISITOR LIST

[illegible]

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## Attachment 1

### ~~FACILITY ACCESS AND RECEPTION AREA~~

#### ~~A. Central Arkansas Community Correction Center Facility Access / Reception Area: 4823 West Seventh Street, Little Rock AR. 72205~~

- ~~1. The front or main entrance located on the north (Seventh Street) side of the building will be the entrance for the following persons:~~
  - ~~a. all staff,~~
  - ~~b. visitors for administrative and support staff,~~
  - ~~c. contractors performing contract or maintenance work, and,~~
  - ~~d. volunteers conducting religious, Alcoholics Anonymous or other approved meetings.~~
- ~~2. The intake door located on the west side of the building, north of the kitchen, will be used by:~~
  - ~~a. residents being brought to the Center from the courts and/or other detention/correctional facilities, and,~~
  - ~~b. residents being returned from court, medical runs, emergency furloughs or other approved absences.~~
- ~~3. Kitchen supplies will be brought through the kitchen located on the west side of the building.~~
- ~~4. Visitors making approved regular visits to the resident population will enter through the service door located on the west side of the building (south of the kitchen door).~~

#### ~~B. Southwest Arkansas Community Correction Center Facility Access / Reception Area: 506 Walnut Street, Texarkana, AR. 71854.~~

- ~~1. Access for all staff, resident and official visitors, volunteers, and routine deliveries (U.S. Mail, small packages, etc.) is through the Walnut Street (west side) of the building.~~
- ~~2. Entrance for law enforcement personnel returning residents from court and new commitments is located on Walnut Street, north of the main entrance.~~
- ~~3. Food service, commissary, and maintenance department deliveries are located on the east side of the facility on Hazel Street.~~

#### ~~C. Southeast Arkansas Community Correction Center Facility Access / Reception Area: 7301 West Thirteenth Street, Pine Bluff, AR. 71602. Access for all officers,~~

~~staff and other authorized vehicular or pedestrian traffic is through the Thirteenth Street Gate.~~

~~**D. Northeast Arkansas Community Correction Center Facility Access / Reception Area:-  
1351 Cyro Road, Osecola, AR 72370**~~

- ~~1. The main entrance, located on the west side of the building and handicapped accessible, is used for routine entry/exit by the following people:~~
  - ~~a. All staff~~
  - ~~b. Contractors~~
  - ~~c. Volunteers, and~~
  - ~~d. people visiting staff members.~~
- ~~2. Immediately to the left of the main entry doors are handicapped accessible double doors for use by people who have been approved to visit a resident.~~
- ~~3. The west side of the building near the rear are the intake doors which are used for new commitments, Community Work Crew turnout, and medical emergencies.~~
- ~~4. At the rear of the building on the north end are the doors for the resident recreational area. These doors are only for use by staff and residents when using the recreation area.~~
- ~~5. The double doors at the south end of the building are used exclusively for Parole/ Probation.~~
- ~~6. The double doors leading to the maintenance shop and Community Work Crew Shop on the east side of the building are for use by staff and residents escorted to the maintenance shop.~~
- ~~7. Also the double doors on the east side are for access to the food production area and receiving deliveries only.~~
- ~~8. All exit doors may be used during an emergency evacuation.~~

~~**E. Malvern Community Correction Center Facility Access/Reception Area:-  
104 Walco Lane, Malvern, AR 72104**~~

- ~~1. The main entry on the east side is used for staff, volunteers, and visitors.~~
- ~~2. The north and south doors are used for residents accessing the outside recreation area.~~
- ~~3. The vehicular sally port doors on the west side of the building are for resident intake/discharge and residents on community work crews.~~
- ~~4. The doors adjacent to the sally port on the west side are for supply deliveries.~~

~~**F. Northwest Arkansas Community Correction Center Facility Access/Reception Area:-  
Residential Building—100 North College Avenue, Fayetteville, AR 72701;-  
Administration Building—114 North College Avenue, Fayetteville, AR 72701**~~

- ~~1. Staff assigned to the Administration Building enters through the covered entrance on the south side of the building. Visitors to the Administration Building enter through the front, west entrance.~~
- ~~2. Assigned staff, visitors, commissary vendors, and volunteers enter the Residential Building through the front entrance which faces southwest.~~
- ~~3. Kitchen deliveries and bulk deliveries are made through the south sally port entrance of the Residential Building.~~



- ~~4. Entrance for law enforcement personnel transporting residents, is located at the north side of the Residential Building.~~
- ~~5. Drug court personnel, clients and drug court deliveries enter the Administration Building through the lower east entrance.~~

AD ~~08-15~~17-16 Form 3

[illegible]

Note. Retain completed forms for one year. AD ~~08-1517-16~~ Form 4

**Department of Arkansas Community Correction**

**MEMORANDUM**

**TO:** \_\_\_\_\_ (Resident)

**FROM:** \_\_\_\_\_ (Records Supervisor or Designee)

**RE:**     **Result of Application for Visitation Privileges**

**DATE:** \_\_\_\_\_

Visitation applications for the following people have been reviewed and decisions are indicated below:

APPLICANT NAME	APPROVED OR DISAPPROVED	REMARKS
_____	<input type="checkbox"/> Approved	_____
_____	<input type="checkbox"/> Disapproved	_____
_____	<input type="checkbox"/> Approved	_____
_____	<input type="checkbox"/> Disapproved	_____
_____	<input type="checkbox"/> Approved	_____
_____	<input type="checkbox"/> Disapproved	_____
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_____	<input type="checkbox"/> Disapproved	_____
_____	<input type="checkbox"/> Approved	_____
_____	<input type="checkbox"/> Disapproved	_____
_____	<input type="checkbox"/> Approved	_____
_____	<input type="checkbox"/> Disapproved	_____
_____	<input type="checkbox"/> Approved	_____
_____	<input type="checkbox"/> Disapproved	_____



## 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: 17-04-25 Employee Training and Certification**

**TO: Arkansas Community Correction (ACC) Employees**

**FROM: Sheila Sharp, Director**

**SUPERSEDES: AD 16-1517-04**

**APPROVED: Signature on file**  
2017

**EFFECTIVE: ~~February 1~~ May 5,**

**I. APPLICABILITY.** This directive applies to Arkansas Community Correction (ACC) employees.

**II. POLICY.** ACC provides employees with opportunities and encouragement to gain necessary knowledge, skills, abilities, and information to enhance their ability to achieve the ACC mission and meet the following standards and/or requirements Prison Rape Elimination Act, American Correctional Association (ACA) accreditation, Commission on Law Enforcement Standards (CLEST) and the Office of Alcohol and Drug Abuse Prevention (OADAP) licensing requirements. (4-ACRS-7B-14 through -7B-18[P], and 4-APPFS-3A-20).

### **III. DEFINITIONS.**

**A. CLEST (Commission on Law Enforcement Standards)-).** A regulating agency that requires minimum selection and training standards for admission to employment as a law enforcement officer in Arkansas. All applicants for law enforcement positions must meet the requirements established by CLEST and complete CLEST approved training to obtain their certification.

**B. IN-SERVICE TRAINING-.** Regular, on-going training for employees that is provided during the course of employment ~~for~~with ACC.

**C. NEEDS ASSESSMENT-.** Surveys conducted by the Central Training Section (CTS) that measure students' learning and training needs. This is done electronically and manually for all documented trainings.

**D. PRE-SERVICE TRAINING-.** Any ACC required training that must be successfully completed by law enforcement officers, correctional officers, and treatment staff that may be eligible for assigned duties.

**IV. PURPOSE AND PROGRAM MANAGEMENT.** To establish uniform procedures within Arkansas Community Correction for standards and training for employees.

#### **A. Code of Conduct.**

Rules of conduct, as established by the ACC and approved by the Board of Corrections shall be adhered to by all employees attending a class conducted by or under the authority of the ACC. Violation of any rule of conduct shall result in written notification of the incident to the employee's supervisor and the Deputy Director of Administrative Services. All conduct notifications to

supervisors will be initiated by the Training Administrator. The appropriate Division Deputy Director, or approved supervisory designee, may remove their employee from training if it is determined that the employee's continued involvement or attendance at training constitutes a safety hazard to the individual ~~or~~ class, or the employee's conduct is disruptive.

**B. Administration.**

The Deputy Director of Administrative Services is responsible for oversight of the Central Training Section (CTS), which will be coordinated and supervised by the Training Administrator. (2-CO-1D-01, and 4-APPFS-3A-06)

**C. The Training Administrator must:**

1. Assess ACC's training programs annually and submit a written training needs assessment report to the Deputy Director of Administrative Services and obtain approval, with consideration to the following:
  - input from employees
  - a statistically valid job/task analysis to determine the needed knowledge, skills, and abilities to perform each job (4-APPFS-3A-11)
  - existing basic, pre-service, in-service, specialized, media-based, and other training programs. (4-APPFS-3A-07, and -3A-19)
2. Annually, use the training program assessment to update the agency training plan. Submit a written training plan to the Deputy Director of Administrative Services and obtain approval, with consideration to the following: the plan must provide for an ongoing formal evaluation of all pre-service, in-service, and specialized training programs, and for the annual written assessment report. (2-CO-1D-03; 4-ACRS-7B-11; 4-APPFS-3A-06, -3A-12, ~~and~~-3A-14 and 3A-19)
3. Maintain an electronic catalog and schedule of available classes that ACC employees have access to review. Provide information about other useful training resources such as on-line training and available CTS library materials. Ensure adequate space and equipment. (4-APPFS-3A-13 and 3A-24)
4. Obtain and maintain an electronic list of training requirements and required training hours for ACC positions.
5. Ensure any person hired for a position as an (LEO) Law Enforcement Officer completes the training standards set by the Commission on Law Enforcement Standards and ACC.
6. (CTS) Training Program:  
The Central Training Section staff is responsible for coordinating training and obtaining CLEST certification for ACC.

**V. TRAINING REQUIREMENTS.**

**A. All Employees.**

ACC employees must participate in required training and meet or exceed the minimum requirements for their position. ~~Attachment 1 can be used as a guide that describes the minimum training hours for various ACC employee categories.~~ Employees who are required to maintain a license or certification may have additional training requirements and a different time period for meeting them.

In addition to ACC-sponsored training, and with appropriate approval in advance, employees

are encouraged to attend professional meetings, seminars, external training, computer-based training, and webinars. Employees may request reimbursement pursuant to applicable policy. ~~(4-ACRS-7B-19, 4-APPFS-3A-21)~~

~~In addition to meeting basic requirements, employees are encouraged to seek training from a variety of sources in areas that enhance ability to perform the job, and better understand ACC operations and the corrections career field. All employees shall receive in-service training provided by qualified instructors, subject matter experts, guest instructors, and/or through CTS. Some training resources are listed on EagleNet.~~  
~~(4-ACRS-7B-19[P] and 4-APPFS-3A-19)~~

Annual training requirements must be fulfilled during the period beginning 60 days prior to the employee's merit eligibility date and ending 12 months later. *For example, for a merit eligibility date of October 1, the training rating period begins August 1 of one year and ends July 31 of the following year.*

## B. New Employees

~~All newly hired employees required to attend either the Residential Services Basic Employee Training Academy or the Parole/Probation Basic Training Academy must be assigned a Field Training or Security Training Officer upon hire. Program Descriptions and begin on the job training immediately.~~  
Administrative Requirements.

~~Failure to complete required pre-service training within the initial probationary period of employment, not to exceed 12 months from date of employment, may result in disciplinary action up to termination.~~

1. ~~Residential Services Basic Training Academy (RSBT) — This.~~ The RSBT is approximately four week course weeks long; length may vary depending on agency needs. RSBT is designed to provide newly hired ~~employees assigned to~~ Residential Services employees with a better good understanding of their basic job functions ~~within ACC's Residential Centers.~~ This course is comprised of classroom work, practical activities, physical fitness, teambuilding activities, and comprehensive and performance based testing. The Deputy Director of Residential Services must approve each Academy schedule to ensure all classes ~~meet ACC's policies.~~ Note: The length of this course can be subject to change based on Agency needs. are aligned with agency policy.

- ~~a. Successfully complete 40 hour JAKE orientation training within the first 60 days of employment and on the job training prior to full time job duties. (2-CO-1D-05)~~
- ~~b. Successfully complete 136 hour academy without missing more than eight hours within the initial 12 months of employment~~
- ~~c. Successfully complete defensive tactics, performance testing and three exams with an overall 70 percent academic average~~
- ~~d. Complete additional courses and weapons qualifications if assigned to a Community Work Crew (CWC) authorized to carry firearms.~~

2. ~~Parole/Probation/Parole Officer Basic Training Academy (PPO) — This.~~ ACC's Parole/Probation Officers are certified law enforcements officers. Achieving certification begins with attending the Parole/Probation Officer Basic Training Academy, which is typically six-week course weeks long. Length may vary depending on agency needs. The Academy is designed to provide newly hired officers a better understanding of their basic job functions of supervising offenders. This course is comprised of classroom work, practical activities, physical fitness, teambuilding activities, and comprehensive and

performance-based testing. The Deputy Director of Parole/Probation must approve each Academy schedule to ensure all classes meet ACC's policies. **Note: The length of this course is subject to change based on Agency needs** are aligned with agency policy.

