

American Correctional Association

ACCREDITATION REPORT



Commission on Accreditation for Corrections

**Cherokee Sheriff's Office
Cherokee Sheriff's Office Adult Detention Center
Canton, Georgia**

The mission of the Commission on Accreditation for Corrections is to upgrade and improve practices and conditions in adult and juvenile correctional facilities and programs through an accreditation process which is founded on a commitment to accountability, professionalism and respect for basic human rights and which recognizes sound and effective correctional practices, while striving towards excellence in the field of corrections.



AMERICAN CORRECTIONAL ASSOCIATION

206 NORTH WASHINGTON STREET, SUITE 200 • ALEXANDRIA, VIRGINIA 22314

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WWW.ACA.ORG

August 19, 2019

Cherokee Sheriff's Office
Cherokee Sheriff's Office Adult Detention Center
Canton, Georgia

Congratulations!

It is a pleasure to officially inform you that the Cherokee Sheriff's Office Adult Detention Center was accredited by the Commission on Accreditation for Corrections at the American Correctional Association 2019 Congress of Correction Conference on August 5, 2019 in Boston, Massachusetts.

Your accreditation represents the satisfactory completion of a rigorous self-evaluation, followed by an outside review by a team of experienced, independent auditors.

Every profession strives to provide a high quality of service to society. To know that you, your staff, and other officials are complying with the requirements of the accreditation process is indeed a statement of a high level of commitment to the staff and persons under your care.

On behalf of the American Correctional Association and the Commission on Accreditation for Corrections, thank you for your commitment to the corrections profession and to the accreditation process.

Sincerely,

Thomas Stickrath, Chairperson
Commission on Accreditation for Corrections



For Immediate Release

Cherokee Sheriff's Office Adult Detention Center Awarded National Accreditation

Thomas Stickrath, Chairperson of the Commission on Accreditation for Corrections (CAC), and David Haasenritter, Director of Standards and Accreditation, American Correctional Association recently announced the accreditation of the Cherokee Sheriff's Office Adult Detention Center. The award was presented in conjunction with the American Correctional Association Congress of Correction Conference on August 5, 2019 in Boston, Massachusetts.

In presenting the award, Thomas Stickrath, Chairperson of the CAC, and Lannette Linthicum, President of the American Correctional Association (ACA), complimented the facility on their professional level of operation and their success in completing the accreditation process. The agency is one of over 1,500 correctional organizations currently involved in accreditation across the nation.

The accreditation program is a professional peer review process based on national standards that have evolved since the founding of the Association in 1870. The standards were developed by national leaders from the field of corrections, law, architecture, health care, and other groups who are interested in sound correctional management.

ACA standards address services, programs, health care and security operations essential to effective correctional management. Through accreditation, an agency is able to maintain a balance between protecting the public and providing an environment that safeguards the life, health, and safety of staff and offenders. Standards set by ACA reflect practical up-to-date policies and procedures and function as a management tool for agencies and facilities throughout the world.

The three-year accreditation award granted to the Cherokee Sheriff's Office Adult Detention Center does not signal the end of their involvement in the accreditation process. During the award period, staff will work to improve any deficiencies identified during the audit and maintain continuous compliance with the standards.



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Congratulations on your accreditation award! You are now a member of the elite in achieving correctional excellence. The certificate you have received is but a small symbol of the enormous dedication and commitment demonstrated by each and every member of your staff to the accreditation process, and I urge you to display it prominently as a continual reminder of the level of professionalism achieved. This is just the beginning of your journey, however, for the true test of excellence is the test of time. It is critical that your operation be able to sustain this achievement over time and be constant through both prosperity and adversity.

Achieving American Correctional Association Accreditation means you have demonstrated your dedication to getting the job done right, and that you are holding your agency to a higher standard.

Thank you for your commitment to the American Correctional Association and the standards and accreditation process.

A handwritten signature in black ink, appearing to read 'D. K. Haasenritter', with a stylized flourish at the end.

David Haasenritter
Director, Standards and Accreditation
American Correctional Association

Overview of the American Correctional Association

The American Correctional Association is the oldest and most prestigious correctional membership organization in the United States. Founded in 1870, ACA currently represents more than 20,000 correctional practitioners in the United States and Canada. Members include all levels of staff from a wide variety of correctional disciplines and programs as well as professionals in allied fields and representatives from the general public. In addition, the Association represents the interests of 74 affiliated organizations whose goals, while similar to those of ACA, focus on specialized fields and concerns within the realm of corrections.

At its first organizational meeting held in Cincinnati, Ohio, in 1870, the Association elected then-Ohio governor and future U.S. President, Rutherford B. Hayes, as its first president. The Declaration of Principles developed at that first meeting became the guidelines for correctional goals in both the United States and Europe.

Since that time, ACA has continued to take a leadership role in corrections and work toward a unified voice in correctional policy. In recent years, one of the Association's major goals has been the development of national correctional policies and resolutions of significant issues in corrections. These policies are considered for ratification at the Association's two annual conferences and ratified policies are then disseminated to the field and other interested groups. ACA has also had a major role in designing and implementing professional standards for correctional practices, as well as methods for measuring compliance with those standards.

The Association conducts research and evaluation activities, provides training and technical assistance, and carries out the regular responsibilities of any professional membership organization, including a full publications program. The Association's two annual conferences, held in varying cities across the nation, attract more than 5,000 delegates and participants each year from the 50 states, U.S. territories, and several foreign countries.

Membership in ACA is open to any individual, agency, or organization interested in the improvement of corrections and the purposes and objectives of the Association. Members include the majority of state, local, provincial, and territorial correctional agencies; individual correctional institutions and local jails, pretrial programs and agencies, schools of criminal justice in colleges and universities, libraries; and various probation, parole, and correctional agencies. Most of ACA's members are employed at the federal, state, and local levels. Members also include more than 200 volunteers affiliated with these agencies as administrators or as members of advisory boards and committees.

Organizational Purposes of the American Correctional Association

Among the most significant purposes of the Association as outlined in its Constitution, are:

To provide a professional association of persons, agencies, and organizations, both public and private, who hold in common the goal of improving the profession of corrections and enhancing their contribution to that profession.

To broaden and strengthen support for the Association's goals by advocating Association policies, resolutions, positions, and standards to policymakers and the public and by forming coalitions with other professional organizations sharing these goals.

To develop standards for all areas of corrections and implement a system for accreditation for correctional programs, facilities and agencies based on these standards. Where feasible, standards shall be based on performance outcome.

To conduct or sponsor corrections conferences, congresses, institutes, forums, seminars and meetings.

To publish and distribute journals and other informative materials relating to criminology, crime prevention, and corrections and to encourage and stimulate research of these matters.

To promote recognition of corrections as a profession, and those who work in corrections as professionals, and to ensure validity of that recognition by encouraging the recruitment and development of highly qualified corrections professionals, and by developing and implementing a certification program for corrections professionals

In carrying out these purposes, ACA supports programs for policy analysis, demonstration, effective delivery of health services to offender populations and research. ACA also provides testimony, consultation, publications, conferences, workshops, and other activities designed to stimulate constructive action regarding correctional issues.

Standard and Accreditation

Perhaps ACA'S greatest influence has been the development of national standards and the accreditation process. ACA standards address services, programs, and operations essential to effective correctional management. Through accreditation, an agency is able to maintain a balance between protecting the public and providing an environment that safeguards the life, health, and safety of staff and offenders. Standards set by ACA reflect practical up-to-date policies and procedures and function as a management tool for correctional agencies in the United States and Mexico.

Organizational Structure of the American Correctional Association

Executive Committee

The Executive Committee is composed of the elected officers of the Association - president, vice president, treasurer, two Board of Governors' members, the immediate past president, the president-elect, and the ACA executive director. The Executive Committee meets at least quarterly and exercises most of the powers of the Board of Governors during the intervals between meetings of the board.

Board of Governors

ACA's bylaws vest control of the Association with an 18-member elected Board of Governors composed of the officers of the Association and five at-large members. To ensure the interdisciplinary nature of the Association, board members must represent the following areas:

Correctional Administration	Community Programs
Institutions	Detention
Juvenile	Education
Probation	Health Care
Parole, Aftercare or Post-Release	
Supervision	

Delegate Assembly

The Delegate Assembly is composed of delegates from the professional affiliates, geographical chapters, membership at-large, Board of Governors, past presidents of ACA, and representatives of each military service. The Delegate Assembly can establish policy, define Association positions on broad social and professional issues, and determine major programs and legislative priorities. They meet at least twice annually, at the Winter Conference and Congress of Correction.

Committees

The majority of the Association's activities take place through committees. Each committee chair reports to the Association's Board of Governors at least twice a year. In this way, the Association collectively benefits from the involvement and contribution of the hundreds of individuals who function on the various committees. Ad-hoc committees are appointed by the president of the Association.

The current committees and councils are:

Committee on Affirmative Action

Committee on Constitution and Bylaws

Committee on International Relations
Committee on Congress Program Planning
Committee on Legal Issues
Committee on Correctional Awards
Committee on Membership
Committee on Military Affairs \

Council of Professional Affiliates
Council of Dual-Membership Chapters and
State and Geographical Affiliates
Nominating Committee

Council on Professional Education
Credentials Committee
Research Council
Eligibility Committee
Resolutions & Policy Development
Comm
Committee on Ethics
Performance Standards Committee
Legislative Affairs Committee

Affiliates and Chapters

Affiliates and state chapters are major features of the Association's structure. They represent professional, regional, and state groups across the United States and Canada. Affiliates and chapters contribute to the professional development of all members by providing consultation in their respective areas of interest and by participating in seminars and workshops at ACA's annual conferences.

The following affiliates and chapters are currently associated with ACA:

American Catholic Correctional Chaplains
Association
American Correctional Chaplains Association
American Correctional Food Service Association
American Jail Association
American Probation and Parole Association
Arizona Probation, Parole, and Corrs Assn Assn of
Paroling Authorities, International Assn of State
Correctional Administrators Assn of Women
Executives in Corrections International Assn of
Correctional Officers Iowa Corrections
Association
Juvenile Justice Trainers Association
Kansas Correctional Association
Kentucky Council on Crime and Delinquency
Louisiana Correctional Association Maryland
Criminal Justice Association
ACA Mexico Chapter
Jamaica Federation of Corrections
Hawaii Criminal Justice Association
Michigan Corrections Association
Middle Atlantic States Correctional
Association
Minnesota Corrections Association
Missouri Corrections Association
District of Columbia Criminal Justice Association

National Association of Adult and Juvenile
State
Community Corrections Association of
Georgia
National Assn of Blacks in Criminal Justice
National Association of Juvenile Corrl
Agencies
Oregon Criminal Justice Association
Parole and Probation Compact
Administrators Association
Pennsylvania Assn of Probation, Parole, and
Corrections
Prison Fellowship
South Carolina Correctional Association
Tennessee Corrections Association
Association on Programs for Female
Offenders
Central States Correctional Association
Colorado Correctional Association
Connecticut Criminal Justice Association
Correctional Association of Massachusetts
Correctional Accreditation Managers Assn
Correctional Education Association
Correctional Industries Association
Council of Juvenile Correctional
Administrators
Florida Council on Crime and Delinquency
Illinois Correctional Association
Indiana Correctional Association

International Assn of Corrl Training Personnel
International Community Corrections Assn
National Association of Probation Executives
National Coalition for Mental and Substance
Abuse Health Care in the Justice System
National Correctional Recreation Association
National Council on Crime and Delinquency
National Juvenile Detention Association
National Organization of Hispanics in Criminal
Justice
Nebraska Justice Association
Nevada Correctional Association
New Jersey Chapter Association
New Mexico Criminal Justice Association
New York Corrections and Youth Svcs Assn
Department of Corrections and Rehabilitation
of Puerto Rico Chapter of the American
Correctional Association

North American Association of Wardens &
Superintendents
North Carolina Correctional Association
Ohio Correctional and Court Svcs
Association
Oklahoma Correctional Association
Oregon Criminal Justice Association
Texas Corrections Association
The Salvation Army
Utah Correctional Association Virginia
Correctional Association Volunteers
of America
Washington Correctional Association
Wisconsin Correctional Association
Wyoming Criminal Justice Association

Major Activities of the American Correctional Association

Legislation

The American Correctional Association is involved with all major issues affecting corrections today. Members and ACA staff maintain close working relationships with committees of the U.S. Congress and all federal agencies and groups whose decisions affect correctional policy. Expert testimony on a wide range of correctional issues is prepared for congressional committee and subcommittee hearings, and recommendations are provided to federal administrative agencies.

To ensure that the concerns and issues of the corrections profession are represented in proposed legislation and public policy, ACA's legislative liaison is addressing legislative and government concerns that will impact the corrections profession. ACA has established partnerships between chapters and affiliates and other national policy making organizations to present a strong collective voice for correctional reform throughout the world.

Professional Development

The purpose of the Association's Professional Development Department is to plan, promote, and coordinate professional development through training seminars, workshops, and published materials including curriculums, resource guides, and monographs.

ACA's training plan calls for a variety of professional development activities. Nationally advertised workshops cover topics such as training for trainers, management training, community-based employment programs, and stress management. On-site workshops for state and local departments of corrections are offered in curriculum development, supervision, communications, and report-writing skills.

The *Training for Correctional Staff Trainers* workshops further the skills of correctional professionals qualified to initiate and deliver training. These workshops also enable agencies to comply with national standards for accreditation and ensure that training is job-related and professionally developed and presented.

The department also offers correspondence courses to further professional development. More than 6,000 correctional personnel have completed or are in the process of completing ACA's self-instruction training program for correctional officers. This program, developed under the auspices of the National Institute of Corrections, provides 40 hours of basic training in accordance with ACA standards. A score of at least 80 percent on the comprehensive examination must be attained to achieve certification.

The Association has similar courses available for correctional supervisors, juvenile caseworkers, and food service employees. Additional courses which cover report writing skills, correctional management skills, legal issues for probation and parole officers, and legal issues for correctional officers are also available.

Publications

As one of the leading publishers of practical correctional publications, ACA produces books, videos and lesson plans. Among the wide-ranging subjects available are management, community, security, counseling, law, history and health. These excellent resources for career advancement appeal to practitioners and scholars alike. Directories for every major sector of corrections also are published by ACA.

The following are just a few of the many publications that ACA offers.

Corrections Today is the major corrections magazine in the United States. Published six times a year, the magazine focuses on the interests of the professional correctional employee and administrator. Articles include reports of original research, experiences from the field, discussion of public policy, and the perspectives of prominent practitioners and academicians.

The Juvenile and Adult Directory has been published since 1939. This publication is the only up-to-date, comprehensive directory of all U.S. and Canadian juvenile and adult correctional departments, institutions, agencies and paroling authorities.

The National Jail and Adult Detention Directory was first published in 1978. It is a source of information concerning jails. The directory attempts to list all jails in the United States that house offenders or detainees for more than 48 hours.

The Probation and Parole Directory provides more than 500 pages of information regarding federal, state, and county adult and juvenile probation, parole and aftercare systems in the United States. It includes statistics on caseloads, expenditures and personnel.

Correctional standards are the most significant improvement in correctional programming. As the basis for accreditation, they give administrators a nationally recognized system for upgrading and improving their correctional services. The association currently publishes more than 20 manuals for every correctional discipline.

To aid in the development of policy with relation to accreditation, *Guidelines for the Development of Policies and Procedures* are available for adult correctional institutions, adult parole authorities/adult probation and parole field services, adult local detention facilities, adult community residential services, juvenile detention facilities, and juvenile training schools.

Conventions

ACA hosts two national conventions each year that attract more than 5,000 professionals from all aspects of corrections; the Winter Conference held in January, and the Congress of Correction, held in August. These events include a variety of workshops, exhibits, and seminars devoted to addressing topics specific to the corrections profession.

Contracts and Grants

The American Correctional Association has a history of successful grant and contract management and administration. ACA has completed contracts and grants of more than \$30 million. These diverse initiatives, which are funded through federal and private sources, add to the technical expertise and knowledge of the organization as well as to the total field of corrections.

Performance Based Standards & Expected Practices Accreditation Department

Perhaps ACA's greatest influence has been the development of national standards and the accreditation process. ACA standards address services, programs, and operations essential to effective correctional management. Through accreditation, an agency is able to maintain a balance between protecting the public and providing an environment that safeguards the life, health, and safety of staff and offenders. Standards set by ACA reflect practical up-to-date policies and procedures and function as a management tool for correctional agencies in the United States and Mexico.

Overview of the Commission on Accreditation for Corrections

The Commission on Accreditation for Corrections (CAC) is a private, nonprofit organization established in 1974 with the dual purpose of developing comprehensive, national standards for corrections and implementing a voluntary program of accreditation to measure compliance with those standards.

The Commission was originally developed as part of the American Correctional Association. In 1979, by joint agreement, the Commission separated from the Association in order to independently administer the accreditation program. Between 1978 and 1986, the organizations shared the responsibility for developing and approving standards and electing members of the Commission. On November 7, 1986, the Commission on Accreditation for Corrections officially realigned itself with the American Correctional Association.

The Commission meets at least twice each year. The responsibility of rendering accreditation decisions rests solely with this board. The members of the Commission represent the full range of adult and juvenile corrections and the criminal justice system. They are elected from the following categories:

- Correctional Administration
- Juvenile Institutions
- Probation Parole, Aftercare or Post-Release Supervision
- Community Programs
- Detention
- Education
- Health Care
- Legal
- Architecture
- Non-correctional administration

Association Staff

Accreditation activities are supported by the staff of the American Correctional Association, Performance Based Standards & Expected Practices Accreditation Department, under the leadership of the director of the department. Performance Based Standards & Expected Practices Accreditation Department staff is responsible for the daily operation of the accreditation program. Agencies in the process have contact primarily with the accreditation specialist responsible for their state or agency.

Auditors

Over 600 corrections professionals in the United States have been selected, trained, and employed on a contract basis by the Association. These individuals perform the field work for the Association which includes providing assistance to agencies working toward accreditation, conducting on-site audits of agencies to assess compliance with standards and confirming that requirements are met, and monitoring to ensure maintenance of the conditions required for accreditation. Teams of auditors, referred to as visiting committees or audit teams, are formed to conduct standards compliance audits of agencies seeking accreditation and reaccreditation.

Auditors are recruited nationally through announcements in prominent criminal justice publications and at major correctional meetings. Affirmative action and equal employment opportunity requirements and guidelines are followed in the recruitment of auditors. All ACA auditors have a minimum of three years of responsible management experience, have received a recommendation from an agency administrator, and have demonstrated knowledge in the substantive area(s) in which they are employed to assist the Association. In addition, all auditors must successfully complete the Association's auditor training and be members of the ACA in good standing.

Traditional Standards and Expected Practices Development

Development of the ACA standards began in 1974 with an extensive program of drafting, field testing, revising, and approving standards for application to all areas of corrections. Since then, over 1,200 correctional facilities and programs have adopted the standards for implementation through accreditation, and many others have applied the standards informally themselves.

