

**COMMISSION ON ACCREDITATION FOR CORRECTIONS**  
**STANDARDS COMPLIANCE REACCREDITATION AUDIT**

Cherokee Sheriff's Office  
Cherokee County Adult Detention Center  
Canton, GA

May 2-4, 2022

**VISITING COMMITTEE MEMBERS**

Katherine Brown, Chairperson  
ACA Auditor

Ernest Umunna  
ACA Auditor

Maria Haynes  
Auditor

**A. Introduction**

The audit of the Cherokee Sheriff’s Office Adult Detention Center, Canton, GA was conducted on May 2-4, 2022, by the following team: Katherine Brown, Chairperson; Ernest Umunna, Member and Maria Haynes, Member.

**B. Facility Demographics**

Rated Capacity: 1146  
Actual Population: 562  
Average Daily Population for the last 12 months: 523  
Average Length of Stay: 30 days  
Security/Custody Level: Minimum - Maximum  
Age Range of Offenders: 18-78  
Gender: Male/Female  
Full-Time Staff: **163**  
**27** Administrative/Support, **127** Security

**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. 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.

Cherokee County is one of the fastest growing counties in Georgia. This Direct Supervision facility originally opened in 1989 and an expansion of the facility was constructed in 2002, and had a total of 225,000 SF. The newest expansion which was completed in 2021 provided an additional 110,915 SF. The capacity of the facility is rated at 583 beds which are in 21 separate housing units. The facility also has a full-service medical unit that houses 27 inmates who require either 24 hours medical treatment or continuous observation. The first day of the audit the inmate count was 552.



The expansion consists of precast concrete modular cells with structural precast walls and floors, load bearing and elevated cast-in-place concrete with 21 dayrooms specially designed for indirect supervision from elevated control towers and 3 exercise yards. This includes a security electronic system that was tied into Master Control room in the existing building. This system manages every door, camera, etc in the new building. Also the access roadway around the new and existing facilities was extended. Renovations also took place in the kitchen, staff dining area, laundry, visitation area, lobby and master control.

In the existing kitchen and staff dining area, equipment was cleaned and new equipment was added, essentially doubling what existed previously. Epoxy flooring was installed throughout the kitchen, new finishes including paint and acoustical ceiling tiles, new electrical outlets to service the added food service equipment, new lighting, new HVAC system including a secondary exhaust hood complete with ANSUL fire suppression, and new flooring, paint, ceiling and light fixtures in staff dining.

There was a complete replacement of the previous security system and upgraded the video visitation system by replacing analog cameras with HD Digital cameras. Along with this upgrade, AJAX remodeled and completed an addition at the existing visitation building.

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 facility is enclosed within a fourteen-foot chain link perimeter fence enforced with one row of razor wire. Three hundred eighteen cameras are strategically located throughout the facility and perimeter.

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."

This audit was conducted during the COVID-19 pandemic. All the practices and programs listed below were affected to some degree during this three-year audit cycle.

#### **D. Pre-Audit Meeting**

The team met on May 1, 2022, in Canton, to discuss the information provided by the Association staff and the officials from Cherokee County Adult Detention Facility.

The chairperson divided standards into the following groups:

Standards #1A-01 to 3A-02 Katherine Brown Chairperson

Standards #4A-01 to 5B-18 Ernest Umunna, Medical

Standards #5C-01 to 7G-01 Maria Haynes, Member

## **E. The Audit Process**

### **1. Transportation**

The team was escorted to the facility by Captain James Cox.

### **2. Entrance Interview**

The audit team proceeded to the office of Major Daniel Higgins. The team expressed the appreciation of the Association for the opportunity to be involved with Cherokee County Adult Detention Facility in the accreditation process.

Captain Irene Ruiz escorted the team to the Roll Call Room where the formal entry meeting was held.

The following persons were in attendance:

Major Daniel Higgins

Captain James Cox

Captain Irene Ruiz

Deputy William Foster-Fire Safety Officer

Sgt. Shelia Jackson-Programs Manager

Lisa Plumb-Accreditation Manager

Delina Long-Health Services Administrator for Correct Health

Jennifer Lowman

Gretchen Faust

Austin Price

The auditors introduced themselves and shared their background and experiences. It was explained that the goal of the visiting team was to be as helpful and non-intrusive as possible during the conduct of the audit. The chairperson emphasized the goals of accreditation toward the efficiency and effectiveness of correctional systems throughout the United States. The audit schedule was also discussed at this time.

The chairperson then re-affirmed from Major Higgins that there have been no consent decrees, class action lawsuits or adverse judgments against the Cherokee County Adult Detention Center. Finally, the chairperson advised Major Higgins, the team would keep him abreast during the entire audit. Also, debriefings would be conducted, with him and any staff he felt relevant, at the end of each day.

The chairperson also advised the facility how important it is to ensure staff are met and spoken to. The chair further went on to say if over the course of the next two days if there was anyone who they overlooked that the administration knows really wanted to speak with us to let her know and they would make sure they met with them. This is a team effort, and everyone needs to know they are a vital part in this process.

It was emphasized that the audit would be conducted in an open and transparent manner; that any problems would be identified as quickly as possible so that the facility would have an opportunity to respond. There would be a debriefing with the warden each evening regarding progress, as well as to address any issues that were observed that may not directly apply to standards, but which the institution might find helpful in enhancing their program. Requirements were discussed regarding support during the walk through, such as availability of keys, fire and safety officer, and individuals to take notes.

### 3. Facility Tour

The team toured the entire facility from 8:45 a.m. to 11:45 a.m. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Captain James Cox  
Captain Irene Ruiz  
Deputy William Foster-Fire Safety Officer  
Sgt. Shelia Jackson-Programs Manager  
Lisa Plumb-Accreditation Manager  
Jennifer Lowman  
Gretchen Faust  
Austin Price

Facility notices were posted throughout.

### 4. Conditions of Confinement/Quality of Life

During the tour, the team evaluated the conditions of confinement at the facility. The following narrative description of the relevant programmatic services and functional areas summarizes the findings regarding the quality of life.

#### **Security:**

All operations of the facility are conducted within the confines of the building walls. 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.

Random perimeter checks are also conducted four times per day at which time gates/locks are checked.

Professional Visitors and Inmate Visitors enter the facility through a security checkpoint manned by one to two security officers who require all visitors to pass through a metal detector/handheld metal detector after being approved for entrance and providing photo identification.

There are a total of 318 closed circuit television cameras 31 of which are outside and 14 in the recreation yards that record all movement and are monitored by the central control. These recordings are maintained for 60 to 90 days depending on movement.

There are two-way communications between the facility's 24-hour command center and the housing units via the telephone, intercom, and institutional radios. The institutional radios are equipped with a radio stress button.

All inmates' movement throughout the facility is controlled. The facility supervises the inmates utilizing indirect supervision. There is one officer in control and two on the floor. All rounds are recorded using a Pipe Button that the officer records when he starts the round and records the last cell checked.

All housing units are accessed from the main corridors by interlocking metal doors. Throughout the facility are numerous sally port control points. Central control can take over any of the pod control room panels.

Key control and accountability measures were found to be well within expected parameters. They use a Key Tracer system. Staff also have a magnetic key card that opens interior doors. All staff and inmates interviewed voiced they felt safe in the facility.

Tool control procedures and accountability measures were within expected parameters. Tools are classified into restricted and less restrictive. All tools are shadow board. Spot checking inventories and documentation did not reveal any discrepancies. Tools are signed out of maintenance however the maintenance staff did not have an inventory on the cart going into the housing units. The team recommended creating an inventory form for the cart. By the end of day one the form was created and put into place.

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.

