

DATE OF REPORT	OUT-STANDING ISSUE Y/N	Monitoring Instrument	ITEM NO.	NON-COMPLIANCE ISSUE	CONTRACTOR RESPONSE/DATE/ CORRECTIVE ACTION TAKEN	DATE/METHOD OF CONFIRMATION BY MONITOR/COMMENTS	TDOC MANAGEMENT COMMENTS/NOTES
9/19/07	Yes	Use of Force	7e	Redacted			
9/19/07	Yes	Use of Force	7i	On 7-22-07, at 7:20 p.m. a MK 9 fogger was used in a Use of Force incident. There is no record of a MK9 fogger being issued by Central Control.	Warden's response September 24, 2007: The facility concurs that the staff in central control failed to log the issuance of OC in this instance as required. Corrective steps have been taken to address their failure.	Repeat finding 12/7/07 below.	2/8/08 CMD note: Letter of concern issued 2/5/08.
10/3/07	Yes	Food Service	34b	On two different dates, hot food delivered to segregation unit never reached required temperature of 140 degrees.	Warden response dated 10/18/07: A warming cart is now being used to transport trays from FS to seg unit and meals will be checked on a random basis each week by the Chief of Security and the FS Manager for temp compliance.	1/7/08 CM Comment: The facility has purchased a steam line for the segregation unit. They started heating the food in the unit on 2/4/08, I will monitor to ensure compliance.	
11/8/07	Yes	Security and Control - Counts	4a	The count room was not notified that 2 inmates had changed cells. This apparently meant that these inmates were not properly accounted for on TOMIS or the count room locator board, and had gone through counts uncorrected.	Wardens response dated 11/15/07: A directive has been given to facility employees that in no circumstance are inmates to be moved without count room approval. The employee who initiated these moves was identified and corrective action has been taken. Unit Managers and other supervisory staff are conducting meetings with line staff to ensure all staff know not to move inmates unless approved by the count room. This has also been added to the Warden's agenda for the upcoming staff recall meetings on November 27th that all employees are expected to attend.	Monitors Note: On 12/19/07 went to the unit to verify that the problem had been fixed. An Inmate, according to LIMC/count room was assigned to IA202, but he was living in IA103. Therefore I will continue to monitor compliance on this item.	1/31/08 CMD note: Letter of Concern issued 1/16/08. 1/7/08 CMD note: This item is identified as an Essential item. It has been determined that a Breach notification will not be issued at this time; however, a letter of concern will be sent addressing this issue.
11/19/07	Yes	Special Management Inmates	NIN	Per TDOC incident #721199, on November 16, 2007 at approximately 12:30 p.m., a maximum custody inmate and a protective custody inmate were placed in the recreation cage together.	Wardens response dated 12/3/07: "The facility agrees that staff...failed to follow applicable policy and post orders... As a result of this incident a thorough review of segregation operations was conducted by external CCA management staff... A number of immediate actions were taken to ensure a higher level of supervision and accountability...In addition, a meeting...with Managing Director Kevin Myers and Wardens of all 3 TDOC contract facilities...addressed segregation concerns at WCFA, HCCF and SCCF and outlined a plan to establish a focus team to evaluate current operations at each facility."		1/31/08 CMD note: Breach letter issued 1/16/08. 1/7/08 CMD note: This issue, due to the significance of the incident, is being considered an Essential requirement. As such, a notification of Breach is being drafted for distribution.
12/7/07	Yes	Security and Control - Security Equipment	5	MK 3 Fogger actual count was nine (9). Perpetual inventory showed ten (10). October and November monthly inventories showed twelve (12). Essential.	Wardens response dated 12/12/07. A complete inventory has been scheduled for the week of 12/17/07.		2/8/08 CMD note: Letter of concern issued 2/5/08. 2/1/08 CMD note: Per Policy, essential items found in non-compliance <i>may</i> result in a breach determination regardless of the number of times the item has been found in non-compliance. At this time, a breach determination is being held in abeyance in this instance, however, another finding of non-compliance for this item in the next 12 months shall result in a breach finding and immediate assessment of liquidated damages.
12/7/07	Yes	Security and Control - Security Equipment	6	Documented inventories present, however due to Item 5 above, inventoried did not match the perpetual records.	Wardens response dated 12/12/07. Weekly inventories will be conducted and any discrepancies will be immediately reported to the Chief of Security and the Duty Officer.		2/8/08 CMD note: Letter of concern issued 2/5/08.

