

**Standards Committee Meeting Minutes
ACA Winter Conference
Orlando World Center Marriott
Crystal Ballroom - H
Orlando, Florida
January 26, 2023**

Members Present

Chambers-Smith, Annette, Chair, Ohio
Collier, Bryan, Vice-Chair, Texas
Cadreche, Marina, Florida
Clarke, Harold, Virginia
Dauss, Kristen, Indiana
Grande, Peter, Kansas
Green, Robert, Maryland
Koon, Ron, Georgia
Linthicum, Lannette, Texas
Little, George
McFadden, Garry, North Carolina
Riggin, Viola, Kansas
Santa, Colette, Massachusetts
Shinn, David, District of Columbia
Stickrath, Thomas, Ohio

Members Absent

Blessinger, Christine, Indiana
DeVoter, Michael, Florida
Frakes, Scott, Nebraska
Lengerich, Jason, Colorado

Staff

James A. Gondles, Jr, Executive Director
Jeff Washington, Deputy Executive Director
Dr. Elizabeth Gondles, ACA Office of Correctional Health
David Haasenritter, Director of Standards and Accreditation
Eric Shultz, Accreditation Specialist
Orchid Powell, Accreditation Specialist
Eli Mendoza, Accreditation Specialist
Kim Wilson, Accreditation Specialist

Annette Chambers-Smith, chairperson of the committee, welcomed the committee members and guests. Ms. Chambers-Smith discussed the meeting agenda. A motion was made and was seconded to approve the August 2023 Standards Committee Meeting Minutes with a correction of the spelling Colombia on page 2 of the minutes. The motion was approved unanimously.

ACA President, Tony Parker welcomed the committee members and guests to Orlando. Mr. Parker provided a brief conference overview and commended everyone for working together to complete the mission of corrections. He discussed some of the bigger issues worked on by the standards committee

during his term as President of ACA to include the work on de-escalation and behavioral intervention and thanked the standards committee for their dedication in moving our industry in the right direction. He thanked Tom Stickrath for his leadership in the Commission on Accreditation for Corrections, ACA staff, Jim and Betty Gondles.

ACA Executive Director James A. Gondles, Jr. welcomed committee members and ACA staff along with the many professionals in the audience. This conference is back to the old schedule with the Delegate Assembly meeting on Tuesday and the 153rd Congress of Corrections in Philadelphia will return to the shortened four-day conference schedule. Mr. Gondles encouraged everyone to attend the healthcare reception on Friday, January 27, 2023, from 5:30 to 6:30 pm in the Orlando World Marriot Center Grand Ballroom 8A as well as Healthcare Special Session & Luncheon the with limited seating on Saturday January 26, 2023, at the Orlando World Marriot Center Grand Ball Room 8A. In addition, the General Session Monday January 30, 2023, in the Canary Ballroom with Emmy Award-Winning Actor, Author, Director & Producer Henry Winkler presenting.

Commission Chair, Mr. Thomas Stickrath acknowledged ACA for keeping the audits and panel hearings moving forward. He noted the Commission on Accreditation for Corrections remained busy since the last conference conducting Virtual Panel Hearings as requested. Mr. Stickrath mentioned that 195 facilities were up for accreditation, 17 of which are international accreditations. Eight new Commissioners will be sworn in Monday during the General Session and their training will be provided later this year. He acknowledged the hard work of the ACA Standards and Accreditation Department with conducting virtual and on-site hearings and thanked the Commissioners on the Commission on Accreditation for Corrections for all their hard work and dedication.

David Haasenritter, Director of the Standards and Accreditation Department gave opening and welcoming remarks to include an introduction of ACA Standards and Accreditation staff. Auditor training will be held Monday, January 30, 2023 beginning at 2:00 pm and Accreditation Manager Training will be held Tuesday, January 31, beginning at 8:00 am. He concluded by thanking the standards committee for all their hard work over the last two years.

A motion was made and seconded for discussion of Old Business, Committee Reports/Proposals and the proposed expected practices additions/deletions/revisions.

The meeting was adjourned.

Section 2

Old Business

Manual: Standards for Adult Correctional Institutions (ACI)

Edition: 5th

Expected Practice: Outcome Measure 1G-2

Agency/Facility: FLDOC

Facility Size: 25,000

Accredited: Yes

Proposal Type: Deletion

Existing Standard: Outcome Measure 1G-2

The total number of hours of community service work delivered by offenders in the past 12 months divided by 12.

Proposal: N/A

Comments: There is no expected practice that requires inmates to perform community service. The "citizen involvement section" is solely for members of the community providing volunteer led programs and services. This is measurement has no corresponding expected practice.

Name: Racheal Hoffmann-Ots

Title: Correctional Services Consultant

Email: racheal.hoffman-ots@fdc.myflorida.com

COMMENTS:

None

FOR ACA STAFF USE ONLY- ACA File No. 2022-003

The above proposed revision, addition, or deletion would also affect the following manuals:
4-ALDF-7F-6; 1-PBHC ACI-1G-2; 1-PBHC ALDF-7F-6

Action taken by the standards committee:

Approved Denied **Tabled** Referred to:

ACA Staff will research to determine if there is a specific expected practice tied to the proposed outcome measure

The outcome measure in the ACI is listed under "Performance Standard: Citizen Involvement and Volunteers". There are no expected practices that require community service by the inmates.

FOR ACA STAFF USE ONLY- ACA File No. 2022-003

The above proposed revision, addition, or deletion would also affect the following manuals:
4-ALDF-7F-6; 1-PBHC ACI-1G-2; 1-PBHC ALDF-7F-6

Action taken by the standards committee:

Approved Denied Tabled Referred to:

Manual: Standards for Adult Correctional Institutions (ACI)

Edition: 5th

Expected Practice: 5-ACI-2C-03

Agency/Facility: FLDOC

Facility Size: 25,000

Accredited: Yes

Proposal Type: Revision

Existing Standard: Each inmate confined to a cell/room for ten or more hours daily is provided a sleeping area with the following: a sleeping surface and mattress at least 12 inches off of the floor; a writing surface and proximate area to sit; storage for personal items; and adequate storage space for clothes and personal belongings.