In the development of standards, the goal was to prescribe the best possible practices that could be achieved in the United States today, while being both realistic and practical. Steps were taken to ensure that the standards would be representative of past standards development efforts, reflect the best judgment of corrections professionals regarding good corrections practice, recognize current case law, and be clear, relevant, and comprehensive. The standards development and approval process has involved participation by a wide range of concerned individuals and organizations. Twenty-two manuals of standards are now used in the accreditation process:

Standards for Adult Correctional Institutions –Fourth Edition
Performance -Based Standards for Adult Probation and Parole Field Services
Performance -Based Standards for Adult Local Detention Facilities--Fourth Edition
Performance -Based Standards for Adult Community Residential Services --Fourth Edition
Performance -Based Standards for Correctional Industries
Standards for Correctional Training Academies
Standards for Juvenile Community Residential Facilities –3rd Edition
Performance -Based Standards for Juvenile Correctional Facilities -- Second Edition
Standards for Juvenile Probation and Aftercare Services –Second Edition
Standards for Juvenile Detention Facilities --3rd Edition
Standards for Juvenile Day Treatment Programs
Standards for Juvenile Correctional Boot Camps

Performance -Based Standards for Therapeutic Communities
Standards for Small Juvenile Detention Facilities
Performance-Based Health Care Standards for Adult Correctional Institutions
Performance Based Core Jail Standards-First Edition
Performance Based International Correctional Core Standards- Adult
Performance Based International Correctional Core Standards- Juvenile
Standards for Administration of Correctional Agencies - Second Edition
Standards for Adult Parole Authorities - Second Edition
Standards for Electronic Monitoring Programs
Standards for Adult Correctional Boot Camps Programs

The standards establish clear goals and objectives critical to the provision of constitutional and humane correctional programs and services. The standards include the requirement for practices to promote sound administration and fiscal controls, an adequate physical plant, adherence to legal criteria and provision of basic services. Basic services called for by the standards include the establishment of a functional physical plant, training of staff, adoption of sanitation and safety minimums, and provision of a safe and secure living environment. In offering specific guidelines for facility and program operations, the manuals of standards address due process and discipline, including access to the courts, mail and visitation, searches, and conditions of confinement of special management offenders.

The standards are systematically revised to keep pace with the evolution of different correctional practices, case law, and after careful examination of experiences, applying them over a period of time and circumstances. The ACA Standards Committee, which includes membership from the Commission on Accreditation for Corrections, is responsible for standards development and revision.

The ACA publishes biannual supplements to the standards with updated information and clarifications until new editions of standards manuals are published. Each supplement addresses standards interpretations, deletions, revisions, and additions for all manuals of standards issued by the Standards and Accreditation Department.

Suggestions and proposals for revisions to the standards from the field and interested others are encouraged. Performance Based Standards & Expected Practices Accreditation Department has developed an on-line process specifically for this purpose. Proposals should be submitted via the ACA website.

Accreditation Process Descriptions

For over 120 years, the American Correctional Association has been the only national body involved in the development of standards for the correctional field. ACA standards are supported by ACA's Performance Based Standards & Expected Practices Accreditation Department and the Commission on Accreditation for Corrections, which is the evaluating and certifying body for accreditation. The department is responsible for the administration of accreditation and ongoing development of correctional standards.

The accreditation process is a voluntary program for all types of correctional agencies. For these agencies, accreditation offers the opportunity to evaluate their operations against national standards, to remedy deficiencies, and to upgrade the quality of programs and services. The recognized benefits of such a process include: improved management; a defense against lawsuits through documentation; demonstration of a "good faith" effort to improve conditions of confinement; increased accountability and enhanced public credibility for administrative and line staff; a safer and more humane environment for personnel and offenders; and the establishment of measurable criteria for upgrading programs, staffing, and physical plant on a continuous basis.

A major component of the accreditation process is the standards compliance audit conducted by a visiting committee. The purpose of the audit is to measure operations against the standards, based on documentation provided by the agency.

The Visiting Committee Report

The results of the standards compliance audit are contained in the visiting committee report, a document prepared by the visiting committee chairperson. The report is distributed to the agency administrator and members of the visiting committee. This report is also submitted to the Commission on Accreditation for Corrections for consideration at the accreditation hearing.

The following information is usually contained in the visiting committee report:

Agency and Audit Narrative

The agency narrative includes a description of program services, a description of physical plant, number of offenders served on the days of the audit, a summary significant incidents and consent decrees, class action lawsuits and/or judgments against the agency/facility, if applicable. The audit narrative, prepared by the visiting committee chairperson, describes audit activities and findings. The narrative examines issues or concerns that may affect the quality of life and services in an agency or facility. Quality of life issues include areas such as staff training, adequacy of medical service, sanitation, use of segregation and detention, reported and/or documented incidences of violence and crowding in institutions, offender activity levels, programming and provision of basic services. The audit narrative also contains comments as a result of staff and offender interviews, and a detailed explanation of all noncompliant and not applicable standards.

Agency Response

The agency has three options for standards found in noncompliance: a plan of action; an appeal; or a waiver request.

A **plan of action** is a detailed statement of tasks to be performed in order to achieve compliance with a standard found in noncompliance at the time of the audit. The plan of action designates staff responsibilities and timetables for completion.

An **appeal** is the agency's attempt to change the visiting committee's decision on a standard. The result of a successful appeal is a change in the status of the standard and a recalculation of the compliance tally.

A **waiver** may be requested when noncompliance with a standard does not adversely affect the life, health, or safety of staff and offenders and when quality of life conditions compensate for the lack of implementation of a plan of action. The granting of a waiver by the Commission waives the requirement for submitting a plan of action; however, it does not change the noncompliant finding.

Auditor's Response

This section contains the visiting committee's final reply to all responses received from the agency and includes comments regarding the acceptability of plans of action, appeals, and waivers.

Accreditation Hearings

The Commission on Accreditation for Corrections is solely responsible for rendering accreditation decisions and considers an agency's application at its next regular meeting following completion of the visiting committee report. The Commission is divided into panels that are empowered to reach and render accreditation decisions. These panels hear the individual application for accreditation and include a quorum of at least three Commissioners which includes the panel hearing chairperson. Agencies are notified in writing of the date, time, and location of the hearings by Performance Based Standards & Expected Practices & Accreditation Department Staff.

The panel hearing is the last step in the process. With the panel chairperson presiding, panel members discuss issues and raise questions relative to all aspects of agency operations and participation in the process. The information presented during the hearing and in the visiting committee report is considered by the panel members in rendering accreditation decisions.

The agency is invited to have a representative at the hearing and, in most cases, one or more individuals attend. When special conditions warrant, the visiting committee chairperson or a member of the visiting committee also may be asked to attend the hearings. When this occurs, the auditor provides information to help clarify controversial issues and responds to questions and concerns posed by panel members.

Attendance by any other parties (i.e. media representatives, public officials, or personnel from agencies other than the applicant) occurs only with the permission of the applicant agency. In these cases, the applicant agency representatives and panel members discuss procedures to be followed before commencement of the hearing.

Conduct of Hearings

The panel schedule provides ample time for review of each individual agency pursuing accreditation. Hearings are conducted by the panel chairperson in accordance with established procedures. Panel proceedings require that a formal vote be taken on all final actions, i.e., agency appeals, waiver requests, and the final accreditation decision of the Commission. All panel proceedings are tape-recorded to assist in preparing minutes of the hearings. Panel activities generally occur as follows:

- Applicant agency representatives are requested by Standards and Accreditation Department staff to be on-call to allow for scheduling flexibility.
- A designated waiting area is usually provided for this purpose.
- When the panel is ready to review the agency, the Standards and Accreditation Department staff representative notifies agency representative(s).
- The hearing opens with an introduction by the panel chairperson. The agency representative is asked to give a brief description of the program.

- If a visiting committee member is present at the hearing, the panel chairperson may request that the auditor present an account of the visit, focusing on matters particularly pertinent to the decision or specific panel actions. In some cases, however, the panel may wish to call on the visiting committee member only to request additional information at different points during the hearing.
- The panel chairperson leads a standard by standard review of non-compliance issues. The agency representative presents information relative to their request for waivers, plans of action, appeals, and discretionary compliance requests. The agency may also present additional materials, including photographs or documentation, for review by the panel.
- Following the agency presentation, the chairperson has the option of calling the panel into executive session to consider the information provided, determine findings, and make an accreditation decision. Whether or not panel deliberations occur in the presence of agency personnel or in executive session varies from panel to panel, considering the preference of panel members and the sensitivity of issues to be discussed regarding the application.

In final deliberations, the Commission panel:

- Ensures compliance with all mandatory standards and at least 90 percent of all other standards.
- Responds with a formal vote to all appeals submitted by the applicant agency.
- Responds with a formal vote to all request for waivers and plans of action submitted by the applicant agency.

At this time, the panel also:

- Assures that an acceptable plan of action will be submitted for every non-compliant standard, including those standards for which appeals of non-compliance and waiver requests have been denied by the panel. In judging the acceptability of plans of action, the panel ensures that all of the information requested on the form is provided. Furthermore, the feasibility of plans to achieve compliance is considered, including specific tasks, time frames, and resource availability (staff and funding) for implementing proposed remedies.
- Addresses to its satisfaction any concerns it has with visiting committee comments about the quality of life in the facility or program, patterns of non-compliance, or any other conditions reviewed by the panel relating to the life, health, and safety of residents and staff.
- For each application, a roll call vote to award accreditation, extend an agency in Candidate or Correspondent Status, or deny accreditation is conducted. The options for final action available to the panel are outlined in the next chapter.
- If the panel has deliberated in executive session, agency representatives are invited back into the meeting and informed of the panel's final decision and actions or recommendations on all other issues raised by the applicant. If accreditation has not been granted, the chairperson discusses with agency personnel specific reasons for the decision and the conditions of extension in Candidate or Correspondent Status and procedures for appeal.

Accreditation Decisions

Three decisions relative to the accreditation of an agency are available to panels:

- *Three-year accreditation award* based on sufficient compliance with standards, acceptance of adequate plans of action for all non-compliant standards and satisfaction of any other life, health, and safety conditions established by the panel. The balance of the contract must be paid in full in order to receive a certificate of accreditation.
- *Extension of the applicant agency in Candidate Status* (initial accreditation only) for reasons of insufficient standards compliance, inadequate plans of action, or failure to meet other requirements as determined by the panel. The Commission may stipulate additional requirements for accreditation if, in its opinion, conditions exist in the facility or program that adversely affect the life, health, or safety of the offenders or staff. Extension of an applicant in Candidate Status is for period of time specified by the panel and for identified deficiencies if in the panel's judgment, the agency is actively pursuing compliance.
- *Probationary Status* is determined when the panel specifies that compliance levels are marginal, there is a significant decrease in compliance from the previous audit (in the case of reaccreditation), or there are quality of life issues that would indicate continued monitoring. While an award of accreditation is granted, a monitoring visit must be completed and the report presented at the next meeting of the Commission. The cost for a monitoring visit is borne by the agency at a rate of cost plus 25%. The agency does not have to appear before the Commission for the review of the monitoring visit report. If they choose to do so, all related travel expenses are borne by the agency. Specific expectations for removal from probation are outlined.
- *Denial of accreditation* removes the agency from Accredited Status (in the case of reaccreditation) and withdraws the agency from the accreditation program. Situations such as insufficient standards compliance, inadequate plans of action, failure to meet other requirements as determined by the panel or quality of life issues may lead to the denial of accreditation, it is withdrawn from the process and is not eligible to re-apply (as an applicant) for accreditation status for a minimum of six months from the date of that panel hearing. The Commission will explain the process for appeal.

The agency receives written notification of all decisions relative to accreditation after the hearing.

Appeal Process

The accreditation process includes an appeal procedure to ensure the equity, fairness, and reliability of its decisions, particularly those that constitute either denial or withdrawal of Accredited Status, or placement into probationary status. Therefore, if an agency is denied accreditation, it is immediately appealed to the full commission.

If an agency is put in probationary status by the panel, it may submit an appeal of the placement into probationary status. The basis for reconsideration of probationary status is based on grounds that the decision(s) were:

- A misinterpretation of the criteria and/or procedures promulgated by the Commission
- Based on incorrect facts or an incorrect interpretation of facts

- Unsupported by substantial evidence
- Based on information that is no longer accurate
- The reasonableness of the expected practices, criteria, and/or procedures for the process may not serve as the basis for reconsideration.

The procedures for reconsideration are as follows:

- The agency can submit a verbal appeal immediately to the Performance Based Standards & Expected Practices & Accreditation or a written request for reconsideration within 30 days of the adverse decision stating the basis for the request.
- The Executive Committee of the Commission, composed of the officers of the Commission, reviews the request and decides whether or not the agency's request presents sufficient evidence to warrant a reconsideration hearing before the Commission. The agency is notified in writing of the Executive Committee's decision.
- If the decision is made to conduct a hearing, the hearing is scheduled for as soon as possible if the appeal is made verbally or if in writing, for the next full Commission meeting and the agency is notified of the date.
- The agency, at its option and expense, has the right of representation, including counsel.
- Following the hearing held before the Commission, the decision, reflecting a majority opinion, is made known to the agency immediately.
- Pending completion of the reconsideration process, the agency maintains its prior status.
- Until a final decision has been reached, all public statements concerning the agency's accredited status are withheld.

Following completion of the reconsideration process, any change in the status of an agency is reflected in the next regularly published list of accredited agencies.

Accredited Status

The accreditation period is three years, during which time the agency must maintain the level of compliance achieved during the audit and work towards compliance of those expected practices found in non-compliance. Regular contact with Performance Based Standards & Expected Practices & Accreditation Department staff should also be maintained. The Annual Report, Critical Incident Report and Significant Incident Summary forms discussed below are available on the ACA website at www.aca.org or through your Accreditation Specialist.

Annual Report

During the three year accreditation period, the agency submits an annual report to the Performance Based Standards & Expected Practices & Accreditation Department. This statement is due on the anniversary of the accreditation (panel hearing) date utilizing the annual report form, which is available on the ACA website or from Performance Based Standards & Expected Practices & Accreditation Department staff. It contains the following information:

Current compliance levels - This includes any changes in compliance since accreditation, listing on a case by case basis any expected practice with which the agency has fallen out of compliance or achieved compliance.

Update of Plans of Action - A progress report is included with respect to Plans of Action submitted to the hearing panel, indicating the status of the completion of the plans. Potential revision to plans reflecting the need to request additional time, funds, and/or resources to achieve compliance should also be included.

Significant Incident Report Summary - A report is made of events and occurrences at the agency during the preceding year that impact on compliance, agency operation, or the quality of services provided by the agency.

Performance Based Standards & Expected Practices & Accreditation Department staff review the annual report received from the agency and respond to clarify issues or request additional information if necessary.

Critical Incident Report

In addition to submission of the annual report, the agency is responsible for notifying Performance Based Standards & Expected Practices & Accreditation Department staff of any critical incident that has the potential to affect expected practice compliance or facility accreditation as soon as possible within the context of the incident itself, using the Critical Incident Report template on the ACA website or through Performance Based Standards & Expected Practices Accreditation Department staff.

Monitoring Visits

Monitoring visits to agencies in Accredited Status are conducted by an ACA auditor(s) in order to assess continuing compliance with the standards. A monitoring visit may be conducted at any time during the accreditation period, with advance notice to the agency. The determination of need for a monitoring visit is based on:

- Compliance levels, findings, and recommendations by the Commission on Accreditation for Corrections during the hearing.
- Incidents or events reported by the agency in its annual report.
- Problems indicated by adverse media reports or correspondence received by Performance Based Standards & Expected Practices & Accreditation Department staff, disturbances at the agency, or special investigations.

The length of the visit varies depending on the number of standards or special issues that must be addressed during the visit. The visits are conducted similar to standards compliance audits, but on a reduced scale. Monitoring visits are charged to the agency at a rate of cost plus twenty-five percent.

Activities, as a general rule, involve a review of all mandatory standards, all standards found in non-compliance at the time of accreditation, and any other concerns identified by the Commission. The visit also involves a tour of the agency and interviews with staff and offenders to ensure maintenance of the requirements of accreditation. It concludes with an exit interview during which the auditor informs the agency staff of the findings of the visit.

Following the visit, the auditor prepares a monitoring visit report that addresses findings of the visit. The report includes a list of standards reviewed, explanation of non-compliance findings, results of the tour and interviews with agency staff and offenders, and discussion of any issues believed to be relevant to the agency's accreditation. The report, as with others prepared by auditors, is reviewed and sent to the agency by Performance Based Standards & Expected Practices Accreditation Department staff.

When a monitoring visit to the agency reveals deficiencies in maintaining compliance levels that existed at the time of accreditation, or less than 100 percent compliance with mandatory standards, the agency prepares a response providing explanation of the problems indicated in the report. When the agency has failed to maintain compliance with all mandatory standards, the monitoring visit report and the agency response are submitted to the Commission on Accreditation for Corrections for review during a regular hearing. Agency representatives are advised of the date, time, and location of the review, and are invited to attend. At the discretion of the Commission, the agency may be placed in probationary status and a revisit conducted to determine if deficiencies have been corrected.

Revocation of Accreditation

If the Commission panel believes that an agency's failure to maintain continuous compliance with certain standards is detrimental to life, health, and safety of residents and staff, the Commission may place an agency on probation. Probationary status last for a specific period of time designated by the Commission at its next regularly schedule meeting. The Commission again reviews the program and considers removing the probationary status or revoking accreditation. When the agency corrects the deficiencies within the probationary status period and the corrections have been verified and accepted, the agency resumes its status as an accredited agency. An agency that does not satisfactorily correct the deficiencies may be withdrawn from accreditation.

Another condition that may result in a rehearing and consideration of revocation is following a significant event in an agency (i.e. major disturbance, death from other than natural causes or allegations of physical/sexual abuse of offenders). Failure to notify the Performance Based Standards & Expected Practices & Accreditation in a timely manner may result in suspension of the agency's accreditation. Once ACA is notified of the major event, the Director of Standards and Accreditation may consult with the Executive Committee of the Commission, who may request a monitoring visit. If a visit is warranted, ACA will notify the agency and a date will be established with the concurrence of the facility. The monitoring visit will take place within 14 days of this notification. The monitoring visit report will be sent to the Director of Standards within 7 days of the monitoring visit and then forwarded to the Executive Committee of the Commission. Following review of the report, a determination will be made by the Executive Committee as to whether revocation of accreditation is warranted. Prior to any rehearing, agency representatives will be notified, so that any issues may be addressed and responded to in writing.

Accreditation is revoked for the following reasons:

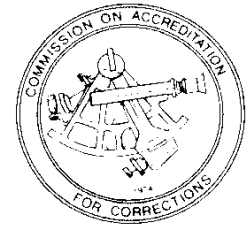
- Failure on the part of the agency to adhere to the provisions on the contract.
- Failure on the part of the agency to maintain continuous compliance with the standards at levels sufficient for accreditation.
- Intentional misrepresentation of facts, lack of good faith, or lack of deliberate speed or a concerted effort to progress in the accreditation process, including the implementation of plans of action.
- Failure to notify ACA of significant incidents in the annual report to the Commission.
- Adverse conditions of confinement that affect the life health, and/or safety of staff and offenders.
- Failure to comply with the conditions of probation or suspension.

Performance Based Standards & Expected Practices & Accreditation Department staff notify the agency in writing of the specific reasons identified by the Commission for the revocation hearing.

Expiration of Accredited Status

Accreditation is granted for a three year period. Unless the agency has applied for reaccreditation and completed activities in the process required for reaccreditation, the Commission withdraws the agency from Accreditation Status after this three year period.

For agencies in Accredited Status that are seeking subsequent accreditation, administrative extensions of Accredited Status may be granted under certain conditions. For example, relocation of the facility, staff turnover, and major renovations often warrant an extension. In these cases, a written request to the Director of Performance Based Standards & Expected Practices & Accreditation is required, outlining the reasons for extending the accreditation period. Agencies that fail to successfully complete an audit within the three year period, or do not receive an extension prior to their expiration date, are withdrawn from Accredited Status.