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12/7/07	Yes	Security and Control - Security Equipment	7	Redacted			
12/7/07	Yes	Security and Control - Security Equipment	12a (1)	Redacted			
12/7/07	Yes	Security and Control - Security Equipment	12b	Quarterly reports are not being done for key inventories. Essential.	Wardens response dated 12/7/07. Quarterly reports will be documented in regards to keys in the future.		<u>2/8/08 CMD note: Letter of concern issued 2/5/08.</u> See 2/1/08 CMD note above.
12/7/07	Yes	Security and Control - Security Equipment	12c	CCA policy requires monthly testing of emergency keys to be done on 3rd shift. No monthly reports could be located. Essential.	Wardens response dated 12/7/07. Monthly checks of all emergency keys will be conducted on third shift and documented.		<u>2/8/08 CMD note: Letter of concern issued 2/5/08.</u> See 2/1/08 CMD note above.
12/7/07	Yes	Security and Control - Security Equipment	NIN	On 11-6-07, 11/12/07, and 11/27/07 the concave shield was used but no record of it being checked out in the armory.	Wardens response dated 12/7/07. Supervisors have been given clear directives that they will be held accountable for ensuring the items are signed out and back in when used.		<u>2/8/08 CMD note: Letter of concern issued 2/5/08.</u> 1/31/08 CMD note: The issue of proper procedures for the issuance and documentation of security equipment, including chemical agents, needs to be effectively addressed. The monitor is requested to verify the effectiveness of the corrective action taken within 30 days. If the problem persists, another NCR should be issued.
12/11/07	Yes	Use of Force	7e	On 11/30/07, six (6) cans of MK9 were issued to a correctional officer with no authorizing supervisor's signature. Repeat finding - NCR dated 9/19/07.	Same as above.		<u>2/8/08 CMD note: Letter of concern issued 2/5/08.</u> 1/31/08 CMD note: The issue of proper procedures for the issuance and documentation of security equipment, including chemical agents, needs to be effectively addressed. The monitor is requested to verify the effectiveness of the corrective action taken within 30 days. If the problem persists, another NCR should be issued.
12/11/07	Yes	Use of Force	7i	On 12/3/07, incident #723026 MK9 was used in a Use of Force incident. On 11/14/07, incident #720934 MK9 was used in a Use Force incident. There was no record of MK9 being issued by Central Control in either of these incidents. Repeat finding - NCR dated 9/19/07.	Same as above.		2/8/08 and 1/31/08 CMD note: Same as above.

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1/15/08	No	Security and Control - Security Equipment	4	On 1/14/08, TOMIS incident #728106, the concave shield and the Nova Stun Shield were present at the incident, however there was no record of the Stun Shield being activated. Upon checking the armory equipment issuance log, there was no record of either the concave shield or the Stun Shield being properly checked out. The armory log reflected the captain entered the armory at 8:20 pm and exited 22:10 with the reason listed as "shield".	Wardens response dated 1/18/08 received from Acting Warden Perry: From this point forward the Chiefs will be called after each incident to go over a prepared check list. The check list will include but not limited to the items listed on this NCR. This will be effective as of 1/15/08.		
1/25/08	No	Vocational and Academic Programs	2c (3)	There were no minutes for staff meetings. Agendas were available but minutes have not been done.	Wardens response dated 1/28/08: Concur. The A/W of Programs will monitor and ensure that minutes are maintained in the future.		
1/25/08	No	Vocational and Academic Programs	6	One teacher has actual classroom time only one day a week and assigns homework the remainder of the time. She has been doing the TABE testing, as well as, other testing for the facility. Note: This has been on-going for 24 months.	Wardens response dated 1/28/08: Facility requests additional information regarding when homework is appropriate. It is agreed that this practice is not optimum and it is not acceptable. However, based on the practice of recording time for which homework is assigned and paying inmates for that time is utilized in other TDOC facilities, it is questioned whether this is a policy violation. Absent a standard acceptable threshold, then to find this item non-compliant could be construed to mean all homework assignments for which inmates are credited for attendance and pay must therefore be in violation of policy. This punishes inmates when a teacher is absent for illness, etc. Request that additional direction be given as to the appropriate level of homework that can account for classroom participation. Immediate corrective action in this matter has been taken by ensuring that TABE testing is performed by the education counselor.		2/8/08 CMD note: <u>This issue detailed in this item more appropriately applies to item number 15a. The Non-compliance finding for item 6 will be deleted, and this issue will be dealt with in item 15a (below).</u>

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1/25/08	No	Vocational and Academic Programs	15a	The teacher noted above is entering time for which inmates are not in class on TOMIS LJEN as actual attendance, however, TDOC Policy 504.04, VI.C.4 (b) indicates that this time should have been entered in the excused hour's column. Several teachers are entering an excess of 6.0 hours a day on LJEN, i.e., 18 hours, 12 hours, 6 hours attend/6 hours excused on the same day.	Wardens response dated 1/28/08: Concur. The Warden met with all department heads on January 23rd and gave clear instructions on the expectations of all managers and supervisors to ensure attendance/pay was being entered accurately. Department heads were advised that they would be held accountable for the performance of their staff in this area, and they were expected to review and monitor their employees and hold them accountable. On January 25th, this issue was addressed to all education staff and additional training provided by the job coordinator to ensure education staff understood how to record attendance and pay.		