Each inmate confined to a cell/room for less than 10 hours daily is provided a sleeping area with the following: a sleeping surface and mattress at least 12 inches off of the floor; storage for personal items; and adequate storage space for clothes and personal belongings.

Comment: The words "writing surface" refer to a fixed or free-standing surface under which a person can sit.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Measurement. Observation. Staff and inmate interviews. Housing and classification records and logs.

Proposal: Each inmate confined to a cell/room for ten or more hours daily is provided a sleeping area with the following: a sleeping surface and mattress at least 12 inches off of the floor; a writing surface and proximate area to sit; storage for personal items; and adequate storage space for clothes and personal belongings.

Each inmate confined to a cell/room for less than 10 hours daily is provided a sleeping area with the following: a sleeping surface and mattress at least 12 inches off of the floor; storage for personal items; and adequate storage space for clothes and personal belongings.

Comment: None

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Measurement. Observation. Staff and inmate interviews. Housing and classification records and logs.

Comments:

One portion of this standard states "a writing surface and proximate area to sit." Despite direction being given at auditor training that they are not to audit the comment, and Panel decisions approving

the appeal of this finding, auditors still focus solely on the comment: "Comment: The words "writing surface" refer to a fixed or free-standing surface under which a person can sit." Making this standard non-compliant, despite portable writing surfaces being available, and acknowledging that adding fixed writing surfaces would decrease the unencumbered space that the cells already are lacking, thereby further affecting the quality of life.

Respectfully request removing the comment completely, or providing direction that portable writing surfaces are sufficient IF the cell does not meet the required unencumbered space as required in 5-ACI-2C-01, or 5-ACI-4B-06.

Name: Racheal Hoffmann-Ots

Title: Correctional Services Consultant

Email: racheal.hoffman-ots@fdc.myflorida.com

COMMENTS:

Adding to the comment that portable writing surfaces are acceptable is a better option than deleting the comment. If the committee believes a "fixed or free-standing" desk is required, it should be included in the expected practice.

Theresa Grenier
Correctional Consultant

FOR ACA STAFF USE ONLY- ACA File No. 2022-004

The above proposed revision, addition, or deletion would also affect the following manuals:

4-ALDF-1A-11; ACA Glossary

Action taken by the standards committee:

Approved Denied **Tabled** Referred to:

Current Comment: The words "writing surface" refer to a fixed or free-standing surface under which a person can sit.

Proposed Comment: The words "writing surface" refer to a fixed, portable writing surface, or free-standing surface under which a person can sit. A writing surface can include an electronic writing surface such as a tablet if the inmate has access to the tablet all the time or immediately upon request.

FOR ACA STAFF USE ONLY- ACA File No. 2022-003

The above proposed revision, addition, or deletion would also affect the following manuals:
4-ALDF-7F-6; 1-PBHC ACI-1G-2; 1-PBHC ALDF-7F-6

Action taken by the standards committee:

Approved Denied Tabled Referred to:

Approved as amended:

Comment: *The words “writing surface” refer to a fixed, portable writing surface, or free-standing surface under which a person can sit. A writing surface can include an electronic writing surface such as a tablet if the inmate has access to the tablet all the time or immediately upon request.*

Manual: Adult Community Residential Services (ACRS)

Edition: 4th

Expected Practice: 4-ACRS-4C-04

Agency/Facility: Alvis, Inc.

Facility Size: 600

Accredited: Yes

Proposal Type: Revision

Existing Standard: 4-ACRS-4C-04 (Mandatory)

A training program for careworker staff and other personnel is established by a recognized health authority in cooperation with the facility administrator that includes the following:

- Signs, symptoms, and action required in potential emergency situations
- Administration of first aid and cardiopulmonary resuscitation (CPR)
- Methods of obtaining assistance
- Signs and symptoms of mental illness, **retardation**, and chemical dependency
- Procedures for patient transfers to appropriate medical facilities or health-care providers

Proposal:

A training program for care worker staff and other personnel is established by a recognized health authority in cooperation with the facility administrator that includes the following:

- Signs, symptoms, and action required in potential emergency situations
- Administration of first aid and cardiopulmonary resuscitation (CPR)
- Methods of obtaining assistance
- Signs and symptoms of mental illness, **developmental disabilities**, and chemical dependency
- Procedures for patient transfers to appropriate medical facilities or health-care providers

Comments: Replacement of the word "retardation" with "developmental disabilities" in the fourth bullet point. Language needs updated to reflect current terminology

Name: Jennifer Stohr

Title: QA & Accreditation Director

Email: jennifer.stohr@alvis180.org

COMMENTS:

There was a definition of “intellectual disability” added in Aug 2017. The expected practices that included “retardation” were not updated. This will effectively correct all the expected practices with this outdated terminology.

Theresa Grenier

Correctional Consultant

FOR ACA STAFF USE ONLY- ACA File No. 2022-006

The above proposed revision, addition, or deletion would also affect the following manuals:

1-ABC-4E-29; 3-JDF-4C-27; 3-JDF-4C-39; 3-JRCF-4C-15; 4C-28 (JBC); 1-SJD-4C-23; 1-SJD-4C-32; 1-TC-3A-03

Action taken by the standards committee:

Approved Denied **Tabled** Referred to: Mental Health Committee

The term “Intellectual Developmental Disorder” is the current terminology used in the community.