The facility has a 14-man Detention Assistance Response Team (DART). They are required to attend 8 hours of training monthly to stay on the team. Each team member is equipped with a taser and pepper spray. They also have a pepper ball launcher and bean bag shotgun for use. Their goal is to use the least amount of force to control the situation.

Central control operates the main security doors, observe cameras, and monitor all fire and smoke detection alarms, internal radio transmissions, public address system and other mechanical and electrical systems.

Officer posts are located adjacent to the inmate living areas which allows officers to hear and interact with the inmates and promptly respond to emergency situations.

Logs and shift reports that record all activities were inspected and found to be up to date and accurate. There was proof in the logs as well as observation on the tour to show that supervisors make frequent rounds in the housing units. Inmates knew who the rank and file were and spoke to them openingly on the tour.

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

Inmates are assigned to housing locations based on a point-based classification system to ensure the separation of inmates based upon charges, mental and emotional stability, escape history, assaultive behavior, medical needs, age, gender, and the need to keep separate. The initial inmate classification is conducted in Intake-by-intake officers, the inmates are then classified by classification within 72 hours. Inmate's classification status is reviewed at appropriate time frames based on the changes in inmate behavior or circumstances.

The team found the security throughout Cherokee County Detention Center was well maintained by professional well-trained staff. Security staff demonstrated knowledge of post orders and emergency procedures. They work well as part of the unit team and do an outstanding job of interaction with the inmate population. Post orders are located in Power DMS which all staff have access to. The Post Orders provide clear, concise, and understandable instructions.

Special management inmates are housed separate from general population inmates. But have the same opportunities and living conditions as general population inmates.

All required checks based on the inmate's classification needs were documented. Staff assigned to the segregation unit have all completed their probationary period and are selected on their suitability to work with this type of inmate population. Medical is notified prior to the placement in segregation and provide assessment and review the inmates three times a day.

**Environmental Conditions:**

The temperatures in the facility were within normal comfort ranges. Temperatures are all thermostatic controlled. Noise levels throughout the facility were acceptable. Inmates are provided with appropriate clothing for cooler temperatures. Water temperatures were well within the appropriate ranges. All fixtures tested were in good working order. All housing areas had good ventilation with no noticeable collections of dust in the vent openings. The housing units had access to natural light through the use of small windows in the cells and larger windows in the dayroom area.

Each housing unit had appropriate number of sinks, showers and toilets easily accessible to the dorm detainees. There were multiple telephones in the housing units for the detainees to use.

**Sanitation:**

The team found the facility to be clean, neat and orderly throughout. Access to cleaning supplies and hygiene items is appropriate for the custody level of the inmate population. The staff appeared to be motivated to maintain the cleanliness of the facility. The individual cells in medical however need additional attention. The team suggested assigning an inmate orderly to clean the cells when the inmates come out for their hour out or sick call visits.

Chemicals are controlled and spot checking of inventories revealed no discrepancies. Chemicals for the washers and dishwasher are automatically dispensed and are stored in locked rooms not accessible by inmates.

A Preventative Maintenance plan is in place, which identifies equipment that is checked weekly, monthly, quarterly, and semi-annually. This includes ventilation, plumbing, lighting, fire, and safety systems.

A written housekeeping plan was developed and assigned sanitation areas of responsibility in accordance with ACA standards. Departments have implemented this plan and established an effective cleaning routine and are maintaining high levels of sanitation. The Safety Officer has sufficient cleaning supply inventory to meet high sanitation standards.

Cannon Termite and Pest Control is contracted to provide pest control services.



Mechanical and storage areas were well organized and maintained. Facility grounds were well maintained with no evidence of dumping or improper material disposal.

The facility complies with all applicable laws and regulations of the local and state inspecting bodies of the governing jurisdiction and there was documentation showing past deficiencies had been addressed and repaired and/or cleaned.

### **Fire Safety:**

The fire protection system consists of smoke detectors and sprinklers throughout the facility. An annunciation panel is located in central control to monitor the fire system. The auditors observed fire pull stations, fire exits, egress points, and evacuation routes, and air packs at appropriate locations. Fire extinguishers are fully charged, appropriately checked and available in all areas of the facility's compounds. Smoking is not permitted inside any of the facilities. Staff and inmates were familiar with fire evacuation procedures and review of paperwork demonstrated fire drills were accomplished at appropriate intervals and required weekly, monthly and annual inspections were accomplished. 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

Power for essential lighting and communication is provided by wall mounted battery powered units. Power ware 9170 Uninterruptable Power Systems (UPS) and generators located in the back of the facility maintain lighting, emergency equipment and required computers. Emergency equipment is being tested monthly and quarterly as required by the standards. There are three generators, two Cummins and one Spectrum.

Procedures for storage and accountability of flammable liquids are effectively managed throughout the complex. Hazardous materials are properly stored with safety data sheets readily available. Flammable cabinets are maintained in good order with inventory cards reflecting accurate amounts in each storage cabinet. Eye wash stations were present at appropriate locations.

The facility has established a routine program of weekly and monthly inspections by qualified departmental staff and Safety personnel.

The facility conforms to applicable federal, state and/or local fire safety codes. The last fire inspection was March 17, 2021, by Siemens Building Technologies State Fire Marshall, with no deficiencies noted.

All Star Fire Sprinkler Services conducted an inspection of the fire suppression system on December 20, 2021

## **Food Service:**

Food service operation is through an award contract with the Trinity Service Group and supervised by a Food Service Director who is responsible for the overall operation of the Food Service Department. There are two Food Service Supervisors. The Trinity staff employees are ServSafe certified. At the time of the audit, there were fifteen male inmates in the AM shift who assist in food preparations and five female inmates who assist in serving dinner meals. The average cost per meal for an inmate is \$0.532. The Cheney Brothers, FL is the primary vendor for food service.

The ADC does not have a dining hall, inmates are allowed to eat in their Units and utilizing four heated carts. Carts are plugged in one hour before transport to the Units. Breakfast is served from 6:30 a.m. to 7:40 a.m., lunch is served from 11:30 a.m. to 12:40 p.m. and dinner is served at 5:45 p.m. Menu is planned on a four-week cycle by a Trinity Registered Dietician. Types of diet includes pregnancy, youth, low sodium, DB2500, DB2300, renal and pre-diabetic. They provide two hot and one cold meals per day. Cold/hot holding temperatures are appropriate. The visiting committee team recommended additional food service temperature checks at the delivery point.

A registered dietician reviews the 2700 calorie, 28-day cycle menu annually. All meals were well prepared, included proper portions as well as appetizing, appealing, and prepared in a secure environment. Food was prepared using a cook-serve method. The meals were wholesome and nutritionally adequate. Meals for inmates in the segregation housing units were delivered on hot trays.

The facility provides both medically approved therapeutic and religious diets. At the time of the audit, there were prenatal-4, diabetic-8, cardiac, heart health and low sodium-4, bland-1, soft-1, youth 1, loaf-21, allergy-14, Kosher/Ramadam-8, vegan-1 high protein-6 and gluten-1. The diet handbook is incorporated as a part of the Departments' policy was on-hand and available for review. The ADC does not serve pork or fried food.

There are two operational coolers, two operational freezers and two operational dry storage rooms. Temperature records were maintained for freezers, coolers, and dry storage area. All products were stored within the acceptable temperature ranges.

Inmate workers serve as cooks, bakers, dishwashers, servers, and janitors. Inmate workers adhere to health and sanitation requirements such as wearing headgear within the food preparation or serving areas. Inmates are medically screened before working in food service.

The Food Service department was found to be clean and well organized with proper control of tools and toxic/caustic inventories.