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9/19/07	Yes	Use of Force	7i	On 7-22-07, at 7:20 p.m. a MK 9 fogger was used in a Use of Force incident. There is no record of a MK9 fogger being issued by Central Control.	Warden's response September 24, 2007: The facility concurs that the staff in central control failed to log the issuance of OC in this instance as required. Corrective steps have been taken to address their failure.	Repeat finding 12/7/07 below.	2/8/08 CMD note: Letter of concern issued 2/5/08.
10/3/07	Yes	Food Service	34b	On two different dates, hot food delivered to segregation unit never reached required temperature of 140 degrees.	Warden response dated 10/18/07: A warming cart is now being used to transport trays from FS to seg unit and meals will be checked on a random basis each week by the Chief of Security and the FS Manager for temp compliance.	1/7/08 CM Comment: The facility has purchased a steam line for the segregation unit. They started heating the food in the unit on 2/4/08, I will monitor to ensure compliance.	
11/8/07	Yes	Security and Control - Counts	4a	The count room was not notified that 2 inmates had changed cells. This apparently meant that these inmates were not properly accounted for on TOMIS or the count room locator board, and had gone through counts uncorrected.	Wardens response dated 11/15/07: A directive has been given to facility employees that in no circumstance are inmates to be moved without count room approval. The employee who initiated these moves was identified and corrective action has been taken. Unit Managers and other supervisory staff are conducting meetings with line staff to ensure all staff know not to move inmates unless approved by the count room. This has also been added to the Warden's agenda for the upcoming staff recall meetings on November 27th that all employees are expected to attend.	Monitors Note: On 12/19/07 went to the unit to verify that the problem had been fixed. An Inmate, according to LIMC/count room was assigned to IA202, but he was living in IA103. Therefore I will continue to monitor compliance on this item.	1/31/08 CMD note: Letter of Concern issued 1/16/08. 1/7/08 CMD note: This item is identified as an Essential item. It has been determined that a Breach notification will not be issued at this time; however, a letter of concern will be sent addressing this issue.
11/19/07	Yes	Special Management Inmates	NIN	Per TDOC incident #721199, on November 16, 2007 at approximately 12:30 p.m., a maximum custody inmate and a protective custody inmate were placed in the recreation cage together.	Wardens response dated 12/3/07: "The facility agrees that staff...failed to follow applicable policy and post orders... As a result of this incident a thorough review of segregation operations was conducted by external CCA management staff... A number of immediate actions were taken to ensure a higher level of supervision and accountability...In addition, a meeting...with Managing Director Kevin Myers and Wardens of all 3 TDOC contract facilities...addressed segregation concerns at WCFA, HCCF and SCCF and outlined a plan to establish a focus team to evaluate current operations at each facility."	Verified 3/11/08 by CM: No recurrences of this or similar issues since corrective action taken.	1/31/08 CMD note: Breach letter issued 1/16/08. 1/7/08 CMD note: This issue, due to the significance of the incident, is being considered an Essential requirement. As such, a notification of Breach is being drafted for distribution.
12/7/07	Yes	Security and Control - Security Equipment	5	MK 3 Fogger actual count was nine (9). Perpetual inventory showed ten (10). October and November monthly inventories showed twelve (12). Essential.	Wardens response dated 12/12/07. A complete inventory has been scheduled for the week of 12/17/07.		2/8/08 CMD note: Letter of concern issued 2/5/08. 2/1/08 CMD note: ...At this time, a breach determination is being held in abeyance in this instance, however, another finding of non-compliance for this item in the next 12 months shall result in a breach finding and immediate assessment of liquidated damages.
12/7/07	Yes	Security and Control - Security Equipment	6	Documented inventories present, however due to Item 5 above, inventoried did not match the perpetual records.	Wardens response dated 12/12/07. Weekly inventories will be conducted and any discrepancies will be immediately reported to the Chief of Security and the Duty Officer.		2/8/08 CMD note: Letter of concern issued 2/5/08.
12/7/07	Yes	Security and Control - Security Equipment	12b	Quarterly reports are not being done for key inventories. Essential.	Wardens response dated 12/7/07. Quarterly reports will be documented in regards to keys in the future.		2/8/08 CMD note: Letter of concern issued 2/5/08. See 2/1/08 CMD note above.

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12/7/07	Yes	Security and Control - Security Equipment	12c	CCA policy requires monthly testing of emergency keys to be done on 3rd shift. No monthly reports could be located. Essential.	Wardens response dated 12/7/07. Monthly checks of all emergency keys will be conducted on third shift and documented.	Corrective Action Verified 3/11/08: CM received Jan./Feb. 2008 monthly checks of emergency keys.	2/8/08 CMD note: Letter of concern issued 2/5/08. See 2/1/08 CMD note above.
12/7/07	Yes	Security and Control - Security Equipment	NIN	On 11-6-07, 11/12/07, and 11/27/07 the concave shield was used but no record of it being checked out in the armory.	Wardens response dated 12/7/07. Supervisors have been given clear directives that they will be held accountable for ensuring the items are signed out and back in when used.		2/8/08 CMD note: Letter of concern issued 2/5/08. 1/31/08 CMD note: The issue of proper procedures for the issuance and documentation of security equipment, including chemical agents, needs to be effectively addressed. The monitor is requested to verify the effectiveness of the corrective action taken within 30 days. If the problem persists, another NCR should be issued.
12/11/07	Yes	Use of Force	7e	On 11/30/07, six (6) cans of MK9 were issued to a correctional officer with no authorizing supervisor's signature. Repeat finding - NCR dated 9/19/07.	Same as above.		2/8/08 CMD note: Letter of concern issued 2/5/08. 1/31/08 CMD note: The issue of proper procedures for the issuance and documentation of security equipment, including chemical agents, needs to be effectively addressed. The monitor is requested to verify the effectiveness of the corrective action taken within 30 days. If the problem persists, another NCR should be issued.
12/11/07	Yes	Use of Force	7i	On 12/3/07, incident #723026 MK9 was used in a Use of Force incident. On 11/14/07, incident #720934 MK9 was used in a Use Force incident. There was no record of MK9 being issued by Central Control in either of these incidents. Repeat finding - NCR dated 9/19/07.	Same as above.		2/8/08 and 1/31/08 CMD note: Same as above.
12/11/07	Yes	Use of Force	NIN	On 10/29/07, log shows one MK9 in the cabinet with Chief of Security being notified. Explanation entered on 11/1/07 that canister was empty and removed by Captain. Armory personnel are to remove/add canisters. On 11/8/07, log sheet showed three (3) MK9's exchanged but the count was changed to four (4). Also supervisors are not signing the central control chemical agent check out log consistently. Note: There were fourteen (14) occasions during the monitoring period (Oct. 1-Dec.7) that the supervisor did not sign the central control check out log for chemical agents.	Same as above.		2/8/08 and 1/31/08 CMD note: Same as above.
1/15/08	Yes	Security and Control - Security Equipment	4	On 1/14/08, TOMIS incident #728106, the concave shield and the Nova Stun Shield were present at the incident, however there was no record of the Stun Shield being activated. Upon checking the armory equipment issuance log, there was no record of either the concave shield or the Stun Shield being properly checked out. The armory log reflected the captain entered the armory at 8:20 pm and exited 22:10 with the reason listed as "shield".	Wardens response dated 1/18/08 received from Acting Warden Perry: From this point forward the Chiefs will be called after each incident to go over a prepared check list. The check list will include but not limited to the items listed on this NCR. This will be effective as of 1/15/08.		