Visiting Committee Report and Hearing Minutes

CONFIDENTIALITY

The American Correctional Association and the Commission on Accreditation for Corrections do not disclose to external parties specific information contained in this Accreditation Report or information discussed in the Accreditation Hearing. The Association encourages all participating agencies to provide information to the media about their accreditation activities, including disclosure of the Self-Evaluation and Accreditation Report.

COMMISSION ON ACCREDITATION FOR CORRECTIONS
STANDARDS COMPLIANCE ACCREDITATION AUDIT

Cherokee Sheriff's Office
Cherokee Sheriff's Office Adult Detention Center
Canton, Georgia

January 23-25, 2019

VISITING COMMITTEE MEMBERS

Susan Lindsey
ACA Chairperson

Joseph G. Ryan
ACA Auditor

Mary O. Worrell
ACA Auditor

A. Introduction

The American Correctional Association initial accreditation audit of the Cherokee Sheriff's Office Adult Detention Center was conducted on January 23-25, 2019 by the ACA visiting team comprised of Susan Lindsey, Chairperson, Joseph G. Ryan, ACA Auditor and Mary O. Worrell, ACA Auditor/Medical. This audit was conducted based on the Adult Local Detention Facilities Fourth Edition and the 2016 Standards Supplement.

B. Facility Demographics

Rated Population	650
Actual Population:	653
Average Daily Population for the last 12 months:	653
Average Length of Stay:	30 days
Security/Custody Level:	Maximum/ High Medium (155) Maximum (177) Medium (140) Minimum (175) Unclassified (6)
Age Range of Offenders:	17 years -79 years
Gender:	Male (81%)/ Female (19%)
Full-Time Staff:	Allocated 130 Sworn and 17 Civilian positions 156 Security 119: Administrative (32) Sworn (130) Civilian (17) Programs (*) Other (0) *contracts/vendors: Medical (Wellpath/CCS) Food Service (Trinity: 2) Education (1) Commissary (Legacy/1)

C. Facility Description



The Cherokee County Sheriff's Adult Detention Center (ADC) is located at 498 Chattin Drive in Canton, Georgia, a rural area approximately 25 miles from the city of Atlanta and 45 miles from the Atlanta International Airport. This Direct Supervision facility originally opened in 1989 and an expansion of the facility was constructed in 2002. There have been no further expansions to the property, but an addition of 612 beds is planned and expected to break ground in April 2019.

Although most of the municipalities have temporary holding areas for inmates, the ADC is the only full-service jail that operates in Cherokee County.

In addition to the Cherokee Sheriff's Office, other agencies utilize their facility and include Georgia State patrol, Department of Natural Resources, Canton Police department, Woodstock Police Department, Holly Springs Police Department, Ball Ground Police Department and Cherokee County School District Police.

The capacity of the facility is rated at 650 with a current population of 653; however, the inmate population fluctuates with on-going daily intakes and discharges. Cherokee County Adult Detention Center houses adult male and female inmates age 17 or older, as 17 is the age of majority in this jurisdiction. Inmates are new arrestees as well as inmates who have not yet made bond or are awaiting trial or court dates. Some inmates are also serving minor sentences or are awaiting transfer to the State correctional facility.

The facility is enclosed within a fourteen foot chain link perimeter fence enforced with one row of razor wire. One hundred fifty-eight cameras are strategically located throughout the facility and perimeter. Within a single building encompassing 154,250 square feet, the three-story building provides eight housing units and a 27 bed medical unit.

The facility utilizes an objective classification system for assigning inmates to appropriate pods. Inmates are assigned to different units based upon their classification status, which takes into consideration their previous criminal history, the seriousness of their offense, prior and current institutional behavior, and any special needs. These factors are continually reviewed by the classification bureau who compile data and demographics for analysis. As a detention center, the facility holds all levels of maximum, medium/high, medium and minimum security prisoners.

The full services medical unit houses 27 inmates who require either 24 hour per day medical treatment or continuous observation; but ADC does not have an infirmary. Medical, dental and psychiatric treatment are currently provided by Wellpath/CCS. Thanks to the joint effort of Cherokee Sheriff's Office and their medical providers, the ADC was awarded and has maintained medical accreditation since 2004 from the National Commission of Correctional Healthcare. Another accomplishment of the Cherokee County Sheriff's Office is their accreditation with Commission on Accreditation for Law Enforcement Agencies (CALEA) and the Department of Justice Prison Rape Elimination Act (PREA).

Security staff operate the facility employing a direct supervision model, including 122 sworn and 34 civilian staff who work a rotating schedule (A,B,C and D) of twelve hour shifts from 6:00 a.m. to 6:00 p.m. with time for shift change briefings prior to beginning their shifts. Administrative staff works 8 a.m. to 5:00 p.m. on weekdays and program staff varies depending on their assignments. Supervision of the jail consists of a jail administrator, a Division Commander and Programs/Expansion Commander, five Watch Commanders and several Sergeants and Corporals.

Sheriff Frank Reynolds became Sheriff of Cherokee County in 2017. He began his career in law enforcement in 1994 where he served through 2005 as a watch commander. He has received a number of awards prior to and after becoming Sheriff, which include the Medal of Bravery, Meritorious Service Award, Sheriff's Commendation Award, Mothers Against Drunk Driving Officer of the Year, and Special Recognition from the Department of State. As a Constitutional Officer, Sheriff Reynolds is mandated to oversee warrant service and civil process, maintain the Adult Detention Center, Courthouse Security and provide general law enforcement in Cherokee County. As stated in their facility brochure, he is committed to honesty, transparency and integrity.

Although inmates are typically assigned to jobs, they also are able to attend classes through work accommodation for part of the work day and evenings. Inmate paintings adorn the walls throughout the long hallway known as "the mile" where program area and staff are located. The motivational signage, with the inmate's signature, was uplifting and well done.



The mission of the Cherokee County Adult Detention Center is: “Dedicated to serving with integrity, protecting with compassion, and preserving a safe and secure environment, while keeping the trust and confidence of our community.” Their Vision Statement is: “We will be recognized for providing exemplary law enforcement services through servant leadership while adapting to emerging trends and contributing to the quality of life.”

D. Pre-Audit Meeting

Upon arrival on January 22, 2019, the visiting committee team was transported to the hotel and joined key staff for dinner at a restaurant adjacent to the hotel. In attendance were Major Bill Smith, Captain Daniel Higgins, Peter Perroncello, Chief Ken Ball, Lt. Irene Ruiz, Lisa Plumb and Captain Charles McMahan. This event afforded the audit team an opportunity to get acquainted with Cherokee County Adult Detention Center staff, the facility’s general operation and to plan for accomplishing a comprehensive audit.

Afterwards, the visiting team met at the hotel to discuss all reports and outcome measures and devise a plan for the next three days. The standards were assigned as follows:

Standards #4-ALDF-1A-01 through 4B-09 to Joseph G. Ryan, ACA Auditor
Standards # 4-ALDF-4C-01 through 4D-28 to Mary O. Worrell, Medical Auditor
Standards # 4-ALDF-5A-01 through 7G-01 to Susan Lindsey, Chairperson

E. The Audit Process

1. Transportation

The team was provided transportation to the facility and arrived at 8:00 a.m. on January 23, 2019.

After checking into the facility, the group proceeded to the Sheriff's Conference Room for a brief introductory meeting with Sheriff Frank Reynolds, and key administrative staff to discuss the upcoming audit. Attendees included Sheriff Frank Reynolds, Major Bill Smith, Jail Administrator, Captain Daniel Higgins, Assistant Jail Administrator, Peter Perronicello, Jail Management Consultant, Chief Ken Ball, Chief Deputy, Lt. Irene Ruiz, Accreditation Manager, Lisa Plumb, Accreditation Administrative Assistant, and Captain Charles McMahan, Jail Programs and Expansion Project. The team thanked the staff for the introductory materials which included operational descriptions, and photos and backgrounds of key staff. There was early discussion of the significant incident and outcome measures reports.

2. Entrance Interview

At 8:30 a.m., the audit team was escorted to the Sheriff's Conference Room for a formal entrance meeting with representative staff from the facility. The Sheriff introduced his staff and thanked the visiting team for their work in ACA. He spoke to his confidence in his staff and their hard work preparing for this first accreditation audit. He introduced the visiting team members who each discussed their background in Corrections and ACA audit experience. The attending staff was individually introduced and stated their years of service, which averaged ten years or longer except for contractors.

The Chairperson thanked the Sheriff and staff for their hospitality. She expressed the appreciation of American Correctional Association for working with them towards accreditation. The many benefits of accreditation were discussed. The audit would be completed in less than three days thus audit team members would be working together and independently to review practice, documentation and to also interview representative staff and inmates. It was emphasized that they want to be as helpful and non-intrusive as possible as they understand the duties that must be continuously performed. The audit was not only to determine that standards were met, but also to highlight the special accomplishments of the Cherokee County Adult Detention Center, some which were highlighted in the pre-audit materials.

The following persons were in attendance:

Frank Reynolds, Sheriff
Chief Deputy Ken Ball
Major William Smith, Jail Administrator / Division Commander
Captain Daniel Higgins, Assistant Jail Administrator
Captain Charles McMahan, Jail Programs and Expansion
Lieutenant Irene Ruiz, Accreditation Manager
Deputy Michael Sanchez, Medical Transport/Fire Safety Officer
Corporal Michael Turoczy, Programs
Peter Perronicello, Jail Management Consultant

Lisa Plumb, Accreditation Assistant
Michael Terry, Acting Health Services Administrator
Valencia Davis, Health Services Administrative Assistant
Captain John Gunning, Training Director
Stephen Fulford, Maintenance Supervisor
Tiffany Ball, Human Resources Coordinator
Mike Dinkens, Food Services Manager/Trinity Food Services
Deputy Jose Zarate, Classification Manager
Shelia Jackson, Sergeant, Programs Manager

3. Facility Tour

The team toured the entire facility on January 23, 2019 from 9:30 a.m. until approximately 2:00 p.m. Individual team members returned to inspect various areas of the facility and further interview staff and inmates during each day of the audit. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Major William Smith, Jail Administrator
Captain Daniel Higgins, Assistant Jail Administrator
Captain Charles McMahan, Jail Programs and Expansion Project
Lt. Irene Ruiz, Accreditation Manager
Peter Perroncello, Jail Management Consultant
Lisa Plumb, Accreditation Assistant
Stephen Fulford, Maintenance Supervisor
Three scribes were each assigned to a member of the visiting team to assist them:
Katie Jones
Kristen Murphy
Andrea Cornelison

Staff assigned to each area of the facility answered questions and explained their duties and responsibilities. They appeared confident and knowledgeable regarding their individual responsibilities. ACA notices were prominently displayed throughout the facility so that all inmates, staff and visitors would have been aware of the audit and the opportunity to talk with or submit comments to the visiting team or ACA. There were no written requests for interviews although a few inmates asked to speak privately with auditors, which is later discussed in the applicable section of this report.

4. Conditions of Confinement/Quality of Life

During the three-day audit, the facility operations, services and programs and conditions of confinement and quality of life for staff and inmates was determined through observation, interviews of employees and various sources of documentation:

Security:

The primary objective of the Cherokee County Sheriff's Adult Detention Center is to provide a safe and secure environment for inmates and all personnel working or volunteering in the facility. Security is accomplished through plant design and management, operations in both non-secure and secure areas of the jail, training, staffing, Special Response Teams, information and technology, team communication and shift change briefings. Effective classification and disciplinary and grievances processes, key and tool control, training, and transportation contribute to the high level of safety in the facility and are described below.

Upon entering the correctional complex, auditors viewed the secure perimeter, which is accomplished by a 14-foot perimeter fence with one roll of razor wire at the top. The perimeter has an exterior roadway around the building. Eight cameras are strategically located on the perimeter of the building. Random perimeter checks are also conducted four times per day at which time gates/locks are checked.

After entry into the facility at the intake/reception area, inmates pass through a metal detector before being searched for contraband. Inmates cleared after being searched are issued inmate clothing and allowed to sit in the reception day area to utilize the phone for unlimited free phone calls to notify friends and relatives, call for bail and notify consulate offices. Televisions are in the day area for inmates to watch an orientation video in English and Spanish. Inmates that are violent or unstable are placed in individual holding cells. This area was efficient and manned by security and program staff. Inmates appeared to be treated respectfully according to observations by the visiting team. After clearance by medical and classification staff, housing assignments typically occur within hours unless an inmate is awaiting release on bond.

Inmates entering the facility are frisked and may be subjected to a strip search for cause. The requirements and procedures for conducting searches is thoroughly outlined in policy, which provides for a safe environment for inmates, volunteers and employees. The effectiveness of this policy and compliance with requirements is apparent in the unusually low number of incidents and lack of escapes/attempts.

The facility provides the Cherokee County Inmate Handbook at booking, which is also interpreted in a Spanish edition, outlining rules and regulations, procedures for inmate funds, property, daily activities, inmate services and programs including visitation, and emergency procedures.

The handbook is easy to understand with positive language explaining and encouraging the importance of compliance for the safety of all. Interviews of inmates reflected general understanding of these expectations.

Intake and processing are a primary area of responsibility for this facility, which as a detention facility housing all adult male and female arrestees in the county, conducted intakes and discharges of 8,240 individuals during the past year.

This is an important consideration as well as the daily average population of 653 inmates. During the tour and return inspections of the intake area during both shifts, the visiting team observed impressive efficiency and respectfulness from all staff towards inmates and each other as they performed their routine duties.

Professional Visitors and Inmate Visitors entry into the facility is through a security checkpoint manned by one to two security officers who require all visitors to pass through a metal detector/hand held metal detector after being approved for entrance and providing official identification.

Four formal inmate counts are conducted per day; four informal counts are also conducted by the deputies in the housing units. Sporadic counts are conducted when there is a facility emergency such as inmate code, medical emergency, or extraordinary weather event. Inmate counts are coordinated from the shift commander in booking, usually by the shift sergeant or lieutenant. Inmate movement is by professional corrections officers under the continuous visual surveillance with cameras within the secure area and the perimeter. There is no pass system in Cherokee County ADC.

The security of the building, as described below, relies on extensive cameras throughout the facility, monitored in Central Control and is able to remotely view virtually every aspect of the facility. Any of the facility's more than 158 cameras can be instantly displayed on any one of an array of monitors. Entry and exit doors are sequentially interlocked and opened/closed.

Internal and external radio communications, including the officer duress system, are monitored from this point. Central Control integrates all internal and external security networks; the Shift Commander oversees the activities of the entire facility from the point and orders adjustments to coordinate movement in and around the facility. Central Control is able to seize control of a single door or an entire section of the facility in a matter of seconds.

Staffing patterns were highly effective as evidenced by our comprehensive tour and interviews with a large number of correctional employees. The facility is staffed with 130 sworn and 17 civilian support staff. The auditors attended the shift briefings for the second shift and were impressed by the level of communication and the team approach they witnessed.

Through interviews with the training staff who work for Cherokee Sheriff's Office as well as in on-going interviews of staff and review of randomly selected training records of new and experienced staff, it was evident that staff is well trained and more than meet ACA requirements before and after they assume full responsibility for their duties. There is a separate training facility adjacent to the ADC where security staff receives initial training and certification as sworn officers.

Copies of training outlines were provided including riot/hostage, natural disaster/bomb threat, and general problem/unknown disturbance, escape both on and off-campus, work stoppage for officers, unscheduled facility wide lockdown/search, fire/smoke condition and medical emergency. Interviews of the four key training personnel and extensive materials they provided were impressive, indicating a highly competent and dedicated staff and a training program worthy of commendation. Cherokee ADC staff also conducts on-site training in addition to their security duties, such as ACA Lt. Irene Ruiz, ACA Coordinator, who is responsible for many of these classes.

Key control review revealed a good system for accounting for all keys which were checked at the end and beginning of each shift with the key control box system. There were limited keys maintained with administrative personnel to provide for emergencies. A master emergency set of keys is maintained outside the secure area of the facility. Keys are routinely issued and returned upon entry into the facilities main entrance sally port by authorization.

The armory contained five shotguns and eight pepper-ball guns. The Arsenal included 28 cases of S&W, FMJ 50 bullets per case, CTS super sock Bean Bag Shotgun Shells 12 gauge, 13 cases, and Shotgun rounds including pepper ball and impact munitions. OC spray is available for officers who have completed the required training and is authorized for use by the shift commander. Disposal of chemical agents and munitions is through training officers. Restraints include wrist restraints, leg restraints and restraint chairs in intake and medical units which are stored in cabinets behind locked doors. All weapons, munitions, and chemical agents are secured in an armory with secure pin access. These are inventoried monthly.

Review of inventories and accountability of weapons was exceptional. Adequate gun lockers are available for daily storage of these weapons and also for visiting officers to secure weapons prior to entering the facility. A clearance barrel was recommended at the intake reception area to provide safe loading and unloading of weapons

Inmate packages are allowed from off- site vendors such as Amazon and approved magazines are allowed directly from the publisher. All incoming US Postal Mail is screened by an x-ray machine and opened for inspection before being delivered to the inmate. Outgoing mail is only screened if there is reasonable suspicion contraband is being concealed.

Tool inventories were accurate. Tools/utensils were properly affixed to shadow boards and logged in and out. A walk of the perimeter did not reveal any issues that were detrimental to overall security. Tools stored outside the facility perimeter which are made available to inmate work crews are locked and accounted for after each shift. It was recommended that these tools be shadowed and organized to more efficiently account for them after each tour.

A disciplinary process and grievance process are in place, but there is a need for statistical measurement to document reversed decisions. Interviews of the staff responsible for this process and those making appeal decisions indicated that there were several decisions in favor of the inmate as verified by form.

The facility appears to be well managed and operationally secure, consistent with the low numbers contained in the Significant Incident Report. This report reflects that during the last year, there have been no escapes, disturbances, sexual violence, homicides, or fires; and six assaults and two unnatural deaths.

Environmental Conditions:

The temperatures throughout the facility were pleasant. The facility is very well maintained. The noise level was very quiet. The team observed operations and spoke to inmates in intake, general population, and segregation units and in the medical unit. The only complaint made was from two inmates in the medical unit who complained that they felt cold when they turned over their blankets and sheets for laundry service. It was recommended that a blanket and sheet exchange replace the current system of waiting for their blankets and sheets to be returned after laundering as the wait time was often one to one and a half hours. There is ample natural light on all units. Routine tests throughout the facility indicated faucets and showers readily provided water at acceptable temperatures as tested in medical, kitchen, the housing units, visitation, and intake.

Sanitation:

Sanitation levels were exceptional throughout the institution. Controls of cleaning supplies were properly documented on MSDS sheets and cleaning agents and tools were properly controlled. Administrative areas were spotless. There was a singular concern in one of the housing units where cleaning of a shower was inadequate and allowed for unsanitary build up. A suggestion was made to specifically add the initials of the inspecting officer on the daily housekeeping inspection sheet/log to ensure accountability for timely correction of problems. However, the remainder of the facility was well cleaned and the team observed pride in the many inmates who were assigned to clean various areas of the facility. Inmate consensus was that such jobs were important incentives as these jobs allowed them to leave the pod and their time passed more quickly. Cherokee inmates may voluntarily work appropriate assignments if they are not yet sentenced, which is important to this accomplishment.

Most of the inmate workers who were interviewed were volunteers.