Upon approval the terms “Intellectual Disability” and “Developmental Disability” will be reviewed in all manuals: Specifically, the ACI and ALDF:

5-ACI-6A-37

5-ACI-6B-13

5-ACI-6C-06

5-ACI-6C-12

4-ALDF-4C-34

4-ALDF-4C-40

FOR ACA STAFF USE ONLY- ACA File No. 2022-006

The above proposed revision, addition, or deletion would also affect the following manuals:

1-ABC-4E-29; 3-JDF-4C-27; 3-JDF-4C-39; 3-JRCF-4C-15; 4C-28 (JBC); 1-SJD-4C-23; 1-SJD-4C-32; 1-TC-3A-03

Action taken by the standards committee:

Approved Denied Tabled Referred to:

Section 3

Reports from ACA Committees

Committee Reports - None

American Correctional Association Committee on Performance-Based Standards

Presentations from Guests Speakers

Alcoholics Anonymous Correctional Committee Mission

Andie Moss

President and Founder of The Moss Group

Andie Moss has been recently selected as the Alcoholics Anonymous trustee. She talked about the importance of Alcoholics Anonymous programs in the corrections setting. She wants to help the industry in bringing AA programs back into the facilities, especially following the COVID 19 period. She provided a packet of AA information and publications. She opened the floor to questions and received very favorable comments from the Committee on Performance-Based Standards members on AA programs and Andie Moss work in corrections. It was recommended she work with the Mental Health Committee on integrating AA programs.

BJA's Corrections and Justice Reform Initiatives

Andre Bethea

**Senior Policy Advisor - Corrections, Reentry and Reform
Initiatives**

Andre Bethea introduced Ruby Qazilbash, BJA Deputy Director of Policy to present on the initiatives. Ruby Qazilbash discussed two BJA initiatives on data. The first in Justice Counts. Justice Counts is a national, consensus-building initiative designed to help policymakers make better decisions with criminal justice data that are more timely, less disjointed, and as useful as possible. The second initiative not available yet is improving data analysis. The initiative would include providing a data analysis to six agencies/facilities for up to three to six months to assist in capturing data to assist the agency/facility. She answered comments from the committee. Chairperson Annette Chambers-Smith commented her on the importance of collecting and using data, and thanked her for her presentation.

Section 4

Proposals for Standards Revision

**Submissions for Expected Practice Revisions
2023 Winter Conference
Orlando, Florida
January 29, 2023**

KEY

ACA File Number (*Order in which the submissions were received*)

Manual: *Manual in which the change is being proposed*

Expected Practice No: *Expected Practice to which the change is being proposed*

Agency /Facility: *Agency or facility submitting the proposed change*

Facility Size: *Size of the agency/facility proposing the change*

Accredited: *Whether or not the submitting agency/facility is accredited*

Proposal Type: *Type of proposal (addition of a new expected practice, deletion of the current expected practice, revision of the current expected practice, or clarification of the existing expected practice or comment)*

Existing Expected Practice: *The expected practice printed in the manual or Supplement as it currently stands. For example:*

Blacked-out text *indicates text in the existing expected practice that has been removed in the proposal.*

Proposal: *The proposed change to the existing expected practice. For example:*

Highlighted Text *indicated new or revised wording to the existing expected practice in the proposal.*

Comments: *Comments from the field regarding the proposed revision. These comments generally indicate whether the commenting entity agrees or disagrees with the revision.*

Name: *Name of person submitting the revision*

Title: *Title of person submitting the revision*

Email: *email address of person submitting the revision*

Contents:

ACA File Number	Expected Practice	Type	Page
Approved Definition	Behavioral Intervention		44
ACA File No. 2023-001	New	Addition	45
ACA File No. 2023-002	New	Addition	47
ACA File No. 2023-003	New	Addition	49
ACA File No. 2023-004	New	Addition	51
ACA File No. 2023-005	New	Addition	53
ACA File No. 2023-006	New	Addition	55
ACA File No. 2023-007	5-ACI-1D-12	Revision	57
ACA File No. 2023-008	5-ACI-1D-13	Revision	60
ACA File No. 2023-009	1-ICCSM-2A-09	Revision	62
ACA File No. 2023-010	New	Addition	63
ACA File No. 2023-011	1-ICCSM-1A-05	Revision	65
ACA File No. 2023-012	1-ICCSM-4B-04	Revision	66
ACA File No. 2023-013	1-ICCSM-7A-03	Revision	67

Executive Committee approved the following definition.

Behavioral Intervention

Behavioral Intervention refers to the authority of an individual or entity to settle conflicts or prevent certain actions by applying measures to either dissuade another party from a particular course of action, or physically intervene to stop them. The Behavioral Intervention is governed by statute and is usually authorized in a series of actions, referred to as a “Behavioral Intervention continuum.”

Manual: ACI
Edition: 5th
Expected Practice: N/A
Agency/Facility: N/A
Facility Size: N/A
Accredited: N/A
Proposal Type: Addition

Existing Standard: N/A

Proposal: Written policy, procedure, and practice specify staff de-escalation actions during the incident of a behavioral intervention to minimize the necessity of a behavioral intervention with physical response. These include, but are not limited to:

- Active Listening
- Attempts to calm the individual
- Use of distance
- Use of time
- Explaining the consequences
- Calling for assistance
- Shift Supervisor interaction during the incident
- Use of multiple disciplines during incident
- Relocation of person to another area if possible
- When onsite and available, a mental health clinician provides crisis intervention services for an individual with serious mental illness in designated mental health housing, restrictive and extended restrictive housing, or on a suicide or self-injury prevention status.

All reasonable actions are taken to stabilize the situation and are documented on the appropriate logs.

Comment: Staff take actions to defuse situations in order to minimize the necessity of physical confrontation and violence. The mental health clinician's crisis intervention services is more than just de-escalation action since it may involve a diagnostic and treatment intervention disposition.

Protocols: Written policy and procedure. Staff training curriculum.

Process Indicators: Observation. De-escalation documentation. Incident reports.

Comments: This expected practice is for purpose of minimizing the necessity of a behavioral intervention with a physical response. Conflict resolution, including defusing a situation entailing a physical confrontation, involves multiple elements, which includes de-escalation, use of body cameras, use of energy conduction devises (tasers), staff duty to intervene, authorization of compelled cell moves, mental health consultation, uninvolved staff review and training on behavioral intervention techniques.