- a. ~~Successfully complete 40 hour JAKE orientation training within the first 60 days of employment and on the job training prior to full time job duties. (2-CO-1D-05)~~
  - b. ~~Successfully complete the 262 hour academy within the initial 9 months of employment without missing more than eight hours. In extenuating circumstances CLEST may approve a 3 month extension. The academy requirements include:~~
    - ~~Successfully complete defensive tactics, performance testing and all academic requirements with an overall 70 percent average~~
    - ~~Successfully complete firearms qualification with 80 percent accuracy.~~
3. **Security and Field Training Officer Programs (STO) Program.** The Security Training Officer (STO) Program is on-the-job training designed and taught by experienced residential and field staff that teach and train while on the job. These programs are. This program is designed to provide more job-related coaching that will allow newly hired employees to be trained consistently across the state. JAKE Coordinators are responsible for enrolling employees in respective Training Officer Programs. Each employee must successfully complete all aspects of the STO Program to maintain employment with ACC.

a. ~~Security Officer~~

4. **Field Training (STO Officer (FTO) Program**—This. The Field Training Officer (FTO) Program is for on-the-job training designed and taught by experienced Parole/Probation Services staff. This program is designed to provide more job-related coaching that will allow newly hired employees that work to be trained consistently across the state. Detailed guidance is provided in Residential Services the Field Training Officer Program policy. Each employee in the STO program must successfully complete all aspects of the program to maintain employment with ACC.

**C. New Employee Training Requirements.**

Failure to complete required training within the required time may result in disciplinary action including employment termination.

**1. All New Employees.** All new employees must:

Successfully complete the 40-hour New Employee Orientation training within the first 60 days of employment and on-the-job training prior to full time job duties. (2-CO-1D-05)

**2. New Residential Services Employees.** All new Residential Services employees who are working in a residential facility must be assigned to a Staff Training Officer (STO) upon hire and promptly begin on-the-job training. New employees must successful complete:

- a. New Employee Orientation training within the first 60 days of employment and prior to full time job duties. (2-CO-1D-05)
- b. Security Officer Training Program prior to full time job duties
- c. RSBT without missing more than eight hours. The Academy must be completed within the first 12 initial nine months of employment

b. ~~Field Training Officer (FTO) Program~~—~~This program is for newly hired officers that work~~



d. ~~Successful completion of defensive tactics, performance testing and three exams with an overall academic average of at least 70 percent during the RSBT Academy.~~

4. ~~New Employees in Parole/Probation Services. Each employee~~**Officer (PPO) Positions.** ~~All new Employees in the FTO program~~**Parole/Probation Officer (PPO) positions must successfully complete all aspects of initial training as follows:**

a. ~~New PPOs must be assigned to a Field Training Officer upon hire and must complete training described in the program to maintain employment with ACC.~~

~~The Field Training Proficiency checklist shall be sent to Officer Program policy.~~

b. ~~Successfully complete the FTO Coordinator and CTS upon completion. This program~~**40-hour New Employee Orientation training within the first 60 days of employment and on the job training prior to full time job duties.**

c. ~~Successfully complete the Parole/Probation Officer Basic Training Academy without missing more than eight hours. The Academy must be completed within the first~~**42initial nine (9) months of employment. In extenuating circumstances, CLEST may pre-approve a three-month extension. The academy requirements include:**

- ~~Successful completion of defensive tactics, performance testing and all academic requirements with an overall average of at least 70 percent~~
- ~~Successful completion of firearms qualification with at least 80 percent accuracy. Failure to qualify during the Academy will result in employment termination.~~

d. ~~Successfully complete ACIC Level I training.~~

5. **New Employees on the Special Response Team (SRT).**

a. ~~A newly-hired employee on the SRT who is already a certified law enforcement officer in good standing may complete the requirements, orientation and training described in the form entitled "Firearm Qualification for New-Hires who are Already a Certified Arkansas Law Enforcement Officer" to qualify for carrying a firearm prior to completing the Parole/Probation Officer Basic Training Academy.~~

b. ~~All newly-hired SRT employees must successfully complete the 40-hour New Employee Orientation training, ACIC Level 1 training, and eOMIS training within the first 60 days of employment.~~

c. ~~The SRT Commander must ensure additional training is provided as appropriate.~~

6. **New Employee Training for Treatment Staff/Counselor Positions and Polygraph Examiner Positions.** ~~New employees in treatment staff/counselor positions and polygraph examiner positions must:~~

a. ~~Successfully complete New Employee Orientation training within the first 60 days of employment and prior to full time job duties.~~

b. Comply with training requirements described in the policy entitled "Recruiting and Hiring."

c. Comply with other applicable training requirements for their position.

**D. Promotions.**

Employees promoting into supervisory positions must complete the Supervisor Management Level I and II courses offered by CTS.

**DE. Supervisor Management Course.**

Employees that are newly hired or are promoting into a supervisory position are required to take one of the following supervisor management courses within their first year of hire or promotion.

1. Supervisor Management Level I – A 40 hour course designed to teach ACC specific processes and procedures
2. Supervisor Management Level II - A 40 hour course designed to teach employees theoretical concepts on managing employees

**E. F. Certified Law Enforcement Officers.**

All officers certified as Law Enforcement Officers are required to successfully complete the following ~~annual~~ in-service training required by CLEST and ACA: ~~annually unless otherwise noted.~~ This ~~include training will fulfill~~ the 16 required CLEST hours, ~~which are as follows:~~ (4-APPFS-3B-02M, 3B-01, 4-APPFS-3B-06, 4-APPFS-3E-05, 4-APPFS-3C-02, 2-CO-1C-11, PREA 115.211)

1. Code of Ethics - An agency policy and required by ACA
2. Use of Force – A 4-hour block of instruction. An agency policy that is required by CLEST and ACA
3. Firearms – Employees certified as law enforcement officers are required by CLEST to successfully complete annual requalification. ~~This is a CLEST requirement~~
4. Defensive Tactics – This is an agency requirement and is directly related to use of force and is required by ACA
5. Racial Profiling – An agency policy and required by CLEST
6. Sexual Harassment – An agency policy required by ACA
7. PREA – (PREA 115.211)
8. Critical Incident Report Writing
9. ~~Interpersonal Communications~~
10. CPR/First Aid (every two years) ~~Required by Agency-~~ American Heart Association certification requirement

~~CLEST requires law enforcement officers to complete 16 hours of continuing education that can be applied to the 40 hours of annual training required by ACC.~~

10. ACIC Level I

It is the duty of the employee to meet annual training requirements to remain certified through ACC.

**FG. Community Work Crew (CWC) Course.**

This is a 40-hour course that is designed ~~to arm and certify for~~ Residential Services security staff ~~to who~~ supervise offenders ~~while performing community service. An officer who has successfully completed this course. Successful completion is authorized to carry an agency approved basis for issuing a~~ firearm ~~as outlined in pursuant to~~ the "Weapons and Security Equipment-AD." policy. It is the duty of the employee to meet annual training requirements to remain certified through ACC. (4-APPFS-3C-02, Ref 3ACRS-3A-05(4-ACRS-2B-01M, 4-APPFS-3B-06, 4-APPFS-3B-02M, 3B-01). The Chief Deputy Director must approve all classes and participants. Participants in this course must successfully:

1. ~~Successfully~~ complete all academic requirements with at least a ~~minimum~~ 70 percent average
2. ~~Successfully~~ complete and pass all physical fitness requirements
3. ~~Successfully~~ pass firearms qualification with a minimum at least 80 percent accuracy
4. ~~Successfully~~ pass all phases of defensive tactics.

~~Officers that~~ Security Staff who have successfully completed this course are required to complete the following to ~~keep their certification current through ACC. meet the requirements for carrying a firearm as described in the Weapons and Security Equipment policy.~~

1. Use of Force, annual refresher
2. Defensive Tactics, annual refresher
3. Firearms – must successfully ~~requalify, on an annual basis, re-qualify annually~~ on ACC's approved firearms course.
4. Critical Incident Report Writing, annual refresher.

#### **GH. Part Time II Certified Officer Course.**

This is a minimum of a 110-hour course approved by ACC policy that allows specifically approved ACC personnel to become certified as a specialized law enforcement officer. The Director must approve when this course is held and the employees who attend it. Employees in this course must:

1. successfully complete all academic requirements with a minimum average of 70 percent
2. successfully complete and pass all physical fitness requirements
3. successfully pass firearms qualification with a minimum of 80 percent accuracy
4. successfully pass ~~all phases of~~ defensive tactics.

Officers ~~that who~~ have successfully completed this course are required to complete the following annual refresher training, or as noted below, to keep their certification current through ACC: (4-APPFS-3B-02M, 3B-01, 4-APPFS-3B-06, 4-APPFS-3E-05, 4-APPFS-3C-02, 2-CO-1C-11, PREA 115.211)

1. Code of Ethics - An agency policy and required by ACA
2. Use of Force – Normally taught in four blocks of instruction. An Agency policy that is required by CLEST and ACA
3. Firearms – Employees certified as law enforcement officers are required to successfully complete annual requalification. This is a CLEST requirement
4. Defensive Tactics – This is an agency requirement and is directly related to use of force and required by ACA
5. Racial Profiling – An agency policy and required by CLEST
6. Sexual Harassment – An agency policy and required by ACA
7. PREA – (PREA 115.211)
8. Critical Incident Report Writing
9. ~~Interpersonal Communications~~

~~40.9.~~ CPR/First Aid (every two years) Required by ACC American Heart Association certification requirement.

According to CLEST, law enforcement officers are required to complete 16 hours of continuing education. CTS is responsible for certifying many of the required trainings above to help meet this standard.

It is the duty of the employee to meet annual training requirements to remain certified through ACC.

#### **HI. Firearms Qualification Training.**

- ~~1. Residential security staff that is assigned a weapon while on duty must complete assigned additional courses and demonstrate proficiency in firearms use by qualifying annually with 80 percent accuracy on an agency approved firearms course.~~
- ~~2. Administrative Officers and Probation/Parole Officers that are assigned a weapon while on duty must demonstrate proficiency in firearms by qualifying annually on agency approved firearms with an 80 percent accuracy.~~

Staff must meet the initial and requalification training requirements described in this policy for their positions. Firearms qualification must be accomplished on an agency-approved firearm course, and students must demonstrate proficiency to include shooting with at least 80 percent accuracy. Training is just one aspect of meeting the requirements for carrying a firearm. Authorization to carry a firearm is described in the policy entitled "Weapons and Security Equipment."

#### **J. Defensive Tactics.**

All Residential Services positions assigned to work security and (LEO) uniformed Parole/Probation/Parole Officer positions are required to participate and successfully complete ACC's Defensive Tactics Program, which includes the following:

1. Use of Force – a minimum of a four-hour block of instruction that must be taught as a part of the Defensive Tactics practical
2. ~~Phases I, II, III – a 32 hour initial practical that CTS recommends being taught in three phases.~~ Once an ACC employee completes the initial ~~32 hour~~ course, he ~~or~~ /she is only required to successfully complete an annual 16-hour refresher.

#### **JK. Instructor Certification.**

This is a 40-hour course that is designed to provide ACC employees with the skills necessary to instruct training classes within ACC. Based on individual credentials, those enrolled may receive a different level of CLEST certification.

1. **Instructor Qualifications.** Instructors must be qualified in the area in which they instruct. (4-ACRS-7B-12 [P]) In addition, ACC staff who instruct must:
  - a. successfully complete a 40-hour instructor development, OR
  - b. have a law degree, OR
  - c. be approved by CLEST (Commission on Law Enforcement Standards) based on appropriate credentials such as:
    - current teacher certification credentials
    - master instructor status (as recognized by the military)
    - a current or former Arkansas Law Enforcement Training Academy (ALETA) instructor, or

- in a key ACC position such as Director, Chief Deputy Director, or Deputy Director.
- d. CTS staff instructors must also successfully pass the Residential Services Basic Training class and ACC Parole/Probation Officer Academy within 12 months of employment. (4-ACRS-7B-10, 4-APPFS-3A-08)

## **2. Requirements for Instructing CLEST-Certified Training.**

- a. To instruct a Parole/Probation Academy class and any recurring training class for which CLEST training credit is required or desired, the instructor must meet the above requirements. Also, the instructor and lesson plan must be pre-approved for each specific class by the Arkansas Commission on Law Enforcement Standards and Training (CLEST). Submit CLEST Form F-5, "Application for Certification of Course<sup>22</sup>" for pre-approval to the CTS Training Administrator who will forward the form to CLEST.
- b. The Training Administrator must obtain CLEST approval of all Parole/Probation Academy instructors and the curricula before each Academy. The Training Administrator must also facilitate the process for annual CLEST approval and certification of instructors and training curriculum for the Racial Profiling and Firearms Qualification classes, which will take place each October, in addition to the required CLEST Training hours for Law Enforcement Officers.

~~Law Enforcement Officers~~LEOs must have proof of the above before an audit can be considered complete. Certificates will not be issued before CLEST audit deficiencies are corrected.