Fire Safety:

Evacuation routes were conspicuously posted throughout the facility. Exit signs are clearly visible to direct staff. A check of fire extinguishers throughout the tour of the facility reflected that all were inspected as required.

There are 67 fire extinguishers and 23 SCBA's conspicuously placed in all areas of the facility. Fire drills are conducted timely and are documented. Fire protection is provided by a fire detection and sprinkler system throughout the facility. A fire suppression system is also employed in the kitchen. The Cherokee County Fire and Rescue Department responds to any fire emergency and is conveniently located on the adjacent property to the facility. There are also ten fire hydrants visible and strategically located along the perimeter.

Chemicals, toxic substances and flammable substances are properly controlled and documented when required. The facility has an alternate source of power with a generator located in the facility perimeter. Weekly generator tests are conducted and documented. Training is mandated for all officers in fire detection and emergencies.

Food Service:

Cherokee County Sheriff's Office Adult Detention Center contracts Trinity Food Incorporated to provide facility meals. They serve an average of 1,957 inmate meals and 175 staff meals per day at a low cost of eighty-four cents per meal. Meals and the rotating menu are approved by a certified dietician. Although policy requires one hot meal per day, Trinity serves two hot meals (breakfast/lunch) and one cold meal for dinner.

Medical diets are served when prescribed by a physician, nurse, or dentist including diabetic, high calorie, and heart healthy. Religious diets including kosher meals and Muslim approved may be requested by kiosk and are reviewed by the facility chaplains and approved by the Programs Manager or designee. The visiting team verified the current breakdown of special diets as follow: diabetic 16, kosher- 36, vegetarian- five, soft diet- six, double portion- three, bland- four, peanut allergy- eight, renal- zero, pregnancy-two.

There is also a staff dining room where employees are provided meals including a salad bar-all at no cost. Multiple tables and chairs are available for employees to enjoy these meals on site, which is convenient and allows for a choice of multiple entrees and side items.

Two supervisory employees from Trinity oversee all aspects of food service and are assisted by three additional staff members. They typically are on site from 4:00 a.m. until 2:00 p.m. During the tour, the team observed impressive teamwork between Trinity and inmate kitchen workers who when interviewed stated they felt fortunate to work in the kitchen. Trinity also provides a Serv-Safe certification course (first level) which assists inmates in obtaining better paying jobs upon release. The end of the year inmate programs report reflected seven inmates were tested for certification last year. A corrections officer is also assigned to the kitchen to maintain security.

Inspection of the kitchen and storage rooms verified compliance with all standards including temperature control of foods, cleaning, control of caustics, rotation of food by date, control of kitchen tools and cleanliness of the general area. Interviews with staff and inmates indicated a well-run operation.

On January 24, 2019, auditors tasted the dinner meal consisting of turkey bologna sandwiches on white bread, cheese, and cookies. The meal was tasty and sufficient in variety and nutritional value. Although two inmates who were interviewed complained or filed a grievance about the lack of a heart-healthy diet that was no different than the standard meal, the facility demonstrated that the foods prepared are “heart healthy” and this designation is no longer necessary. It was recommended that they eliminate this dietary designation and communicate this change that heart healthy diets are no longer required or different.

Inmates may purchase food items from, Legacy Commissary Services, which has been contracted for this purpose since October 2018. A single employee manages orders from inmates for items listed on the inmate kiosk and housing unit bulletin board. These may be ordered once weekly by location/schedule, allowing for \$80 of food items and seven of any one non-hygiene items. There is no limit to the amount of hygiene items that may be purchased. Inmates who have dietary restrictions are identified for appropriate purchases through commissary. Also, indigent inmates may order an indigent hygiene kit from commissary and the cost is reflected as a negative balance which may be applied to any funds during the inmate’s stay or if they return.

A wide variety of items are available such as chips, pretzels, cookies, dill pickles, pork skins, ramen, tuna, beef stew, spam, tortillas, salsa, salmon, mackerel, Velveeta, beans and rice, mac and cheese, Vienna sausage, graham crackers, crackers of several varieties, cinnamon rolls, nutty bars, moon pies, nutria-grain bars, pop tarts, donuts, pies, sausage, condiments, trail mix and peanuts. Prices are similar to market value. Orders are delivered to inmates who must review the items and sign for receipt. If an item is missing, the inmate may select an item of similar value or be refunded the cost and the receipt is marked to document the correction. There were no concerns voiced regarding commissary services.

Medical and Mental Health Care:

The medical department at Cherokee is contracted with Correct Care Solutions which has now merged and has a name change to Wellpath. Staffing consist of HSA (currently vacant- interviews scheduled), MD (two to three days per week), NP (five days week), Dentist (eight hrs. week), Dental Assistant (part time), not including the HSA RN, they have a staffing pattern per day of four RN’s and four LPN’s.

The LPN's work a 6:00 a.m. to 2:00 p.m. and 2:00 p.m. to 10:30 p.m. shifts and cover the pharmacy (including medication delivery), a records clerk, administrative assistant, mental health professional (five days week), LCSW (one to two days week), a Psychiatrist (telehealth three times a month and on site once a month). The MD and NP rotate calls and the Psychiatrist is on call 24 hours a day.

The department still uses paper records that are located in a secure room. They have separate exam areas to afford privacy for interviews, treatment, and exams. Medical also has a room in the intake area of the building for the intake exams. They have mobile x-rays and ultrasounds when needed. They utilize an outside Hospital (which is approx. ten minutes from the facility), ambulance (with a response time of approx. five minutes) and they utilize specialty providers as needed. Lab is picked up five days a week and prn for stat labs. Medical waste is picked up monthly. Medical has 27 cells that include four negative pressure rooms. The rooms can have a maximum of two beds. The rooms are used for suicide watch, segregation, medical, and mental health. They have a call light system in each room. There is a security and a nurse's station in this area of medical.

The inmates are informed of medical access, co-pay and grievances upon intake. No medical complaints were voiced upon inmate interviews. Sick call is completed Monday through Friday. Requests are completed by using the kiosk. These requests are triaged daily. Over the last year the nurse averaged 250 detainees per month and the providers averaged 162 detainees a month. There is a co-pay of \$5.00 for nurse sick call for medical issues and \$3.00 for additional complaints. Inmates also are charged \$5.00 for medications, and \$5.00 for a mid-level provider and \$5.00 for a dentist visit. Mental Health Visits, Chronic Care/Medications and Pre-Natal Care/Medications are all provided free of charge. They maintain outside OB/GYN services for the pregnant women. This facility also has a substance detoxification program in place where inmates are observed for transfer to a hospital if indicated or maintained until they are stable.

Random checks were completed during this audit of the 14 AEDs and first aid kits located throughout the facility and no deficiency noted. A random narcotic count was performed and found to be accurate. Medication records are paper and noted to be in use. There were no KOP medications at this facility except inhalers. Medications are ordered using a local pharmacy when urgent medications are needed. They have a medication contract with Diamond Pharmacy, which is located in Pennsylvania. Discharge medications are given for at least seven days up to 30 days at no charge; they are ordered for pick up at the offender's local pharmacy, which is impressive in accomplishing seamless treatment to the benefit of the inmate and the community. A Diamond contracted Pharmacist completes a quarterly inspection of this facility. Refrigerator temperature checks were accurate and open vials were labeled with an open date.

A random sharp count was performed and found to be accurate at the following locations: medical intake office, medical nursing station, pharmacy medicine room,

medical storeroom, dental office and the lab room. The dental office had a few missing MSDS sheets that were obtained in seconds and placed in the dental MSDS book. It was noted that signatures were not on some of count sheets and the Regional Medical Manager (interim HSA) has added this to the CQI agenda to be monitored closely.

It was noted that the four minute response is in policy and is monitored on the medical drills. Response is noted on the actual Emergency Room incident reports also.

TB screening is performed on all new intakes and on new direct staff. The offenders receive an annual screening and staff will start to receive these annually per the Health Services Administrator (HSA). Hepatitis B vaccines are offered and if requested they are obtained from the local health department and given by Cherokee medical staff. Documentation was given for declination of the offered vaccine. The training officer and the HSA stated they will continue to stress the benefits of the vaccine to staff during orientation and upon annual blood borne training classes. CCS/Wellpath also offers hepatitis vaccine and tuberculosis testing to non-medical staff, but there is a need for routine documentation when it is offered and when employees receive or decline this free service.

MAC meeting is conducted between medical and security staff quarterly. Medical also attends the weekly critical update information meetings with security. The visiting team auditors observed the weekly multi-disciplinary meeting, which was conducted on January 24, 2019 between key medical and security staff. Twelve staff members attended: Wellpath, including AA and Mental Health, Programs Staff, Classification Staff (two), Security Staff (two), and ADC Administration. During the meeting the status and progress of 27 inmates occupying medical beds were reviewed. Critical information updates were also provided for inmates in protective custody, administrative segregation, pregnant females, razor restriction in pods, detoxification protocol, PREA risk, assault risk and senior inmates. The visiting team was impressed with the manner in which each inmates was discussed individually for input by all. Their intercommunication and teamwork were evident indicating a strong and open relationship between medical, security and administration.

It was noted that the counseling for detainees with a history of sexually assaultive behavior and the sexual victimization were not being completed in the 72 hours period by the mental health staff. Interviews with staff indicated that they do not have all of the security information and rely on referral by Security who complete the initial form identifying inmates at intake.

Security does complete a Sexual Predator and Victimization Intake Screening form ADC #100, but this information needs to be forwarded to the Mental Health staff to ensure counseling is being scheduled. Therefore, the visiting team found Standard #4D-22-3 and 4D-22-4 to be non-compliant.

Recreation:

Inmates are provided a minimum of one hour per day of physical exercise. These activities may take place in the indoor recreation yard, or when weather permits, in the outside recreation yard adjacent to the housing units. The outside recreation yards met requirements and are limited to a basketball hoop. Many of the inmates who were interviewed had generous access to exercise when they are not working or attending programs. However, there are no outdoor uncovered or outdoor covered exercise yards used for A and B Segregation Units. Inmates on these units receive one to two hours of indoor recreation per day seven days per week. In view of the lack of outside/covered recreation in A and B Segregation Units, standard 5C-04 was found to be non-compliant.

As outlined later in this report, the facility requested a waiver based on the age of the facility design, which does not allow for outside recreation in these areas. They note that their “old jail houses both segregation and administrative segregation to include protective custody. Neither has a recreation area open to the outdoors either covered or uncovered. The inside dayroom has substantial room for recreation and they are out for free time hours an extra hour throughout the day to compensate for the lack of an outdoor recreation area.” The jail expansion project however will rectify this issue since all segregation housing will have access to an outdoor covered exercise yard once it is completed in November 2020. There are plans to break ground for this addition in April 2019. Inmate interviews did not indicate any complaints regarding lack of access to outdoor uncovered or covered exercise.

Indoor recreation includes access to televisions, board games, cards and checkers. As most inmates have job assignments and many also participate in diverse programs during and after hours, which are provided in the housing units, available recreation seemed sufficient.

There is a very large two room staff gym in the administrative area of the ADC. Available are four treadmills, an elliptical stepper, three exercise bikes, weights and weight gym machines, and leg lifts. The gym is utilized by Cherokee Sheriff's Office as well as the Cherokee County Fire Department and civilian employees. Twelve mountain bikes are available for check out to staff to encourage fitness off-site, and they are popular given the excellent bike paths available proximal to the facility and in the general area.

The Sheriff also pays for two health club memberships at Orange Theory Fitness and Superior Health Club and provides discounted membership at One Life Fitness. Free memberships are available as slots allow. The visiting team also toured the employee locker room and shower facility adjacent to the gym, which was well appointed for staff after gym usage. It contained four showers, one that was handicap accessible, and four toilets/sinks. There were numerous lockers, which are also available to partnering Fire Department and civilian employees. This was one of the most complete gyms toured by the team.

Religious Programming:

Chaplain services are provided through two volunteer chaplains who each average thirty hours of work per week. They oversee fifty to seventy-five volunteers and conduct faith services in the housing pods including Christian faith services on Thursdays from 7:00 p.m. until 9:00 p.m., Jehovah's Witnesses, Fridays from 7:00 p.m. through 9:00 p.m.; Muslim services on Saturdays from 1:00 p.m. until 4:00 p.m. and Gideons Mondays from 7:00 p.m. through 9:00 p.m. Volunteers are interviewed by the chaplains "that their heart is in the right place" and must pass a background check and complete a thorough ADC orientation, which process was reviewed. Providers are from diverse backgrounds and faiths.

Chaplains also visit all eight pods and the medical areas on Sunday from 1:00 p.m. to 3:00 p.m. and on Thursday from 7:00 p.m. to 9:00 p.m., to provide counseling to inmates without the need for a prior request. Inmates will also be allowed to receive personal counseling by a pastor of their choosing or a pastor can be provided to them upon request from the Programs Manager's Prior Approval List. Counseling visits are allowed every day during normal visitation hours in the public visitation area only unless specially approved. Bibles, Korans and other approved religious materials will be provided to inmates upon request.

One of the two chaplains was interviewed who has been a volunteer at Cherokee ADC since 1995. He retired with an advanced level of managerial experience and was certified as a minister. He regarded his work as a gift to help others rather than a service to the inmates and found this after retirement work to be truly rewarding. He stated that security staff work very well with him and the volunteer staff to ensure inmate's benefit as much as possible during their periods of incarceration. He was quite impressive in his dedication to this mission.

Offender Work Programs:

There is a generous allowance for inmates, both sentenced and un-sentenced, to participate in appropriate jobs both on-site and off-site. Jobs include kitchen, outside grounds, floor cleaning, laundry, kitchen, law library/legal, and housemen. Staff estimated that eighty percent of inmates have jobs interviews and observations indicated most inmates were not only working but also participating in one or more programs.

Cherokee County Sheriff's Office provides inmate workers to twenty-eight community sites including parks, bike trails, playgrounds, athletic complexes, recreation centers, hiking trails, animal shelters and community centers. Another important incentive is the reduction in time they receive for participation in work, if it is statutorily allowed. This reduction may be as high as one for four.

On the second audit day, auditors interviewed a group of thirty-seven workers who were returning to the facility at approximately 5:00 p.m. The majority of the inmates volunteered for community service work and stated they were not ordered by court to complete any hours. They enjoyed working outside the facility and gaining work skills which will benefit them when they are released which they stated also helps them pass the time more quickly.

The Cherokee County Sheriff's Office Adult Detention Center accomplished over 39,198 hours of service to the community through local partnerships. Not only does this benefit the community by reducing fiscal costs, it also provides inmates with a sense of earning their way back and helping the community- thus gaining self-respect, which is restorative justice in action.

Academic and Vocational Education:

Despite the short time typically spent in Cherokee County Adult Detention Center, they began offering a ServSafe Management Course in December 2018. This is a two full day class conducted in the library in the jail. Inmates can receive a level one certification if they pass the test. Seven inmates have already taken this test and become certified. This vocational program provides an opportunity to kitchen workers who may gain skills and certification that will benefit them upon release in qualifying for a better paying job. Inmates were very complimentary about this program.

The facility contracts an experienced educational director who oversees a GED program as well as classes in English as a Second Language, Creative Writing, Entrepreneurship, and Music Theory. His wife obtained a grant that afforded them an additional eleven GED volunteers, which multiplied the available slots for interested inmates to participate. During the last year, the facility tested 787 inmates for GED classes and taught 368 students. Forty of these were tested resulting in the awarding twenty-seven GED's.

In 2017, 46 inmates obtained GED's. Creative writing participants included 1,341 inmates, Entrepreneurship included 91 inmates, and 156 inmates participated in English as a second language.

These are impressive numbers for a facility with a constant influx of intakes and releases and short-term duration of stay for most inmates, which averages thirty days. The educational director was clearly dedicated to providing any help, regardless of length of stay, and typically conduct classes in the pods. Classes allow for rolling admission so that anyone interested can participate and receive help while they are in custody.

Social Services:

Cherokee County Adult Detention Center also provides social services through Substance abuse programs such as Narcotics Anonymous and Alcoholics Anonymous, which are offered to those battling addictions in their lives and providing a support group to discuss these issues. Life Skills is also offered to provide education on communication, anger management, goal setting, career exploration, job skills, time management, parenting and family skills and budgeting and finance. Their end of the year report reflected 534 inmates participated in life skills, 2,790 inmates in AA/NA, and 375 inmates in Parenting.

The facility embraces volunteer services which is important to this great accomplishment. Their volunteer list included 28 N/A and AA volunteers; four volunteer teachers for English as a Second Language, and 18 GED volunteer teachers.

Inmates in need of counseling may receive help by kiosk or request made to any security officer which are forwarded to Correct Care Solutions (Wellpath) for evaluation and services through their mental health staff which includes a mental health professional (five days week) , LCSW (one to two days week) , a Psychiatrist through telehealth three times a month and on site once a month, who is also on call 24 hours per day. Security staff may also make referrals based their observations and concerns.

The chaplains also provide counseling during their rounds in every housing unit and medical area multiple days per week. They work in concert with security and mental health staff if any major concerns arise to expedite help to the inmate.

Visitation:

Visitation with family and friends is encouraged. There are no contact visits except with attorneys, but non-contact visits are available both on-site and for a fee, from remote locations. Visitation occurs every day of the week except for Wednesday. Inmates are allowed one on-site visit per assigned visitation day (three times per week by schedule/location) which is limited to two adults and two children. Visitation may occur up to thirty minutes from 7:30 a. m. until 10:00 a.m. and from 6:30 p.m. until 9:40 p.m. Inmates in disciplinary segregation do not receive visitation privileges other than attorney visits.

Visitors may only carry their identification and keys in the visitation area of the facility; lockers are available to provide sufficient space for small personal items not allowed in the visitation area of the facility. Children under the age of 18 must be accompanied by an adult. Photo identification is required upon arrival and are then escorted to the non-contact visitation booths proximal to inmate housing. The facility provides room for contact visits with attorneys available when needed.

The space for visitation adjacent to the units allowed for on-going visitation while maintaining full security since these are not contact visits.

Library Services:

Cherokee County ADC contracts an educational/programs provider (see above) full time who was interviewed at length. He also oversees the library and law library and supervises educational and non-faith-based volunteers.

The facility stores a large variety of books and magazines in an established library containing thirteen bookcases organized by subject matter. Inmates may request books via four rolling book carts and one creative writing book cart through the inmate kiosk. Books are then distributed to the individual housing pods on a daily basis. Inmates are allowed one book per week, but Creative Writing participants can receive two books per week as an incentive. Inmates may also receive books as packages when they are sent from a recognized bookseller.

Law library services are available through kiosks in the housing unit. Legal researchers compile, print, and package relevant statutes, cases, and appropriate content in an envelope addressed to the inmate. The response package is returned to the ADC by an overnight courier service within three business days of receipt of the initial request. A mobile law library computer is also available upon request. In the last years report, the facility documented 1,321 legal inquiries.

Laundry:

The tour of the laundry reflected four washers and four dryers with automatic detergent/chemical feeds. Depending on the color of the uniform, linens are cleaned once per week, and undergarments are also cleaned once per week. Inmate workers are supervised by a correctional officer and typically work from 5:00 a.m. until 5:00 p.m. seven days per week with a mid-day break. Inmates who were interviewed stated they enjoyed this work assignment and camaraderie was evident as they worked washing, folding and sorting laundry. Inspection of the area indicated it was well cleaned. Dryers were free of lint and chemicals were properly accounted for in the appropriate logs.