Name: Professional Development Committee

Title: N/A

Email: acastandards@aca.org

COMMENTS:

Propose wording change “Written policy, procedure, and practice specify staff de-escalation actions during the incident of a **non-emergent** behavioral intervention to minimize the necessity of a behavioral intervention with physical response.”

Angela Whittaker, EMA on behalf of Seth Smith, Chief of Operations

FOR ACA STAFF USE ONLY- ACA File No. 2023-001

The above proposed revision, addition, or deletion would also affect the following manuals:

CJ; ICCSA; ICCSM; ICCSJ; ACRS; ALDF; JCF; TC; HC-ACI; HC-ALDF; HC-JCF; ABC; CTA; EM; FS; JCRF; JBC; JDTP; JDF; JPAS; SJDF

Action taken by the standards committee:

Approved as Amended Denied Tabled Referred to:

Proposal: Written policy, procedure, and practice specify staff de-escalation actions during the incident of a behavioral intervention **continuum** to minimize the necessity of a behavioral intervention with physical response. These **may** include, but are not limited to:

- Active Listening
- Attempts to calm the individual
- Use of distance
- Use of time
- Explaining the consequences

- Calling for assistance
- Shift Supervisor interaction during the incident
- Use of multiple disciplines during incident
- Relocation of person to another area if possible
- When onsite and available, a mental health clinician provides crisis intervention services for an individual with serious mental illness in designated mental health housing, restrictive and extended restrictive housing, or on a suicide or self-injury prevention status.

All reasonable actions are taken to stabilize the situation and are documented on the appropriate logs.

Comment: Staff take actions to defuse situations in order to minimize the necessity of physical confrontation and violence. The mental health clinician's crisis intervention services is more than just de-escalation action since it may involve a diagnostic and treatment intervention disposition.

Protocols: Written policy and procedure. Staff training curriculum.

Process Indicators: Observation. De-escalation documentation. Incident reports.

ACA FILE No. 2023-002

Manual: ACI

Edition: 5th

Expected Practice: N/A

Agency/Facility: N/A

Facility Size: N/A

Accredited: N/A

Proposal Type: Addition

Existing Standard: N/A

Proposal: Written policy, procedure, and practice delineates requirements for the use of a video camera and/or body cameras with audio capacity during any behavioral intervention incident.

Comment: Procedures specify appropriate location and activation procedures for the camera.

Protocols: Written policy and procedure.

Process Indicators: Facility records and logs. Incident reports. Video footage.

Comments: This expected practice is for purpose of minimizing the necessity of a behavioral intervention with a physical response. Conflict resolution, including defusing a situation entailing a physical confrontation, involves multiple elements, which includes de-escalation, use of body cameras, use of energy conduction devises (tasers), staff duty to intervene, authorization of compelled cell moves, mental health consultation, uninvolved staff review and training on behavioral intervention techniques.

Name: Professional Development Committee

Title: N/A

Email: acastandards@aca.org

COMMENTS:

Behavioral interventions can be unplanned and immediate. If the agency does not use body cameras, there are instances where it is not feasible to wait for video cameras with audio capacity. This expected practice may create a financial burden on agencies.

The use of video cameras and body cameras does not minimize the necessity of a behavioral intervention with a physical response, but records behavioral intervention actions for internal reviews and training purposes.

Comment in the proposal states “Procedures specify appropriate location and activation procedures for the camera.” IF the intent is to have this in the procedures, it needs to be moved to the actual expected practice. Comments are only a guide, not a requirement.

Theresa Grenier, Correctional Consultant

Propose Modification: Written policy, procedure, and practice delineates requirements for the use of a video camera and/or body cameras with audio capacity during any **planned** behavioral intervention incident.

Since behavioral intervention is part of a continuum, video/body cameras would not be readily available for every incident, unless they were worn by all staff at all times. The video/body cameras would however be available for “planned” intervention, i.e., cell extractions, etc.

Angela Whittaker, EMA on behalf of Seth Smith, Chief of Operations

FOR ACA STAFF USE ONLY- ACA File No. 2023-002

The above proposed revision, addition, or deletion would also affect the following manuals:

CJ; ICCSA; ICCSM; ICCSJ; ACRS; ALDF; JCF; TC; HC-ACI; HC-ALDF; HC-JCF; ABC; CTA; EM; FS; JCRF; JBC; JDTP; JDF; JPAS; SJDF

Action taken by the standards committee:

Approved as Amended Denied Tabled Referred to:

Proposal: Written policy, procedure, and practice delineates requirements for the use of a video camera and/or body cameras with audio capacity **when used** during any behavioral intervention incident.

Comment: Procedures specify appropriate location and activation procedures for the camera.

Protocols: Written policy and procedure.

Process Indicators: Facility records and logs. Incident reports. Video footage.

Manual: ACI
Edition: 5th
Expected Practice: N/A
Agency/Facility: N/A
Facility Size: N/A
Accredited: N/A
Proposal Type: Addition

Existing Standard: N/A

Proposal: (MANDATORY) All personnel authorized to use tasers and other less than lethal munitions receive training in their use and in the treatment of individuals exposed to energy conduction devices and other less than lethal munitions.

Comment: A specialized training curriculum is implemented, which includes both individual and group instruction by certified trainers.

Protocols: Written policy and procedure. Job descriptions. Staff training curriculum. Training records forms and formats.

Process Indicators: Personnel records. Training records.

Comments: Staff need to be trained in the use of energy conduction devices (tasers) and other less than lethal munitions.

Name: Professional Development Committee
Title: N/A
Email: acastandards@aca.org

COMMENTS:

I feel that the standards for training for 5-ACI-1D-18 and 5-ACI-1D-19 rally already cover this. Our facility includes this training in use of force as well as specialty training. This is reflected in our training records that are included in these files.

Wayne Millus, Deputy Warden

Propose this standard be incorporated with 5-ACI-1D-21 Use of Chemical Agents to read as follows:

All personnel authorized to use chemical agents, tasers, and other less than lethal munitions receive training in their use and in the treatment of individuals exposed to chemical agent, energy conduction devices and other less than lethal munitions.