- 3. Instructors must plan for and use appropriate strategies to determine successful completion of training programs. (4-ACRS-7B-12 [P])
- 4. Instructors are encouraged to make appropriate use of community resources. (4-ACRS-7B-13)
- 5. For curriculum courses, the instructor must give the JAKE Coordinator a sign-in roster and lesson plan. Courses that are CLEST approved require a copy of the signed f-18.
- 6. For each non-curriculum training session, the instructor must give the JAKE Coordinator a sign-in roster and some description of the lesson such as learning objectives, a written description of the content and outline, or a PowerPoint presentation.
- 7. CTS must process CLEST instructor certification requests to the Commission.
- 8. The Deputy Director of Parole/Probation Services must ensure the availability of a pool of Parole/Probation Officers qualified as firearms instructors to provide firearms training and other trainings as deemed necessary.

## **KL. Certified and Licensed Staff.**

All professional and certified staff must comply with applicable state and federal registration, certification, and licensure requirements. Verification of current credentials and job descriptions must be on file. (4-ACRS-7B-02)



## **L—M. Training Hour Requirements.**

- ~~1. Administrative staff shall~~
  - ~~1. Residential Services staff must receive forty (40) hours of training in addition to orientation training during their first year of employment with ACC. Each year after that, Residential Services staff must receive forty (40) hours of annual training.~~
- ~~2. Parole/Probation staff must~~ receive forty (40) hours of training in addition to orientation training during their first year of employment with ACC. ~~Each year after that, Parole/Probation staff must receive forty (40) hours of annual training.~~
- ~~2.~~
  - ~~a. Managerial staff shall receive~~Employees - Forty (40) hours of training in addition to orientation ~~training during their the~~ first year of employment ~~with ACC and forty hours of annual training each year after that.~~
  - ~~b. Non-Managerial Employees -~~ Sixteen (16) hours of training in addition to orientation ~~during the first year of employment and 16 hours of annual training- each year after that.~~

Central Office

## **MN. Attendance.**

1. Pre-Service Training (Basic Training): An employee having an unexcused absence or an excused absence of more than one (1) day may be removed by ~~their supervisor~~the CTS Training Administrator from the training and returned to his/her work station until reviewed by the Deputy Director of Administrative Services. Once students are scheduled for Residential Service Basic Training, only the Deputy Director of Residential Services or Chief Deputy Director is authorized to remove a student to fill job requirements at a center.
2. An employee having an excused absence of one (1) day or less may make up the missed training during the week the absence occurred and before any test is administered. The training staff shall provide the necessary procedure for the employee to complete the missed training. The individual's supervisor shall receive prompt notification of any absence.
3. Supervisors must ensure their employees are aware of and comply with training requirements. Supervisors must post and encourage employees to review the yearly CTS Training Calendar for training opportunities or requirements and ensure that employees are informed of their assigned training date in a timely manner. They must ensure that employees arrive to training with required equipment and materials. Supervisors may only approve training requests and credit for training that provides knowledge, skills, abilities, and/or information that enhances the learner's ability to achieve the ACC mission; and if funding is required, training is related to the employee's current job.

## **NO. Curriculum Requirements.**

1. The curriculum must be approved by the Training Administrator. A curriculum consists of a series of classes that are combined to create a regular course of study. Examples:

- Parole/Probation Officer Academy
  - Residential Services Basic
  - New Employee Orientation
  - Refresher Training
  - A series of 3 or more classes presented on a recurring basis.
2. Training curriculum must be evidence-based and developed based on clear, concise, measurable, and written statements of intended learning outcomes. The content and instructional methods selected for a training program must be consistent with stated learning objectives, sequenced to facilitate learning, and incorporate strategies to evaluate the learning. (4-APPFS-3A-09)
  3. Lessons in a training curriculum must be developed based on employee career tracks, organizational needs, the results of the training assessment, and in accordance with the agency's Training Plan. The Training Plan must be reviewed annually and revised as necessary.
  4. For classes that are part of a curriculum, training presented by ACC staff or by non-ACC instructors exclusively for ACC staff must have lesson plans pre-approved by the Training Administrator. An approved lesson plan may be used in subsequent years if it remains current. The Training Administrator must approve substantial revisions.
  5. Lesson plans must include learning objective(s) and indication of content.
  6. CTS instructors must provide an opportunity for students to critique the material, course content, and instructors on major courses provided or sponsored by the CTS. (4-ACRS-7B-12 [P])

## **P. Process for Obtaining Training and Training Credit.**

1. **1. Training Resources.** Some training resources are listed on the ACCess Training website. Some ACC sections publish lists of available training and supervisors should ensure applicable lists are provided to employees.

## **2. Training Request Requirements.**

- a) Training must be requested and approved in advance by the supervisor. However, supervisor approval is not required when the CTS enrolls new employees in training.
- b) If ACC will incur reimbursable expenses for the training, the Training Request form must be completed and approved in advance by the supervisor, the appropriate Deputy Director and the Deputy Director of Administrative Services.
- c) If out-of-state travel is required, refer to the Travel Rules and Reimbursement ADpolicy.
- d) If training is NOT "ACC sponsored," the Training Request form is required. Examples of when the form is required include on-line webinars, AASIS classes, OPM classes, and outside training for treatment staff. The appropriate Deputy Director ~~has the authority to~~ must approve exceptions.



- e) When a training request form is not required by policy, supervisors have the option of approving training verbally, by email, or on a Training Request form.
- f) ACC Training Sponsor/Instructor Responsibilities. When training is conducted or otherwise sponsored by ACC staff, the ACC person responsible for the training must provide CTS with a curriculum or lesson plan approval request. The approved curriculum or lesson plan being taught must be on file with CTS. All CLEST required training must be pre-approved with the Commission prior to instruction. The JAKE Coordinator must receive an attendance roster. The responsible person must ensure the attendance roster and sufficient training documentation (such as the approved lesson plan and F-18), are provided to the JAKE Coordinator.

### **23. To Ensure Training Credit.**

Employees are responsible for ensuring required training hours are in the JAKE training database. Training credits may be viewed on the [EagleNet/ACCess > JAKE](#) webpage or the JAKE Coordinator can provide earned credit hours. Employees should always sign the attendance roster to help ensure proper credit.

When taking classes that are NOT ACC-sponsored, complete and process the bottom portion of the Training Request form. Submit this with sufficient documentation showing the training content such as a training summary, agenda, and/or certificate.

~~3. New Employee Enrollment in Certain Classes. New employees will be enrolled by CTS staff in the next available JAKE (Joint Access to Knowledge via e-Learning) Orientation class and where required, the Residential Services Basic and the Parole/Probation Academy. JAKE refers to the computer training program that is available through the agency intranet (EagleNet). Requests to change enrollment to a later date must be approved by the appropriate Supervisor who will advise CTS if approved.~~  
**4. New Employee Enrollment in Certain Classes.**

~~4. JAKE On-Line Training. CTS will enroll all new employees in Orientation.~~  
New employees will be enrolled by CTS staff in the New Employee Orientation class and where required, the next available Residential Services Basic or the Parole/Probation Academy. JAKE (Joint Access to Knowledge via e-Learning) refers to the computer training software that is available on the agency intranet (ACCess). Requests to change enrollment to another date must be approved by the appropriate Supervisor who will advise CTS if approved.

### **5. New Employee Orientation Training.**

~~CTS will enroll all new employees in the New Employee Orientation training.~~ Supervisors must allow employees time free from interruption to complete orientation prior to full assignment of duties. Upon completion of ~~the JAKE Orientation~~this training, employees must sign the "Orientation Acknowledgement" form. (4-ACRS-7C-01, -7E-07[P])

### **56. AASIS and OPM Training.**

For any training other than internal, including AASIS, OPM, Criminal Justice Institute and on-line, contact CTS for specific registration details.

### **67. Other Training Credit.**

Use the following table to determine training hours that may be awarded when credit is earned in "college semester hours," or "college quarter hours," or "Continuing Education

Units (CEUs).” One CEU is defined as 10 hours of participation in a recognized continuing education program with qualified instruction and sponsorship.

TRAINING HOUR CREDIT CONVERSION TABLE	
Type of Hours	Training Hours
1 Semester Hour of Credit	6
1 College Quarter Hour of Credit	3
1 Continuing Education Unit	10
1 Hour of Professional Development or Continuing	1

An employee may submit a request to substitute training received prior to employment with ACC to satisfy special requirements such as supervisory courses and certificate courses. Submit requests to the CTS Training Administrator whose approval is required.” (4-ACRS-7B-04)

Training credit may be awarded for staff meetings; however, this is limited to two hours per month. A Training Request form is not required for staff meetings.

ACC Instructors may request credit for ~~actual~~ class preparation time (research and developing materials, lesson plans, objectives, ~~etc.~~), revision or update of current plan.

An employee who conducts an American Correctional Association (ACA) internal or external audit may be approved for 3 training credit hours for each half-day spent conducting the audit. An employee who receives compensation for an external audit will not receive training credit.

#### **PQ. ADVERTISING TRAINING SESSIONS.**

Supervisors are encouraged to ask CTS to post relevant class information on ~~EagleNet~~ ACCess when seats are available for staff from other ACC offices.

ACC employees are encouraged to continue their education and to join and participate in criminal justice and allied professional associations and activities. (2-CO-1D-09 and 2-CO- 1 D-10)

All attendees of ACC sponsored academies must meet the physical fitness standards set forth during training.

## **VI. ATTACHMENTS.**

~~Attachment 1 Minimum Required Employee Training Hours~~

AD ~~4617~~-15 Form 1, Training Request

AD ~~4617~~-15 Form 2, Orientation Acknowledgement

~~AD-17-04 Attachment 1~~

~~AD 17-15 Form 3, Firearm Qualification for New-Hires who are Already a Certified Arkansas Law Enforcement Officer~~

**Arkansas Community Correction  
TRAINING REQUEST**

Use this form to request training approval and credit. Retain a copy for submission when training is completed as described in "Request for Training Hours" below. The employee is responsible for making any necessary registration and travel arrangements after receiving approval. A completed Out-Of-State Request Form needs to be filled out if applicable.

Student/Employee's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Student/Employee's

Position: \_\_\_\_\_

Course Title: \_\_\_\_\_

Training Date(s) \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Training Location: \_\_\_\_\_ Training Sponsor: \_\_\_\_\_

Justification for attending this training. \_\_\_\_\_

**ESTIMATED COST**

Transportation \_\_\_\_\_  
Registration \_\_\_\_\_  
(Cannot include membership fees)  
Lodging \_\_\_\_\_  
Meals \_\_\_\_\_  
Miscellaneous \_\_\_\_\_

Is a Personal vehicle being used for travel ☐ Yes ☐ No

If no was a state vehicle requested? ☐ Yes ☐ No

TOTAL: \_\_\_\_\_

Supervisor:

☐ APPROVED

☐ DISAPPROVED

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Admin. Services Dep. Director  
(if reimbursable expenses):

☐ FUNDS  
AVAILABLE

☐ FUNDS NOT  
AVAILABLE

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Division Dep. Director

(if reimbursable expenses):

☐ APPROVED

☐ DISAPPROVED

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**REQUEST FOR TRAINING HOURS**

For ACC-sponsored training this form is not needed if the instructor provides a JAKE Coordinator with the sign-in roster with your signature and supporting documentation. In this situation you should check to ensure credit was awarded in JAKE and if not, take actions necessary to provide documentation and get the credit.

Upon completion of training that is NOT ACC sponsored, complete this section then submit this form through your supervisor to the JAKE Coordinator.

Actual Training Hours

Training Credit Hours **APPROVED:**  (supervisor)

☐ I hereby certify that I fully participated in the training described above.  
☐ Certificate Attached ☐ No certificate issued, but I initialed (on the attached agenda) the classes that I attended.

☐ I certify that I partially participated in the training described above by attending only \_\_\_\_\_ hours.  
☐ I have initialed (on the attached agenda) the classes that I attended.

\_\_\_\_\_  
Employee/Student's Name (Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Name (Print)

\_\_\_\_\_  
Employee/Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature

## Arkansas Community Correction ORIENTATION ACKNOWLEDGEMENT

The ACC develops and maintains ~~varied and many directives and/or~~ policies that define how we conduct our business. They enable us to accomplish ~~the agency our~~ mission, goals and objectives, and copies of certain policies are provided during new employee orientation and are available on "~~EagleNet~~," ~~ACCess~~," the ACC Intranet. You may ~~aeesssreview~~ them by accessing any ACC computer, opening the Internet Explorer browser, clicking on "Favorites," then "~~EagleNet~~," ~~ACCess~~," and ~~finally then~~ click on "Policy, Forms & Documents" on left side menu. Navigate through the documents to find the item that pertains to your topic. If you do not have access to a computer, contact your supervisor. The following documents were provided via hard copy and/or ~~aeessedreviewed~~ during the New Employee Training:

- Employee Handbook
- Employee Performance Evaluation, initial presentation & explanation of performance evaluation documents
- Drug Free Workplace
- Whistle Blower Act
- Historical Perspective & Goals of ACC
- Records Management
- Rape Elimination
- Use of Force
- Evidence Based Practices
- Resource Control Policy
- Provision & explanation of essential job functions, duties & responsibilities
- Office Security and Safety
- Code of Ethics and Rules of Conduct
- Employee Discipline
- Employee Grievance/Mediation Procedure
- Tobacco Free Environment
- Employee Work Schedules, Compensation, and Timekeeping
- Communication Skills
- Interpersonal Communications
- Computer, Cell Phone, Copier, and Technology Resources
- Agency Description and Public Information
- Reporting and Investigation Incidents and Hazards
- Preventing Harassment
- Arkansas State Vehicle Safety Program
- Facility Orientation on basic emergency procedures or response **(with veteran employee or supervisor)**
- Equipment assignment/orientation (computer, keys, firearms, handcuffs, pepper spray) **(with veteran employee or supervisor)**
- Job Specific Policies & Standard Operating Procedures **(with veteran employee or supervisor)**
- Job Specific Training Rotation **(with veteran employee or supervisor)**

I have read and understand the documents or processes listed above. I understand that it is my responsibility to stay current on policies/procedures that pertain to me and my responsibilities. These documents are updated on occasion and I may not be notified when they are updated. If I have any questions, I will address them with my supervisor or contact ACC Human Resources Section for personnel issues. I understand that nothing contained in ACC policy/procedural documents, applications, or the granting of an interview, or the placement in a probationary status, or any other administrative act, creates a contract between me and ACC for either employment or the provision of benefits. I have familiarized myself with the job specifics and fully understand my duties and responsibilities. I have signed and dated this acknowledgement and understand it will be maintained in my personnel/training files.