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1/25/08	Yes	Vocational and Academic Programs	2c (3)	There were no minutes for staff meetings. Agendas were available but minutes have not been done.	Wardens response dated 1/28/08: Concur. The A/W of Programs will monitor and ensure that minutes are maintained in the future.	Corrective Action Verified: 3/11/08 Minutes are now being taken of staff meetings.	
1/25/08	Yes	Vocational and Academic Programs	15a	One teacher has actual classroom time only one day a week and assigns homework the remainder of the time. She has been doing the TABE testing, as well as other testing for the facility. The teacher noted above is entering time for which inmates are not in class on TOMIS LJEN as actual attendance, however, Policy 504.04 indicates that this time should have been entered in the excused hour's column. Several teachers are entering an excess of 6.0 hours a day on LJEN, i.e., 18 hours, 12 hours, 6 hours attend/6 hours excused on the same day.	Wardens response dated 1/28/08:"...Facility requests additional information regarding when homework is appropriate. It is agreed that this practice is not optimum... it is questioned whether this is a policy violation. Request that additional direction be given as to the appropriate level of homework that can account for classroom participation. Immediate corrective action in this matter has been taken by ensuring that TABE testing is performed by the education counselor." Concerning entry of attendance: "Concur. The Warden met with all department heads on January 23rd and gave clear instructions on the expectations of all managers and supervisors to ensure attendance/pay was being entered accurately... On January 25th, this issue was addressed to all education staff and additional training provided by the job coordinator to ensure education staff understood how to record attendance and pay."	Corrective Action Verified: 3/11/08. Education Counselor is now doing the TABE testing. The attendance monitored has been correctly entered.	
1/28/08	No	Special Management Inmates	3a	Inmate D. Smith #122954 was scheduled to be released from segregation on 1/27/08 at 4:00 pm. He was not released until 6:30 a.m. on 1/28/08. Captain called TDOC liaison at 3:00 a.m. on 1/28.08 requesting inmate Smith be allowed to stay on segregation pending PC. This request was denied. He was held in segregation 14.5 hours beyond his approved time. Essential Item.	Wardens response dated 2/6/08. The Shift Supervisor was directed by Chief of Unit Management to contact the Commissioner's designee regarding this inmate. He did not do as directed. The S/S has been talked to and corrective action has been taken. A PSN is completed and will be served on 2/6/08.	Corrective Action Verified: 3/11/08. BI01MGM report is being checked daily by monitor. No other deficiencies noted.	3/17/08 CMD note: Although this is an Essential item, no breach notification is being issued at this time. Disciplinary action was taken with the staff involved, and there were no recurrences of the issue in the 6 weeks after noted. Any subsequent instances of this will result in assessment of liquidated damages.
2/26/08	No	Staffing	3	On 2/23/08, a part-time officer was working the critical Utility Escort/Search post. She was allowed to go home at 4:00 pm. No replacement was made for this critical post. Upon entering Central Control, only one officer was present. The other officer came in prior to my leaving. These are both designated as critical posts. Essential Item.	Wardens response dated 2/23/08. Concur. Captain did send officer home at 4 pm with no relief. This is a violation of policy and post orders. The weekend roster will be routinely checked against Kronos to assure proper staffing. The C/C officer left her post to take a break. This was not authorized by the supervisor and corrective action is being taken on the officer. This is a violation of policy and post orders and unacceptable.		3/17/08 CMD note: Breach notification pending.
2/26/08	No	Security & Controls - Count	4d	On 2/23/08, the out-counts for visitation and kitchen were not received till 4:25 p.m., count began at 4:30 p.m.	Wardens response dated 2/23/08. Concur. The out-counts did arrive at the count room late. The Chief and AW will routinely monitor this area to ensure the policy is followed.		
2/26/08	No	Security & Controls - Count	NIN	Central Control called for the 4:30 p.m. count to be a sit/stand count. I conducted an i.d. count after the officer. Inmate in KC 214 and inmate in KC 110 were both covered with a blanket and did not wake up for count.	Wardens response dated 2/23/08. Concur. The 4:30 pm count is a sitting and standing count and staff are expected to hold inmates accountable for complying with the count procedure. I have issued a directive to Unit Management staff, the Chiefs and the AW's to monitor this count frequently to ensure that all staff are conducting count as expected and as directed.		