Angela Whittaker, EMA on behalf of Seth Smith, Chief of Operations

All personnel authorized to use tasers and other less than lethal munitions receive training in their use and in the treatment of individuals exposed to energy conduction devices and other less than lethal munitions.

FOR ACA STAFF USE ONLY- ACA File No. 2023-003

The above proposed revision, addition, or deletion would also affect the following manuals:

CJ; ICCSA; ICCSM; ICCSJ; ACRS; ALDF; JCF; TC; HC-ACI; HC-ALDF; HC-JCF; ABC; CTA; EM; FS; JCRF; JBC; JDTP; JDF; JPAS; SJDF

Action taken by the standards committee:

Approved Denied Tabled Referred to: Subcommittee to seek information on best practices for body worn cameras during treatment. Subcommittee members are Dr. Lanettee Linthicum, Viola Riggins and Robert Green.

Manual: ACI
Edition: 5th
Expected Practice: N/A
Agency/Facility: N/A
Facility Size: N/A
Accredited: N/A
Proposal Type: Addition

Existing Standard: N/A

Proposal: Written policy, procedure, and practice require staff to have the duty to intervene on behalf of an incarcerated individual whose constitutional rights are being violated.

Comment: Staff intervenes on behalf of an incarcerated individual whose constitutional rights are being violated by other staff or an incarcerated individual in his or her presence.

Protocols: Written policy and procedure. Staff training curriculum.

Process Indicators: Observation. Training records. Incident reports.

Comments: Staff should be trained that they have a duty to intervene when an individual's constitutional rights are being violated.

Name: Professional Development Committee

Title: N/A

Email: acastandards@aca.org

COMMENTS:

The verbiage "whose constitutional rights are being violated" is overly broad, and would require a staff member to know what constitutional rights one has while confined. Recommend rewording.

Dr. Tracy L. Reveal, Administrative Officer ODRC

This provision can be incorporated into 5-ACI-1C-22, written code of ethics.

5-ACI-1C-22 - Current

A written code of ethics shall require employees to conduct themselves and perform their duties in such a way as to set a good example for prisoners and thereby command their respect. The

code of ethics shall prohibit employees from using their official position to secure privileges for themselves or others and from engaging in activities that constitute a conflict of interest. This code is available to all employees.

5-ACI-1C-22 - Proposed

A written code of ethics shall require employees to conduct themselves and perform their duties in such a way as to set a good example for prisoners and thereby command their respect and have the duty to intervene on behalf of an incarcerated individual whose constitutional rights are being violated. The code of ethics shall prohibit employees from not responding when an incarcerated individual's constitutional rights are being violated and using their official position to secure privileges for themselves or others from engaging in activities that constitute a conflict of interest. This code is available to all employees.

Theresa Grenier, Correctional Consultant

This is covered under file 1C-23 in regards to ethical behavior. This information is provided to all staff as part of their employee manual as well as training on how to deal with offenders

Wayne Millus Deputy Warden

FOR ACA STAFF USE ONLY- ACA File No. 2023-004

The above proposed revision, addition, or deletion would also affect the following manuals:

CJ; ICCSA; ICCSM; ICCSJ; ACRS; ALDF; JCF; TC; HC-ACI; HC-ALDF; HC-JCF; ABC; CTA; EM; FS; JCRF; JBC; JDTP; JDF; JPAS; SJDF

Action taken by the standards committee:

Approved

Denied

Tabled: Legal Review to be completed

Referred to:

Manual: ACI
Edition: 5th
Expected Practice: N/A
Agency/Facility: N/A
Facility Size: N/A
Accredited: N/A
Proposal Type: Addition

Existing Standard: N/A

Proposal: Written policy, procedure and practice require that, after de-escalation efforts have been attempted and determined ineffective, and there is no emergent need for a physical response, the highest-ranking shift supervisor on duty provides authorization for all behavioral interventions with physical response, including compelled moves, when safe and possible to do so. The incident and response will be documented in a written report by the security supervisor.

Comment: A written summary by the security supervisor provides a clear account of the behavioral intervention with physical response and is based upon all employee and incarcerated individuals' statements and the incident recording.

Protocols: Written policy and procedure.

Process Indicators: Documentation of supervisory approval for the use of behavioral intervention with physical response. Incarcerated individual's records. Incident report.

Comments: This expected practice is for purpose of minimizing the necessity of a behavioral intervention with a physical response. Conflict resolution, including defusing a situation entailing a physical confrontation, involves multiple elements, which includes de-escalation, use of body cameras, use of energy conduction devises (tasers), staff duty to intervene, authorization of compelled cell moves, mental health consultation, uninvolved staff review and training on behavioral intervention techniques.

Name: Professional Development Committee
Title: N/A
Email: acastandards@aca.org

COMMENTS:

This proposal only addresses behavioral intervention with physical response which would duplicate Expected Practice 5-ACI-3A-35.

Recommend this expected practice not be passed

5-ACI-3A-35

(MANDATORY) Written policy, procedure, and practice restrict the use of physical force to instances of justifiable self-defense, protection of others, protection of property, prevention of escapes, and to maintain or regain control, and then only as a last resort and in accordance with appropriate statutory authority. In no event is physical force justifiable as punishment. A written report is prepared following all use of physical force and is submitted to administrative staff for review.

Theresa Grenier, Correctional Consultant

Would this not already be covered under standards 3A-31 and 3A-35 where a written report is submitted on any incidents and submitted to Warden for review. I myself would consider a de-escalation of any event would fall within this scope. If not here then under suicide reviews

Wayne Millus Deputy Warden

FOR ACA STAFF USE ONLY- ACA File No. 2023-005

The above proposed revision, addition, or deletion would also affect the following manuals:

CJ; ICCSA; ICCSM; ICCSJ; ACRS; ALDF; JCF; TC; HC-ACI; HC-ALDF; HC-JCF; ABC; CTA; EM; FS; JCRF; JBC; JDTP; JDF; JPAS; SJDF

Action taken by the standards committee:

Approved as Amended Denied Tabled Referred to:

Proposal: Written policy, procedure and practice require that, after de-escalation efforts have been attempted and determined ineffective, and there is no emergent need for a physical response, ~~the highest ranking shift supervisor on duty~~ **warden or designee** provides authorization for all behavioral interventions with physical response, including compelled moves, when safe and possible to do so. The incident and response will be documented in a written report ~~by the security supervisor.~~

Comment: A written summary by the security supervisor provides a clear account of the behavioral intervention with physical response and is based upon all employee and incarcerated individuals' statements and the incident recording.