**I acknowledge that I have satisfactory completed the 40 hours of New Employee Orientation.**

Printed Employee Name	Employee Signature	Date
Printed Supervisor Name	Supervisor Signature	Date

Give this form to the JAKE Coordinator to scan into the training records and forward (original) to ACC HRS (105 W. Capitol, Little Rock, AR, 3rd floor, Little Rock, AR 72201-5731).

**Arkansas Community Correction**  
**FIREARM QUALIFICATION FOR NEW-HIRES WHO ARE ALREADY A CERTIFIED ARKANSAS LAW**  
**ENFORCEMENT OFFICER**

**Instructions.** A newly-hired employee in a Special Response Team (SRT) position who is an Arkansas certified law enforcement officer in good standing and his/her supervisor may use this form to expedite the process for authorizing carry of a firearm on duty. Upon completion of this form, and the required firearms training and qualification, the supervisor may complete the Arkansas Community Correction (ACC) form entitled "Receipt for and Authorization to Carry Weapons and Security Equipment."

The new employee must qualify on the firearm(s) with a certified ACC or ALETA firearms instructor and must complete the requirements on this form. The new employee is still required to complete the Parole/Probation Academy at a later date.  
Reference: CLEST Standard 1002(3)(k)

**Supervisor/Manager Complete this Section**

Newly-Hired Employee's Name: \_\_\_\_\_

(Name of CLEST Representative): \_\_\_\_\_ at the Arkansas CLEST was contacted on \_\_\_\_\_ (date)  
and he/she indicated that this newly-hired employee is an Arkansas certified law enforcement officer in good standing.

<u>Initials</u>	<u>Statement</u>
_____	This employee is Arkansas certified law enforcement officer in good standing.
_____	This employee has qualified on the ACC firearm that will be issued.
_____	This employee has qualified on a personal firearm that has been approved for carry (optional)
_____	This training (policy review below) has been accomplished and documented on the CLEST "Initial Employment Report, Form F-1 which has been submitted to Commission on Law Enforcement Standards and Training (CLEST); Office of Law Enforcement Standards.
_____	Completed physical, psychological examinations and drug test.
_____	Copy of the Arkansas Certified Law Enforcement Officer Certificate is on file.
_____	

Supervisor's Signature \_\_\_\_\_ Supervisor's Printed Name \_\_\_\_\_

**Continued on the next page...** \_\_\_\_\_



**... page 2 of the form FIREARM QUALIFICATION FOR NEW-HIRES WHO ARE ALREADY A CERTIFIED ARKANSAS LAW ENFORCEMENT OFFICER**

**Newly-Hired Employee in a SRT Position Complete this Section**

When completed, this optional form is used as a basis for completing the form entitled "Receipt for and Authorization to Carry Weapons and Security Equipment." See instructions above for details.

Initials	Statement	
	I am an Arkansas certified law enforcement officer in good standing.	
	I have qualified on the ACC firearm that will be issued.	
	I have Completed Chemical Agent training that included being exposure to the chemical agent.	
	I have reviewed and understand the following Arkansas Community Correction policies (initial each and enter the policy effective dates):	
	<u>Policy Effective Date</u>	<u>Policy Title</u>
		Use of Force Administrative Regulation
		Use of Force Administrative Directive
		Use of Restraints Administrative Directive (this includes information on Transporting or Escorting Restrained Offenders)
		Weapons and Security Equipment Administrative Regulation
		Weapons and Security Equipment Administrative Directive
		Racial Profiling Administrative Directive
		Reporting and Investigating Incidents, Hazards and Maltreatment Administrative Directive
		Section 5-12, "Specialized Law Enforcement Duties" in the Parole/Probation Supervision Manual (this includes information on arrest, detention and transport of offenders and others)
		Prison Rape Elimination Act (PREA) Administrative Directive

**Newly-Hired Employee in a SRT Position Statement**

I understand that I CANNOT carry a firearm while on ACC duty until authorized on the form entitled "Receipt for and Authorization to Carry Weapons and Security Equipment."

If there is any uncertainty about the above, I realize I can skip this optional form and complete the Parole/Probation Services Academy where these topics will be covered in detail along with other relevant information. My initials by the above line items along with my signature below attest that the above statements are true. I understand that I am accountable for this and non-compliance with policies can lead to disciplinary actions including employment termination.

\_\_\_\_\_  
Newly Hired Employee Signature

\_\_\_\_\_  
Date Signed



## 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: AD ~~15-04-EMPLOYEE TIMEKEEPING AND~~ 17-26 Employee Timekeeping and Compensation

**TO:** Arkansas Community Correction (ACC) Employees

**FROM:** Sheila Sharp, Director

**SUPERSEDES:** AD ~~10-1015-04~~

**APPROVED:** Signature on file  
1, 2017

**EFFECTIVE:** ~~February 6, 2015~~ June 1, 2017

- I. **APPLICABILITY.** This policy applies to all ACC employees.
- II. **POLICY.** All ACC positions are classified as exempt, nonexempt or 207(k) (7K) law enforcement exempt from the Fair Labor Standards Act (FLSA). Supervisors of nonexempt and 7K law enforcement employees are required to hold employees accountable to the established regular workweek standard unless overtime hours of work are necessary and approved to facilitate operations.
- III. **DEFINITIONS.**
  - A. **Banked Time.** Balance of accrued leave (annual, sick, overtime or holiday).
  - B. **Overtime.** Time physically worked in excess of 40 hours in a workweek for nonexempt employees and in excess of 86 hours in a 2-week pay period for 7K exempt employees.
  - C. **Straight Time.** Time physically worked up to 40 hours in a pay period for non-exempt employees and up to 86 hours in a pay period for 7K exempt employees.
  - D. **Promotion.** An employee's change in duty assignment from a position in one classification to a position in another classification of a higher salary grade.
  - E. **Demotion.** An employee's change in duty assignment from a position in one classification to a position in lower classified position



- F. Lateral Transfer.** Transferring to another position within the state under the same job classification of title, grade, and pay as their current position.

#### **IV. TIME KEEPING.**

- A. Time Sheets.** All time sheets must reflect the exact time the employee physically worked, any paid leave, and leave without pay.
- B. Time Entry Requirements.** All ~~timekeeper~~employees must have ALL time entered by noon on the second Wednesday of each bi-weekly pay period. It is mandatory for ~~timekeeper~~employees to contact ~~the~~their local timekeeper with any time entry questions that would affect payroll after the noon deadline. Timekeepers are to verify time is entered for employees from their area/center and are to contact HRS with any time entry questions that would affect payroll ~~after the noon~~ deadline.
- C. Light Duty and/or Part-Time.** ACC is a full time employer only and does not have any positions that can be utilized as light duty and/or part-time.
- D. Timekeeping Records.** Non-exempt and 7K exempt employees must accurately complete and submit time sheets through Empowering Arkansas State Employees (EASE) in sufficient time for the timekeeper to meet the payroll schedule. All employees must complete leave request forms and comply with guidance in this policy.
- E. Determining FLSA Designation.** FLSA designations for each position classification within the state Classification and Compensation Act are determined and assigned by OPM. If the FLSA designation of the position occupied by the employee is in question, the appropriate Deputy Director must contact the HRS Administrator and request a classification status review. The HRS Administrator will submit the Request for Review to OPM.
- F. Non-Exempt.** Non-exempt employees are those whose functional job duties and responsibilities do not meet the FLSA exemption test and who are compensated with time on a multiple of their hourly rate of pay for overtime. All time sheets must reflect the exact time the non-exempt employee physically worked. Actual time physically worked above 40 hours in a scheduled workweek is accrued at the rate of time and one-half. The employee will be paid for overtime exceeding 240 hours.
- G. Exempt.** Employees whose positions meet specific tests established by the FLSA and state law and are exempt from the FLSA overtime provisions requirements. Exempt employees are paid on an annual salary basis.
- H. 7K Law Enforcement (Partially Exempt).** Employees categorized as 7K law enforcement personnel are partially exempt from the FLSA and will record time based on a standard 14-day work period (80 to 86 hours). The partial exemption provides that employees are paid at their regular work schedule rate of pay for the

first 80 hours they physically work. Those hours physically worked between 80 and 86 hours will be counted as straight time and placed in the employee's banked straight time account. Any time physically worked in excess of 86 in the 14-day work period is counted at a rate of one and one half times and is banked in the employee's overtime account. The 7K exempt employee will be paid for overtime exceeding 480 hours.

- I. Leave Records.** Supervisors and timekeepers must ensure timekeeping records are forwarded to the new supervisor and timekeeper when an employee transfers, promotes or demotes to another position within the ACC. When an employee leaves the agency, leave records are to be maintained by the timekeeper under the records retention policy. All records are electronic after April 22, 2017.

~~**J. Quarterly Timekeeper Reporting Requirement and Employee Review of Leave Balance.** At the end of each quarter, the timekeeper is responsible for notifying employees of their leave balances. Each employee must review the leave balances and indicate agreement to the leave information provided. If there is a discrepancy or disagreement, the employee will request the timekeeper to perform an audit of the leave in question. If an adjustment is required, the findings of the audit must be reported to HRS so the leave balance can be reviewed and adjusted to reflect the correct leave activity. After appropriate audit, review and correction, the timekeeper must print the PT 50 screen and obtain the employee's signature. Timekeepers must maintain the signed document in the employee file.~~

- K.J. Use of Banked Holidays, Straight Time and Overtime.** Overtime may only be worked with the approval of an Assistant Area Manager, Assistant Center Supervisor, staff supervisor, or higher. "Authorization to Work Overtime" form must be used to request overtime. Employees are required to use banked leave in the following sequence: holiday, overtime, straight time, annual leave, and leave without pay (LWOP) unless an exception is permitted in this policy. If an employee requests annual leave, the timekeeper must check leave balances and charge leave in the same sequence. The timekeeper will correct the employee's time sheet, initial the change, explain the change to the employee and have the employee initial the change. An employee who requests to use banked holidays, straight time, overtime or annual leave may be permitted to do so within a reasonable period after making the request as long as it does not affect critical operations of the agency. The minimum amount of banked holiday, straight time or overtime that can be requested is fifteen (15) minutes. If an employee is in danger of losing annual leave at the end of the year, a supervisor may allow the employee to use annual leave before using banked holiday, straight time, and overtime.

- L.K. Leave Time. Benefit vs. Entitlement.** Benefits consist of holidays, annual and sick leave. Entitlements are overtime and straight time. Under no circumstance must a benefit be converted into an entitlement by counting it toward the hours the employee physically works. For example, a non-exempt employee uses 8 hours sick leave on Monday, then physically works 10 hours on Tuesday, 9 hours on Wednesday, 8 hours on Thursday and 8 hours on Friday. The employee would have a total of 35 hours physically worked and 8 hours of sick leave for a total of 43 hours. Forty (40) hours is all that is required for the pay week; therefore, the number of sick

leave hours charged must be reduced from 8 to 5. Timekeepers should inform the supervisor and employee of the necessary corrections, have the changes to a time sheet and leave slip initialed by the employee and supervisor and then make the appropriate changes to AASIS. Under no circumstance will 3 hours be added to the employee's banked straight time account.

## V. COMPENSATION.

**A. Upon Hire.** The ACC will not transfer holidays, straight time, or overtime from other State agencies.

**B. Promotion.** An employee who is promoted shall receive the maximum annual salary for which he or she is eligible as follows:

1. For a promotion to a position of a higher grade on the same pay plan, the employee's maximum rate of pay shall be increased by ten percent (10%).
2. For a promotion from a position on the career service pay plan to a position on the professional and executive pay plan, the employee's maximum rate of pay shall be increased by twelve percent (12%).
3. An employee who upon promotion is receiving a rate of pay below the lowest ~~entrance~~entrance pay level established for the new grade ~~shall~~will be adjusted to that lowest entrance pay level for that grade; however, an employee's rate of pay upon promotion ~~shall not~~cannot exceed the maximum pay level of the grade assigned to the classification, unless the employee is eligible for the career pay level on the career service pay plan.
4. When an employee promotes to a different agency or institution, the originating agency or institution must pay all accumulated compensatory time and overtime to the employee at the time of transfer.
5. Non-exempt employees promoting to an exempt classification must have all accumulated compensatory time and overtime paid at the time of transfer. Payment will be at the rate prior to promotion.