Inmate workers that were contacted in the kitchen were knowledgeable of health and sanitation practices. The food storage facilities and dishwashing equipment were functioning within required temperatures. An inventory and accountability of all kitchen tools was checked. The 3-compartment sinks are labelled wash, rinse and sanitize. Sample meals are kept for 72-hours. Alternative diets choices are provided to the inmate population who are approved based on their religious preferences. Medical diets are also available to the inmate population. The visiting committee team recommended the acquisition of specific racks for the pots and sheet pans to ensure proper drying.

The ADC last food service inspection was on March 16, 2022, by the Georgia Department of Public Health and all the notable deficiencies were corrected. There are also monthly facility inspections. Vermin and pest control inspections are current and there is no evidence of reported infestation. There are one Ansul fire pull stations/systems and has current inspection. There is an accurate inventory of chemicals and tools.

The visiting committee team on the second day of the audit consumed a lunch meal consisting of Chicken Patty (1 Each), BBQ Beans (1 Cup), Cabbage and Carrots (1/2 Cup), Cornbread (1/48 Cut). Dressing Salad (1 Tbsp), Iced White Cake (1/48 Cut) and Beverage (1 Cup). The team found the meal to be tasty, reasonable portion size and temperature appropriate. Inmates interviewed were complimentary of food service.

### **Medical Care**

The review of health care at the ADC includes direct observation and review of local policies and written procedures, approved clinical protocols and review of medical records, as well as interviews with medical staffs and inmates.

Medical at the ADC are managed through an award contract with the Correct Health on October 1, 2020, and houses ambulatory medical, dental, and mental health services, and employs full-time, part-time, PRN and agency staff. The ADC is an intake and releasing facility and receives inmates some with a history of high-risk behaviors, mental health, and more likely to have chronic illnesses and infectious diseases. The ADC medical is also accredited by the National Commission on Correctional Health Care on February 7, 2020.

The ADC medical has a Physician and an Interim Health Services Administrator. The working relationship between medical, mental health, dental, programs, and security is good.

The Correct Health Mission: “To provide high quality, cost-effective, comprehensive healthcare inside the walls of correctional facilities.”

Medical staff are well trained and caring professionals. Inmates are complimentary of medical services. There are peer review evaluations, access to care meeting, CQI and MAC meetings.

Upon admittance to the ADC, inmates receive an Inmate Orientation Handbook in English and Spanish to aid the individuals in their adjustment to correctional setting. This documentation contains information regarding medical, mental health and dental services. Information in the handbook also includes medical and sick call procedures, general information on medical, copay, diets, medication administration, keep on person (KOP) medication and over the counter (OTC) medication. Other educational guides are utilized to inform inmates about communicable diseases, including COVID-19, blood borne pathogens and safety when working with body fluids and heat related illness and prevention. The ADC medical utilize interpreter and language lines services.

Medical at the ADC is staffed with one FT Interim Health Services Administrator, one FT Registered Nurse/Nurse Practitioner, one PT Physician (twice per week), two FT Registered Nurses, two FT Agency Registered Nurses, one PRN Registered Nurse, two FT Licensed Practical Nurses, six FT Agency Licensed Practical Nurses, one PRN Agency Licensed Practical Nurse and two FT Administrative Assistants. Staff recruitment and retention continues to be a challenge.

Medical at ADC operate two 12-hour shifts from 6:00 a.m. to 6:00 p.m., and from 6:00 p.m. to 6:00 a.m. (Sunday to Saturday). There are nursing and provider on call schedule.

Medical Services at the ADC are centralized. There are three examination rooms (medical-2 and medical observation area-1). There is a medical waiting room with access to water, bathrooms, education materials, health pamphlets/posters and a TV. The medical auditor recommended that the TV in the medical waiting area to be incorporated into the wellness program by showing medical related channels or videos.

The ADC is equipped with twenty AEDs, two EKGs (read on/offsite), six emergency or jump bags, twenty portable oxygen cylinders inspected and serviced by the Airgas, two oxygen concentrators inspected and serviced through the Medical Maintenance and three stretchers with straps and neck supports.

The ADC is an ADA compliant facility and has an ADA Coordinator. There are ADA cells and showers, accessible TTY phones, volume control phones, elevator, and accessible day room tables. Physical Therapy service is provided offsite.

The ADC maintains affiliation agreements to provide emergency room and inpatient medical services with the following hospitals: 1) Northside Hospital Cherokee, Canton, GA (ER). 2) WellStar Kennestone Hospital, Marietta, GA.

The ADC has an agreement with the Cherokee County Fire Department and Cherokee County EMS/Fire (5 minutes, 1.7 miles) in the event of a medical emergency. Facility staff does non-emergent medical transportation to either a hospital facility or community provider for offsite consultations. Drills are performed regularly to evaluate medical emergency responses. Nursing staffs have Basic Life Support (BLS) certifications. Master SDS is maintained in medical. Staffs are trained on CPR and First Aid and have current certifications. Hand sanitizers dispensers and eye wash stations are located throughout medical and other areas. Sanitation and housekeeping provided using inmate help and are trained on biohazards. There are first aid and blood borne pathogen kits. The ADC has three medical evacuation chairs located in various floors of the facility.

Sick calls are provided five days per week for the General Population (GP) and the Special Management Housing (SMU). Sick calls are submitted through the Kiosk system. Average monthly sick calls are 97. The medical reviewer observed the sick call process and found the process timely and organized. Medical requests are triaged daily; any patient with symptoms is seen within one day. Inmates are provided with periodic and age specific medical exams. Telemedicine is not available at the ADC. Optometry services are provided offsite through the Thomas Eye Group.

There were four pregnant females during the review. Pregnant females are provided with bottom bunks, pre-natal vitamins, snacks, and extra or thicker mattresses during their third trimester weeks. OBGYN services are provided offsite. The ADC has a vacant position for a midwife.

Health care service fees of \$5 is accessed for each inmates-initiated visit. There are no health care service fees for follow-ups, chronic care, mental health or indigency. There are no health care service fees for Covid-19 related symptoms. The quality and level of care between the inmates are the same. No inmate is denied health care services.

The average monthly chronic care inmates, excluding mental health, at the time of the review was 53. Specialty clinics or outside consults are approved by the Health Authorities and reviewed by the Utilization Review Committee and referred within 30 days and depending on the urgency. There were 8 insulin and 17 non-insulin dependent diabetics at the time of the review. Insulin dependent diabetic inmates are provided with midnight snacks. There is a better management of hypertension and A1C level. The ADC has a twenty-one bed medical housing unit with cameras.

Medical grievance is through the Kiosk system in the Units and reviewed by the Interim Health Services Administrator within 1-3 days. There is a grievance coordinator. The facility averages two substantiated medical grievances per month for medical co-pays, medication refills and timeline for specialty clinics (OCM Std. 4C-20).

Medical diets are coordinated with food service. The health authority approves medically necessary diets. The food service maintains a daily log. The medical reviewer examined the manual during the audit and found it current. The manual is examined regularly by the health authority for updates. There are approximately 38 medical diets at the time of the review which includes clear liquid, pureed, mechanical soft, cardiovascular, ADA, diabetic with no concentrated sweets and high calorie.

The ADC medical has a draw only lab. Specimens are collected on site. Blood is spun and sent out for analysis to the LabCorp, and reports are received online/fax/phone within 24-48 hours. STAT labs are available through the LabCorp and the Northside Hospital Cherokee, Canton, GA (ER) within 2-4 hours and reports are received online within 2-4 hours. The average monthly inmates' lab test is 55.

The MCF Environmental Services, Ellenwood, GA is contracted to pick up the biohazard and sharps wastes for proper disposal as verified by manifests on hand. The medical auditor checked the specimen refrigerator temperature log and found the records accurate.