Protocols: Written policy and procedure.

Process Indicators: Documentation of supervisory approval for the use of behavioral intervention with physical response. Incarcerated individual's records. Incident report.

Manual: ACI
Edition: 5th
Expected Practice: N/A
Agency/Facility: N/A
Facility Size: N/A
Accredited: N/A
Proposal Type: Addition

Existing Standard: N/A

Proposal: Written policy, procedure and practice require an uninvolved staff review of all behavioral interventions with physical response to determine the necessity of any further actions. The warden or designee reviews the written summary by the security supervisor of the behavioral intervention with physical response to determine the necessity of any further actions.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Incident reports. Incarcerated individual's records. Documentation of review. Metrics that demonstrate if staff de-escalation actions during the incident of a behavioral intervention were attempted prior to the use of a physical response.

Comments: Use of any behavioral intervention with physical response needs to be reviewed by an uninvolved staff member.

Name: Professional Development Committee
Title: N/A
Email: acastandards@aca.org

COMMENTS:

This behavioral intervention expected practice can easily be incorporated into existing expected practices. Many of the requirements of the proposal are already in an existing expected practice. Consider modifying an existing expected practice instead of creating a new one.

5-ACI-3A-35 - Current

(MANDATORY) Written policy, procedure, and practice restrict the use of physical force to instances of justifiable self-defense, protection of others, protection of property, prevention of escapes, and to maintain or regain control, and then only as a last resort and in accordance with appropriate statutory authority. In no event is physical force justifiable as punishment. A written report is prepared following all use of physical force and is submitted to administrative staff for review.

5-ACI-3A-35 - Proposed

(MANDATORY) Written policy, procedure, and practice restrict the use of physical force to instances of justifiable self-defense, protection of others, protection of property, prevention of escapes, and to maintain or regain control, and then only as a last resort and in accordance with appropriate statutory authority. In no event is physical force justifiable as punishment. A written report is prepared following all use of behavioral intervention with physical response by an uninvolved security supervisor to determine the necessity of any further actions. The warden or designee reviews the written summary by the security supervisor of the behavioral intervention with physical response to determine the necessity of any further actions.

Theresa Grenier, Correctional Consultant

Would this not already be covered under standards 3A-31 and 3A-35 where a written report is submitted on any incidents and submitted to Warden for review. I myself would consider a de-escalation of any event would fall within this scope. If not here then under suicide reviews.

Wayne Millus Deputy Warden

FOR ACA STAFF USE ONLY- ACA File No. 2023-006

The above proposed revision, addition, or deletion would also affect the following manuals:

CJ; ICCSA; ICCSM; ICCSJ; ACRS; ALDF; JCF; TC; HC-ACI; HC-ALDF; HC-JCF; ABC; CTA; EM; FS; JCRF; JBC; JDTP; JDF; JPAS; SJDF

Action taken by the standards committee:

Approved **Denied** Tabled Referred to:

Manual: ACI

Edition: 5th

Expected Practice: 1-ACI-1D-12

Agency/Facility: N/A

Facility Size: N/A

Accredited: N/A

Proposal Type: Revision

Existing Standard: Written policy, procedure, and practice provide that all new correctional officers receive 120 hours of training during their first year of employment. At a minimum, this training covers the following areas:

- security and safety procedures
- emergency and fire procedures
- supervision of offenders
- suicide intervention/prevention
- de-escalation
- offender rights
- key control
- interpersonal relations
- communication skills
- standards of conduct
- cultural awareness
- sexual abuse/assault intervention
- code of ethics

Additional topics may be added at the discretion of the agency or facility.

Comment: Since the duties of correctional officers frequently involve most institutional operations, their training should be comprehensive.

Protocols: Written policy and procedure. Job descriptions. Training curriculum. Training records forms and formats.

Process Indicators: Personnel records. Training records.

Proposal: 5-ACI-1D-12 (Ref. 4-4084)

Written policy, procedure, and practice provide that all new correctional officers receive 120 hours of training during their first year of employment. At a minimum, this training covers the following areas:

- security and safety procedures
- emergency and fire procedures
- supervision of offenders
- suicide intervention/prevention
- de-escalation strategies
- offender rights
- key control
- interpersonal relations
- interpersonal communication skills
- standards of conduct
- cultural awareness
- sexual abuse/assault intervention
- code of ethics
- crisis intervention training
- behavior redirection

Additional topics may be added at the discretion of the agency or facility.

Comment: Since the duties of correctional officers frequently involve most institutional operations, their training should be comprehensive.

Protocols: Written policy and procedure. Job descriptions. Training curriculum. Training records forms and formats.

Process Indicators: Personnel records. Training records.

Comments: De-escalation strategies, crisis intervention training, and behavioral redirection training need to be incorporated in all new correctional officers training.

Name: Professional Development Committee

Title: N/A

Email: acastandards@aca.org

COMMENTS:

Existing standard lists use of force not de-escalation. Are we changing definition of use of Force?