F. Examination of Records

Following the facility tour, the team proceeded to the administrative conference room to review ACA standards and compliance files. Throughout the three-day audit, the visiting committee team reviewed all standards, reviewed documentation and conducted interviews as needed to establish compliance. The team formed consensus on all standards deemed non-applicable or non-compliant. The ACA standards folders were generally well documented with the essential information highlighted and tabulated to easily establish compliance

1. Litigation

The Cherokee County Sheriff's Office Adult Detention Center did not have any class action lawsuits, consent decrees or adverse judgments during the audit period. There were also no notices of non-compliance with local, state, or federal laws or regulations.

2. Significant Incidents/Outcome Measures

The Significant Outcome Summary was provided for the twelve-month period required as a facility applying for initial ACA accreditation ending in January 2019. These statistics are consistent with the visiting team's observations that indicated the facility has excellent security operations. As indicated in this report, during the last year, there were no escapes (or attempts according to staff); no disturbances, no indications of sexual violence, no homicides, and only six assaults which all pertained to offender on staff. The visiting concern questioned the lack of any offender on offender assaults (zero) given the high number of intakes/discharges (8,240) during the last year. This may indicate a need for refining the statistical counting of inmate on inmate assaults if serious injury results requiring urgent and immediate medical attention or restriction of activities. These are very positive measures.

Facility reports on the two unnatural deaths that occurred during this audit period were analyzed:

1. On July 11, 2018 at age 33 upon intake a death occurred. The Medical Death review was completed by the team at Cherokee after the coroner's report. Action plans were noted for a medical services staff member who is no longer employed.
2. On November 18, 2018, with the intake age 23, a patient died in the medical observation department within 48 hours of his intake to this facility, is still under investigation and waiting for the coroner's report.

Review of the ALDF outcome measures were consistent with statistics expected of a detention center with this volume of intakes and discharges. Despite an average population of 653 inmates, 8,240 inmates were in custody at some point. The medical auditor found the measures involving health and medical care acceptable. The visiting team discussed the lack of statistical and formal documentation of grievances/disciplinary actions found in the favor of the inmate. This is being addressed as they move forward. However, it was established through interviews that the grievance and disciplinary process meet standard time frames and requirements.

3. Departmental Visits

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

<u>Department Visited</u>	<u>Person(s) Contacted</u>
Medical	Acting HSA/ Wellpath: Michelle Terry, Nurse Cook, Donna Carter, Mental Health Regional, Dr. Olufeko, Dentist, Dr. Tiffany Parks, Medical Director
Faith Based Programs	Chaplain Doug Miannay
Human Resources	Beth Stringer, Human Resources Coordinator, Tiffany Ball, Human Resources Coordinator
Disciplinary Segregation Programs	Deputy Jose Zarate, Classification Manager Cpl. Turoczy and Sgt. Sheila Jackson, Programs Manager
Library/ Education Commissary Training	Brody Smithwick, GED Supervisor Jessica Prager, Legacy Commissary Captain John Gunning, Training Director, Lt. William Thompson, Asst. Training Director, Corporal Josh Watkins, Jail Training Coordinator, and Corporal Jeremy Herrin, Agency Training Coordinator
Maintenance	Stephen Fulford, Maintenance Supervisor
Night Shift Change Briefing	Lieutenant James Cox, Sergeant Dawn Burkhart; attending commanders/staff

4. Shifts

a. Day Shift

Officers on the day shift work from 6:00 a.m. until 6:00 p.m. This schedule also requires that security officers report thirty minutes in advance to attend a shift briefing for interchange of facility information from the previous shift and operational updates. The team was present each day from approximately 8:00 a.m. well past the 6:00 p.m. end of shift. Tours and staff/inmate interviews were primarily conducted during this shift. All operational areas including individual housing units were visited resulting in more than 42 employee interviews and 66 inmate interviews.

The staff was well-trained and was apparent they exhibited confidence in discharging their duties. The general relationship between inmates and correctional officers seemed very positive. Security staff also indicated that they felt safe and supported by fellow officers and ranking officers alike.

b. Night Shift

Officers working the night shift work from 6:00 p.m. until 6:00 a.m. and are also required to report one half hour in advance of each shift for attendance at before shift briefings.

The visiting team attended the shift briefing conducted at 5:30 p.m. on January 24, 2019 which was held in the Detention Center Training Conference Room. Five ranking officers moderated the meeting and fifteen correctional officers were in attendance.

General information was covered and concerns from the previous shift or from internal investigations was shared to ensure information was not lost between shifts. The visiting committee auditor asked officers how they would know what occurred in a housing unit during the previous shift, and they readily responded that they read the logs maintained in housing and also receive communication from day shift officers as they arrive. Individual assignments were reviewed and the briefing ended at 5:55 p.m. The team conducted interviews of night shift officers and staff until 8:00 p.m. Many of the officers interviewed preferred the night shift as it is quiet and less active. Some of them were promoted requiring this change of schedule. The tour included interviews of staff at the front desk, control center, and two housing units. As observed during the day shift, officers demonstrated impressive competence, answered questions about their duties well, and acted comfortably but were focused on safely maintaining the facility.

5. Status of Previously Non-compliant Standards/Plans of Action

This is not applicable since this is an initial audit.

G. Interviews

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

1. Offender Interviews

Sixty-six inmates were interviewed during the course of the audit. Interviews represented every aspect of operation and demographics of the population served: young, older, female, male, Hispanic, African-American, and other ethnicities. All inmates interviewed indicated a clear sense of safety; that officers would aid them if they were in danger. PREA was familiar and notices were visibly posted in the housing units, medical area and intake. They claimed good access to medical and dental care, and praised the work programs, incentives for time reduction, GED program, and the professional staff.

A few complaints were voiced regarding food being too similar- bologna for the evening meal, for example. Other inmates praised the tasty food as the best in a correctional facility. The only other concerns were about cleanliness of singular shower, which in one case was valid and quickly corrected. The overall impression was a very safe facility with constant turnover of inmates, but that they were treated respectfully, and had good access to jobs, programs, and faith-based services.

2. Staff Interviews

Forty-two employees were interviewed representing the diverse areas of operation, gender, ethnicity, rank, and type of assignment. All staff members quickly responded that they felt safe in the facility and that they would be supported by fellow officers and supervisors in handling their duties. Some of the younger officers were utilizing corrections as a step up to working patrol in the Sheriff's office adjacent to the facility. They reflected a pride in their work and were well-trained for their duties. Staff spoke to being part of a family and feeling supported in their duties and the decisions that sometimes had to be made with little time or assistance. One of the significant observations was that administrative staff performs many duties simultaneously which contributes to a seamless operation in the facility. Interviews with the Human Resource Representative confirmed a transparent and professional hiring and promotional process. There was a clear sense of zero tolerance for discrimination and sexual harassment.

The Cherokee County Sheriff's Office promotes individual accomplishment as evidenced by their performance evaluation forms and process, and support for education and fitness. Staff typically had more than five years on the job; many cited more than ten years and intended to remain until retirement. The overall impression was that the staff enjoys a high quality of life in this facility.

H. Exit Discussion

The exit interview was held at 12:00 p.m. on January 25, 2019 in the Cherokee County ADC conference room. Approximately thirty-five employees attended representing all areas of operation including medical (CCS/Wellpath), security, administration, programming, support staff and line staff and chaplaincy.

Sheriff Reynolds thanked the visiting team for their time and efforts in conducting this audit that he knew would help them improve in their operations. He acknowledged the hard work of the entire staff to achieve accreditation and they were looking forward to the conclusion and findings.

The Chairperson thanked the Sheriff and his staff for their hospitality and transportation throughout the audit. The ACA accreditation manager Lt. Irene Ruiz and Administrative Assistant Lisa Plumb were praised for their hard work and well-organized files. She stated that this was a first accreditation audit and staff would agree it was an intensive, comprehensive look at every aspect of operation.

Each auditor presented their findings on the standards and sections they reviewed. The cleanliness and safety of the facility was highlighted. The facility displayed excellent operations.

The Chairperson stated that it is important to note that this facility was responsible for the intake, discharge, and provision of services to 8,240 inmates during the last year. The constant turnover of inmate population poses quite a challenge to correctional officers and program staff.

Despite an average stay of thirty days, the facility had significant accomplishments worthy of commendation. 39,138 hours of community service were performed by inmates to the benefit of the community, which saved public funds and provided them with both a sense of pride and for many, a reduction in sentence. Inmates were typically able to access jobs inside or outside the facility and also benefit from faith-based services and programs with rolling admission, conducted in the housing pods. Twenty-seven GED's and seven ServSafe Certifications resulted. High numbers of inmates participated in Alcoholics Anonymous, Narcotics Anonymous, Creative Writing, Life Skills, and Parenting as well as English as a Second Language. A strong compliment of faith-based and educational volunteers helped to make these accomplishments possible and they are to be commended as well.

Policy was well written and comprehensive. Training was impressive both at the Sheriff's Office Training Academy and through on-site classes conducted by ADC staff. Staff was respectful and engaged with inmates, which was also noted and reflects this positive training.

Sixty-six inmates were interviewed and all indicated they felt safe; that a security officer would help them if they were in danger. There were few complaints and much praise for the professional, respectful staff which was noted throughout the tour by auditors. Quality of life for staff appeared to be high as reflected in typically long staff tenure. Positive leadership was observed and incorporated in practice; for example, the assistance to staff to achieve higher educational levels and free memberships in fitness clubs.

The recommended findings were stated by the Chairperson as follow: out of 59 applicable mandatory standards, 100% were met. Out of three hundred and twenty-three standards, two hundred and ninety-one were applicable. Five were non-compliant and some of these standards refer to plant limitations. The resulting level of compliance was 98.3%. This is an impressive accomplishment for a facility undergoing its first accreditation audit.

The Chairperson explained the procedures that would follow the audit and clarified that these are recommended findings which are included in the visiting committee report. The ACA Commission on Accreditation would determine the final level of compliance and accreditation at the upcoming conference. The visiting team congratulated the facility team for the progress made and encouraged them to continue to strive toward even further professionalism within the correctional field. The exit interview concluded at 12:30 p.m. with a round of applause and thanks from the Sheriff and his administrative staff.

AMERICAN CORRECTIONAL ASSOCIATION
AND THE
COMMISSION ON ACCREDITATION FOR CORRECTIONS

COMPLIANCE TALLY

Manual Type	Adult Local Detention Facilities, 4 th Edition	
Supplement	2016 Standards Supplement	
Facility/Program	Cherokee County Sheriff's Adult Detention Center	
Audit Dates	January 23-25, 2019	
Auditor(s)	Susan Lindsey, Chairperson Joseph G. Ryan, ACA Auditor Mary O. Worrell, ACA Auditor/Medical	
	MANDATORY	NON-MANDATORY
Number of Standards in Manual	60	323
Number Not Applicable	1	32
Number Applicable	59	291
Number Non-Compliance	0	5
Number in Compliance	59	286
Percentage (%) of Compliance	100%	98.3%

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Cherokee Sheriff's Office
Cherokee Sheriff's Office Adult Detention Center
Canton, Georgia

January 23-25, 2019

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

Standard #4-ALDF-2A-34

SINGLE OCCUPANCY CELLS/ROOMS ARE PROVIDED WHEN INDICATED FOR THE FOLLOWING:

- MAXIMUM AND CLOSE CUSTODY
- INMATES WITH SEVERE MEDICAL DISABILITIES
- INMATES SUFFERING FROM SERIOUS MENTAL ILLNESS
- SEXUAL PREDATORS
- INMATES LIKELY TO BE EXPLOITED OR VICTIMIZED BY OTHERS
- INMATES WHO HAVE OTHER SPECIAL NEEDS FOR SINGLE-OCCUPANCY HOUSING

NO LESS THAN TEN PERCENT OF THE RATED CAPACITY OF THE FACILITY IS AVAILABLE FOR SINGLE OCCUPANCY

FINDINGS:

Maximum security inmates are predominantly double bunked.

AGENCY RESPONSE:

Waiver Request

Our current facility is not equipped with the adequate manpower and facility structure to facilitate single occupancy cells for classification plans listed in this standard. When our expansion is completed in November of 2020, we intend to have a variety of housing units designed to maintain single occupancy cells for just these specific classifications. Our hope is to be compliant with this standard upon completion with our jail expansion project.

AUDITORS' RESPONSE:

The visiting committee agrees with this plan but notes the expected expansion should be monitored for completion as proposed.

Standard #4-ALDF-4D-22-3

DETAINEES IDENTIFIED AS HIGH RISK WITH A HISTORY OF SEXUALLY ASSAULTIVE BEHAVIOR ARE ASSESSED BY A MENTAL HEALTH OR OTHER QUALIFIED PROFESSIONAL. DETAINEES WITH A HISTORY OF SEXUALLY ASSAULTIVE BEHAVIOR ARE IDENTIFIED, MONITORED, AND COUNSELED.

FINDINGS:

The history of sexually assaultive behavior is identified upon intake on ADC 100 form (sexual predator and victimization intake screening form) by security personnel. The high risk inmates' referrals need to be made to mental health to be seen within 72 hours per PREA. Documentation was not provided that indicated counseling was being provided as a result of the intake screening form ADC 100 when the inmate scored high risk.

AGENCY RESPONSE:

Appeal

The ACA standard reads as follows:

4-ALDF-4D-22-3

Detainees identified as high risk with a history of sexually assaultive behavior are assessed by a mental health or other qualified professional. Detainees with a history of sexually assaultive behavior are identified, monitored, and counseled.

The auditor cited non-compliance for this standard stating we were not in compliance with a PREA standard of Mental Health clearance within 72 hours. We are a PREA accredited facility and have attached our FINAL PREA Auditor Report (Appendix A) for your review. I have highlighted PREA standard 115.41 (Appendix B) Screening for risk of victimization and abusiveness that states and intake screening must take place within 72 hours of arrival that assesses both for risk of victimization and abusive behavior. Our facility completes form #100 ACD Sexual Predator and Victimization Intake Screening Form (Appendix C) within the first few hours of their initial arrival at intake. (Appendices D & E Policy #08-5-09 & CCS Policy E-05.)

These forms are then submitted to our classification manager and team to be reviewed. Any indication of high risk sexual predator or victimization on the predictor scale is placed on the critical information updates list by the classification team weekly and discussed weekly at the special needs meeting by medical, mental health, corrections, administrative and command staff. Any mental health referrals are made accordingly. All inmates are reviewed within 14 days of arrival according to PREA standard 115.81 (Appendix F) to ensure there is a continuous ongoing medical and mental health screening conducted when an inmate has made someone aware of prior victimization and/or abusive behavior.

PREA standard 115.83 (Appendix G) states ongoing medical and mental health care for sexual abuse victims and abusers is provided to inmates who have been abused or victimized in any prison or jail. All inmate on inmate abusers shall have a mental health evaluation conducted within 60 days of learning of such abuse history and offer treatment by mental health practitioners.

I have attached two examples (Appendices H & I) of inmates with predatory behavior who have been identified, monitored, and counseled throughout their stay in our facility according to ACA standards and PREA regulations.

AUDITORS' RESPONSE:

It was noted that the counseling for detainees with a history of sexually assaultive behavior and the sexual victimization were not being completed in the 72 hours by the mental health staff due to the medical policy reflected 14 day and the medical staff does not have all the security information to ensure all of above are noted on intake. Security does complete a Sexual Predator and Victimization Intake Screening form ADC #100, but this information needs to be forwarded to the Mental Health staff to ensure counseling is being scheduled.

Attached are copies of records indicating that a transgender inmate and three predatory inmates were present in the facility but the facility could not provide any evidence of the 72 hour referral. One possibility is that the security personnel who complete the Form may benefit from further training on interviewing such inmates to ensure identification (see attached.)

Two of the three auditors observed the weekly meeting between mental health and security personnel which was impressive in the discussion of inmates in special housing and their progress/appropriate housing assignment.

The visiting committee recognized the facility's PREA accreditation. However, the visiting team agreed that based on mental health personnel who were interviewed and forms/records including the ADC form #100, all inmates who would score as high risk as defined by this standard are not connected to mental health through initial referral by security personnel who conduct the screening, as required by the standard.

The team concluded that there is a need for better linkage between security personnel who conduct the screenings and mental health to ensure high risk inmates are identified timely and are referred to mental health staff within the 72 hour time frame. Copies of documentation are attached to this report. A plan of action is recommended to accomplish compliance and ensure high risk inmates are properly identified, monitored and counseled when indicated.

Standard #4-ALDF-4D-22-4

DETAINEES IDENTIFIED AS AT RISK FOR SEXUAL VICTIMIZATION ARE ASSESSED BY A MENTAL HEALTH OR OTHER QUALIFIED PROFESSIONAL. DETAINEES AT RISK FOR SEXUAL VICTIMIZATION ARE IDENTIFIED, MONITORED, COUNSELED.

FINDINGS:

ID completed by security Form #100- when high risk on this form, referrals need to be made to mental health to be seen within 72 hours per PREA. Documentation was not provided that indicated counseling was not being completed by mental health as a result of intake screening form ADC 100 when high risk was scored or merited

AGENCY RESPONSE:

Appeal

The ACA standard reads as follows:

Detainees identified as high risk with a history of sexually assaultive behavior are assessed by a mental health or other qualified professional. Detainees with a history of sexually assaultive behavior are identified, monitored, and counseled.

The auditor cited non-compliance for this standard stating we were not in compliance with a PREA standard of Mental Health clearance within 72 hours. We are a PREA accredited facility and have attached our FINAL PREA Auditor Report (Appendix A) for your review. I have highlighted PREA standard 115.41 (Appendix B) Screening for risk of victimization and abusiveness that states and intake screening must take place within 72 hours of arrival that assesses both for risk of victimization and abusive behavior. Our facility completes form #100 ACD Sexual Predator and Victimization Intake Screening Form (Appendix C) within the first few hours of their initial arrival at intake. (Appendices D & E Policy #08-5-09 & CCS Policy E-05.)

These forms are then submitted to our classification manager and team to be reviewed.

Any indication of high risk sexual predator or victimization on the predictor scale is placed on the critical information updates list by the classification team weekly and discussed weekly at the special needs meeting by medical, mental health, corrections, administrative and command staff. Any mental health referrals are made accordingly. All inmates are reviewed within 14 days of arrival according to PREA standard 115.81 (Appendix F) to ensure there is a continuous ongoing medical and mental health screening conducted when an inmate has made someone aware of prior victimization and/or abusive behavior.

PREA standard 115.83 (Appendix G) states ongoing medical and mental health care for sexual abuse victims and abusers is provided to inmates who have been abused or victimized in any prison or jail. All inmate on inmate abusers shall have a mental health evaluation conducted within 60 days of learning of such abuse history and offer treatment by mental health practitioners.

I have attached two examples (Appendices H & I) of inmates with predatory behavior who have been identified, monitored, and counseled throughout their stay in our facility according to ACA standards and PREA regulations.

AUDITORS' RESPONSE:

It was noted that the counseling for detainees with a history of sexually assaultive behavior and the sexual victimization were not being completed in the 72 hour by the mental health staff due to the medical policy reflected 14 day and the medical staff does not have all the security information to ensure all of above are noted on intake. Security does complete a Sexual Predator and Victimization Intake Screening form ADC #100, but this information needs to be forwarded to the Mental Health staff to ensure counseling is being scheduled.

Attached are copies of records indicating that a transgender inmate and three predatory inmates were present in the facility but the facility could not provide any evidence of the 72 hour referral. One possibility is that the security personnel who interview may need further training on interviewing such inmates to ensure identification (see attached.)