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10/3/07	Yes	Food Service	34b	On two different dates, hot food delivered to segregation unit never reached required temperature of 140 degrees.	Warden response dated 10/18/07: A warming cart is now being used to transport trays from FS to seg unit and meals will be checked on a random basis each week by the Chief of Security and the FS Manager for temperature compliance.	Corrective Action Verified 3/31/08: No reoccurrence of this issue. 1/7/08 CM Comment: The facility has purchased a steam line for the segregation unit. They started heating the food in the unit on 2/4/08, I will monitor to ensure compliance.	
11/8/07	Yes	Security and Control - Counts	4a	The count room was not notified that 2 inmates had changed cells. This apparently meant that these inmates were not properly accounted for on TOMIS or the count room locator board, and had gone through counts uncorrected.	Wardens response dated 11/15/07: A directive has been given to facility employees that in no circumstance are inmates to be moved without count room approval. The employee who initiated these moves was identified and corrective action has been taken. Unit Managers and other supervisory staff are conducting meetings with line staff to ensure all staff know not to move inmates unless approved by the count room. This has also been added to the Warden's agenda for the upcoming staff recall meetings on November 27th that all employees are expected to attend.	Monitors Note: 3/31/08: I will continue to monitor this item due to a similar problem arising this month. Monitors Note: On 12/19/07 went to the unit to verify that the problem had been fixed. An inmate, according to LIMC/count room was assigned to IA202, but he was living in IA103. Therefore I will continue to monitor compliance on this item.	1/31/08 CMD note: Letter of Concern issued 1/16/08. 1/7/08 CMD note: This item is identified as an Essential item. It has been determined that a Breach notification will not be issued at this time; however, a letter of concern will be sent addressing this issue.
11/19/07	Yes	Special Management Inmates	NIN	Per TDOC incident #721199, on November 16, 2007 at approximately 12:30 p.m., a maximum custody inmate and a protective custody inmate were placed in the recreation cage together.	Wardens response dated 12/3/07: "The facility agrees that staff...failed to follow applicable policy and post orders... As a result of this incident a thorough review of segregation operations was conducted by external CCA management staff... A number of immediate actions were taken to ensure a higher level of supervision and accountability...In addition, a meeting...with Managing Director Kevin Myers and Wardens of all 3 TDOC contract facilities...addressed segregation concerns at WCFA, HCCF and SCCF and outlined a plan to establish a focus team to evaluate current operations at each facility."	Corrective Action Verified: 3/31/08: WCFA does not presently have any administrative segregation inmates. Verified 3/11/08 by CM: No recurrences of this or similar issues since corrective action taken.	4/22/08 CMD note: Breach has been cured. Any subsequent incident of this nature within 12 months will result in issuance of a Breach notification and immediate liquidated damages. 1/31/08 CMD note: Breach letter issued 1/16/08. 1/7/08 CMD note: This issue, due to the significance of the incident, is being considered an Essential requirement. As such, a notification of Breach is being drafted for distribution.
12/7/07	Yes	Security and Control - Security Equipment	5	MK 3 Fogger actual count was nine (9). Perpetual inventory showed ten (10). October and November monthly inventories showed twelve (12). Essential.	Wardens response dated 12/12/07. A complete inventory has been scheduled for the week of 12/17/07.	Corrective Action Verified: 3/31/08: Inventories have been correct. No reoccurrence.	2/8/08 CMD note: Letter of concern issued 2/5/08. 2/1/08 CMD note: ...At this time, a breach determination is being held in abeyance in this instance, however, another finding of non-compliance for this item in the next 12 months shall result in a breach finding and immediate assessment of liquidated damages.
12/7/07	Yes	Security and Control - Security Equipment	6	Documented inventories present, however due to Item 5 above, inventories did not match the perpetual records.	Wardens response dated 12/12/07. Weekly inventories will be conducted and any discrepancies will be immediately reported to the Chief of Security and the Duty Officer.	Corrective Action Verified: 3/31/08: No further problems in regards to the inventories.	2/8/08 CMD note: Letter of concern issued 2/5/08.