Wayne Millus, Deputy Warden

FOR ACA STAFF USE ONLY- ACA File No. 2023-007

The above proposed revision, addition, or deletion would also affect the following manuals:

4-ACRS-7B-17; 1-ABC-1D-10; 4-ALDF-7B-10; 1-JDTP-1D-08; 3-JDF-1D-09; 3-JCRF 1D-10; 4-JCF-6E-08; 1-JBC-1D-09; 1-SJD-1D-05; 1-CORE-7B-04; 1-ICCSA-7A-03; 1-ICCSM-7A-03

Action taken by the standards committee:

Approved as Amended Denied Tabled Referred to:

Proposal: 5-ACI-1D-12 (Ref. 4-4084)

Written policy, procedure, and practice provide that all new correctional officers receive 120 hours of training during their first year of employment. At a minimum, this training covers the following areas:

- security and safety procedures
- emergency and fire procedures
- supervision of offenders
- suicide intervention/prevention
- de-escalation strategies
- offender rights
- key control
- interpersonal relations
- interpersonal relations communication skills
- standards of conduct
- cultural awareness
- sexual abuse/assault intervention
- code of ethics
- crisis intervention training teams
- behavior redirection

Additional topics may be added at the discretion of the agency or facility.

Comment: Since the duties of correctional officers frequently involve most institutional operations, their training should be comprehensive.

Protocols: Written policy and procedure. Job descriptions. Training curriculum. Training records forms and formats.

Process Indicators: Personnel records. Training records.

Manual: ACI
Edition: 5th
Expected Practice: 5-ACI-1D-13
Agency/Facility: N/A
Facility Size: N/A
Accredited: N/A
Proposal Type: Revision

Existing Standard: Written policy, procedure, and practice provide that all correctional officers receive at least 40 hours of annual training. This training shall include at a minimum the following areas:

- standards of conduct/ethics
- security/safety/fire/medical/emergency procedures
- supervision of offenders including training on sexual abuse and assault
- de-escalation

Additional topics shall be included based upon a needs assessment of both staff and institution requirements.

Comment: This training will enable employees to sharpen skills, maintain certification, and keep abreast of changes in policies, procedures, and legislative, judicial, or executive actions.

Protocols: Written policy and procedure. Job descriptions. Training curriculum. Training records forms and formats.

Process Indicators: Personnel records. Training records.

Proposal: Written policy, procedure, and practice provide that all correctional officers receive at least 40 hours of annual training. This training shall include at a minimum the following areas:

- standards of conduct/ethics
- security/safety/fire/medical/emergency procedures
- supervision of offenders including training on sexual abuse and assault
- de-escalation strategies
- interpersonal communication skills
- crisis intervention training

Comment: This training will enable employees to sharpen skills, maintain certification, and keep abreast of changes in policies, procedures, and legislative, judicial, or executive actions.

Protocols: Written policy and procedure. Job descriptions. Training curriculum. Training records forms and formats.

Process Indicators: Personnel records. Training records.

Comments: Because of the sensitivity of the issues De-escalation strategies, crisis intervention training, and behavioral redirection training should be conducted annually.

Name: Professional Development Committee

Title: N/A

Email: acastandards@aca.org

COMMENTS:

Existing standard lists use of force not de-escalation. Are we changing definition of use of Force?

Wayne Millus, Deputy Warden

FOR ACA STAFF USE ONLY- ACA File No. 2023-008

The above proposed revision, addition, or deletion would also affect the following manuals:

1-ABC-1D-10-1; 4-ALDF-7B-10-1; 1-JDTP-1D-08-1; 3-JDF-1D-09-1; 3-JCRF 1D-10-1;
4-JCF-6E-10; JBC-1D-09-1; 1-SJD-1D-05-1; 1-CORE-7B-04; 1-ICCSA-7A-04; 1-ICCSM-7A-04

Action taken by the standards committee:

Approved as Amended Denied Tabled Referred to:

Proposal: Written policy, procedure, and practice provide that all correctional officers receive at least 40 hours of annual training. This training shall include at a minimum the following areas:

- standards of conduct/ethics
- security/safety/fire/medical/emergency procedures
- supervision of offenders including training on sexual abuse and assault
- de-escalation strategies
- interpersonal communication skills
- crisis intervention training teams

Comment: This training will enable employees to sharpen skills, maintain certification, and keep abreast of changes in policies, procedures, and legislative, judicial, or executive actions.

Protocols: Written policy and procedure. Job descriptions. Training curriculum. Training records forms and formats.

Process Indicators: Personnel records. Training records.

Manual: International Core Standards - Mexico

Edition: First

Expected Practice: 1-ICCSM-2A-09

Agency/Facility: N/A

Facility Size: N/A

Accredited: N/A

Proposal Type: Revision

Existing Standard: No inmate or group of inmates is given control, or allowed to exert authority, over other inmates.

Proposal: No inmate or group of inmates is given control, or allowed to exert authority, over other inmates **and/or staff**.

Comments: During a re-accreditation audit, the visiting committee discovered inmates being provided unauthorized privileges allowed by the center as well as the parent agency. It was clear to the visiting committee the group of inmates had excessive influence on their living quarters and conjugal visiting arrangements that included access to alcohol. Adding the words "over other inmates and/or staff" would allow committees to include the staff of the center and the parent agency when finding non-compliance.

Name: William Powers

Title: NYSDOCCS - Superintendent - Retired

Email: wmpowers54@gmail.com

COMMENTS: None

FOR ACA STAFF USE ONLY- ACA File No. 2023-009

The above proposed revision, addition, or deletion would also affect the following manuals:

ICCSA; ICCSJ

Action taken by the standards committee:

Approved Denied Tabled Referred to:

Note: this is only applicable to the International Standards for Mexico

Manual: Performance-Based Standards for Adult Local Detention Facilities

Edition: 4th

Expected Practice: N/A

Agency/Facility: NYC Borough-Based Jail Program AECOM-Hill Joint Venture

Facility Size: N/A

Accredited: N/A

Proposal Type: Addition

Existing Standard: N/A

Proposal:

Single level (no tier) medical / mental health units have both outdoor and covered/enclosed exercise areas. The minimum space requirements for outdoor and covered/enclosed exercise areas for medical / mental health units are as follows:

- Outdoor exercise areas in facilities where less than 100 inmates have unlimited access to an individual recreation area – 15 square feet per inmate for the maximum number of inmates expected to use the space at one time, but not less than 750 square feet of unencumbered space.
- Covered/enclosed exercise areas in facilities where less than 100 inmates utilize one recreation area have 15 square feet per inmate for the maximum number of inmates expected to use the space at one time, with a minimum ceiling height of 12 feet, but not less than 500 square feet of unencumbered space.
- In cases where cover is not provided to mitigate the inclement weather, appropriate weather-related equipment and attire should be made available to the inmates who desire to take advantage of their authorized exercise time.