Two of the three auditors observed the weekly meeting between mental health and security personnel which was impressive in the discussion of inmates in special housing and their progress/appropriate housing assignment.

The visiting committee recognized the facility's PREA accreditation. However, the visiting team agreed that based on mental health personnel who were interviewed and forms/records including the ADC form #100, all inmates who would score as high risk as defined by this standard are not connected to mental health through initial referral by security personnel who conduct the screening, as required by the standard.

The team concluded that there is a need for better linkage between security personnel who conduct the screenings and mental health to ensure high risk inmates are identified timely and are referred to mental health staff within the 72 hour time frame. Copies of documentation are attached to this report.

A plan of action is recommended to accomplish compliance and ensure high risk inmates are properly identified, monitored and counseled when indicated.

Standard #4-ALDF-5A-04

INMATES WITH DRUG AND ALCOHOL ADDICTION PROBLEMS ARE PROVIDED WITH SUBSTANCE ABUSE PROGRAMS, TO INCLUDE MONITORING AND DRUG TESTING.

FINDINGS:

Although Cherokee County Sheriff's Office Adult Detention Center conducts substance abuse classes, they do not provide substance abuse programs and also do not conduct drug testing or monitoring for inmates with drug and alcohol addiction problems.

AGENCY RESPONSE:

Plan of Action

Task

Meet with our local Substance Abuse Organization to establish a drug monitoring and testing treatment program at our facility to complement our established NA/AA support groups.

Responsible Agency

Cherokee Sheriff's Office ADC Programs Staff.

Assigned Staff

Sgt. Sheila Jackson and Cpl. Michael Turoczy

Anticipated Completion Date

August 2019

AUDITORS' RESPONSE:

It was noted that the average length of stay for inmates is typically thirty days or less which is a mitigating factor for accomplishing substance abuse programming. However, since certain inmates may be detained for a year or longer awaiting trial, sentencing or serving minor sentences, the visiting committee supports the plan of action submitted by Cherokee ADC within the cited time frame.

Standard #4-ALDF-5C-04

SEGREGATION UNITS HAVE EITHER OUTDOOR UNCOVERED OR OUTDOOR COVERED EXERCISE AREAS. THE MINIMUM SPACE REQUIREMENTS FOR OUTDOOR EXERCISE AREAS FOR SEGREGATION UNITS ARE AS FOLLOWS:

- GROUP YARD MODULES: 330-SQUARE FEET OF UNENCUMBERED SPACE CAN ACCOMMODATE TWO INMATES. FOR EACH ADDITIONAL 150-SQUARE FEET OF UNENCUMBERED SPACE, AN ADDITIONAL INMATE MAY USE THE EXERCISE AREA SIMULTANEOUSLY. (FORMULA: FOR EACH 150 SQUARE FEET OF UNENCUMBERED SPACE EXCEEDING THE BASE REQUIREMENT OF 180 SQUARE FEET FOR THE FIRST INMATE, EQUALS THE MAXIMUM NUMBER OF INMATES WHO MAY USE THE RECREATION AREA SPACE SIMULTANEOUSLY). NO MORE THAN FIVE INMATES ARE TO USE A GROUP MODULE AT ONE TIME.

- INDIVIDUAL YARD MODULES: 180 SQUARE FEET OF UNENCUMBERED SPACE. IN CASES WHERE COVER IS NOT PROVIDED TO MITIGATE THE INCLEMENT WEATHER, APPROPRIATE WEATHER-RELATED EQUIPMENT AND ATTIRE SHOULD BE MADE AVAILABLE TO THE INMATES WHO DESIRE TO TAKE ADVANTAGE OF THEIR AUTHORIZED EXERCISE TIME.

FINDINGS:

There are no outdoor uncovered or outdoor covered exercise yards used for A and B Segregation Units. Inmates on these units receive one to two hours of indoor recreation per day seven days per week.

AGENCY RESPONSE:

Waiver Request

Our old jail houses both segregation and administrative segregation to include protective custody. Neither has a recreation area open to the outdoors either covered or uncovered. The inside dayroom has substantial room for recreation and they are out for free time hours an extra hour throughout the day to compensate for the lack of an outdoor recreation area. The jail expansion project however will rectify this issue since all segregation housing will have access to an outdoor covered exercise yard once it is completed in November of 2020. We expect to be in compliance with this standard after completion.

AUDITORS' RESPONSE:

The visiting team supports this waiver based on the proposed plan, which would bring them into compliance.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Cherokee Sheriff's Office
Cherokee Sheriff's Office Adult Detention Center
Canton, Georgia

January 23-25, 2019

Visiting Committee Findings

Mandatory Standards

Not Applicable

Standard #4-ALDF-4C-23

ALL INTRA-SYSTEM TRANSFER INMATES RECEIVE A HEALTH SCREENING BY HEALTH-TRAINED OR QUALIFIED HEALTH CARE PERSONNEL, WHICH COMMENCES ON THEIR ARRIVAL AT THE FACILITY. ALL FINDINGS ARE RECORDED ON A SCREENING FORM APPROVED BY THE HEALTH AUTHORITY. AT A MINIMUM, THE SCREENING INCLUDES THE FOLLOWING:

INQUIRY INTO:

- WHETHER THE INMATE IS BEING TREATED FOR A MEDICAL OR DENTAL PROBLEM
- WHETHER THE INMATE IS PRESENTLY ON MEDICATION
- WHETHER THE INMATE HAS A CURRENT MEDICAL OR DENTAL COMPLAINT

OBSERVATION OF:

- GENERAL APPEARANCE AND BEHAVIOR
- PHYSICAL DEFORMITIES
- EVIDENCE OF ABUSE OR TRAUMA

MEDICAL DISPOSITION OF INMATES:

- cleared for general population
- cleared for general population with appropriate referral to health care service
- referral to appropriate health care service for service for emergency treatment

FINDINGS:

The Cherokee County Sheriff's Adult Detention Center does not receive intra system transfers.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Cherokee Sheriff's Office
Cherokee Sheriff's Office Adult Detention Center
Canton, Georgia

January 23-25, 2019

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

Standard #4-ALDF-1A-06

THE FACILITY CONFORMS TO APPLICABLE FEDERAL, STATE, AND LOCAL BUILDING CODES. (RENOVATION, ADDITIONS, NEW CONSTRUCTION ONLY)

FINDINGS:

Cherokee County Sheriff's Adult Detention Center was constructed in 1989; the last renovations occurred in 2002.

Standard #4-ALDF-1A-16

ALL INMATE ROOMS/CELLS PROVIDE THE OCCUPANTS WITH ACCESS TO NATURAL LIGHT BY MEANS OF AT LEAST THREE SQUARE FEET OF TRANSPARENT GLAZING, PLUS TWO ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER INMATE IN ROOMS/CELLS WITH THREE OR MORE INMATES. (RENOVATION, ADDITION, NEW CONSTRUCTION ONLY)

FINDINGS:

Cherokee County Sheriff's Adult Detention Center was constructed in 1989; the last renovations occurred in 2002.

Standard #4-ALDF-2A-18

PHYSICAL PLANT DESIGNS FACILITATE CONTINUOUS PERSONAL CONTACT AND INTERACTION BETWEEN STAFF AND INMATES IN HOUSING UNITS. ALL LIVING AREAS ARE CONSTRUCTED TO FACILITATE CONTINUOUS STAFF OBSERVATION, EXCLUDING ELECTRONIC SURVEILLANCE, OF CELL OR DETENTION ROOM FRONTS AND AREAS SUCH AS DAYROOMS AND RECREATION SPACES. (RENOVATION, ADDITION, NEW CONSTRUCTION ONLY)

FINDINGS:

Cherokee County Sheriff's Adult Detention Center was constructed in 1989; the last renovations occurred in 2002.

Standard #4-ALDF-2A-33

THE FACILITY SUPPORTS INMATE SEPARATION ACCORDING TO EXISTING LAWS AND REGULATION AND/OR ACCORDING TO THE FACILITY'S CLASSIFICATION PLAN. (ADDITION, NEW CONSTRUCTION)

FINDINGS:

Cherokee County Sheriff's Adult Detention Center was constructed in 1989; the last renovations occurred in 2002.

Standard #4-ALDF-2A-36

INMATES PARTICIPATING IN WORK OR EDUCATIONAL RELEASE PROGRAMS ARE SEPARATED FROM INMATES IN THE GENERAL POPULATION.

FINDINGS:

Cherokee County Sheriff's Adult Detention Center does not provide work or educational release programs.

Standard #4-ALDF-2A-37

CONFINEMENT OF JUVENILES UNDER THE AGE OF 18 IS PROHIBITED UNLESS A COURT FINDS THAT IT IS IN THE BEST INTEREST OF JUSTICE AND PUBLIC SAFETY THAT A JUVENILE AWAITING TRIAL OR OTHER LEGAL PROCESS BE TREATED AS AN ADULT FOR THE PURPOSES OF PROSECUTION, OR UNLESS CONVICTED AS AN ADULT AND REQUIRED BY STATUTE TO BE CONFINED IN AN ADULT FACILITY.

FINDINGS:

Cherokee County Sheriff's Adult Detention Facility does not house any offenders under the age of seventeen, which is the age of majority for their jurisdiction.

Standard #4-ALDF-2A-38

IF YOUTHFUL OFFENDERS ARE HOUSED IN THE FACILITY, THEY ARE HOUSED IN A SPECIALIZED UNIT FOR YOUTHFUL OFFENDERS EXCEPT WHEN:

- VIOLENT, PREDATORY YOUTHFUL OFFENDER POSES AN UNDUE RISK OF HARM TO OTHERS WITHIN THE SPECIALIZED UNIT, OR
- A QUALIFIED MEDICAL OR MENTAL-HEALTH SPECIALIST DOCUMENTS THAT THE YOUTHFUL OFFENDER WOULD BENEFIT FROM PLACEMENT OUTSIDE THE UNIT

A WRITTEN STATEMENT IS PREPARED DESCRIBING THE SPECIFIC REASONS FOR HOUSING A YOUTHFUL OFFENDER OUTSIDE THE SPECIALIZED UNIT AND A CASE-MANAGEMENT PLAN SPECIFYING WHAT BEHAVIORS NEED TO BE MODIFIED AND HOW THE YOUTHFUL OFFENDER MAY RETURN TO THE UNIT. THE STATEMENT OF REASONS AND CASE-MANAGEMENT PLAN MUST BE APPROVED BY THE FACILITY ADMINISTRATOR OR HIS/HER DESIGNEE. CASES ARE REVIEWED AT LEAST QUARTERLY BY THE CASE MANAGER, THE ADMINISTRATOR OR HIS OR HER DESIGNEE, AND THE YOUTHFUL OFFENDER TO DETERMINE WHETHER A YOUTHFUL OFFENDER SHOULD BE RETURNED TO THE SPECIALIZED UNIT.

FINDINGS:

Cherokee County Sheriff's Adult Detention Facility does not house any offenders under the age of seventeen, which is the age of majority for their jurisdiction.

Standard #4-ALDF-2A39

DIRECT SUPERVISION IS EMPLOYED IN THE SPECIALIZED UNIT TO ENSURE THE SAFETY AND SECURITY OF YOUTHFUL OFFENDERS.

FINDINGS:

Cherokee County Sheriff's Adult Detention Facility does not house any offenders under the age of seventeen, which is the age of majority for their jurisdiction.

Standard #4-ALDF-2A-40

CLASSIFICATION PLANS FOR YOUTHFUL OFFENDERS DETERMINE LEVEL OF RISK AND PROGRAM NEEDS DEVELOPMENTALLY APPROPRIATE FOR ADOLESCENTS. CLASSIFICATION PLANS INCLUDE CONSIDERATION OF PHYSICAL, MENTAL, SOCIAL, AND EDUCATIONAL MATURITY OF THE YOUTHFUL OFFENDER.

FINDINGS:

Cherokee County Sheriff's Adult Detention Facility does not house any offenders under the age of seventeen, which is the age of majority for their jurisdiction.

Standard #4-ALDF-2A-41

ADEQUATE PROGRAM SPACE IS PROVIDED TO MEET THE PHYSICAL, SOCIAL, AND EMOTIONAL NEEDS OF YOUTHFUL OFFENDERS AND ALLOWS FOR THEIR PERSONAL INTERACTIONS AND GROUP ORIENTED ACTIVITIES.

FINDINGS:

Cherokee County Sheriff's Adult Detention Facility does not house any offenders under the age of seventeen, which is the age of majority for their jurisdiction.

Standard #4-ALDF-2A-42

YOUTHFUL OFFENDERS IN THE SPECIALIZED UNIT FOR YOUTHFUL INMATES HAVE NO MORE THAN INCIDENTAL SIGHT OR SOUND CONTACT WITH ADULT INMATES FROM OUTSIDE THE UNIT IN LIVING, PROGRAM, DINING, OR OTHER COMMON AREAS OF THE FACILITY. ANY OTHER SIGHT OR SOUND CONTACT IS MINIMIZED, BRIEF, AND IN CONFORMANCE WITH APPLICABLE LEGAL REQUIREMENTS.

FINDINGS:

Cherokee County Sheriff's Adult Detention Facility does not house any offenders under the age of seventeen, which is the age of majority for their jurisdiction.

Standard #4-ALDF-2A-43

PROGRAM PERSONNEL WHO WORK WITH YOUTHFUL OFFENDERS ARE TRAINED IN THE DEVELOPMENTAL, SAFETY, AND OTHER SPECIFIC NEEDS OF YOUTHFUL OFFENDERS. WRITTEN JOB DESCRIPTIONS AND QUALIFICATIONS REQUIRE TRAINING FOR STAFF WHO ARE RESPONSIBLE FOR PROGRAMMING OF YOUTHFUL OFFENDERS IN THE SPECIALIZED UNIT

BEFORE BEING ASSIGNED TO WORK WITH YOUTHFUL OFFENDERS. TRAINING INCLUDES, BUT IS NOT LIMITED TO THE FOLLOWING AREAS:

- ADOLESCENT DEVELOPMENT
- EDUCATIONAL PROGRAMMING
- CULTURAL AWARENESS
- CRISIS PREVENTION AND INTERVENTION
- LEGAL ISSUES
- HOUSING AND PHYSICAL PLANT
- POLICIES AND PROCEDURES
- MANAGEMENT OF, AND PROGRAMMING FOR, SEX OFFENDERS
- SUBSTANCE-ABUSE SERVICES
- COGNITIVE BEHAVIORAL INTERVENTIONS, INCLUDING ANGER MANAGEMENT, SOCIAL-SKILLS TRAINING, PROBLEM SOLVING
- RESISTING PEER PRESSURE
- suicide prevention
- nutrition
- mental-health issues
- gender-specific issues
- case-management planning and implementation

FINDINGS:

Cherokee County Sheriff's Adult Detention Facility does not house any offenders under the age of seventeen, which is the age of majority for their jurisdiction.

Standard #4-ALDF-2C-02

WHEN A CANINE UNIT IS OPERATED BY THE FACILITY:

- THERE IS A MISSION STATEMENT, INCLUDING GOALS AND OBJECTIVES
- THE CIRCUMSTANCES IN WHICH CANINE UNITS MAY BE USED ARE CLEARLY DEFINED
- EMERGENCY PLANS ARE INTEGRATED INTO THE OVERALL EMERGENCY PLANS OF THE FACILITY
- THERE ARE CRITERIA FOR SELECTING, TRAINING AND CARING FOR ANIMALS
- THERE ARE CRITERIA FOR THE SELECTION, TRAINING, AND PHYSICAL FITNESS OF HANDLERS
- THERE IS AN APPROVED SANITATION PLAN THAT COVERS INSPECTION, HOUSING, TRANSPORTATION AND DAILY GROOMING FOR THE ANIMALS
- THERE ARE DAILY AND CURRENT RECORDS ON TRAINING, CARE OF DOGS AND SIGNIFICANT EVENTS.

FINDINGS:

The Cherokee County Sheriff's Office Adult Detention Center does not have a canine unit.

Standard #4-ALDF-4A-14

WHEN REQUIRED BY STATUTE, FOOD PRODUCTS THAT ARE GROWN OR PRODUCED WITHIN THE SYSTEM ARE INSPECTED AND APPROVED BY THE APPROPRIATE GOVERNMENT AGENCY; THERE IS A DISTRIBUTION SYSTEM THAT ENSURES PROMPT DELIVERY OF FOODSTUFFS TO FACILITY KITCHENS.

FINDINGS:

The Cherokee County Sheriff's Office Adult Detention Center does not grow or produce food within the facility system.

Standard #4-ALDF-4C-09

IF INFIRMARY CARE IS PROVIDED ONSITE, IT INCLUDES, AT A MINIMUM, THE FOLLOWING:

- DEFINITION OF THE SCOPE OF INFIRMARY CARE SERVICES AVAILABLE
- A PHYSICIAN ON CALL OR AVAILABLE 24 HOURS PER DAY
- HEALTH CARE PERSONNEL HAVE ACCESS TO A PHYSICIAN OR A REGISTERED NURSE AND ARE ON DUTY 24 HOURS PER DAY WHEN PATIENTS ARE PRESENT
- ALL INMATES/PATIENTS ARE WITHIN SIGHT OR SOUND OF A STAFF MEMBER
- AN INFIRMARY CARE MANUAL THAT INCLUDES NURSING CARE PROCEDURES
- AN INFIRMARY RECORD THAT IS A SEPARATE AND DISTINCT SECTION OF THE COMPLETE MEDICAL RECORD
- COMPLIANCE WITH APPLICABLE STATE STATUTES AND LOCAL LICENSING REQUIREMENTS

FINDINGS:

The Cherokee County Sheriff's Adult Detention Center does not operate an infirmary.

Standard #4-ALDF-4C-37

OFFENDERS HAVE ACCESS TO SUBSTANCE DISORDER INFORMATION, EDUCATION, AND/OR TREATMENT PROGRAMS FOR SUBSTANCE USE DISORDERS. WHEN A SUBSTANCE USE DISORDER TREATMENT PROGRAM EXISTS, THE CLINICAL MANAGEMENT OF PROGRAM PARTICIPANTS INCLUDES, AT A MINIMUM, THE FOLLOWING:

- A STANDARDIZED NEEDS ASSESSMENT ADMINISTERED TO DETERMINE THE LEVEL OF SUBSTANCE USE TREATMENT NEEDS AND CRIMINOGENIC RISKS/NEEDS.
- AN INDIVIDUALIZED TREATMENT PLAN DEVELOPED AND IMPLEMENTED BY A CLINICIAN OR MULTIDISCIPLINARY TEAM WITH APPROPRIATE TRAINING, AND CERTIFICATION OR LICENSURE (WHERE REQUIRED BY STATUTE), IN SUBSTANCE USE DISORDERS TREATMENT.
- PRE-RELEASE EDUCATION RELATED TO THE RISK OF RETURN TO SUBSTANCE USE.
- PROGRAM PARTICIPANT INVOLVEMENT IN AFTERCARE DISCHARGE PLANS.

FINDINGS:

Cherokee County Sheriff's Adult Detention Center does not have a chemical dependency treatment program.

Standard #4-ALDF-4D-04

A HEALTH-TRAINED STAFF MEMBER COORDINATES THE HEALTH DELIVERY SERVICES UNDER THE JOINT SUPERVISION OF THE RESPONSIBLE HEALTH AUTHORITY AND FACILITY ADMINISTRATOR, WHEN QUALIFIED HEALTH CARE PERSONNEL ARE NOT ON DUTY.