Instrument name and Item numbers for Liquidated Damages issues are in BOLD print

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12/7/07	Yes	Security and Control - Security Equipment	12b	Quarterly reports are not being done for key inventories. Essential.	Wardens response dated 12/7/07. Quarterly reports will be documented in regards to keys in the future.	Corrective Action Verified: 3/31/08: CM was provided a copy of the quarterly key inventory report.	2/8/08 CMD note: Letter of concern issued 2/5/08. See 2/1/08 CMD note above.
12/7/07	Yes	Security and Control - Security Equipment	12c	CCA policy requires monthly testing of emergency keys to be done on 3rd shift. No monthly reports could be located. Essential.	Wardens response dated 12/7/07. Monthly checks of all emergency keys will be conducted on third shift and documented.	Corrective Action Verified:3/31/08: CM received Mar. 2008 monthly check of emergency keys. Corrective Action Verified: 3/11/08: CM received Jan./Feb. 2008 monthly checks of emergency keys.	2/8/08 CMD note: Letter of concern issued 2/5/08. See 2/1/08 CMD note above.
12/7/07	Yes	Security and Control - Security Equipment	NIN	On 11-6-07, 11/12/07, and 11/27/07 the concave shield was used but no record of it being checked out in the armory.	Wardens response dated 12/7/07. Supervisors have been given clear directives that they will be held accountable for ensuring the items are signed out and back in when used.	Monitors Note: 3/31/08: CM will continue to monitor this item due to findings this month.	2/8/08 CMD note: Letter of concern issued 2/5/08. 1/31/08 CMD note: The issue of proper procedures for the issuance and documentation of security equipment, including chemical agents, needs to be effectively addressed. The monitor is requested to verify the effectiveness of the corrective action taken within 30 days. If the problem persists, another NCR should be issued.
12/11/07	Yes	Use of Force	7e	On 11/30/07, six (6) cans of MK9 were issued to a correctional officer with no authorizing supervisor's signature. Repeat finding - NCR dated 9/19/07.	Same as above.	Monitors Note: 3/31/08: CM will continue to monitor this item due to findings on 3/11/08.	2/8/08 CMD note: Letter of concern issued 2/5/08. 1/31/08 CMD note: The issue of proper procedures for the issuance and documentation of security equipment, including chemical agents, needs to be effectively addressed. The monitor is requested to verify the effectiveness of the corrective action taken within 30 days. If the problem persists, another NCR should be issued.
12/11/07	Yes	Use of Force	7i	On 12/3/07, incident #723026 MK9 was used in a Use of Force incident. On 11/14/07, incident #720934 MK9 was used in a Use Force incident. There was no record of MK9 being issued by Central Control in either of these incidents. Repeat finding - NCR dated 9/19/07.	Same as above.	Monitors Note: 3/31/08: CM will continue to monitor this item due to findings this month.	2/8/08 and 1/31/08 CMD note: Same as above.
12/11/07	Yes	Use of Force	NIN	On 10/29/07, log shows one MK9 in the cabinet with Chief of Security being notified. Explanation entered on 11/1/07 that canister was empty and removed by Captain. Armory personnel are to remove/add canisters. On 11/8/07, log sheet showed three (3) MK9's exchanged but the count was changed to four (4). Also supervisors are not signing the central control chemical agent check out log consistently. Note: There were fourteen (14) occasions during the monitoring period (Oct. 1-Dec.7) that the supervisor did not sign the central control check out log for chemical agents.	Same as above.	Monitors Note: 3/31/08: CM will continue to monitor this item due to findings this month.	2/8/08 and 1/31/08 CMD note: Same as above.

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1/15/08	Yes	Security and Control - Security Equipment	4	On 1/14/08, TOMIS incident #728106, the concave shield and the Nova Stun Shield were present at the incident, however there was no record of the Stun Shield being activated. Upon checking the armory equipment issuance log, there was no record of either the concave shield or the Stun Shield being properly checked out. The armory log reflected the captain entered the armory at 8:20 pm and exited 22:10 with the reason listed as "shield".	Wardens response dated 1/18/08 received from Acting Warden Perry: From this point forward the Chiefs will be called after each incident to go over a prepared check list. The check list will include but not limited to the items listed on this NCR. This will be effective as of 1/15/08.	Monitors Note: 3/31/08: CM will continue to monitor this item due to findings this month.	
1/28/08	Yes	Special Management Inmates	3a	Inmate D. Smith #122954 was scheduled to be released from segregation on 1/27/08 at 4:00 pm. He was not released until 6:30 a.m. on 1/28/08. Captain called TDOC liaison at 3:00 a.m. on 1/28.08 requesting inmate Smith be allowed to stay on segregation pending PC. This request was denied. He was held in segregation 14.5 hours beyond his approved time. Essential Item.	Wardens response dated 2/6/08. The Shift Supervisor was directed by Chief of Unit Management to contact the Commissioner's designee regarding this inmate. He did not do as directed. The S/S has been talked to and corrective action has been taken. A PSN is completed and will be served on 2/6/08.	Corrective Action Verified: 3/31/08: No reoccurrence. This item is monitored daily. Corrective Action Verified: 3/11/08. BI01MGM report is being checked daily by monitor. No other deficiencies noted.	3/17/08 CMD note: Although this is an Essential item, no breach notification is being issued at this time. Disciplinary action was taken with the staff involved, and there were no recurrences of the issue in the 6 weeks after noted. Any subsequent instances of this will result in assessment of liquidated damages.
2/26/08	Yes	Staffing	3	On 2/23/08, a part-time officer was working the critical Utility Escort/Search post. She was allowed to go home at 4:00 pm. No replacement was made for this critical post. Upon entering Central Control, only one officer was present. The other officer came in prior to my leaving. These are both designated as critical posts. Essential Item.	Wardens response dated 2/23/08. Concur. Captain did send officer home at 4 pm with no relief. This is a violation of policy and post orders. The weekend roster will be routinely checked against Kronos to assure proper staffing. The C/C officer left her post to take a break. This was not authorized by the supervisor and corrective action is being taken on the officer. This is a violation of policy and post orders and unacceptable.	Monitors Note: 3/31/08: Due to findings on 3/24/08, CM will continue to monitor this item.	4/17/08 CMD note: Breach notification sent via e-mail 4/17, with hard copy to follow. 3/17/08 CMD note: Breach notification pending.
2/26/08	Yes	Security & Controls - Count	4d	On 2/23/08, the out-counts for visitation and kitchen were not received till 4:25 p.m., count began at 4:30 p.m.	Wardens response dated 2/23/08. Concur. The out-counts did arrive at the count room late. The Chief and AW will routinely monitor this area to ensure the policy is followed.	Corrective Action Verified: 3/31/08: No reoccurrence for this item.	
2/26/08	Yes	Security & Controls - Count	NIN	Central Control called for the 4:30 p.m. count to be a sit/stand count. I conducted an i.d. count after the officer. Inmate in KC 214 and inmate in KC 110 were both covered with a blanket and did not wake up for count.	Wardens response dated 2/23/08. Concur. The 4:30 pm count is a sitting and standing count and staff are expected to hold inmates accountable for complying with the count procedure. I have issued a directive to Unit Management staff, the Chiefs and the AW's to monitor this count frequently to ensure that all staff are conducting count as expected and as directed.	Monitors Note: 3/31/08: CM will continue to monitor this item.	