## C. Job Series Promotions.

### 1. **Correctional Officer (Residential Supervisors)**

Only ~~an ACCa~~ CO I may become eligible to be promoted to a Corporal. This promotion will be processed following Human Resources' (HR) receipt of a Promotion Recommendation Form with authorized signatures. The authorized signatures verify that the CO I have met the following criteria:

- completed the one year probationary period;
- completed the RSBT Training Academy within the first ~~12~~29 months of employment with ACC
- successfully completed the Security Officer Training Program

- obtained an overall a “satisfactory” in the most current performance evaluation rating,
- and is free from disciplinary action greater than a verbal warning.

Promotion will result in an increase of one salary grade; however, the promotion will not go into effect until the Promotion Recommendation Form is received in HR. The documentation provided to HR will be placed in the employee’s personnel file.

If an employee cannot attend the required RSBT Academy within the first 129 months of employment due to extenuating circumstances, the Deputy Director of Residential Services must approve a requested extension. If approved, the employee will not receive a promotion to a Corporal until completion of the required RSBT Academy and previously stated eligibility criteria.

## 2. Parole/Probation Officer.

### a. **Promotion from PPO I to PPO II**

Only an ACCa PPO I may become eligible to be promoted to a PPO II. This promotion will be processed following Human Resources’ (HR) receipt of a copy of the signed F7 (Application for Award of Law Enforcement Officer Certificate) submitted to the Commission on Law Enforcement Standards and Training (CLEST) authorized signatures. The authorized signatures verify that the PPO I have met the following criteria:

- Completed the one year probationary period,
- successfully completed ACC basic PPO Training Academy, as well as Firearms Qualification
- Successfully completed the Field Training Officer Program
- obtained an overall “satisfactory” in the most current performance evaluation rating,
- and is free from disciplinary action greater than a verbal warning.

Promotion will result in an increase of one salary grade; however, the promotion will not go into effect until the official certification is received in HR from CLEST. The documentation provided to HR will be placed in the employee’s personnel file.

If an employee cannot attend the required PPO Academy within the first 129 months of employment due to extenuating circumstances, the Deputy Director of Parole/Probation Services must approve a requested extension. If approved, the employee will not receive a promotion to a PPO II until completion of the required PPO Academy and previously stated eligibility criteria.

**b. Promotion from PPO II to an Agent**

Only ACC employees in PPO II positions (excluding those assigned to institutions) may voluntarily apply for promotion to a Parole/Probation Agent (Agent). The PPO II must meet the following criteria for the promotion:

- served in a PPO II position for two consecutive years immediately prior to application for Agent;
- must be current on firearms requalification prior to his/her scheduled PB Promotion Board interview;
- obtained an overall satisfactory for the past 2 years as a PPO II, with no disciplinary action (excluding verbal warnings) during the same period;
- must be current on defensive tactics refresher course prior to his/her scheduled PB interview;
- passed the PPA written examination with a minimum of 80%;%. If an employee fails the written examination, that employee will have an additional opportunity to take and pass the examination with a minimum score of 80%. If the employee fails the examination the second time, the employee must wait a period of six months to retake the examination and must pass with a minimum score of 80%; and
- successfully complete ACC's Leadership Course before scheduled PB Promotion Board interview
- must have current First Aid/CPR certifications
- ~~received~~receive a favorable promotion recommendation by the Promotion Board.

If a PPO II receives a disciplinary of a written warning or greater, the employee's two consecutive years will start over.

Promotions will result in an increase of one salary grade; however, the promotion will not go into effect until the completed "Application for Promotion to Agent"Parole-Probation Recommendation Summary form is received in HR. The documentation provided to HR will be placed in the employee's personnel file.

**D. ~~D.~~ Demotion.** When an employee is demoted for cause or voluntarily solicits a demotion, his or her rate of pay shall be:

1. Fixed at the rate equal to ten percent (10%) less than the employee's rate of pay at the time of the demotion for demotions of one or more grades on the career service pay plan or on the professional and executive pay plan.
- 2~~—.~~. Fixed at a rate equal to twelve percent (12%) less than the employee's rate of pay at the time of demotion for demotions of one (1) or more grades from a position on the professional and executive pay plan to a position on the career service pay plan.



3. If the employee's salary falls below the entry pay level of the new grade upon demotion, his/her salary will be adjusted to entry level for that grade.
  4. An employee's rate of pay upon a demotion cannot exceed the amount provided by the maximum pay level of the grade assigned to the classification, unless the employee is eligible for career pay level of the career service pay plan.
  5. An employee returning within 12 months after a promotion to a position or classification that they previously occupied is eligible for a rate of pay not greater than that for which the employee would have been eligible had they remained in the lower-graded classification.
- E. Retirement.** Employees are permitted to defer to the State 457 Deferred Compensation Plan for all, or a portion, of their final lump sum monies (comprised of unused sick or vacation leave) provided the employee follows the requirements of the program. For more information on Deferred Compensation please ~~go to~~ [click this link Arkansas Diamond Deferred Compensation Plan information-](#). Employees should discuss this option with HRS before their termination due to retirement.
- F. Termination.** Upon termination from employment, the employee shall receive payment for any unused holidays, straight time and overtime at the employee's final regular rate of pay.
- G. Pay Periods.** Biweekly pay periods run from Sunday of one week through Saturday of the following week. Employees are paid every other Friday for time worked through the preceding payroll cycle. The time sheet is used to record hours worked by non-exempt and 7K exempt employees during the pay period. A pay period schedule is retained in HRS.
- H. Meal, Rest and Fitness Breaks.** Generally, non-exempt employees assigned to posts or workstations requiring constant staffing are allowed a 15-minute paid rest break in the morning and in the afternoon, at times approved by the supervisor. They must be completely relieved of their duties and free to leave the post during this time. Although other employees may be allowed the same, it is not a right, but a privilege at the discretion of the supervisor. When rest breaks are authorized, they may be combined for the purpose of participating in fitness activities and may not exceed 30 minutes.
- All employees are allowed a 30 to 60 minute [unpaid](#) lunch break, depending on their approved work schedule. This break may not be combined with rest breaks, nor taken to leave work early or arrive late. When an employee does not take a break during the day the benefit is lost. Aside from the breaks described above, there are no other authorized breaks (e.g., smoking, etc.).
- I. On-Call Time.** Time spent on-call, under circumstances where the time can be used effectively for personal purposes, is not compensable. Generally, an employee who is not required to remain on ACC premises but is merely required to leave word with ACC officials where he/she may be reached or carry a cell phone while "on-call."

To be considered as compensable on-call time, an employee must be restricted from using the time for his or her personal pursuits. Should an employee be called in while on-call, pay begins when the employee receives the call. The employee must report immediately and no later than 1 hour after receiving the call. An employee who reports later than 1 hour will be paid beginning upon arrival. Should the employee be released before the end of the shift or the end of their regular work schedule, on-call pay will be stopped when the employee leaves the premises.

J.

**K. Workers Compensation.** Employees who are absent from work due to a temporary occupational injury or illness and who are entitled to Workers' Compensation benefits may use their accrued leave as a supplement to such benefits not to exceed the employee's regular salary rate of pay per pay period. Contact the ACC Benefits Analyst in Human Resources for more information.

**L. Over-payments.** Employees are responsible for monitoring personal bank account direct deposits from ACC to ensure accurate compensation. In the event of an overpayment, the employee must contact his/her supervisor and Human Resources Section immediately for corrective action. Employees will be held accountable for refunding all overpayments back to the agency. An employee's lack of cooperation in refunding the agency can lead to disciplinary action up to termination.

**M. Compensable Time for Training/Travel.** If an ACC employee is required to attend training or a meeting on a weekend or regular day off, the time must be counted as time worked. It must be counted toward the pay period. Any time worked over these scheduled hours may be counted as straight or over time, whichever applies. Travel to and from training is also compensable as time worked. Travel time for training begins from the employee's physical place of employment and ends upon return to the employee's work location. If unforeseeable events prevent an employee from arriving at their destination in a timely manner, the supervisor must be notified immediately. Specific questions regarding whether training time is compensable should be directed to the HRS Administrator. Employees must receive approval before attending training. Hours in preparation for a license or certification exam cannot be counted toward compensated time.

#### **VI. ~~Forms List~~ FORMS LIST.**

Authorization to Work Overtime  
Leave Request for Employee  
Time Sheet Weekly  
Application for Promotion to Agent  
Promotion Recommendation Form





# 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: ~~14-13~~17-20 RESIDENT CONDUCT**

**TO: ARKANSAS COMMUNITY CORRECTION EMPLOYEES**

**FROM: SHEILA SHARP, DIRECTOR**

**SUPERSEDES: AD ~~08-17~~14-13**

**APPROVED: Signature on file**

**EFFECTIVE: ~~July 1, 2014~~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).

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

#### **IV. RESIDENT CONDUCT.**

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

**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.
  - 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.

## **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.
  - b. Review and be knowledgeable of ACC policies and procedures as they relate to residents of Centers.

- c. Give careful and impartial consideration to the facts and circumstances presented during hearings and render fair judgments of guilty or not guilty based solely on information obtained during hearings including statements of the offender charged, other witnesses, and evidence.
  - d. Review the Hearing Summary Report, Form 5, for completeness and accuracy and sign, as appropriate.
  - e. Make a request to the Center Supervisor to be excused from a hearing if a member believes there is a conflict of interest or inability to set aside prior knowledge or involvement in an incident or other concerns that may prevent him or her from rendering a fair judgment.
  - f. Ensure prior disciplinary records of residents are not considered during a disciplinary hearing, except when determining sanctions.
  - g. As appropriate, write booking slips on residents found guilty of cardinal rule violations so they may also be put before the MTC for therapeutic treatment to correct the unacceptable behavior.
  - h. For the purpose of disciplinary action, a good faith report of sexual abuse based upon a reasonable belief that the alleged conduct occurred must not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. (PREA 115.278(f))
  - i. When considering sanctions when there was sexual contact between a resident and staff, sanctions must NOT be imposed unless there was a finding that the staff member did not consent to such contact. When considering sanctions, consider the range of available sanctions, the determination of guilt, and any mitigating and extenuating circumstances. Also consider whether a resident's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Then choose sanctions that are commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories. (PREA 115.278)
3. Chairperson Responsibilities.
- a. Ensure the Administrative Review Officer (ARO) properly tape records hearings noting date, times, persons present during phases of the hearing and announces tape recorder meter numbers when appropriate.
  - b. Ensure all appropriate procedures are followed.
  - 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., 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.



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.

#### **F. Appeals of DHC Actions.**

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 ~~or~~, 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 ~~must be~~ 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 ~~ACC~~Chief Deputy Director, if necessary.
5. **Sanctions.** Sanctions must NOT be increased during the appeals process.

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

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


## **H. Resident Hearing Assistance.** Residents have no right to an assistant or retained counsel, however, a staff representative (hearing assistant) will be appointed to assist an accused resident when the need is identified.

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

- 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 incident (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;
  - f. Inform the ARO of the name of the inquiry officer, if designated; and

- g. Monitor the activities of the Shift Supervisor and ARO to ensure prompt and proper processing.
4. The Administrative Review Officer must perform the following:
- a. Log the Rule Violation Report and assign a control number;
  - b. Review the Rule Violation Report to ensure completeness and accuracy;
  - c. Obtain additional information through appropriate inquiry, if necessary;
  - d. Schedule a time and date for the hearing before the DHC and complete the Disciplinary Committee Hearing Docket, Form 4 within the 5-day period following receipt of the Cardinal Rule Violation/disciplinary packet from the Senior Residential Supervisor (excluding weekends and holidays). Ensure the resident has 24 hour notice of the scheduled hearing unless he or she waives the requirement for 24 hour notice. An extension must be obtained if a hearing cannot be held within 5 days (excluding weekends and holidays) of receiving the DHC packet from the Senior Residential Supervisor following the inquiry;
  - e. Complete Form 7, "Amendment of Cardinal Rule Violation Report," when the DHC chairperson determines a more appropriate rule should be cited in the Cardinal Rule Violation Report or to correct administrative errors. Recommendations to amend a charge to a major or house rule violation, or to dismiss a charge, require Center Supervisor approval. Feedback should be provided to the officer preferring the charge whenever amendments are approved;
  - f. Provide assistance to the designated inquiry officer and ensure the resident charged has received notice of the rule violation charge, Form 1a, but not Form 1b which names witnesses. Also ensure the resident is provided with Form 2 and, when appropriate, Form 3.
  - g. Coordinate with the DHC Chairperson and the accused resident to review and process any plea of guilty entered prior to a hearing;
  - h. Obtain, or have an inquiry officer obtain, any additionally required witness statements;
  - i. Advise DHC members, accused resident(s) and the hearing assistant, if assigned, of the time and date of the hearing and control number of the Cardinal Rule Violation Report so members may review reports in advance of the meeting;
  - j. Attend DHC hearings, or ensure the presence of a designee approved by the Center Supervisor, and read the charges and possible sanctions when called upon by the chairperson, tape record meetings and take appropriate notes; and
  - k. Complete the Hearing Summary Report, Form 5, following the hearing and process (distribute and file) completed actions.
5. The Inquiry Officer or ARO must perform the following:
- a. No later than 24 hours prior to the DHC hearing, use Form 1 Parts I and II, to

- advise the accused resident(s) of the alleged violation(s); read to the resident from Form 2a & b his/her rights, DHC procedures, the appeal process, and possible sanctions; and ensure that he/she understands. Obtain the resident's signature on Forms 1a and 2a. (4-ACRS-6C-02)
- b. Ensure the accused resident understands the full impact of waiving his/her right to appear at a hearing (see Section V.E.2). If the resident indicates a desire to do so, escort him/her to the ARO for further processing.
- c. Obtain a list of requested witnesses from the accused, Part II of the form, and advise the resident that he or she is expected to be at the hearing unless he or she waives appearance in writing, or is removed due to poor behavior.
- d. Review the list of persons who have relevant knowledge of the facts related to the alleged violation and obtain any additionally required witness statements;
- 6. The Hearing Assistant must perform the following:
  - a. Immediately before a disciplinary hearing, review with the accused resident his/her rights, DHC procedures, and the appeal process (Form 2 a & b) and answer any questions he/she may have.
  - b. Provide general assistance to the accused resident before and after the hearing but may not testify or argue for the resident or give the resident advice;
  - c. Be present at hearings only during the portions requiring the resident's presence, unless the resident waives (in writing) the right to appear or is removed due to poor behavior;
  - d. Under certain circumstances, assist with the presentation of evidence on the resident's behalf at the disciplinary hearing and any subsequent proceedings;
  - e. Aid the resident in the appeals process.