Routine radiology services are provided through an award contract with the Global Diagnostics and results received online within one to two days. They also perform ultrasounds. Advanced radiology services such MRIs and CT scans are provided through the Northside Hospital Cherokee, Canton, GA. They also provide emergency x-ray services. EKGs are performed and read on/offsites.

The ADC medical has an Infectious Control Nurse. There is a plan for the management of communicable diseases including education on prevention, diagnosis, treatment, and isolation. A log is maintained regarding positive lab results for communicable diseases. Inmates needing higher level of care are transported to a contracted hospital. The ADC medical has four negative pressure rooms. The negative pressure rooms were last inspected by the Air Data, Inc., Conyers, GA on April 22, 2022. Inmates are provided TB skin tests and annual tests afterwards. Average monthly TB tests are 125. There were two needle sticks during the audit period, and employees were provided with additional training and non-judgmental counseling (OCM Std. 4C-32).

A review of COVID-19 vaccination statistics/data as of May 3, 2022, as provided by the facility indicated that vaccinations are arranged by the jail admin. staffs and not through medical and no additional information was provided. There were no Coronavirus (COVID-19) precautions in place in the facility to include facial masks in congregate and medical areas. However, there are hand sanitizer dispensers in public areas. There were no units under medical quarantine due to Covid-19 at the time of the review. Units Green 4 & 7 are designated males quarantine units and Units Violet 1 & 6 are designated for females.

The ADC medical has a dispensary. Medications are provided through the Diamond Pharmacy and delivered through FedEx. Stock, OTC, KOP (creams), and patient specific medications are maintained. The backup pharmacy is the local Walgreens. The dispensary is audited by the Diamond Pharmacy Pharmacist quarterly and the facility management team. The medical auditor found the medication secured, and a random inventory count on sharps and controlled medications was accurate. The dispensary has a refrigerator for the storage of insulin. The medical auditor found the temperature log and inventory current. Basic medical supplies and materials are obtained through the McKesson Medical. Inmates are provided with 7-day supply of medications including medications on cart upon release and connected with the community resources for further assistance through the discharge process.

The disposal of expired, unused, discontinued, recalled, over stocked medications including over-the-counter (OTC) medications (pills and liquids), and narcotics is arranged through the Diamond Pharmacy and the use of the Rx Destroyer. There were some expired medications and discontinued medications found in the facility during the audit ready for pickup. Records are maintained on disposal process.

Medications are stored in medication rooms and secured behind double door locks. Medications are administered two times per day, 7 days/week for GP and SMU inmates. Prior to giving medications, an inmate's identification is confirmed, and mouth cavities checked after administration. The medical auditor observed medication administrations on the second day of the audit and found the process organized and timely. There is a separate diabetic line two times per day in the unit. All no-shows or refusal to medications are documented and /or referred.

The auditor checked the electronic (Sapphire eMAR) Medical Appraisal and Revalidation System (MARS) and Narcotic logbooks for signatures and missed doses, and found the records correct. There were 15 inmates on control and 300 on prescription medications at the time of the audit. Some medications are crushed per doctor's specification. The ADC has a distribution list of over the counter (OTC) medications and approved by the Health Authority and the Assistant Jail Administrator.

Dental service at the ADC is supported by one private contracted PT Dentist. Dental service at the ADC is provided 1-day per week on Wednesday from 9:00 a.m.-3:00 p.m. (20-30 patients). The average number of inmates seen monthly is 50. There is a medical protocol in case of an emergency. Dental services include fillings, extractions, exams, cleaning, oral cancer screenings and hygiene education. The inmates' access dental health services through the sick call process-Kiosk system.

The medical reviewer reviewed the license, registration, records and random inventory of sharps and instruments and found them accurate. The medical

reviewer recommended that all facility dental instruments and sharps to be inventoried and secured. The contracted dentist brings in his own instrument. The dental area is clean. Dental is equipped with one analog dental bitewing x-ray machine and one dental chair. Dental chair traps are cleaned weekly when in use. Sterilization is monitored using the EMS Sterilization Monitoring Service and processed monthly for spore testing to monitor its efficacy. Reports were reviewed and indicated fully functioning sterilization of instruments to prevent cross contamination and/or postoperative infections.

Dental supplies and equipment services are through the Henry Schein. There is no record of dental dosimetry or x-ray equipment inspection. The dental compressor is not equipped with the dental amalgam separator to prevent contamination of local water sources. The medical reviewer recommended dental dosimetry and x-ray equipment inspection and the installation of dental amalgam separator.

Mental health service at the ADC is supported by one PRN Corporate Mental Health Director, two PT Psychiatrists and one PT Licensed Practical Counselor. There is one FT Licensed Practical Counselor vacancy position. They provide services from 9:00 a.m. to 5:00 p.m. (Mon-Fri) and on call. There is a psychiatrist visit once per week on Wednesdays.

There are approximately 295 inmates seen monthly by mental health staff. All suicide ideations are referred to Mental Health. Suicidal inmates are housed separate, monitored, and observed 1:1. There are three self-harm observation rooms with cameras, including a padded cell. At the time of the review, there were 71 inmates on anti-psychotic and 112 on anti-depressant medications. Daily rounds are conducted in the Special Management Housing. Inmates are evaluated regularly if clinically indicated and based on severity level. Inmates requiring more intense treatment are referred to the Georgia Regional Hospital-Atlanta (GRHA) Atlanta, GA. The GRHA offers adult mental health services, forensic program services, and rehabilitative services. There are available security garments for inmates on self-harm observation.

### **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.

Indoor recreation includes access to televisions, board games, cards and checkers.

The segregation units have recreation opportunities outside for one hour each day.



### **Religious Programming:**

Inmates have the opportunity to participate in practices of their religious faith that are deemed essential by the faith's judicatory, limited only by documentation showing a threat to the safety of persons involved in such activity itself or disruption of order in the facility.

The chaplain has the qualifications of clinical pastoral education and endorsement by the appropriate religious certifying body. The chaplain has access to all areas of the facility to minister to inmates and staff. There is one Chaplain Assistant that is available Tuesday/Thursday/Friday. All religious diets are approved by the chaplain and forwarded to the kitchen.

When a religious leader of an inmate's faith is not represented through the chaplain's staff or volunteers, the chaplain assists the inmate in contacting a member of that faith.

Due to Covid volunteers have not been allowed to come in to conduct religious services but the Chaplain makes rounds of the housing units and provides religious guidance. Prior to Covid there were 45 religious volunteers. The facility is slowly opening the facility up.

### **Inmate Work Programs:**

The facility has an inmate work assignment plan that provides for inmate labor in kitchen, laundry and janitorial. There are a variety of work assignments that afford inmates an opportunity to develop good work habits and attitudes that can be applied to jobs after their release.

All sentenced inmates are required to work and pretrial and un-sentenced inmates may volunteer for work assignments.

### **Academic and Vocational Education:**

Due to the short length of stay the facility offers GED, ESL English as a Second Language, Creative Writing, and a Serve Safe Program.

### **Social Services:**

The facility prior to covid offered AA and NA classes, which hopefully will start back up.

The facility has Chirps which allows inmates to send text, each text cost 10 cents.

Commissary services are provided by contract with Legacy. Inmates may order commissary weekly with a \$80.00 weekly limit not including hygiene items, as long as funds are available on their account. All funds generated from the commissary are considered generated revenue and must be utilized for the sole benefit of the inmates. The team did not receive any complaints about the commissary services being provided.