Comments: Single-level (no tier) medical / mental health units are for inmates who require more intensive treatment or observation based on a mental or physical health condition, or those who may benefit from a more therapeutic setting.

Inmates that are assigned to a medical / mental health unit include persons that are constrained from accessing programs in other areas of the facility due to temporary or permanent mental or physical conditions. These can range from physical conditions such as low or limited mobility to conditions that are more serious such as an acute mental condition where 24 hours supervision of a person is required. To ensure that people in custody who are constrained to a unit have the opportunity for physical exercise outside the cell and in an outdoor space an outdoor or covered/enclosed exercise area is required for medical / mental health units.

For a single level (no-tier) medical / mental health unit the outdoor and covered/enclosed exercise areas should meet a minimum ceiling height of 12 feet. A 12-foot ceiling height ensures that the ceiling is inaccessible to individuals and high enough that inmates can engage in active sports such as handball or soccer and/or passive activities within the space.

Name: Roger Lichtman

Title: Senior Vice-President, Justice Lead Americas, AECOM

Email: roger.lichtman@aecom.com

COMMENTS: None

FOR ACA STAFF USE ONLY- ACA File No. 2023-010

The above proposed revision, addition, or deletion would also affect the following manuals:

ACI; JCF; JBC; ABC

Action taken by the standards committee:

Approved **Denied** Tabled Referred to:

Manual: International Correctional Core Standards Mexico (ICCSM)

Edition: 1st

Expected Practice: 1-ICCSM-1A-05 (Mandatory)

Agency/Facility: INL / Corrections Program

Facility Size: N/A

Accredited: N/A

Proposal Type: Revision

Existing Standard: Mandatory

The facility's potable water source and supply is in compliance with applicable laws and regulations of the governing jurisdiction.

Proposal: Mandatory

The facility's potable water supply is in compliance with applicable laws and regulations of the governing jurisdiction. The facility plumbing is in working order.

Comments: It is suggested that the evaluation of plumbing installations be integrated into section 1A, in order to ensure that the health of staff, visitors and inmates is protected, ensuring the correct functioning of the water supply, complying with sanitary regulations so that the facilities establish and document an inspection and maintenance program for plumbing installations.

Name: Michel Arellano

Title: Corrections Reform Program Coordinator

Email: arellanome@state.gov and moralesjf@state.gov

COMMENTS: None

FOR ACA STAFF USE ONLY- ACA File No. 2023-011

The above proposed revision, addition, or deletion would also affect the following manuals:

None

Action taken by the standards committee:

Approved Denied Tabled Referred to:

Note: this is only applicable to the International Standards for Mexico

Manual: International Correctional Core Standards Mexico (ICCSM)

Edition: 1st

Expected Practice: 1-ICCSM-4B-04 (Mandatory)

Agency/Facility: INL / Corrections Program

Facility Size: N/A

Accredited: N/A

Proposal Type: Revision

Existing Standard: Mandatory

Inmates have access to clean drinking water, adequate water for bathing and personal hygiene **and plumbing in working order.**

Proposal: Mandatory

The facility's potable water source is in compliance with applicable laws and regulations of the governing jurisdiction. Inmates have access to clean drinking water, adequate water for bathing and personal hygiene

Comments: Ensure the supply and distribution of water for human use and consumption with the potabilization processes established in Mexican sanitary regulations, in order to avoid health risks to staff, visitors and inmates, as well as to prevent infectious and parasitic diseases, as well as those derived from the ingestion of toxic substances that the water may contain, thus ensuring that acceptable personal hygiene conditions are provided for inmates.

Name: Michel Arellano

Title: Corrections Reform Program Coordinator

Email: arellanome@state.gov and moralesjf@state.gov

COMMENTS: None

FOR ACA STAFF USE ONLY- ACA File No. 2023-012

The above proposed revision, addition, or deletion would also affect the following manuals:

None

Action taken by the standards committee:

Approved Denied Tabled Referred to:

Note: this is only applicable to the International Standards for Mexico

Manual: International Correctional Core Standards Mexico (ICCSM)

Edition: 1st

Expected Practice: 1-ICCSM-7A-03

Agency/Facility: INL / Corrections Program

Facility Size: N/A

Accredited: N/A

Proposal Type: Revision

Existing Standard:

Prior to assuming duties, all correctional officers receive training in the facility under the supervision of a qualified officer. Training **may** include:

- facility policies and procedures
- suicide prevention
- use of force
- report writing
- inmate rules and regulations
- key control
- emergency plans and procedures
- cultural diversity
- communication skills
- cardiopulmonary resuscitation (CPR) /first aid
- sexual misconduct

Proposal:

Prior to assuming duties, all correctional officers receive training in the facility under the supervision of a qualified officer. Training **shall** include:

- facility policies and procedures
- suicide prevention
- use of force
- report writing
- inmate rules and regulations
- key control
- emergency plans and procedures
- cultural diversity
- communication skills
- cardiopulmonary resuscitation (CPR) /first aid
- sexual misconduct

Comments: Facility did not comply with 7A 03, Auditor comment was it should be done, but the standard says “may include”. 7A 04 requires the same training, facility did not comply and standard said, “should include”.

Both standards must reflect the word “Should include”.

Name: Michel Arellano

Title: Corrections Reform Program Coordinator

Email: arellanome@state.gov and moralesjf@state.gov

COMMENTS: None

FOR ACA STAFF USE ONLY- ACA File No. 2023-013

The above proposed revision, addition, or deletion would also affect the following manuals:

None

Action taken by the standards committee:

Approved Denied Tabled Referred to:

Note: this is only applicable to the International Standards for Mexico