#### **B. Disciplinary Hearing.**

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 sanction will be put into effect along with any sanction imposed for the new violation.

### **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

~~AD-14-13~~ **Form 1** Cardinal Rule Violation Report and Notice to Accused Resident  
~~AD-14-13~~ **Form 2** Explanation of the Disciplinary Process  
~~AD-14-13~~ **Form 3** Hearing Appearance Waiver and Plea  
~~AD-14-13~~ **Form 4** Disciplinary Hearing Committee Docket  
~~AD-14-13~~ **Form 5** Hearing Summary Report  
~~AD-14-13~~ **Form 6** ARO Cardinal Rule Violation Report Log  
~~AD-14-13~~ **Form 7** Amendment of Cardinal Rule Violation Report  
~~AD-14-13~~ **Form 8** Disciplinary Hearing Appeal Form  
~~AD-14-13~~ **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 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., 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.
- 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 ☐ AM ☐ PM \_\_\_\_\_ Location \_\_\_\_\_  
Description of Alleged Incident Continuation Sheets Attached: \_\_\_\_\_ pages, or ☐ 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:** \_\_\_\_\_

Original: DHC Hearing Packet  
COPY: **SIDE A ONLY** to resident

AD 17-20 Form 1 Side A

**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  
**PART 7 CONTINUATION PAGE**

Resident Number

Incident Date

**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.

**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.

_____ Residents signature	_____ Resident number	_____ Date
_____ Staff Witness Signature		_____ Date

**STAFF**

I advised resident \_\_\_\_\_ at \_\_\_\_\_  
Resident's Printed Name Date Time

\_\_\_\_\_  
Resident's Location upon Notification, e.g., floor, cell number

Disciplinary Hearing Committee on \_\_\_\_\_ of his/her right to appear before the  
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

---

**Time:**

1

ACCUSED'S NAME  
LAST

OFFENDER  
NUMBER

Case Scheduled:  
DATE TIME

REMARKS

This image shows a full page of primary-ruled notebook paper. It features ten horizontal blue lines spaced evenly down the page. There are two vertical red lines on each side, creating three equal-width columns: a narrow left margin, a wide central writing area, and a narrow right margin. The paper is otherwise blank, with no handwriting or other markings.

# 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., witness statements) must be maintained from the hearing date for any subsequent official access (e.g., 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	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> No Plea	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty DHC Finding
		Resident Pleads	
Rule No.	Short Title of Cardinal Rule Violated	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> No Plea	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty DHC Finding
		Resident Pleads	
Rule No.	Short Title of Cardinal Rule Violated	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> No Plea	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty DHC Finding
		Resident Pleads	
Rule No.	Short Title of Cardinal Rule Violated	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> No Plea	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty DHC Finding
		Resident Pleads	

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

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[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 NUMBMR:**

**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 blue or grey 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 17-20 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 pre-cut 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

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: ~~16-07~~ 17-08 RECRUITING AND HIRING**

**TO: ARKANSAS COMMUNITY CORRECTION EMPLOYEES**

**FROM: SHEILA SHARP, DIRECTOR**

**SUPERSEDES: AD ~~14-10~~ 16-07**

**APPROVED: \_\_\_\_\_ Signature on File \_\_\_\_\_**

**2016 May 12, 2017**

**EFFECTIVE: July 1,**

**I. APPLICABILITY.** This policy applies to Arkansas Community Correction (ACC) employees and applicants for classified positions.

**II. POLICY.** ACC policy is to recruit, select, and employ qualified persons with the character, record of conduct, and experience consistent with agency policies, philosophy, and mission. Selection will be nondiscriminatory and based on applicant qualifications, background investigations, interview(s), other job related criteria, and the needs of the ACC. Nothing contained in ACC policies, handbooks, applications, other documents, the granting of any interview, placement in a probationary status, or any other administrative act, creates a contract between an individual and ACC for either employment or the provision of benefits. The ACC does not guarantee continued employment for any specific period of time and employment can be terminated with or without cause, and with or without notice, at any time, at the option of either the ACC or the employee. (4-APPFS-3E-02[P]; 4-APPFS-3E-08)

### **III. DEFINITIONS.**

**A. Conditional Offer of Employment.** An offer of employment conditioned upon an applicant meeting certain job-related requirements prior to hire and/or during the probationary period.

**B. Constitutional Officer.** Governor, Lieutenant Governor, Secretary of State, Treasurer of State, Attorney General, Commissioner of State Lands, and Auditor of State.

**C. Convictions.** A conviction must include a guilty plea, plea of nolo contendere, negotiated plea, or finding of guilt by a judge or jury.

**D. Direct Threat.** A significant risk of substantial harm to the health or safety of a person.

**E. Essential Job Functions.** The fundamental (not incidental) duties of a job.

**F. Extra Help.** Positions specifically designated in the agency budget to be filled by temporary employees who work 1,000500 hours or less per fiscal year.

**G. Family Members.** The husband, wife, mother, father, stepmother, stepfather, mother-in-law, father-in-law, sister, brother, stepsister, stepbrother, half-sister, half-brother, sister-in-law, brother-in-law, daughter, son, stepdaughter, stepson, daughter-in-law, son-in-law, aunt, uncle, first cousin, niece or nephew.

**H. Grant Position.** A position that is funded for a specified period of time and from sources other than State General Revenue or Agency Funds.

**I. Hiring Official.** The **Center Supervisor, Area Manager, Administrator or higher** who manages the recruiting and hiring process for a position in his or her supervision chain.

**J. Law Enforcement Officer (LEO).** Parole/Probation Officer/Agent, Parole/Probation Manager/Assistant Manager, Parole/Probation Assistant Director, Deputy Director of Parole/Probation Services, and others as designated by the Director who have met, or are in the process of meeting, Arkansas law enforcement certification requirements of Specialized Police Personnel.

**K. Fiscal Positions.** Fiscal positions include Administrative Services employees and Center Business Managers, Commissary Supervisors, and any other positions in a center that have fiscal responsibilities.

**L. Probationary Period.** A continuous period of on-the-job work experience during which a new employee completes conditions of employment and during which the employee and the ACC may evaluate employee suitability in terms of knowledge, skill, ability, character, interest and conduct, and determine whether employment should be continued.

**LM. Qualified Individual with a Disability.** An individual with a disability who satisfies the requisite skill, experience, education, and other job-related requirements for the employment position that the individual holds or desires and who, with or without reasonable accommodation, can perform the essential functions of such position.

**MN. Reasonable Accommodation.** Modifications or adjustments that do not pose an undue hardship on the employer and which enable qualified applicants with disabilities to access the job application process or enable qualified employees with disabilities to perform the essential job functions and to enjoy the same terms, conditions, and privileges of employment that are available to persons without disabilities.

**N O. Rehire.** A rehire is a former employee who previously left state service.

**OP. Undue Hardship.** "Undue hardship" is defined as an "action requiring significant difficulty or expense" when considered in light of a number of factors. These factors include the nature and cost of the accommodation in relation to the size, resources, nature, and structure of the employer's operation.

#### IV. SPECIAL REQUIREMENTS.

**A.** ACC employees must meet the minimum qualifications for their jobs, be able to perform the essential job functions (including providing a signed form to that effect after a conditional offer is made), be fingerprinted, receive favorable background investigations, and successfully complete training requirements and probationary periods, and if applicable, obtain and/or maintain certification and/or licensing.

**B. Reasonable Accommodations in Employment.** (2-CO-1C-09-1; 4-ACRS-7E-03; 4-APPFS-3E-03);

1. ACC will not waive essential job functions; however, upon request, the ACC will make reasonable accommodation(s) for the known physical and/or mental impairment of a qualified employee or applicant with a disability so that he/she may have the same access to the employment application processes, terms, conditions, and privileges of employment that are available to a person without disabilities unless doing so imposes an undue hardship or would otherwise pose a direct threat to the health and safety to themselves or others. Supervisors who have an applicant or employee requesting reasonable accommodation should immediately contact the Human Resources Administrator (HRA) to facilitate an accommodation determination. (4-APPFS-3E-03)

2. If a supervisor observes a qualified employee with a known disability having apparent difficulty in the performance of the essential job functions, he/she may inquire of the employee as to whether accommodation is needed. Otherwise, a supervisor or other hiring official must not inquire into apparent or unknown physical or mental disabilities.

3. Qualified applicants and employees with a disability may make requests for accommodations for physical and/or mental impairments to the HRS Human Resources Administrator, who will in good faith make every effort to facilitate (in coordination with the agency legal counsel and appropriate Deputy or Chief Deputy Director) a determination of reasonable accommodation necessary to enable the employee to perform the essential job functions. The HRS Human Resources Administrator will solicit a written recommendation, justification, and information relative to the expense through the supervisory chain to the Director for review and approval, prior to responding to the request.

4. Because of the physical demands associated with working in a corrections setting, an applicant for a position assigned to the Parole/Probation or Residential Services Divisions will complete a questionnaire regarding his/her ability (with or without accommodation) to perform the essential job functions. (2-CO-1C-19)

**Specialized Police Officer (LEO-C. Law Enforcement Officer (LEO)).** Bachelor's degrees must be from a four-year college or university that is accredited by an organization recognized by the U.S. Department of Education, and the degree must meet the minimum qualifications specified in the Office of Personnel Management position class specifications. (4-APPFS-3A-01). Physical and psychological examinations are also required (4-APPFS-3A-04). A LEO must complete the law enforcement training requirements as set forth in the Arkansas Commission on Law Enforcement Standards and Training (CLEST) rules and regulations manual.

Psychological Exam for Law Enforcement Officers – All Law Enforcement Officers must take the Minnesota Personality Inventory (MMPI). The HRS must schedule the administration of the MMPI (to include purchasing documents) with a psychologist or psychiatrist to be completed within thirty (30) days of the new employee's first workday whenever possible. The psychologist will send the F-2b form to HRS to retain in LEO file.

Once a Law Enforcement Officer has met all requirements required by CLEST within the twelve (12) month employment probationary period, application must be made for certification.

The Application for Award of Special ~~Police~~ Law Enforcement Officer Certificate (CLEST F-7) form must be completed by the supervisor, signed by applicant, notarized, and sent to the HRS 10 business days before the employee's one-year anniversary (one-year in the Parole/Probation Officer position). A copy of the ACC Law Enforcement Training Academy certificate must accompany the CLEST F-7.

Additional supplemental forms must be submitted as appropriate for certified Law Enforcement Officers in compliance with the guidelines set forth by CLEST. All Supplemental Forms should be signed by the supervisor and employee and notarized before being sent to HRS who will forward to CLEST.

**Supplemental forms include:**

1. Personnel Change-in-status Report (CLEST F-4). This form must be submitted to HRS within 10 days of a LEO resignation, dismissal, retirement, death, change in rank, change of name, or other change in status, at which time HRS will notify CLEST.

2. Personnel Separation Notice (CLEST F-4a). The hiring official must present or mail this form to the LEO within 10 days of resignation, retirement, termination, or other form of separation. A copy of the form must be provided to the HRS.

3. Application for Award of Law Enforcement Instructor Certificate (CLEST F-8). This form must be completed by the supervisor, signed by employee, notarized, and sent to the Central Training Section. The Instructor Development Course certificate must accompany the F-8.

4. Law Enforcement Officer or Instructor Certificates. When received in response to the CLEST F-7 or CLEST F-8 application, the original certificate will be mailed to the HRS. HRS will make a copy for the LEO file and send the original to the hiring official who should copy the certificate for the supervisory file and present the original to the officer.