All inmates are allowed to send and receive mail. All incoming and outgoing mail is subject to search for contraband. Legal mail was being opened in the presences of the inmate for inspection. An appropriate system of mail rejection is in place. Books must come from the publisher and periodicals must receive pre-approval. Requests for Bibles and other religious texts are approved by the Chaplain. Indigent inmates received the appropriate number of items allowing them the opportunity to send letters to their families

**Visitation:**

Visitation with family and friends is encouraged. All visitors over the age of 18 must present a state or government issued identification card. Visitors are required to check in with the Visitation Center deputy upon their arrival. There are 25 video visitation terminals and 6 attorney booths. All on-site visits must be scheduled and approved by midnight the day prior to an inmate's scheduled visitation day.

Each inmate is allowed only one on-site visit per assigned visitation day. Visitation is limited to two adults and two children. Visits are only allotted thirty (30) minutes.

Off site Video Visitation is set up through iwebvisit and can be used for a fee. These visits are limited to three (3) fifteen (15) minute sessions daily and must take place during the inmate's free time hours via the kiosk.

Attorneys are permitted unlimited number of visits with their clients between the hours of 0700-1030 and 1200-2200. Attorneys can set up an account with iwebvisit to speak with their clients.

**Library Services:**

A qualified staff member coordinates and supervises library services. The Leisure Library offers a wide variety of fiction and non-fiction books for inmates to check out. All books are barcoded and checked out to the inmates. The inmates go on the kiosk to request books. They are allowed two (2) books a week. The library provides inmates access to educational, religious, recreation and leisure reading. Library books are donated to the facility through a wide variety of community resources that include individuals, church groups and public library.

Law Library services are provided using Chega Net Law where they can request legal research via the kiosk. The company conducts the research and sends the material to the inmate via US Postal Service.

### **Laundry:**

The facility has a centralized laundry area is well designed and well equipped to provide adequate clean clothing to the population. Inmates are trained in the safety aspects of laundry procedures and the use of the machines.

The laundry operates seven days a week with two shifts each day. Male inmates work during the day and female work on night shift. There are seven inmates and one staff member assigned to the laundry. The laundry is equipped with four 70lbs and two 75lbs washers. There are six commercial dryers.

The chemicals are stored in a secured room and dispensed automatically. Materials safety data sheets for these chemicals the laundry and are readily accessible if needed. There is sufficient stock of clothing and linen to supply the inmate population. Linens are exchanged weekly. All inmates observed had clean clothing and linens, with all being in good repair.

## **F. Examination of Records**

Following the facility tour, the team proceeded to the Lieutenants office to review the accreditation files and evaluate compliance levels of the policies and procedures. The facility has no notices of non-compliance with local, state, or federal laws or regulations.

### **1. Litigation**

Over the last three years, the facility had no consent decrees, class action lawsuits or adverse judgments.

### **2. Significant Incidents/Outcome Measures**

The audit team reviewed and discussed the Significant Incident Summary and Outcome Measures worksheet and found the numbers reflected in the report are consistent with the overall mission and security level of the facility. The data reported on the SIS indicated low numbers for each category; the reported numbers are considered reasonable based on inmate demographics. The data reported on the Outcome Measures also appeared reasonable for the reporting period. The one other listed on the Significant Incident Summary was a natural cause death, inmate had a heart attack.

The medical auditor reviewed the Outcome Measure (OCM) reports for the audit period with the administrative team. There were six deaths during the audit period (2019: two due to injury and two unexpected), (2020: one due to suicide and one unexpected), There were forty-one suicide attempts during the audit period.

The analyses of the Outcome Measures (OCM) are as follows:

1. Std. 4C (5): Number of Hepatitis C positive inmates in the past 12 months of the review period was 145 in 2019, 28 in 2020 and 25 in 2021, and with the average daily population in the past 12 months of the audit period of 529.13. The number suggested prior lifestyle, disenfranchised population, intravenous drug users and better tracking system and testing. The ADC is an Intake facility and inmate arrives with the diagnosis.
2. Std. 4C (6): Number of HIV-positive inmates in the past 12 months of the review period was 128 in 2019, 14 in 2020 and 34 in 2021, and with the average daily population in the past 12 months of the audit period of 529.13. The number suggested prior lifestyle, disenfranchised population, and intravenous drug users. The ADC is an Intake facility and inmate arrives with the diagnosis. The ADC participates in the 340b HIV program and is testing more
3. Std. 4C (8): Number of inmates with an individualized services/treatment plan for a diagnosed mental disorder (excluding sole diagnosis of substance abuse) at a given point in time during of the audit period was 180 in 2019, 183 in 2020 and 127 in 2021, and with the average daily population in the past 12 months of the audit period of 529.13. The ADC is an Intake facility and houses inmates with adjustment and situation disorders with anxiety.

The visiting committee medical reviewer concurs with the responses.

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>
Intake	Officer Goggins D/S Foster Teresa Fisher M. Davis Captain Cox

Booking	Captain Ruiz Sarah Bralett from Records and ID Deputy Davis – count clerk
Property	Kristen Murphy
Medical	Sharon Thompson, LPN-Agency Susie Hatfield, RN, NP Delina Long, Interim Health Services Administrator, LPN Julie Kiker, RN Carlton Firestone, Admin. Assistant Tabitha Jenkins, Admin. Assistant Darien Bunch, LPN Charles Anyamkpa, LNP Heather Sims, Corporate Mental Health Director Steve Kissinger, Psychiatrist Laurie Castelo, LPC Diana Santiago, Psychiatrist Shellina Jenkins, LPC Stephen Mitchell, Dentist Sara Clowers, Global Diagnostic-x-ray vendor.
Laundry	T. Raiford
Kitchen	Ms. Felicia Massie Kenny – Kitchen Manager
Programs	Chaplain Darrel James Sgt. Jackson
Maintenance	Lt. Donley
Inmate Funds	JoAnee Chambers – Financial Manager Stephen Chambers
Violet Control	Deputy Caudill
Green Pod	Deputy Dean
Green Tower	Corporal Mitchell's
Master Control	Deputy McNamara
Human Resources	Beth Stringer
Training	Corporal Josh Wilkins Corporal Jeremy Herrin Corporal John Gunning
Chemical Storage	Courtney Jeffries
Classification	Officer Zuranta

4. Shifts

a. Day Shift

The team was present at the facility during the day shift from 0800 to 1800. During the first day we toured the facility and visited with many staff as we moved about the institution visiting all departments.

Staff were extremely positive about the facility and were anxious to visit with the audit team regarding their work areas. Staff reported they are supported by the administration and have direct access to their supervisor when needed. All staff had participated in a fire drill during the past month and knew what to do in case of a fire.

b. Night Shift

The team was present at the facility during the evening shift from 5:45 p.m. to 6:30 p.m. During the evening the audit team attended the shift briefing and had an opportunity to visit with staff. The officers reported they enjoyed working at the facility and felt it was a good place to work. Most of them were planning on making corrections a career and remaining in the area. Again, all staff reported they had participated in a fire drill during the past month.

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

The team reviewed the status of standards previously found non-compliant, for which a waiver was not granted, and found the following:

4-ALDF 2A-34 – In compliance with this standard due to opening the new housing unit.

4-ALDF 4D-22-3 – Incompliance now mental health screenings are completed within 72 hours.

4-ALDF-4D-22-4 - Incompliance now mental health screenings are completed within 72 hours.

4-ALDF- 5A-04 – Incompliance now with drug and alcohol programs

4-ALDF- 5C-04 – Incompliance now due to new housing unit opening.

**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

Approximately 31 inmates were interviewed and all of them said they felt safe in this facility, stated they were able to go out to recreation and that medical was very good at this facility. They said that they were treated fairly by staff, and their basic needs, including basic medical needs were being met. They have access to telephones, mail and the library. Inmate morale appeared to be fair, and they were cooperative and respectful during the audit. Staff was observed interacting well with inmates. There were no major or consistent complaints received by the audit team. The inmates stated the facility was safe and they were treated by staff with dignity. The inmates indicated the medical staff was attentive to their needs.