FINDINGS:

The Cherokee County Sheriff's Adult Detention Center has qualified health care personnel on duty twenty-four hours per day.

Standard #4-ALDF-4D-11

UNLESS PROHIBITED BY STATE LAW, INMATES, UNDER STAFF SUPERVISION, MAY PERFORM FAMILIAL DUTIES COMMENSURATE WITH THEIR LEVEL OF TRAINING. THESE DUTIES MAY INCLUDE THE FOLLOWING:

- PEER SUPPORT AND EDUCATION
- HOSPICE ACTIVITIES
- ASSISTING IMPAIRED INMATES ON A ONE-ON-ONE BASIS WITH ACTIVITIES OF DAILY LIVING
- SERVING AS A SUICIDE COMPANION IF QUALIFIED AND TRAINED THROUGH A FORMAL PROGRAM THAT IS PART OF A SUICIDE PREVENTION PLAN
- HANDLING DENTAL INSTRUMENTS FOR THE PURPOSE OF SANITIZING AND CLEANING, WHEN DIRECTLY SUPERVISED AND IN COMPLIANCE WITH APPLICABLE TOOL CONTROL POLICIES, WHILE IN A DENTAL ASSISTANTS TRAINING PROGRAM CERTIFIED BY THE STATE DEPARTMENT OF EDUCATION OR OTHER COMPARABLE APPROPRIATE AUTHORITY

INMATES ARE NOT TO BE USED FOR THE FOLLOWING DUTIES:

- PERFORMING DIRECT PATIENT CARE SERVICES
- SCHEDULING HEALTH CARE APPOINTMENTS
- DETERMINING ACCESS OF OTHER INMATES TO HEALTH CARE SERVICES
- HANDLING OR HAVING ACCESS TO SURGICAL INSTRUMENTS, SYRINGES, NEEDLES, MEDICATIONS, OR HEALTH RECORDS
- OPERATING DIAGNOSTIC OR THERAPEUTIC EQUIPMENT EXCEPT UNDER DIRECT SUPERVISION, BY SPECIALLY TRAINED STAFF, IN A VOCATIONAL TRAINING PROGRAM

FINDINGS:

Inmates at Cherokee County Sheriff's Office Adult Detention Center do not perform familial duties.

Standard #4-ALDF-5A-05

THERE IS A TREATMENT PHILOSOPHY WITHIN THE CONTEXT OF THE TOTAL CORRECTIONAL SYSTEM AS WELL AS GOALS AND MEASURABLE OBJECTIVES. THESE DOCUMENTS ARE REVIEWED AT LEAST ANNUALLY AND UPDATED AS NEEDED.

FINDINGS:

There is no therapeutic community/substance abuse program at Cherokee County Sheriff's Adult Detention Center.

Standard #4-ALDF-5A-06

THERE IS AN APPROPRIATE RANGE OF PRIMARY TREATMENT SERVICES FOR ALCOHOL AND OTHER SUBSTANCE-ABUSING INMATES THAT INCLUDE, AT A MINIMUM, THE FOLLOWING:

- INMATE DIAGNOSIS
- IDENTIFIED PROBLEM AREAS
- INDIVIDUAL TREATMENT OBJECTIVES
- TREATMENT GOALS
- COUNSELING NEEDS
- DRUG EDUCATION PLAN
- RELAPSE PREVENTION AND MANAGEMENT
- CULTURALLY SENSITIVE TREATMENT OBJECTIVES, AS APPROPRIATE
- THE PROVISION OF SELF-HELP GROUPS AS AN ADJUNCT TO TREATMENT
- PRERELEASE AND TRANSITIONAL SERVICE NEEDS
- COORDINATION EFFORTS WITH COMMUNITY SUPERVISION AND TREATMENT STAFF DURING THE PRERELEASE PHASE TO ENSURE A CONTINUUM OF SUPERVISION AND TREATMENT

FINDINGS:

There is no therapeutic community/substance abuse program at Cherokee County Sheriff's Adult Detention Center.

Standard #4-ALDF-5A-07

THE FACILITY USES A COORDINATED STAFF APPROACH TO DELIVER TREATMENT SERVICES. THIS APPROACH TO SERVICE DELIVERY IS DOCUMENTED IN TREATMENT PLANNING CONFERENCES AND IN INDIVIDUAL TREATMENT FILES.

FINDINGS:

There is no therapeutic community/substance abuse program at Cherokee County Sheriff's Adult Detention Center.

Standard #4-ALDF-5A-08

THERE ARE INCENTIVES FOR TARGETED TREATMENT PROGRAMS TO INCREASE AND MAINTAIN THE INMATE'S MOTIVATION FOR TREATMENT.

FINDINGS:

There is no therapeutic community/substance abuse program at Cherokee County Sheriff's Adult Detention Center.

Standard #4-ALDF-5A-10

IN FACILITIES OFFERING ACADEMIC AND VOCATIONAL TRAINING PROGRAMS, CLASSROOMS ARE DESIGNED IN CONSULTATION WITH SCHOOL AUTHORITIES. (RENOVATION, ADDITION, NEW CONSTRUCTION ONLY)

FINDINGS:

The Cherokee County Sheriff's Adult Detention Center does not meet the definition of new construction nor have there been any new additions or renovation since 2002.

Standard #4-ALDF-5B-14

WHEN THE FACILITY IS DESIGNATED TO OPERATE ANY TYPE OF PRETRIAL INTERVENTION SERVICE OR OTHER RELEASE PROGRAMS, ITS AUTHORITY AND RESPONSIBILITY ARE STATED BY STATUTE OR ADMINISTRATIVE REGULATION.

FINDINGS:

The Cherokee County Sheriff's Adult Detention Center does not operate pretrial intervention services or other release programs.

Standard #4-ALDF-5B-15

WHEN A PRETRIAL INTERVENTION PROGRAM, DIVERSION PROGRAM, PRETRIAL RELEASE PROGRAM, OR SUPERVISED RELEASE PROGRAM IS CONDUCTED IN THE FACILITY, SUFFICIENT STAFF, SPACE, AND EQUIPMENT ARE PROVIDED TO SERVICE THE PROGRAM.

FINDINGS:

The Cherokee County Sheriff's Adult Detention Center does not operate pretrial intervention services, diversion, pretrial release programs or supervised release programs.

Standard #4-ALDF-5B-16

WHERE TEMPORARY RELEASE PROGRAMS EXIST, THE PROGRAMS HAVE THE FOLLOWING ELEMENTS:

- WRITTEN OPERATIONAL PROCEDURES
- CAREFUL SCREENING AND SELECTION PROCEDURES
- WRITTEN RULES OF INMATE CONDUCT
- A SYSTEM FOR EVALUATING PROGRAM EFFECTIVENESS
- EFFORTS TO OBTAIN COMMUNITY COOPERATION AND SUPPORT

FINDINGS:

The Cherokee County Sheriff's Adult Detention Center does not operate a temporary release program.

Standard #4-ALDF-5B-17

WHERE WORK RELEASE AND/OR EDUCATIONAL RELEASE ARE AUTHORIZED, THE FACILITY ADMINISTRATOR HAS AUTHORITY TO APPROVE OR DISAPPROVE PARTICIPATION FOR EACH INMATE.

FINDINGS:

The Cherokee County Sheriff's Adult Detention Center does not operate a work release or educational release program.

Standard #4-ALDF-5C-13

WHERE AN INDUSTRIES PROGRAM EXISTS, ITS ESTABLISHMENT IS AUTHORIZED AND AREAS OF AUTHORITY, RESPONSIBILITY, AND ACCOUNTABILITY ARE DELINEATED.

FINDINGS:

There is no correctional industries program at the Cherokee County Sheriff's Adult Detention Center.

Standard #4-ALDF-5C-14

THE NUMBER OF INMATES ASSIGNED TO INDUSTRIES OPERATIONS MEETS THE REALISTIC WORKLOAD NEEDS OF EACH OPERATING UNIT.

FINDINGS:

There is no correctional industries program at the Cherokee County Sheriff's Adult Detention Center.

Standard #4-ALDF-5C-15

THERE IS A COMPREHENSIVE QUALITY CONTROL PROCESS.

FINDINGS:

There is no correctional industries program at the Cherokee County Sheriff's Adult Detention Center.

Standard #4-ALDF-5C-16

A COST ACCOUNTING SYSTEM FOR EACH INDUSTRIES UNIT IS DESIGNED, IMPLEMENTED, AND MAINTAINED IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES.

FINDINGS:

There is no correctional industries program at the Cherokee County Sheriff's Adult Detention Center.

Standard #4-ALDF-7F-07

IF VOLUNTEERS ARE USED IN THE DELIVERY OF HEALTH CARE, THERE IS A DOCUMENTED SYSTEM FOR SELECTION, TRAINING, STAFF SUPERVISION, FACILITY ORIENTATION, AND A DEFINITION OF TASKS, RESPONSIBILITIES AND AUTHORITY THAT IS APPROVED BY THE HEALTH AUTHORITY. VOLUNTEERS MAY ONLY PERFORM DUTIES CONSISTENT WITH THEIR CREDENTIALS AND TRAINING. VOLUNTEERS AGREE IN WRITING TO ABIDE BY ALL FACILITY POLICIES, INCLUDING THOSE RELATING TO THE SECURITY AND CONFIDENTIALITY OF INFORMATION.

FINDINGS:

The Cherokee County Sheriff's Adult Detention Center does not use volunteers in the delivery of health.

Significant Incident Summary

This report is required for all **residential** accreditation programs.

This summary is required to be provided to the Chair of your visiting team upon their arrival for an accreditation audit and included in the facility's Annual Report. The information contained on this form will also be summarized in the narrative portion of the visiting committee report and will be incorporated into the final report. Please type the data. If you have questions on how to complete the form, please contact your Accreditation Specialist.

This report is for Adult Correctional Institutions, Adult Local Detention Facilities, Core Jail Facilities, Boot Camps, Therapeutic Communities, Juvenile Community Residential Facilities, Juvenile Correctional Facilities, Juvenile Detention Facilities, Adult Community Residential Services, and Small Juvenile Detention Facilities.

Facility Name: Cherokee County Adult Detention Center Reporting Period: 12/2017 to 11/2018

Incident Type	Months	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Total for Reporting Period
	⇒													
Escapes		0	0	0	0	0	0	0	0	0	0	0	0	0
Disturbances*		0	0	0	0	0	0	0	0	0	0	0	0	0
Sexual Violence		0	0	0	0	0	0	0	0	0	0	0	0	0
Homicide*	Offender Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Staff Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
	Other Victim	0	0	0	0	0	0	0	0	0	0	0	0	0
Assaults	Offender/Offender	0	0	0	0	0	0	0	0	0	0	0	0	0
	Offender/Staff	2	0	0	0	0	0	0	0	0	1	1	2	6
Suicide		0	0	0	0	0	0	0	0	0	0	0	0	0
Non-Compliance with a Mandatory Standard*		0	0	0	0	0	0	0	0	0	0	0	0	0
Fire*		0	0	0	0	0	0	0	0	0	0	0	0	0
Natural Disaster*		0	0	0	0	0	0	0	0	0	0	0	0	0
Unnatural Death		1	0	0	0	0	0	0	0	0	0	0	1	2
Other*		0	0	0	0	0	0	0	0	0	0	0	0	0

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

Name of Facility: Cherokee County ADC
 Number of Months Data Collected: 12

Date: 12/12/2018

ALDF Outcome Measure Worksheet				
1A	Outcome Measure	Numerator/Denominator	Value	Calculated O.M
		The community, staff, contractors, volunteers, and inmates are protected from injury and illness caused by the physical environment.		
	(1)	Number of worker compensation claims filed for injuries that resulted from the physical environment in the past 12 months.	9	
	divided by	Average number of Full-Time Equivalent (FTE) staff positions in the past 12 months.	153	.06
	(2)	Number of illnesses requiring medical attention as a result of the physical environment of the facility in the past 12 months.	0	
	divided by	Average daily population in the past 12 months.	653	0
	(3)	Number of illnesses requiring medical attention as a result of the physical environment of the facility in the past 12 months.	0	
	divided by	The number of admissions in the past 12 months.	8240	0
	(4)	Number of physical injuries or emotional trauma requiring treatment as a result of the physical environment of the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(5)	Number of physical injuries or emotional trauma requiring treatment as a result of the physical environment of the facility in the past 12 months.	0	
	divided by	The number of admissions in the past 12 months.	8240	0
	(6)	Number of sanitation or health code violations identified by external agencies in the past 12 months.	4	
	divided by	The average daily population in the past 12 months.	653	0.007
	(7)	Number of health code violations corrected in the past 12 months.	0	
	divided by	The number of health code violations identified in the past 12 months.	4	0
	(8)	Number of inmate grievances related to safety or sanitation found in favor of inmates in the past 12 months.	0	
	divided by	The number of inmate's grievances related to safety or sanitation in the past 12 months.	0	0
	(9)	Number of fire code violations corrected in the past 12 months.	3	

	divided by	The number of fire code violations cited by jurisdictional authority in the past 12 months.	3	0
	(10)	Number of inmate injuries resulting from fires requiring medical treatment in a 12-month period.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(11)	Number of inmate injuries (other than by fire) requiring medical treatment in the past 12 months.	3	
	divided by	The average daily population of inmates in the past 12 months.	653	0.005
	(12)	Number of staff injuries resulting from fires requiring medical treatment in the past 12 months.	0	
	divided by	The average daily population of staff in the past 12 months.	653	0
	(13)	Number of staff injuries (other than fire) requiring medical treatment in the past 12 months.	51	
	divided by	The average daily population of staff in the past 12 months.	653	0.09
	(14)	Number of inmate lawsuits related to safety or sanitation found in favor of the inmate in the past 12 months.	0	
	divided by	The number of inmate lawsuits related to safety or sanitation in the past 12 months.	0	0
1B		Vehicles are maintained and operated in a manner that prevents harm to the community, staff, contractors, volunteers, and inmates.		
	(1)	Number of vehicle accidents resulting in property damage in the past 12 months.	2	
	divided by	The average daily population in the past 12 months.	653	.003
	(2)	Number of vehicle accidents resulting in injuries requiring medical treatment for any party in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(3)	Amount dollar of damage from vehicle accidents in the past 12 months.	\$1000.00	
	divided by	The average daily population in the past 12 months.	653	\$1.68
1C		The number and severity of emergencies are minimized. When emergencies occur, the response minimizes the severity.		
	(1)	Number of emergencies, caused by forces external to the facility, that result in property damage in the past 12 months.	0	
	divided by	The number emergencies.	11	0
	(2)	Number of injuries, caused by forces external to the facility, requiring medical attention that resulted from emergencies in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(3)	Number of times that normal facility operations were suspended due to emergencies caused by forces external to the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0

	(4)	Number of hours that facility operations were suspended due to emergencies caused by forces external to the facility in the past 12 months.	0	
	divided by	The number of emergencies caused by forces external to the facility.	0	0
	(5)	Number of emergencies that were not caused by forces external to the facility that resulted in property damage in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(6)	Number of injuries requiring medical attention that resulted from emergencies that were not caused by forces external to the facility in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	653	0.002
	(7)	Number of times that normal facility operations were suspended due to emergencies that were not caused by forces external to the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(8)	Number of hours that facility operations were suspended due to emergencies that were not caused by forces external to the facility in the past 12 months.	0	
	divided by	The number of emergencies.	11	0
	(9)	Number of injuries resulting from fires requiring medical treatment in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(10)	Number of fires that resulted in property damage in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(11)	Amount dollar of property damage from fire in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(12)	Number of code violations cited in the past 12 months.	7	
	divided by	The average daily population in the past 12 months.	653	0.010
	(13)	Number of incidents involving toxic or caustic materials in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(14)	Number of incidents of inventory discrepancies in the past 12 months.	3	
	divided by	The average daily population in the past 12 months.	653	0.005

2A	Outcome Measure	Numerator/Denominator	Value	Calculated O.M
		The community, staff, contractors, volunteers, and inmates are protected from harm. Events that pose risk of harm are prevented. The number and severity of events are minimized.		
	(1)	Number of incidents involving harm in the past 12 months.	100	
	divided by	The average daily population in the past 12 months.	653	0.15
	(2)	Number of incidents in the past 12 months involving harm.	100	
	divided by	The number of admissions in the past 12 months.	8240	0.01
	(3)	Number of physical injuries or emotional trauma requiring treatment as a result of incidents in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(4)	Number of physical injuries or emotional trauma requiring treatment as a result of the incidents in the past 12 months.		
	divided by	The number of admissions in the past 12 months.	8240	
	(5)	Number of unauthorized inmate absences from the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(6)	Number of instances of unauthorized access to the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
2B		Physical force is used only in instances of self-protection, protection of the inmate or others, prevention of property damage, or prevention of escape.		
	(1)	Number of instances in which force was used in the past 12 months.	334	
	divided by	The average daily population in the past 12 months.	653	0.51
	(2)	Number of instances in which force was used in the past 12 months.	334	
	divided by	The number of admissions in the past 12 months.	8240	0.04
	(3)	Number of times that staff use of force were found to have been inappropriate in the past 12 months.	2	
	divided by	The number of instances in which force was used.	334	0.006
	(4)	Number of inmate grievances filed alleging inappropriate use of force in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	653	0.002
	(5)	Number of grievances alleging inappropriate use of force decided in favor of inmate in the past 12 months.	0	
	divided by	The number of grievances alleging inappropriate use of force filed.	1	0
	(6)	Number of injuries requiring medical treatment resulting from staff use of force in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
2C		Contraband is minimized. It is detected when present in the facility.		
	(1)	Number of incidents involving contraband in the past 12	101	

		months.		
	divided by	The average daily population in the past 12 months.	653	0.15
	(2)	Number of incidents involving contraband in the past 12 months.	101	
	divided by	The number of admissions in the past 12 months.	8240	0.01
	(3)	Number of weapons found in the facility in the past 12 months.	10	
	divided by	The average daily population in the past 12 months.	653	0.02
	(4)	Number of controlled substances found in the facility in the past 12 months.	101	
	divided by	The average daily population in the past 12 months.	653	0.15
	(5)	Number of controlled substances found in the facility in the past 12 months.	101	
	divided by	The number of admissions in the past 12 months.	8240	0.01
2D		Improper access to and use of keys, tools and utensils are minimized.		
	(1)	Number of incidents involving keys in the past 12 months.	15	
	divided by	The average daily population in the past 12 months.	653	0.023
	(2)	Number of incidents involving tools in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(3)	Number of incidents involving culinary equipment in the past 12 months.	12	
	divided by	The average daily population in the past 12 months.	653	0.02
	(4)	Number of incidents involving medical equipment and sharps in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	653	0.002
3A		Inmates comply with rules and regulations.		
	(1)	Number of rule violations in the past 12 months.	522	
	divided by	The average daily population in the past 12 months.	653	0.8
	(2)	Number of assaults—inmate against inmate, inmate against staff in the past 12 months.	6	
	divided by	The average daily population in the past 12 months.	653	0.009
4A		Food service provides a nutritionally balanced diet. Food service operations are hygienic and sanitary.		
	(1)	Number of documented inmate illnesses attributed to food service operations in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(2)	Number of inmate grievances about food service decided in favor of the inmate the past 12 months.	0	
	divided by	The number of inmate grievances about food service in the past 12 months.	0	0
	(3)	Number of violations cited by independent authorities for food service sanitation in the past 12 months.	4	
		Divided by number of violations cited by independent authorities in the past 12 months.	4	1
4B		Inmates maintain acceptable personal hygiene practices.		
	(1)	Inmate grievances regarding inmate access to personal hygiene decided in favor of the inmate in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0