**D. Residential Services Positions.** Hire selections for residential services positions must complete the Essential Job functions form. If the answer is "Yes with Accommodations" to any of the statements, the form must be completed and signed by a physician. New employees must be promptly screened for Tuberculosis (TB).

**E. Treatment Staff.** Within the initial 30 days of employment with ACC, a person hired in a treatment position must at minimum be certified as an Alcohol/Drug Counselor (ADC), Advanced Alcohol/Drug Counselor (AADC), Co-occurring Disorders Professional (CCDP), or registered with the Arkansas Substance Abuse Certification Board (ASACB) as a Counselor in Training (CIT). A CIT must test and

pass for one of these certifications within three years. An employee who fails to obtain certification within the designated time frame or otherwise does not maintain required certification or licensure does not meet the requirements of the job will be terminated from that position. Upon becoming certified, employees must present the certification documentation to their supervisors who will forward such certification documents to Human Resources.

Persons hired into a position as a clinical supervisor must be a Certified Clinical Supervisor (CCS) or must test and pass the test as a CCS within two years of being hired as a CCS. Persons who fail to get a passing score within the two-year period no longer meet the essential functions of the job and will be terminated from that position.

The "ASACB Policy and Procedure Manual" available on the ASACB website describes the "Certification Standards," "Training/Education Approval Guidelines," and other related information. Failure to obtain and maintain certification within the designated time frame constitutes failure to meet the essential functions of the job (4-ACRS-7B-02)

**F. Training Staff.** When hiring Central Training staff, excluding ~~the~~ administrative ~~assistant~~ staff, the same process and forms must be used as are used for Law Enforcement Officers (Parole/Probation Officer positions). All staff trainers in the CTS must become a CLEST certified law enforcement instructor within the first year of employment as a CTS trainer.

**G. Polygraph Examiners.** Polygraph Examiners must be licensed as required by the Arkansas Board of Private Security Agencies and the Arkansas Polygraph Examiners Act (Arkansas law section 17-39-101 through 17-39-308). Examiners must also follow the rules and regulations of this Board concerning conducting truth verification testing. A minimum of 40 hours of post-conviction sex offender testing training, beyond the basic examiner's course requirements, is required for those who practice post-conviction truth verification testing. Examiners must obtain a minimum of 30 hours of continuing education in a two-year time period with 16 of the 30 hours consisting of specialized sex offender polygraph training. Examiners should complete a minimum of 25 examinations prior to undertaking post-conviction sex offender testing. Examiners who have conducted fewer than 25 such exams should conduct these types of exams under the supervision of an experienced examiner in post-conviction sex offender testing. Examiners may not serve as both Polygraph / CVSA examiner and Supervision Officer to the offender.

~~**A. ACC Hire Selections.** All applicants selected for ACC employment must be of good character and the best qualified for the position as determined through such methods as interviews, background checks, mock presentations or writings.~~

**H. Use of Vehicles for Conducting State Business.** ACC employees in security and LEO positions, positions assigned State vehicles, and employees who use a personal or State vehicle to conduct State business, are required to have valid Arkansas driver's licenses and meet the Vehicle Safety Program guidelines for driving a State vehicle. (4-ACRS-1B-03)

**I. Positions Requiring Commercial Driver Licenses (CDL).** Applicants for positions requiring a CDL must authorize ACC to contact the Arkansas Office of Driver Services regarding past positive alcohol and/or drug tests. Applicants with a history of a positive test must submit documentation of completing a treatment program or an educational program prescribed by a substance abuse counselor.



## **I. Avoiding Conflicts of Interest.**

1. Constitutional Officers and Their Spouses. ACC will not hire a constitutional officer serving in an elected office. Spouses of constitutional officers may be hired by ACC only with prior approval from the Legislature and the Governor. Former constitutional officers may not be hired into a job created or which had a salary enhancement of more than 15% by legislation enacted in the two-year period immediately preceding the conclusion of the constitutional officer's term in office. The continued employment of an ACC employee who becomes a constitutional officer or a spouse of a constitutional officer will be in accordance with Arkansas Code Ann. §21-1-402. Upon notification from the hiring official, ACC HRS will notify the State Chief Fiscal Officer, the Governor, and the Legislative Council of the hiring of any former constitutional officer.

2. Employment of Family Members. Hiring officials must not hire, promote, or demote a person into a position supervising or being supervised by a member of his/her family, working with or having access to sensitive confidential information regarding other family members, or where there is a conflict of interest. If employees become related after employment and a conflict of interest or supervision results, or if a reorganization creates such conflicts, up to 30 calendar days may be allowed to resolve the matter. If a resolution is not reached, the hiring official, with approval of the appropriate Deputy Director, may require one of the employees to transfer or resign immediately following the 30 calendar day allowance.

**V. GUIDELINES.** ACC will use various announcements and competitive processes to attract, hire and retain qualified applicants and encourage the professional advancement of experienced and qualified ACC staff. The ACC HRA must ensure use of the Arkansas State Jobs website to advertise all job vacancies for classified positions, as defined in the Statewide Classification and Compensation system. Additionally, job advertisements will affirm that ACC is an equal opportunity, at-will, drug and smoke-free criminal justice agency. Employees will be ~~subjected~~subject to drug and/or alcohol testing and undergo background investigations. (4-APPFS-3A-02)

~~**A. Veteran's Preference.** The State Veteran's Preference Law confers preference in employment for certain veterans (or their widows, widowers, and spouses) provided they meet "substantially equal qualifications" and provide a DD214 Long Form to the hiring official during or before the interview process.~~

~~**Veteran's Requests for Information.** When a person who has qualified for veteran's preference makes a request for scoring information, the hiring official must provide the person with his/her base score, adjusted score, and the successful candidate's score. Also upon request, the hiring official must provide in writing the reason that the veteran was not included on a list of qualified candidates for interview and why the veteran was not selected for the position. (Arkansas law section 21-3-302)~~

~~**B. Applicant Interviews.** Interviews will be conducted by a committee. Hiring officials should strive for a committee which reflects the agency demographics.~~

**C**



**A. Special Programs/Initiatives.** When consistent with the ACC mission and acceptable human resources practices, ACC may hire or engage the services of ~~non-minors or extra help~~ employees based on its participation in special programs/initiatives.

1. Employment of Minors. ACC Employees must have graduated from high school. However, students or others who are at least 18-years old may be hired for extra -help positions under special conditions and when approved by the appropriate Deputy Director. Some restrictions may also apply regarding employing minors in sensitive security areas. Minors will be paid at least the federal minimum wage. A minor must have a valid work permit, certificate of high school proficiency, or be a high school graduate.

a. A minor who is a high school graduate or has a certificate of high school proficiency may work the same hours as an adult.

b. A minor who has not graduated or achieved a certificate of high school proficiency may work up to 8 hours per day, 40 hours per week when school is not in session. When school is in session, a minor is limited to working up to 4 hours per day unless written permission is received from school authorities allowing the minor to work up to 8 hours on any day immediately prior to a non-school day.

c. Before an employment offer is made to a minor, the hiring official should consult with the HRA and verify authorization of the hire.

2. Extra -Help. ACC will allow extra help and temporary personnel only when justification warrants, funds are available, a position is available and it is approved by the Director.

a. The supervisor will submit a request, justification and number of hours through the established supervisory approval process. Approved requests will be forwarded to the Deputy Director of Administrative Services and Human Resources Section to ensure availability of a position and funding.

b. Before making an employment offer for an extra help position, the requesting supervisor must interview the applicant, check employment and character references, obtain a favorable ACIC/NCIC check, and if hired, forward necessary papers (including, but not limited to, employment application, reference checks, NCIC/ACIC results, INS forms, and W-4) to HRS and obtain a start date from HRS.

c. In case of an emergency, the Director may waive any and all of the above steps. In emergencies, personnel may be hired from a temporary employment service using procedures identified by the Deputy Director of Administrative Services and with the Director's approval

## **VI. FILLING VACANCIES.**

**A. Request to Fill Job Vacancy.** When a vacancy occurs, the hiring official must make a request to advertise the position to HRS by submitting a Job Vacancy Request form and a Hiring Freeze Exception Request form, as well as supporting documentation.

**B. Advertising/Screening Applicants.** Unless authorized to perform these functions locally, the central HRS Office will advertise vacancies, screen applications for completeness and minimum qualifications, and forward them to the hiring officials. Hiring officials, or a selected designee, must pre-score qualified applicants using the rating procedures as outlined below in D (Rating System) and by using the appropriate form. Upon request and approval, HRS will provide standardized information for advertisement in the local media. Supervisors may ask to have more detailed information added. Position advertisements must be posted for a minimum of five (5) business days. Advertising positions will follow OPM Policy.

**C. Employment Applications.** Applicants are encouraged to submit applications using the Arkansas State Jobs website. A separate completed application is required for each advertised position. All applications must be entered into the Arkansas State Jobs website or received in the Central Office, Human Resources Section on or before the position closing date.

**D. Rating System.** A Rating System approved by Human Resources shall be utilized by the Hiring Official and/or Interview Committee for scoring applicants selected for interview. Scoring shall be conducted in a manner that ensures objective criteria are used for selection of the most qualified applicants for vacant positions. Using the Applicant Rating Sheet, points shall be awarded for various criteria, which when totaled, comprise the total score for each applicant interviewed. The Rating System shall include:

1. Related Education. The applicant must meet minimum requirements for the job classification or must be approved as a qualified applicant per state requirements. A maximum of ~~ten~~ ~~(+0eight~~ (8) points may be awarded to an applicant for completion of Related Education above the Minimum Educational Requirements for the position.

If the Minimum Qualifications require a high school diploma and the applicant possesses a related Associate's degree, two (2) points will be awarded; if the applicant possesses a related Bachelor's degree, ~~two~~ ~~(2four~~ (4) points will be awarded; and if the applicant possesses a related Master's degree, ~~two~~ ~~(2six~~ (6) points will be awarded.

~~This would give the applicant a total of 6 (six) points for education.~~

If a Bachelor's degree is required and the applicant possesses a Master's degree, two (2) points will be awarded, and if the applicant possesses a related Doctorate's degree, ~~two (2) points will be awarded.~~ A copy of the diploma or degree showing the award of the educational level is required. This would give this applicant a total of four (4) points four (4) points will be awarded.

A copy of the diploma or degree showing the award of the educational level is required.

2. All diplomas received must be from the Department of Education for the applicable state.

3. All degrees received must be from a college or university accredited by one of the Regional Institutional Accrediting agencies recognized by the United States Department of Education.

4. Related Experience. An applicant's experience level for the job classification is awarded pre-calculated points for each month of related experience exceeding the minimum requirements ~~up to a maximum of 10 points.~~ A year of experience is calculated in twelfths to appropriately level the score in conjunction with education. If the applicant is approved for a substitution, then those years used to substitute must be subtracted from the total years in the appropriate section of the pre-scoring sheet.

5. Veteran's Status. An applicant may qualify for 5 or 10 points in accordance with provisions of the Arkansas Veteran's Preference Law. To claim Veteran's Preference, an applicant must be honorably discharged from a tour of active duty, other than active duty for training only, with the Armed Forces of the United States or served honorably in the National Guard of Reserve Forces of the United States for a period of at least six (6) years, whether retired or discharged. Five (5) points are awarded for standard veteran's preference. ~~A disability discharge is ten (10) points.~~ Disabled veterans ~~or~~ veterans over the age of fifty-five (55) and who are disabled and entitled to a pension or compensation, or the spouse of a disabled veteran should have ten (10) points added to his/her final rating score. The applicant must produce a copy of the DD214 long form or NGB form 22 prior to the closing of the application process to receive veteran's preference points: during the pre-score process.

6. Disposition Codes. Attached to this policy is a list of disposition codes that must be utilized for the purpose of non-selections during the pre-score/interview portion of the selection process.

~~E. Substitution of Minimum Qualifications. If an applicant is determined "not qualified", and has related experience, the applicant must submit a letter addressed to The Human Resources Section requesting will automatically substitute experience and/or education. The substitution of experience for will allow the education requirement.~~  
~~Upon review of the state application, the requirements of the position and the letter requesting minimum qualifications substitution, the HRS may approve the request applicant to move forward in the application grading process. The approval, but it does not guarantee the applicant he/she will receive an interview or will be selected for the position, but only to move forward in the process.~~

#### **Substitution equation:**

##### equations:

One year of related experience = one year of education from an accredited college

One year of education from an accredited college = one year of related experience

If the Applicant is selected for the position, ACC HRS must submit the request to ACC Qualifications Review Committee for final approval of substitution request.

**F. Applicant Interview Process.** Hiring officials are responsible for following established procedures for the Interview Process:

1. Based on the pre-score, the interview will be conducted with a minimum of the top six (6) but not more than twelve (12) three (3) applicants. Fewer than Six (6) three (3) qualified applicants

will result in all applicants being interviewed. ~~More than twelve (12) may be interviewed if the pre-scores prohibit a natural cutoff at twelve (12)~~ The pool of qualified applicants must be exhausted before the position may be advertised again.

The pre-score determines the applicants selected for interview. The top ~~six~~<sup>three</sup> applicants with the highest pre-scores must get an interview; however, if the ~~sixth~~<sup>third</sup> applicant pre-score is tied with other applicants, and then those applicants must also receive an interview.

2. Interview committee members are responsible for documenting and scoring the interview responses on the Applicant Scoring Form.