## 2. Staff Interviews

Approximately 44 staff were interviewed, and they stated they liked working at this facility and thought highly of the supervisors. They were polite, cooperative, and conducted themselves in a professional manner. There was a normal working relationship between the departments and communication flowed freely. Gender and ethnic diversity were good, and morale also appeared to be good. All staff was well versed on fire evacuation procedures. Staff was knowledgeable in their post orders and job duties. All of them reported they had received the required 40 hours of annual training and believed they were receiving adequate training to perform the required duties. They were all aware ACA was going to be conducted at the jail.

### **H. Exit Discussion**

The exit interview was held at 1100 in the rollcall room with the Sheriff Frank Reynolds and 15 staff in attendance.

The chairperson explained the procedures that would follow the audit. The team discussed the compliance levels of the mandatory and non-mandatory standards and reviewed their individual findings with the group.

The chairperson expressed appreciation for the cooperation of everyone concerned and congratulated the facility team for the progress made and encouraged them to continue to strive toward even further professionalism within the correctional field.

COMMISSION ON ACCREDITATION FOR CORRECTIONS  
AND THE  
AMERICAN CORRECTIONAL ASSOCIATION

**COMPLIANCE TALLY**

<b>Manual Type</b>	<b>Adult Local Detention Facility 4<sup>th</sup> Edition</b>	
<b>Supplement</b>	2016 Standards Supplement	
<b>Facility/Program</b>	Cherokee County Adult Detention Center	
<b>Audit Dates</b>	May 2-4, 2022	
<b>Auditor(s)</b>	Katherine Brown, Chairperson Maria Haynes, Member Ernest Umunna, Member	
	<b>MANDATORY</b>	<b>NON-MANDATORY</b>
Number of Standards in Manual	61	323
Number Not Applicable	1	26
Number Applicable	59	297
Number Non-Compliance	0	0
Number in Compliance	59	297
Percentage (%) of Compliance	100%	100%
!      Number of Standards <i>minus</i> Number of Not Applicable <i>equals</i> Number Applicable		
!      Number Applicable <i>minus</i> Number Non-Compliance <i>equals</i> Number Compliance		
!      Number Compliance <i>divided by</i> Number Applicable <i>equals</i> Percentage of Compliance		



COMMISSION ON ACCREDITATION FOR CORRECTIONS

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

COMMISSION ON ACCREDITATION FOR CORRECTIONS

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

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

**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-2A-39**

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-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-10**

ANY STUDENTS, INTERNS, OR RESIDENTS DELIVERING HEALTH CARE IN THE FACILITY, AS PART OF A FORMAL TRAINING PROGRAM, WORK UNDER STAFF SUPERVISION COMMENSURATE WITH THEIR LEVEL OF TRAINING. THERE IS A WRITTEN AGREEMENT BETWEEN THE FACILITY AND TRAINING OR EDUCATIONAL FACILITY THAT COVERS THE SCOPE OF WORK, LENGTH OF AGREEMENT, AND ANY LEGAL OR LIABILITY ISSUES. STUDENTS OR INTERNS 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 utilize Students, interns, or residents in the delivery of health care services.

**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-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 Correctional Facilities, Juvenile Detention Facilities, Adult Community Residential Services, and Small Juvenile Detention Facilities.

Facility Name: Cherokee County Adult Detention Center Reporting Period: 1/2021 to 12/2/2021

Incident Type	Months	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEP	OCT	NOV	DEC	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	1	0	0	0	0	0	1
	Offender/Staff	0	0	0	0	0	0	0	0	0	0	0	0	0
Suicide		0	0	0	0	0	0	0	0	0	0	0	0	0
Non-Compliance with Mandatory Standard <sup>a</sup> *		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		0	0	0	0	0	0	0	0	0	0	0	0	0
Other*		1	0	0	0	0	0	0	0	0	0	0	0	1

*\*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 Adult Detention Center  
 Date 1/2021 – 12/2021  
 Number of Months Data Collected

<b>ALDF Outcome Measure Worksheet</b>				
<b>1A</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Calculated O.M</b>
		<b>The community, staff, contractors, volunteers, and inmates are protected from injury and illness caused by the physical environment.</b>		
	(1)	Number of worker compensation claims filed for injuries that resulted from the physical environment in the past 12 months.	3	
	divided by	Average number of Full-Time Equivalent (FTE) staff positions in the past 12 months.	162	0.02
	(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.	526.9	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.	6314	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.	526.9	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.	6314	0
	(6)	Number of sanitation or health code violations identified by external agencies in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	526.9	0.002
	(7)	Number of health code violations corrected in the past 12 months.	1	
	divided by	The number of health code violations identified	3	

		in the past 12 months.		0.3
	(8)	Number of inmate grievances related to safety or sanitation found in favor of inmates in the past 12 months.	719	
	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.	0	
	divided by	The number of fire code violations cited by jurisdictional authority in the past 12 months.	0	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.	526.9	0
	(11)	Number of inmate injuries (other than by fire) requiring medical treatment in the past 12 months.	0	
	divided by	The average daily population of inmates in the past 12 months.	526.9	0
	(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.	526.9	0
	(13)	Number of staff injuries (other than fire) requiring medical treatment in the past 12 months.	18	
	divided by	The average daily population of staff in the past 12 months.	526.9	0.03
	(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
<b>1B</b>		<b>Vehicles are maintained and operated in a manner that prevents harm to the community, staff, contractors, volunteers, and inmates.</b>		
	(1)	Number of vehicle accidents resulting in property damage in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	526.9	0
	(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.	526.9	0
	(3)	Amount dollar of damage from vehicle accidents in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	526.9	0
<b>1C</b>		<b>The number and severity of emergencies are minimized. When emergencies occur, the response minimizes the severity.</b>		
	(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.	9	0
	(2)	Number of injuries, caused by forces external to the	0	

		facility, requiring medical attention that resulted from emergencies in the past 12 months.		
	divided by	The average daily population in the past 12 months.	526.9	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.	526.9	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.	526.9	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.	36	
	divided by	The average daily population in the past 12 months.	526.9	0.07
	(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.	526.9	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.	9	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.	526.9	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.	526.9	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.	526.9	0
	(12)	Number of code violations cited in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	526.9	0
	(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.	526.9	0
	(14)	Number of incidents of inventory discrepancies in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	526.9	0



<b>2A</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Calculated O.M</b>
		<b>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.</b>		
	(1)	Number of incidents involving harm in the past 12 months.	176	
	divided by	The average daily population in the past 12 months.	526.9	0.3
	(2)	Number of incidents in the past 12 months involving harm.	176	
	divided by	The number of admissions in the past 12 months.	6314	0.02
	(3)	Number of physical injuries or emotional trauma requiring treatment as a result of incidents in the past 12 months.	36	
	divided by	The average daily population in the past 12 months.	526.9	0.07
	(4)	Number of physical injuries or emotional trauma requiring treatment as a result of the incidents in the past 12 months.	36	
	divided by	The number of admissions in the past 12 months.	5314	0.07
	(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.	526.9	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.	526.9	0
<b>2B</b>		<b>Physical force is used only in instances of self-protection, protection of the inmate or others, prevention of property damage, or prevention of escape.</b>		
	(1)	Number of instances in which force was used in the past 12 months.	882	
	divided by	The average daily population in the past 12 months.	526.9	1.67
	(2)	Number of instances in which force was used in the past 12 months.	882	
	divided by	The number of admissions in the past 12 months.	6314	0.14
	(3)	Number of times that staff use of force was found to have been inappropriate in the past 12 months.	1	
	divided by	The number of instances in which force was used.	882	0.001
	(4)	Number of inmate grievances filed alleging inappropriate use of force in the past 12 months.	38	
	divided by	The average daily population in the past 12 months.	526.9	0.07
	(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.	38	0
	(6)	Number of injuries requiring medical treatment resulting from staff use of force in the past 12 months.	4	
	divided by	The average daily population in the past 12 months.	526.9	0.008