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3/10/08	No	Staffing	11a	SCO position #118162 was vacated 1/29/08 and not filled until 3/2/08 a total of 34 days. Security positions are to be filled within 30 days per contract requirements.	Warden's response dated 3/19/08: While facility concurs that this position was not filled within the 30 day time frame, we submit that due diligence was performed attempting to fill within the designated time frame and further that overtime was utilized to maintain coverage of posts throughout this period. There was an unusual occurrence of 4 SCO vacancies occurring very closely together. Only 6 applicants applied for those positions and of those 4 either did not have the requisite 6 months experience or were completely unsuitable for a supervisory position. The remaining vacancies were reposted and the remaining vacancies filled from that selection of applicants. It is also noted that the last occasion WCFA failed to fill a security position within the 30 day limit was June 2004: a period of nearly 4 years.		

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9/19/07	Yes	Use of Force	7e	On 7-1-07, a MK 9 fogger was issued to the Assistant Shift Supervisor. On 8-21-07, a MK 9 fogger was issued to a Correctional Officer. Per CCA approved policy neither of these positions are authorized.	Warden's response September 24, 2007: Warden does not concur. TDOC approved facility policy specifies that use of OC must be approved by Shift supervisor or higher authority. It does not state that OC cannot be issued to other staff. He notes in both incidents the supervisor sent personnel to pick up the OC.	Corrective Action Verified: 5/6/08: No further finding of noncompliance. Monitors Note: 03/31/08: CM will continue to monitor due to findings this month. ****Repeat finding 12/7/07 below.	2/8/08 CMD note: Letter of concern issued 2/5/08. 11/21/07 CMD note: In both cases cited in the NCR, the log entry for the issuance of the chemical agents was incorrectly completed: neither indicated that the issuance was approved by an authorized supervisor. Complete and accurate documentation of issuance of chemical agents and other security devices is a valid contractual concern.
9/19/07	Yes	Use of Force	7i	On 7-22-07, at 7:20 p.m. a MK 9 fogger was used in a Use of Force incident. There is no record of a MK9 fogger being issued by Central Control.	Warden's response September 24, 2007: The facility concurs that the staff in central control failed to log the issuance of OC in this instance as required. Corrective steps have been taken to address their failure.	Corrective Action Verified: 5/6/08: No further finding of noncompliance. Monitors Note: 3/31/08: CM will continue to monitor this item. Repeat finding 12/7/07 below.	2/8/08 CMD note: Letter of concern issued 2/5/08.
11/8/07	Yes	Security and Control - Counts	4a	The count room was not notified that 2 inmates had changed cells. This apparently meant that these inmates were not properly accounted for on TOMIS or the count room locator board, and had gone through counts uncorrected.	Wardens response dated 11/15/07: A directive has been given to facility employees that in no circumstance are inmates to be moved without count room approval. The employee who initiated these moves was identified and corrective action has been taken. Unit Managers and other supervisory staff are conducting meetings with line staff to ensure all staff know not to move inmates unless approved by the count room. This has also been added to the Warden's agenda for the upcoming staff recall meetings on November 27th that all employees are expected to attend.	Corrective Action Verified: 5/6/08: No further finding of noncompliance. Monitors Note: 3/31/08: I will continue to monitor this item due to a similar problem arising this month. Monitors Note: On 12/19/07 went to the unit to verify that the problem had been fixed. An inmate, according to LIMC/count room was assigned to IA202, but he was living in IA103. Therefore I will continue to monitor compliance on this item.	1/31/08 CMD note: Letter of Concern issued 1/16/08. 1/7/08 CMD note: This item is identified as an Essential item. It has been determined that a Breach notification will not be issued at this time; however, a letter of concern will be sent addressing this issue.
12/7/07	Yes	Security and Control - Security Equipment	NIN	On 11-6-07, 11/12/07, and 11/27/07 the concave shield was used but no record of it being checked out in the armory.	Wardens response dated 12/7/07. Supervisors have been given clear directives that they will be held accountable for ensuring the items are signed out and back in when used.	Corrective Action Verified: 5/6/08: No further finding of noncompliance. Monitors Note: 3/31/08: CM will continue to monitor this item due to findings this month.	2/8/08 CMD note: Letter of concern issued 2/5/08. 1/31/08 CMD note: The issue of proper procedures for the issuance and documentation of security equipment, including chemical agents, needs to be effectively addressed. The monitor is requested to verify the effectiveness of the corrective action taken within 30 days. If the problem persists, another NCR should be issued.
12/11/07	Yes	Use of Force	7e	On 11/30/07, six (6) cans of MK9 were issued to a correctional officer with no authorizing supervisor's signature. Repeat finding - NCR dated 9/19/07.	Same as above.	Corrective Action Verified: 5/6/08: No further finding of noncompliance. Monitors Note: 3/31/08: CM will continue to monitor this item due to findings on 3/11/08.	2/8/08 CMD note: Letter of concern issued 2/5/08. 1/31/08 CMD note: The issue of proper procedures for the issuance and documentation of security equipment, including chemical agents, needs to be effectively addressed. The monitor is requested to verify the effectiveness of the corrective action taken within 30 days. If the problem persists, another NCR should be issued.