~~Scoring for interviews shall be determined by assessing the responses to questions that support the knowledge, skills, and abilities (KSA's) of each job specification.~~

The rating shall be multiplied times the numerical weight (importance) assigned for each KSA to determine the total interview score, ~~which. The sum of all the numerical weights combined must be 60% total 100. The selected applicant's total applicant score must average 300 or higher. Any supervisory position requires an interview score of 70% or higher. The~~ The Hiring Official and interview committee ~~shall utilize~~<sup>must use</sup> objective questions relative to the knowledge, skills, abilities and requirements of the position. Questions and model answers must be attached to the hire/promotion packet.

**Select**

3. An interview committee must be used for the selection of no less than applicants for any classified position that is exempt from provisions of the FLSA. An interview committee must consist of at least two people who reflect ~~agency and/or county~~<sup>local</sup> demographics and may include the Hiring Official. The Hiring Official may select the top-scoring applicant or may elect to re-interview the top three applicants prior to making a final selection. If the selected applicant does not have the highest score, written justification in clear and unambiguous terms is required on the Applicant Recommendation Summary.

~~1. Applicants not properly registered or with Selective Services will not be considered for employment.~~

4. An interview committee is not required for the selection for applicants for positions classified as non-exempt under FLSA. However, an interview committee must be used for entry level Parole/Probation Officer positions. The interview committee must consist of at least two people who reflect local demographics and may include the Hiring Official.

**G. Selection Criteria.** The Hiring Official makes the initial recommendation for hire based on information furnished by the applicant, responses on Qualification Inquiry Form, applicant interview responses, work and/or character references, ACIC/NCIC reports, and an assessment of knowledge, skills, and abilities (KSAs). Persons applying for rehire will be evaluated on the same basis as other applicants plus past job performance and the circumstances surrounding termination of previous ACC employment; physical, and psychological exams (when appropriate); and in compliance with legal, budgetary, and regulatory requirements. Consequently, the applicant with the highest interview score will not necessarily be the applicant hired for the position. (2-CO-1C-13; 4-ACRS-7B-04)

## H. Background Investigation.

1. For positions requiring a CDL, the HRS must request information from the Office of Driver Services Commercial Driver Alcohol and Drug Testing Database (CDADTD) and maintain the results for three (3) years. A person with a record of a positive drug and/or alcohol test may not work for ACC in a position requiring a CDL.

2. Fiscal Positions. If the background check reveals a financial misdemeanor conviction or a felony conviction, the applicant shall not be hired.

3. LEO and Residential Security Positions. Applicants and incumbents for law enforcement officer positions are prohibited by CLEST rules and regulations from having a felony conviction. The fact that an individual has received a pardon or their record has been sealed/expunged does not release the person from having a felony record for the purpose of the CLEST requirements. A person must not be employed as an ACC LEO if he or she has a felony or a misdemeanor conviction for domestic violence or sexual abuse by force or coercion. ACC also requires applicants for Residential Services positions to meet the above Commission standard on misdemeanor and felony convictions except as outlined below in Conviction Exceptions. Residential Services and Central Office Hiring Officials must be consistent with federal, state, and local laws and make efforts to contact all prior correctional facility employers (jails, prisons, or community correction facilities) for information on substantial allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. (PREA 115.217)

4. Conviction Considerations. An ex-offender status will not automatically disqualify an applicant for employment with ACC, except for Law Enforcement Officers/Security Officer positions. The following should be considered in determining whether convictions other than those described in the preceding paragraphs are sufficient to refuse employment or discharge from employment:

- a. the job duties and responsibilities;
- b. the nature and number of convictions;
- c. the facts of each conviction;
- d. the length of time between a conviction and the employment decision;
- e. rehabilitation efforts; and
- f. if the particular conviction would prevent acceptable job performance.

The Director must approve the hiring of an ex-offender for any ACC position.

5. Hiring Officials must conduct a comprehensive background investigation using the following tools: Authorization for Release of Information, addresses listed on the Child and Adult Maltreatment forms for last five (5) years, Qualification Inquiry, ACIC/NCIC reports and responses from local courts. This information must be included in the hire packet sent to HRS.

6. A minimum of two positive employment reference checks on the selected applicant's work history are required, however the reference checks will be done with the understanding that



recent graduates may not have established a work history. Military veterans must submit a DD Form 214 long form, or NGB form 22, so the Hiring Official can determine whether the discharge was “Honorable” or “Under Honorable Conditions”.

7. The comprehensive background investigation and packet will be reviewed by the HRS-BD on each recommended applicant. If during the investigation or review, the Hiring Official or HRS encounters information that indicates a potential connection or involvement with terrorism, the information must be forwarded through the Internal Affairs Administrator (IAA) to the Arkansas State Police (ASP) for review by the Joint Fusion Center (the Arkansas Joint Terrorism Task Force). (4-ACRS-7B-05; 2-CO-1C-18).

~~6-8.~~ Following review of the background investigation and hire packet, the HRS-BD will forward it to the appropriate Deputy Director. If the background is not acceptable, the HRS must provide the supporting information.

~~79.~~ The Deputy Director must review the complete packet and sign indicating “approved” or “not approved.” Approved hire packets are sent to HRS.

~~810.~~ When a Deputy Director approves an applicant, his/her Administrative Specialist must communicate the information on the Information Systems Access Request form to the Information Technology department.

**I. Rehire of Retired State of Arkansas Employees.** Candidates who have retired from State of Arkansas jobs are subject to a mandatory waiting period before they can be rehired. Anyone who enters the DROP on or after March 1, 2011, cannot return to APERS covered employment.

☐ Regular Retirement On or after July 1, 2009      180 days waiting period

☐ DROP Retirement:

- On or before January 1, 2009      30 days
- February 1, 2009 – February 1, 2011      180 Days
- March 1, 2011      Not eligible to return (includes employers covered under reciprocal plans)

#### **J. Inter-Agency Movements.**

1. Administrative transfer – The Director may at any time transfer employees and/or their ~~positenspositions~~ to another location when the transfer is in the best interest of the Department.

2. Lateral Transfer ACC employees ~~must meet~~have the ~~following criteria~~opportunity to ~~be eligible for a lateral transfer; however, laterally within the Director or appropriate Deputy Director may approve the request based upon extenuating circumstances.~~

~~a. A current ACC employee not on disciplinary probation may apply for a agency. The lateral transfer process can only be utilized to a position move from an employee’s current~~ title and

grade ~~that is to~~ the exact same ~~as the employee's current position~~ title and grade somewhere else within ACC, if approved.

~~b. A newly hired employee currently on initial probation may not request a lateral transfer until his or her probationary period is up.~~

a. The employee is responsible for obtaining all required signatures on the Request for Lateral Transfer form. If an employee is on disciplinary probation, he/she must attach a copy of the most current letter, along with any supporting documentation, to allow for full disclosure of the circumstances regarding the disciplinary action. Once completed, the Request for Lateral Transfer form and the DFA Disclosure/Certifications Forms must be sent to HRS on or before the day the position advertisement on the Arkansas State Jobs website closes. HRS will validate transfer eligibility and forward transfer requests to the hiring official.

b. The hiring official may interview and process his/her hiring recommendation or request HRS to forward remaining applications for the position and resume the normal interview and selection process. The Hiring Official is responsible for notifying non-selected candidates referred to him/her for consideration; HRS will notify all other applicants. HRS will confirm the Lateral Transfer Date and will notify both the Releasing Official and the Hiring Official. The Releasing Official may allow the transfer in less than two weeks. 4-APPFS-3E-09

3. Transfer. Any transfer of a position or employee within an Area requires immediate supervisor and Division Deputy Director approval.

4. Promotions. ACC employees may compete for subsequent promotion within the agency using the State application to apply for a higher graded job (4-APPFS-3E-09). Reference checks for promotion applicants may be limited to internal checks. Criminal history checks will be conducted. Upon change to a higher grade, an employee's salary will be increased in accordance with OPM Policy and guidelines of the Timekeeping and Compensation Policy.

#### 5. Demotion.

a. Voluntary – Employees can opt to demote to a vacant position with approval from the immediate supervisor and Division Deputy Director

b. Involuntary – Refer to Administrative Directive: Employee Discipline

### **K. Conditional Offer of Employment**

1. The Hiring Official must make a written conditional offer of employment. Candidates for employment should be informed of any position requirements, such as training, certification, travel requirements/frequency, and extended or irregular work hours. The written conditional offer of employment may be electronic; however, a signed letter must be obtained prior to start of ACC employment and must be provided to HRS on or before HR in-processing day, which is usually on the hire date.

2. Certified counselors must provide HRS a copy of the certification the first day of or before HR in-processing or orientation otherwise; promptly forward attainment of certification.

~~3. Assemble the HR hire pack to include required documents listed on the Hire Pack Checklist that is appropriate for the position.~~

#### **L. Final Processing**

The HRS, upon receipt of a completed and correct hire packet, will issue an effective hire date to the Hiring Official.

The hiring official ~~must notify~~will work with the HRS to ensure candidates who were interviewed, but not selected, ~~are notified~~ that the position has been filled by another qualified applicant. Notification may include an e-mail via ARStateJobs website.

#### **M. Orientation.**

The Hiring Official must facilitate enrollment for new employees in the orientation process as described in the Employee Training policy. The Hiring Official must submit new employee information via ACC HR IT Notify.

**N. Probationary Period.** All new employees, rehires, transfers (including lateral transfers), and promotions must complete a probationary period as outlined below.

- ☐ New Hire – 12 months
- ☐ Rehire – 12 months
- ☐ Internal Transfers (including lateral transfers) – 6 months
- ☐ Promotions – 6 months
- ☐ Voluntary Demotions – 6 months

~~Involuntary Demotions – 12 months~~

~~☐ Disciplinary Probation – 3-12 months as outlined in the “Employee Discipline”  
Administrative Directive.~~

~~Multiple probationary periods run concurrently, and each one must be completed.~~

Completion of a probationary period does not affect the “at-will” employment status of the employee or create or constitute a contract for employment. In the event of a major illness or other necessity that results in approved, long-term absences from the work place during the probationary period, the period will be extended until such time as the total amount of time on the job reaches the equivalency of 12 months. (2-CO-1C-15)

#### **O. Veteran’s Requests for Information.**

When a person who has qualified for veteran’s preference makes a request for scoring information, the hiring official must provide the person with his/her base score, adjusted score, and the successful candidate’s score. Also upon request, the hiring official must provide in writing the reason that the veteran was not included on a list of qualified candidates for interview and why the veteran was not selected for the position. (Arkansas law section 21-3- 302)



## VII. FORMS LIST

Form 1A Hire Pack Checklist for Non-Security/Non-LEO  
Form 1B Hire Pack Checklist for Law Enforcement Officers  
Form 1C Hire Pack Checklist for Residential Services Security  
Form 2 Request for Job Vacancy Advertisement  
Form 3 Applicant Scoring  
Form 4 Applicant Recommendation Summary  
Form 5 Workplace Notices  
Form 6 Qualification Inquiry (All Employees)  
Form ~~7A—External~~7 Employment Reference Form

~~Form 7B—Internal Employment Reference Form~~

~~Form 8—Character Reference Questionnaire~~

Form 9 Grant Position Acknowledgement

Form 10 Applicant Rating Sheet

Form 11 Authorization for Release of Information

Form 12 Request for Lateral Transfer

Form 13 Law Enforcement Code of Ethics

Form 14 Essential Job Functions Non-Security/ Non- LEO

Form 15 Essential Job Functions Law Enforcement

Form 16 Essential Job Functions Residential Security

Form 17 Information Systems Access Request Form

Form 18 Conditional Offer of Employment (LEO)

Form 19 Conditional Offer of Employment (Residential Services)

Form 20 Conditional Offer of Employment (Non-Security/Non-Leo)

~~Form 21—Notice of Non-Selection~~

~~Form 21 Previous State Agency Education Information~~

~~Form 22 Notice to Applicant's Selected for Interview~~

~~Form 23 Applicant Pre-Score~~

### OTHER ITEMS AS NEEDED:

APS-0001 Authorization for Adult Maltreatment Central Registry (Check) Form

CFS-316 Request for Child Maltreatment Central Registry (Check) Form

DFA Disclosure Forms

W-4 Federal Withholding Form

AR4EC Arkansas Tax Form

I-9 Employment Eligibility Verification Form

Direct Deposit Form

AASIS Information Confidentiality and Security Agreement

VSP-1 Authorization to Operate State or Private Vehicles on State Business

Disposition Codes

OPM Form 023 Statement of Selective Service Status

OPM Form Hiring Freeze Exception Request

CLEST F-1 Initial Employment Form

CLEST F-2 Medical Examination Form  
CLEST F-2a Medical History Questionnaire  
CLEST F-3 Personal History Statement  
CLEST F-4 Personnel Change in Status Report  
CLEST F-4a Personnel Separation Notice  
CLEST F-7 Application for Award of Law Enforcement Certificate  
CLEST F-8 Application for Law Enforcement Instructor Certificate  
ALETA Training Application Forms

#### **VIII. REFERENCES:**

**Arkansas Dept. of Finance & Administration (DFA)**

**Disclosure of Employment of Family Members forms is available on the Department of Finance and Administration: Human Resources website**