<b>2C</b>		<b>Contraband is minimized. It is detected when present in the facility.</b>		
	(1)	Number of incidents involving contraband in the past 12 months.	127	
	divided by	The average daily population in the past 12 months.	526.9	0.2
	(2)	Number of incidents involving contraband in the past 12 months.	127	
	divided by	The number of admissions in the past 12 months.	6314	0.02
	(3)	Number of weapons found in the facility in the past 12 months.	2	
	divided by	The average daily population in the past 12 months.	526.9	0.004
	(4)	Number of controlled substances found in the facility in the past 12 months.	23	
	divided by	The average daily population in the past 12 months.	526.9	0.04
	(5)	Number of controlled substances found in the facility in the past 12 months.	23	
	divided by	The number of admissions in the past 12 months.	6314	0.004
<b>2D</b>		<b>Improper access to and use of keys, tools and utensils are minimized.</b>		
	(1)	Number of incidents involving keys in the past 12 months.	2	
	divided by	The average daily population in the past 12 months.	526.9	0.004
	(2)	Number of incidents involving tools in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	526.9	0
	(3)	Number of incidents involving culinary equipment in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	526.9	0
	(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.	526.9	0.002
<b>3A</b>		<b>Inmates comply with rules and regulations.</b>		
	(1)	Number of rule violations in the past 12 months.	1975	
	divided by	The average daily population in the past 12 months.	526.9	0.4
	(2)	Number of assaults—inmate against inmate, inmate against staff in the past 12 months.	156	
	divided by	The average daily population in the past 12 months.	526.9	0.3
<b>4A</b>		<b>Food service provides a nutritionally balanced diet. Food service operations are hygienic and sanitary.</b>		
	(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.	526.9	0
	(2)	Number of inmate grievances about food service decided in favor of the inmate the past 12 months.	237	
	divided by	The number of inmate grievances about food service in the past 12 months.	719	0.3
	(3)	Number of violations cited by independent authorities for food service sanitation in the past 12 months.	1	
		Divided by number of violations cited by independent authorities in the past 12 months.	1	1
<b>4B</b>		<b>Inmates maintain acceptable personal hygiene practices.</b>		

	(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.	526.9	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.	526.9	0
	(3)	Number of inmates diagnosed with hygiene-related conditions (scabies, lice, or fungal infections) in the past 12 months.	43	
	divided by	The average daily population in the past 12 months.	526.9	0.08
	(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	0
	divided by	The number of inmate lawsuits related to hygiene in the past 12 months.	0	0
<b>4C</b>		<b>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.</b>		
	(1)	Number of inmates with a positive tuberculin skin test in the past 12 months.	1	
	divided by	The number of admissions in the past 12 months.	6314	158
	(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.	526.9	0
	(3)	Number of conversions to a positive tuberculin skin test in the past 12 months.	0	
	divided by	The number of tuberculin skin tests given in the past 12 months.	1900	0
	(4)	Number of inmates with a positive tuberculin skin test who completed prophylaxis treatment for tuberculosis in the past 12 months.	0	
	divided by	The number of inmates with a positive tuberculin skin test on prophylaxis treatment for tuberculosis in the past 12 months.	3	0
	(5)	Number of Hepatitis C positive inmates in the past 12 months.	25	
	divided by	The average daily population in the past 12 months.	526.9	0.05
	(6)	Number of HIV positive inmates in the past 12 months.	34	
	divided by	The average daily population in the past 12 months.	526.9	0.06
	(7)	Number of HIV positive inmates who are being treated with highly active antiretroviral treatment in the past 12 months.	34	

	divided by	The number of known HIV positive inmates in the past 12 months.	34	1
(8)		Number of inmates' diagnosis with an Axis I (excluding sole diagnosis of substance abuse) in the past 12 months.	127	
	divided by	The average daily population in the past 12 months.	526.9	0.2
(9)		Number of inmate suicide attempts in the past 12 months.	5	
	divided by	The average daily population in the past 12 months.	526.9	0.009
(10)		Number of inmate suicides in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	526.9	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.	526.9	0
(12)		Number of inmate deaths due to injuries in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	526.9	0
(13)		Number of medically expected inmate deaths in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	526.9	0
(14)		Number of medically unexpected inmate deaths in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	526.9	0
(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.	526.9	0
(16)		Number of inmate admissions to off-site hospitals in the past 12 months.	26	
	divided by	The average daily population in the past 12 months.	526.9	0.05
(17)		Number of inmates transported off-site (via an ambulance or correctional vehicle) for treatment of emergency health conditions in the past 12 months.	237	
	divided by	The average daily population in the past 12 months.	526.9	0.4
(18)		Number of inmate specialty consults completed in the past 12 months.	112	
	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.	112	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.	21	
	divided by	The number of inmate grievances related to the quality of health care in the past 12 months.	36	0.6
(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.	0	0
(22)		Number of individual sick call encounters in the past 12 months.	2681	
	divided by	The average daily population in the past 12 months.	526.9	5.08
(23)		Number of physician visits contacts in the past 12 months.	4962	
	divided by	The average daily population in the past 12 months.	526.9	9.4
(24)		Number of individualized dental treatment plans in the past 12 months.	347	
	divided by	The average daily population in the past 12 months.	526.9	0.7
(25)		Number of hypertensive inmates enrolled in a chronic care clinic in the past 12 months.	5983	
	divided by	The average daily population in the past 12 months.	526.9	11.4
(26)		Number of diabetic inmates enrolled in a chronic care clinic in the past 12 months.	60,719	
	divided by	The average daily population in the past 12 months.	526.9	1.17
(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.	526.9	0
(28)		Number of cardiac diets received by inmates with cardiac disease in the past 12 months.	5983	
	divided by	The number of cardiac diets prescribed in the past 12 months.	526.9	11.4
(29)		Number of hypertensive diets received by inmates with hypertension in the past 12 months.	5983	
	divided by	The number of hypertensive diets prescribed in the past 12 months.	5983	0
(30)		Number of diabetic diets received by inmates with diabetes in the past 12 months.	619	
	divided by	The number of diabetic diets prescribed in the past 12 months.	619	0
(31)		Number of renal diets received by inmates with renal disease in the past 12 months.	2	
	divided by	The number of renal diets prescribed in the past 12 months.	3	0
(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.	5	0.2
(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.	216,810	0
(34)		Number of nursing medication administration errors in the past 12 months.	0	
	divided by	The number of medications administered in the past 12 months.	219,000	0

<b>4D</b>		<b>Health services are provided in a professionally acceptable manner. Staff are qualified, adequately trained, and demonstrate competency in their assigned duties.</b>		
	(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.	13	0
	(2)	Number of new employees in the past 12 months who completed orientation training prior to undertaking job assignments.	2	
	divided by	The number of new employees in the past 12 months.	2	1
	(3)	Number of employees completing in-service training requirements in the past 12 months.	4	
	divided by	The number of employees eligible in the past 12 months.	4	1
	(4)	Number of MD staff who left employment in the past 12 months.	0	
	divided by	The number of authorized MD staff positions in the past 12 months.	1	0
	(5)	Number of RN staff who left employment in the past 12 months.	1	
	divided by	The number of authorized RN staff positions in the past 12 months.	4	0.25
	(6)	Number of LPN staff who left employment in the past 12 months.	0	
	divided by	The number of authorized LPN staff positions in the past 12 months.	8	0
	(7)	Number of medical records staff who left employment in the past 12 months.	2	
	divided by	The number of medical records staff positions in the past 12 months.	1	2
	(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.	526.9	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.	526.9	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.	526.9	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.	526.9	0
	(12)	Number of detainees identified as high risk with a history of sexually assaultive behavior in the past 12 months.	730	
	divided by	Average daily population in the past 12 months.	526.9	1.39
	(13)	Number of detainees identified as at risk for sexual victimization in the past 12 months.	548	
	divided by	Average daily population in the past 12 months.	526.9	1.04
<b>5A</b>		<b>Inmates have opportunities to improve themselves while confined.</b>		