	(2)	Number of inmate illnesses attributed to poor hygiene practices in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(3)	Number of inmates diagnosed with hygiene-related conditions (scabies, lice, or fungal infections) in the past 12 months.	175	
	divided by	The average daily population in the past 12 months.	653	0.3
	(4)	Number of inmate grievances related to hygiene found in favor of the inmate in the past 12 months.	0	
	divided by	The number of inmate grievances related to hygiene in the past 12 months.	0	0
	(5)	Number of inmate lawsuits related to hygiene found in favor of the inmate in the past 12 months.	0	
	divided by	The number of inmate lawsuits related to hygiene in the past 12 months.	0	0
4C		Inmates maintain good health. Inmates have unimpeded access to a continuum of health care services so that their health care needs, including prevention and health education, are met in a timely and efficient manner.		
	(1)	Number of inmates with a positive tuberculin skin test in the past 12 months.	148	
	divided by	The number of admissions in the past 12 months.	8240	0.02
	(2)	Number of inmates diagnosed with active tuberculosis in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(3)	Number of conversions to a positive tuberculin skin test in the past 12 months.	1	
	divided by	The number of tuberculin skin tests given in the past 12 months.	3720	0.0003
	(4)	Number of inmates with a positive tuberculin skin test who completed prophylaxis treatment for tuberculosis in the past 12 months.	1	
	divided by	The number of inmates with a positive tuberculin skin test on prophylaxis treatment for tuberculosis in the past 12 months.	1	1
	(5)	Number of Hepatitis C positive inmates in the past 12 months.	153	
	divided by	The average daily population in the past 12 months.	653	0.2
	(6)	Number of HIV positive inmates in the past 12 months.	139	
	divided by	The average daily population in the past 12 months.	653	0.2
	(7)	Number of HIV positive inmates who are being treated with highly active antiretroviral treatment in the past 12 months.	139	

	divided by	The number of known HIV positive inmates in the past 12 months.	139	1
	(8)	Number of offenders with an individualized services/treatment plan for a diagnosed mental disorder (excluding sole diagnosis of substance abuse) at a given point in time.	164	
	divided by	The average daily population in the past 12 months.	653	0.3
	(9)	Number of inmate suicide attempts in the past 12 months.	24	
	divided by	The average daily population in the past 12 months.	653	0.04
	(10)	Number of inmate suicides in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(11)	Number of inmate deaths due to homicide in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(12)	Number of inmate deaths due to injuries in the past 12 months.	2	
	divided by	The average daily population in the past 12 months.	653	0.005
	(13)	Number of medically expected inmate deaths in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(14)	Number of medically unexpected inmate deaths in the past 12 months.	2	
	divided by	The average daily population in the past 12 months.	653	0.003
	(15)	Number of inmate admissions to the infirmary (where available) in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(16)	Number of inmate admissions to off-site hospitals in the past 12 months.	29	
	divided by	The average daily population in the past 12 months.	653	0.04
	(17)	Number of inmates transported off-site (via an ambulance or correctional vehicle) for treatment of emergency health conditions in the past 12 months.	130	
	divided by	The average daily population in the past 12 months.	653	0.2
	(18)	Number of inmate specialty consults completed in the past 12 months.	57	
	divided by	The number of specialty consults (on-site or off-site) ordered by primary health care provider (MD, NP, PA) in the past 12 months.	0	0
	(19)	Number of inmate grievances about access to health care services found in favor of the inmate in the past 12 months.	0	
	divided by	The number of inmate grievances about access to healthcare services in the past 12 months.	0	0
	(20)	Number of inmate grievances related to the quality of health care found in favor of inmates in the past 12 months.	0	
	divided by	The number of inmate grievances related to the quality of health care in the past 12 months.	19	0
	(21)	Number of inmates' lawsuits about access to healthcare services found in favor of inmates in the past 12 months.	0	
	divided by	The number of inmate's lawsuits about access to healthcare services in the past 12 months.	1	0
	(22)	Number of individual sick call encounters in the past 12 months.	2999	

	divided by	The average daily population in the past 12 months.	653	4.6
	(23)	Number of physician visits contacts in the past 12 months.	1945	
	divided by	The average daily population in the past 12 months.	653	3.0
	(24)	Number of individualized dental treatment plans in the past 12 months.	439	
	divided by	The average daily population in the past 12 months.	653	0.7
	(25)	Number of hypertensive inmates enrolled in a chronic care clinic in the past 12 months.	613	
	divided by	The average daily population in the past 12 months.	653	.9
	(26)	Number of diabetic inmates enrolled in a chronic care clinic in the past 12 months.	220	
	divided by	The average daily population in the past 12 months.	653	.34
	(27)	Number of incidents involving pharmaceuticals as contraband in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(28)	Number of cardiac diets received by inmates with cardiac disease in the past 12 months.	613	
	divided by	The number of cardiac diets prescribed in the past 12 months.	613	1
	(29)	Number of hypertensive diets received by inmates with hypertension in the past 12 months.	613	
	divided by	The number of hypertensive diets prescribed in the past 12 months.	613	1
	(30)	Number of diabetic diets received by inmates with diabetes in the past 12 months.	220	
	divided by	The number of diabetic diets prescribed in the past 12 months.	220	1
	(31)	Number of renal diets received by inmates with renal disease in the past 12 months.	3	
	divided by	The number of renal diets prescribed in the past 12 months.	3	1
	(32)	Number of needle-stick injuries in the past 12 months.	1	
	divided by	The number of employees on average in the past 12 months.	29	0.03
	(33)	Number of pharmacy dispensing errors in the past 12 months.	0	
	divided by	The number of prescriptions dispensed by the pharmacy in the past 12 months.	3517	0
	(34)	Number of nursing medication administration errors in the past 12 months.	2	
	divided by	The number of medications administered in the past 12 months.	2	1

4D		Health services are provided in a professionally acceptable manner. Staff are qualified, adequately trained, and demonstrate competency in their assigned duties.		
	(1)	Number of staff with lapsed licensure and/or certification in the past 12 months.	0	
	divided by	The number of licensed or certified staff in the past 12 months.	34	
	(2)	Number of new employees in the past 12 months who completed orientation training prior to undertaking job assignments.	34	
	divided by	The number of new employees in the past 12 months.	11	3.1
	(3)	Number of employees completing in-service training requirements in the past 12 months.	34	
	divided by	The number of employees eligible in the past 12 months.	34	1
	(4)	Number of MD staff who left employment in the past 12 months.	1	
	divided by	The number of authorized MD staff positions in the past 12 months.	1	1
	(5)	Number of RN staff who left employment in the past 12 months.	5	
	divided by	The number of authorized RN staff positions in the past 12 months.	4	1.25
	(6)	Number of LPN staff who left employment in the past 12 months.	1	
	divided by	The number of authorized LPN staff positions in the past 12 months.	19	0.05
	(7)	Number of medical records staff who left employment in the past 12 months.	1	
	divided by	The number of medical records staff positions in the past 12 months.	1	1
	(8)	Number of alleged sexual misconduct incidents between staff and detainees in the past 12 months.	0	
	divided by	Average daily population in the past 12 months.	653	0
	(9)	Number of alleged sexual misconduct incidents between volunteers and/or contract personnel and detainees in the past 12 months.	0	
	divided by	Average daily population in the past 12 months.	653	0
	(10)	Number of confirmed sexual misconduct incidents between staff and detainees in the past 12 months.	0	
	divided by	Average daily population in the past 12 months.	653	0
	(11)	Number of confirmed sexual misconduct incidents between volunteers and/or contact personnel and detainees in the past 12 months.	0	
	divided by	Average daily population in the past 12 months.	653	0
	(12)	Number of detainees identified as high risk with a history of sexually assaultive behavior in the past 12 months.	52	
	divided by	Average daily population in the past 12 months.	653	0.08
	(13)	Number of detainees identified as at risk for sexual victimization in the past 12 months.	5	
	divided by	Average daily population in the past 12 months.	653	0.008
5A		Inmates have opportunities to improve themselves while confined.		

	(1)	Number of inmates who passed GED exams while confined in the past 12 months.	26	
	divided by	The number of inmates who were sentenced to the jail for 6 months or more in the past 12 months.	22	1.18
	(2)	Total number of grade levels advanced by inmates in the past 12 months.	26	
	divided by	The number of inmates who were sentenced to the jail for 6 months or more in the past 12 months.	22	1.18
	(3)	Number of certificates of vocational competency awarded to inmates in the past 12 months.	0	
	divided by	The number of inmates who were sentenced to the jail for 6 months or more in the past 12 months.	22	0
5B		Inmates maintain ties with their families and the community.		
		NONE		
5C		The negative impact of confinement is reduced.		
		NONE		
6A		Inmates' rights are not violated.		
	(1)	Total number of inmate grievances in the past 12 months, regarding: (a) access to court; (b) mail or correspondence; (c) sexual harassment; (d) discipline; (e) discrimination; (f) protection from harm.	299	
	divided by	The average daily population in the past 12 months.	653	0.5
	(2)	Number of inmate grievances (see [a] through [e] above) decided in favor of inmates in the past 12 months.	0	
	divided by	The total number of grievances filed in the past 12 months.	11321	0
	(3)	Total number of inmate court suits alleging violation of inmate rights filed against the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(4)	Number of inmate court suits alleging violation of inmate rights decided in favor of inmates in the past 12 months.	0	
	divided by	The total number of inmate suits filed in the past 12 months.	1	0
6B		Inmates are treated fairly.		
	(1)	Number of inmate grievances regarding discrimination in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(2)	Number of inmate grievances regarding discrimination resolved in favor of inmates in the past 12 months.	0	
	divided by	The total number of inmate grievances filed regarding discrimination in the past 12 months.	0	0
	(3)	Number of grievances resolved in favor of inmates in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(4)	Number of grievances resolved in favor of inmates in the past 12 months.	0	
	divided by	The total number of inmate grievances filed in the past 12 months.	11321	0
	(5)	Number of court malpractice or tort liability cases found in favor of the inmate in the past 12 months.	0	
	divided by	The number of court malpractice or tort liability cases in	0	0

		the past 12 months.		
6C		Alleged rule violations are handled in a manner that provides inmates with appropriate procedural safeguards.		
	(1)	Number of disciplinary incidents resolved informally in the past 12 months.	5	
	divided by	The average daily population in the past 12 months.	653	0.008
	(2)	Number of formal inmate disciplinary decisions that were appealed in the past 12 months.	37	
	divided by	The total number of disciplinary decisions made in the past 12 months.	891	0.04
	(3)	Number of appealed disciplinary decisions decided in favor of the inmate in the past 12 months.	18	
	divided by	The total number of disciplinary decisions made in the past 12 months.	891	0.02
	(4)	Number of grievances filed by inmates challenging disciplinary procedures in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(5)	Number of disciplinary-related grievances resolved in favor of the inmate in the past 12 months.	0	
	divided by	The total number of disciplinary-related grievances filed in the past 12 months.	0	0
	(6)	Number of court suits filed against the facility regarding discipline in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
	(7)	Number of court cases regarding discipline decided against the facility in the past 12 months.	0	
	divided by	The total number of court decisions regarding discipline decided in the past 12 months.	0	0
	(8)	Number of rule violations in the past 12 months.	522	
	divided by	The average daily population in the past 12 months.	653	0.8
	(9)	Number of inmates terminated from the facility due to rule violations in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	653	0
6D		Inmates take responsibility for their actions.		
	(1)	Number of inmates released in the past 12 months who made regular payments toward their restitution obligations.	n/a	
	divided by	The number of inmates who had restitution obligations in the past 12 months.	78	n/a
	(2)	Number of inmates who satisfy their court cost/fines obligations in the past 12 months.	78	
	divided by	The number of inmates who had court cost/fine obligations in the past 12 months.	78	1
	(3)	Total amount of restitution paid by inmates in the past 12 months.	58,187.16	
	divided by	The average daily population in the past 12 months.	653	89.11
	(4)	Total number of hours of community service donated by inmates in the past 12 months.	39198	
	divided by	The average daily population in the past 12 months.	653	60.03
	(5)	Total number of inmates who participated in restitution in the past 12 months.	n/a	
	divided by	The total number of inmates housed in the past 12	8326	n/a

		months.		
	(6)	Total number of inmates who participated in community service work in the past 12 months.	50	
	divided by	The total number of inmates housed in the past 12 months.	8236	0
	(7)	Total number of inmates who participated in victim awareness programs in the past 12 months.	0	
	divided by	The total number of inmates housed in the past 12 months.	8236	0
	(8)	Total amount of restitution paid by inmates in the past 12 months.	236,325.81	
	divided by	The total number of inmates housed in the past 12 months	8236	28.69
	(9)	Total number of hours delivered by inmates who participated in community service work in the past 12 months.	39198	
	divided by	The total number of inmates housed in the past 12 months.	8236	4.75
7A		The facility operates as a legal entity.		
		NONE		
7B		Staff, contractors, and volunteers demonstrate competency in their assigned duties.		
	(1)	Total number of years of staff members' education as of the end of the last calendar year.	2068	
	divided by	The number of staff at the end of the last calendar year.	153	13.52
	(2)	Number of staff who left employment for any reason in the past 12 months.	31	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	153	0.2
	(3)	Total number of credit hours in course relevant to their facility responsibilities earned by staff participating in higher education in the past 12 months.	39	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	153	0.3
	(4)	Number of professional development events attended by staff in the past 12 months.	15	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	153	0.1
7C		Staff, contractors, and volunteers are professional, ethical and accountable.		
	(1)	Number of incidents in which staff was found to have acted in violation of facility policy in the past 12 months.	3	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	153	0.02
	(2)	Number of staff terminated for conduct violations in the past 12 months.	4	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	153	0.03
	(3)	Number of inmate grievances attributed to improper staff conducts which were upheld in the past 12 months.	4	
	divided by	The number of inmate grievances alleging improper staff conduct filed in the past 12 months.	9	0.4
	(4)	Number of inmate grievances attributed to improper staff conduct which were upheld in the past 12 months.	0	
	divided by	The average daily population for the past 12 months.	653	0

	(5)	Where staff is tested, the number of staff substance abuse tests failed in the past 12 months.	0	
	divided by	The number of staff substance abuse tests administered in the past 12 months.	0	0
	(6)	Number of staff terminations for violation of drug-free work policy in the past 12 months.	0	
	divided by	The number of staff terminations in the past 12 months.	5	0
	(7)	The average number of physicians employed in the past 12 months.	2	
	divided by	The number of physician positions authorized in the past 12 months.	1	2
	(8)	The average number of nurses employed in the past 12 months.	40	
	divided by	The number of nurse positions authorized in the past 12 months.	14	2.9
	(9)	The average number of mid-level health care practitioners employed in the past 12 months.	2	
	divided by	The number of mid-level health care practitioner positions authorized in the past 12 months.	2	1
	(10)	The average number of ancillary health care staff employed in the past 12 months.	3	
	divided by	The number of ancillary health care staff positions authorized in the past 12 months.	3	1
7D		The facility is administered efficiently and responsibly.		
	(1)	Net amount of budget shortfalls or surplus at the end of the last fiscal year (budget less expenditures).	(\$139,140.00)	
	divided by	The budget for the past 12 months.	\$3,663,251.00	0.04
	(2)	Number of material audit findings by an independent financial auditor at the conclusion of the last audit.	0	
		NONE		
	(3)	Number of grievances filed by inmates regarding their records or property in the past 12 months.	90	
	divided by	The average daily population in the past 12 months.	653	0.14
	(4)	Number of inmate grievances (records/property) decided in favor of inmates in the past 12 months.	0	
	divided by	The total number of inmate grievances (records/property) in the past 12 months.	90	0
	(5)	Number of objectives achieved in the past 12 months.	11	
	divided by	The number of objectives for the past 12 months.	11	1
	(6)	Number of program changes made in the past 12 months.	4	
	divided by	The number of program changes recommended in the past 12 months.	0	0
	(7)	Number of problems identified by internal health care review that were corrected in the past 12 months.	0	
	divided by	The number of problems identified by internal health care review in the past 12 months.	0	0
7E		Staff are treated fairly.		
	(1)	Number of grievances filed by staff in the past 12 months.	0	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	153	0
	(2)	Number of staff grievances decided in favor of staff in the past 12 months.	0	

	divided by	The total number of staff grievances in the past 12 months.	0	0
	(3)	Total number of years of staff members' experience in the field as of the end of the last calendar year.	676	
	divided by	The number of staff at the end of the last calendar year (e.g. average number of years experience).	153	4.42
	(4)	Number of staff termination or demotion hearings in which the facility decision was upheld in the past 12 months.	2	
	divided by	The number of staff termination or demotion hearings requested in the past 12 months.	2	1
7F		The facility is a responsible member of the community.		
	(1)	Total number of hours of volunteer service delivered by members of the community in the past 12 months.	1144	
	divided by	The average daily population of inmates in the past 12 months.	653	1.75
	(2)	Total number of individual community members who provided voluntary service in the past 12 months.	123	
	divided by	The average daily population of inmates in the past 12 months.	653	0.2
	(3)	Total number of complaints filed by media regarding access to information in the past 12 months.	0	
	divided by	The average daily population of inmates in the past 12 months.	653	0
	(4)	Total number of positive statements made by media regarding the facility in the past 12 months.	0	
	divided by	The average daily population of inmates in the past 12 months.	653	0
	(5)	Total number of complaints from the community in the past 12 months.	0	
	divided by	The average daily population of inmates in the past 12 months.	653	0
	(6)	Total number of hours of community service work delivered by inmates in the past 12 months.	39198	
	divided by	The average daily population of inmates in the past 12 months.	653	60.03

**COMMISSION ON ACCREDITATION FOR CORRECTIONS
PANEL ACTION REPORT**

John B. Hynes Veterans Memorial Convention Center
Boston, MA

Saturday, August 3, 2019

Agency Name: Cherokee Sheriff's Office
Facility Name: Cherokee Sheriff's Office Adult Detention Center
Facility Location: Canton, GA

Agency Representatives: Peter Parangelo
Major Bill Smith, Jail Administrator
Irene Ruiz
Captain Daniel Higgins
Lisa Plumb, Accreditation Asst.

Panel Members: Michael Wade, Chairperson
Stephanie Collins
Debra Inglis
Todd Thomas

Staff: Na'Jee Jordan

Panel Action

Result

Standards # 4-ALDF-2A-34	The request for waiver was denied and a Plan of Action was requested. The plan should be supplied to ACA staff within 30 days.
Standards # 4-ALDF-4D-22-3	The Appeal was denied and a Plan of Action was granted by the Commission. The Plan of Action should be submitted to ACA staff within 30 days.
Standards # 4-ALDF-4D-22-4	The Appeal was denied and a Plan of Action was granted by the Commission. The Plan of Action should be submitted to ACA staff within 30 days.
Standards # 4-ALDF-5A-04	Plan of Action Completed
Standards # 4-ALDF-5C-04	The request for a waiver was denied and a Plan of Action was requested. The plan should be supplied to ACA staff within 30 days.

Accreditation Panel Decision

Moved: Commissioner Collins

Seconded: Commissioner Inglis

Three-Year Accreditation: Yes

Accreditation Vote

Yes

No

Chairman Wade ✓

Commissioner Collins ✓

Commissioner Inglis ✓

Commissioner Thomas ✓

Final Tally

Mandatory 100%

Non-Mandatory 98.3%