	(1)	Number of inmates who passed GED exams while confined in the past 12 months.	1	
	divided by	The number of inmates who were sentenced to the jail for 6 months or more in the past 12 months.	352	0.003
	(2)	Total number of grade levels advanced by 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.	352	0
	(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.	352	0
<b>5B</b>		<b>Inmates maintain ties with their families and the community.</b>		
		NONE		
<b>5C</b>		<b>The negative impact of confinement is reduced.</b>		
		NONE		
<b>6A</b>		<b>Inmates' rights are not violated.</b>		
	(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.	864	
	divided by	The average daily population in the past 12 months.	526.9	1.6
	(2)	Number of inmate grievances (see [a] through [e] above) decided in favor of inmates in the past 12 months.	1616	
	divided by	The total number of grievances filed in the past 12 months.	10438	0.15
	(3)	Total number of inmate court suits alleging violation of inmate rights filed against the facility in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	526.9	0.002
	(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
<b>6B</b>		<b>Inmates are treated fairly.</b>		
	(1)	Number of inmate grievances regarding discrimination in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	526.9	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.	1616	
	divided by	The average daily population in the past 12 months.	526.9	3.07
	(4)	Number of grievances resolved in favor of inmates in the past 12 months.	1616	
	divided by	The total number of inmate grievances filed in the past 12 months.	10438	0.15
	(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 torte liability cases in the past 12 months.	0	
<b>6C</b>		<b>Alleged rule violations are handled in a manner that provides inmates with appropriate procedural safeguards.</b>		
	(1)	Number of disciplinary incidents resolved informally in the past 12 months.	47	
	divided by	The average daily population in the past 12 months.	526.9	0.9
	(2)	Number of formal inmate disciplinary decisions that were appealed in the past 12 months.	494	
	divided by	The total number of disciplinary decisions made in the past 12 months.	1975	0.3
	(3)	Number of appealed disciplinary decisions decided in favor of the inmate in the past 12 months.	122	
	divided by	The total number of disciplinary decisions made in the past 12 months.	1975	0.06
	(4)	Number of grievances filed by inmates challenging disciplinary procedures in the past 12 months.	26	
	divided by	The average daily population in the past 12 months.	526.9	0.05
	(5)	Number of disciplinary-related grievances resolved in favor of the inmate in the past 12 months.	2	
	divided by	The total number of disciplinary-related grievances filed in the past 12 months.	85	0.02
	(6)	Number of court suits filed against the facility regarding discipline in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	526.9	0.002
	(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.	572	
	divided by	The average daily population in the past 12 months.	526.9	1.09
	(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.	526.9	0
<b>6D</b>		<b>Inmates take responsibility for their actions.</b>		
	(1)	Number of inmates released in the past 12 months who made regular payments toward their restitution obligations.	0	
	divided by	The number of inmates who had restitution obligations in the past 12 months.	108	0
	(2)	Number of inmates who satisfy their court cost/fines obligations in the past 12 months.	108	
	divided by	The number of inmates who had court cost/fine obligations in the past 12 months.	108	1
	(3)	Total amount of restitution paid by inmates in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	526.9	0
	(4)	Total number of hours of community service donated by inmates in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	526.9	0



	(5)	Total number of inmates who participated in restitution in the past 12 months.	0	
	divided by	The total number of inmates housed in the past 12 months.	5051	0
	(6)	Total number of inmates who participated in community service work in the past 12 months.	0	
	divided by	The total number of inmates housed in the past 12 months.	5051	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.	5051	0
	(8)	Total amount of restitution paid by inmates in the past 12 months.	0	
	divided by	The total number of inmates housed in the past 12 months	5051	0
	(9)	Total number of hours delivered by inmates who participated in community service work in the past 12 months.	0	
	divided by	The total number of inmates housed in the past 12 months.	5051	0
<b>7A</b>		<b>The facility operates as a legal entity.</b>		
		NONE		
<b>7B</b>		<b>Staff, contractors, and volunteers demonstrate competency in their assigned duties.</b>		
	(1)	Total number of years of staff members' education as of the end of the last calendar year.	2062	
	divided by	The number of staff at the end of the last calendar year.	162	13.5
	(2)	Number of staff who left employment for any reason in the past 12 months.	47	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	162	0.3
	(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.	40	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	162	0.25
	(4)	Number of professional development events attended by staff in the past 12 months.	12	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	162	0.07
<b>7C</b>		<b>Staff, contractors, and volunteers are professional, ethical and accountable.</b>		
	(1)	Number of incidents in which staff was found to have acted in violation of facility policy in the past 12 months.	10	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	162	0.06
	(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.	162	0.02
	(3)	Number of inmate grievances attributed to improper staff conducts which were upheld in the past 12 months.	38	

	divided by	The number of inmate grievances alleging improper staff conduct filed in the past 12 months.	383	0.1
(4)		Number of inmate grievances attributed to improper staff conduct which were upheld in the past 12 months.	38	
	divided by	The average daily population for the past 12 months.	526.9	0.07
(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.	8	0
(7)		The average number of physicians employed in the past 12 months.	0	
	divided by	The number of physician positions authorized in the past 12 months.	0	0
(8)		The average number of nurses employed in the past 12 months.	0	
	divided by	The number of nurse positions authorized in the past 12 months.	0	0
(9)		The average number of mid-level health care practitioners employed in the past 12 months.	0	
	divided by	The number of mid-level health care practitioner positions authorized in the past 12 months.	0	0
(10)		The average number of ancillary health care staff employed in the past 12 months.	0	
	divided by	The number of ancillary health care staff positions authorized in the past 12 months.	0	0
<b>7D</b>		<b>The facility is administered efficiently and responsibly.</b>		
(1)		Net amount of budget shortfalls or surplus at the end of the last fiscal year (budget less expenditures).	988,000	
	divided by	The budget for the past 12 months.	19,379,423	0.05
(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.	198	
	divided by	The average daily population in the past 12 months.	526.9	0.4
(4)		Number of inmate grievances (records/property) decided in favor of inmates in the past 12 months.	7	
	divided by	The total number of inmate grievances (records/property) in the past 12 months.	198	0.04
(5)		Number of objectives achieved in the past 12 months.	0	
	divided by	The number of objectives for the past 12 months.	0	
(6)		Number of program changes made in the past 12 months.	0	
	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

<b>7E</b>		<b>Staff are treated fairly.</b>		
	(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.		162
	(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.	677	
	divided by	The number of staff at the end of the last calendar year (e.g. average number of years experience).	162	4.2
	(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
<b>7F</b>		<b>The facility is a responsible member of the community.</b>		
	(1)	Total number of hours of volunteer service delivered by members of the community in the past 12 months.	0	
	divided by	The average daily population of inmates in the past 12 months.	527	0
	(2)	Total number of individual community members who provided voluntary service in the past 12 months.	0	
	divided by	The average daily population of inmates in the past 12 months.	527	0
	(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.	527	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.	527	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.	527	0
	(6)	Total number of hours of community service work delivered by inmates in the past 12 months.	0	
	divided by	The average daily population of inmates in the past 12 months.	527	0