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12/11/07	Yes	Use of Force	NIN	On 10/29/07, log shows one MK9 in the cabinet with Chief of Security being notified. Explanation entered on 11/1/07 that canister was empty and removed by Captain. Armory personnel are to remove/add canisters. On 11/8/07, log sheet showed three (3) MK9's exchanged but the count was changed to four (4). Also supervisors are not signing the central control chemical agent check out log consistently. Note: There were fourteen (14) occasions during the monitoring period (Oct. 1-Dec.7) that the supervisor did not sign the central control check out log for chemical agents.	Same as above.	Corrective Action Verified: 5/6/08: No further finding of noncompliance. Monitors Note: 3/31/08: CM will continue to monitor this item due to findings this month.	2/8/08 and 1/31/08 CMD note: Same as above.
1/15/08	Yes	Security and Control - Security Equipment	4	On 1/14/08, TOMIS incident #728106, the concave shield and the Nova Stun Shield were present at the incident, however there was no record of the Stun Shield being activated. Upon checking the armory equipment issuance log, there was no record of either the concave shield or the Stun Shield being properly checked out. The armory log reflected the captain entered the armory at 8:20 pm and exited 22:10 with the reason listed as "shield".	Wardens response dated 1/18/08 received from Acting Warden Perry: From this point forward the Chiefs will be called after each incident to go over a prepared check list. The check list will include but not limited to the items listed on this NCR. This will be effective as of 1/15/08.	Corrective Action Verified: 5/6/08: No further finding of noncompliance. Monitors Note: 3/31/08: CM will continue to monitor this item due to findings this month.	
2/26/08	Yes	Staffing	3	On 2/23/08, a part-time officer was working the critical Utility Escort/Search post. She was allowed to go home at 4:00 pm. No replacement was made for this critical post. Upon entering Central Control, only one officer was present. The other officer came in prior to my leaving. These are both designated as critical posts. Essential Item.	Wardens response dated 2/23/08. Concur. Captain did send officer home at 4 pm with no relief. This is a violation of policy and post orders. The weekend roster will be routinely checked against Kronos to assure proper staffing. The C/C officer left her post to take a break. This was not authorized by the supervisor and corrective action is being taken on the officer. This is a violation of policy and post orders and unacceptable.	Corrective Action Verified: 5/6/08: No further finding of noncompliance. Monitors Note: 3/31/08: CM will continue to monitor this item.	4/17/08 CMD note: Breach notification sent via e-mail 4/17, with hard copy to follow. 3/17/08 CMD note: Breach notification pending.
2/26/08	Yes	Security & Controls - Count	NIN	Central Control called for the 4:30 p.m. count to be a sit/stand count. I conducted an i.d. count after the officer. Inmate in KC 214 and inmate in KC 110 were both covered with a blanket and did not wake up for count.	Wardens response dated 2/23/08. Concur. The 4:30 pm count is a sitting and standing count and staff are expected to hold inmates accountable for complying with the count procedure. I have issued a directive to Unit Management staff, the Chiefs and the AW's to monitor this count frequently to ensure that all staff are conducting count as expected and as directed.	Corrective Action Verified: 5/6/08: No further finding of noncompliance. Monitors Note: 3/31/08: CM will continue to monitor this item.	

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3/10/08	No	Staffing	11a	SCO position #118162 was vacated 1/29/08 and not filled until 3/2/08 a total of 34 days. Security positions are to be filled within 30 days per contract requirements.	Warden's response dated 3/19/08: While facility concurs that this position was not filled within the 30 day time frame, we submit that due diligence was performed attempting to fill within the designated time frame and further that overtime was utilized to maintain coverage of posts throughout this period. There was an unusual occurrence of 4 SCO vacancies occurring very closely together. Only 6 applicants applied for those positions and of those 4 either did not have the requisite 6 months experience or were completely unsuitable for a supervisory position. The remaining vacancies were reposted and the remaining vacancies filled from that selection of applicants. It is also noted that the last occasion WCFA failed to fill a security position within the 30 day limit was June 2004: a period of nearly 4 years.	Corrective Action Verified: 5/6/08: All positions have been filled within the required timeframe.	
4/10/08	No	PREA	1	Two (2) out of twenty (20) checked did not have the predictor scales showing they were screened fro PREA.	Warden's response dated 4/29/08: WCFA agrees with the non-compliance item. The Case Manager did complete the two (2) predictor scales in question, however, she did not ensure placement into the institutional file as required by policy. Training has been conducted with all unit teams to ensure that all Case Managers are in compliance with this requirement. Additionally, both predictor scales have been placed in the IIR.		
4/10/08	No	PREA	4c	Seven (7) out of thirty-seven (37) inmates identified as predators did not have the required quarterly contact not on TOMIS: LCDG.	Warden's response dated 4/29/08: The facility concurs with the NCR. The department heads responsible for monitoring this process failed to ensure that their employees completed the required quarterly contact notes on LCDG. The department heads were held accountable for the subpar performance of their staff in this area and lack of follow-up on their part. They were advised of the expectation that they are to review and monitor their employees and hold them accountable when the policy is not followed.		
4/10/08	No	PREA	4d	Thirty-seven (37) out of thirty-seven (37) did not have the results of predator status review entered on LCLN during annual reclassification process.	Warden's response dated 4/29/08: WCFA acknowledges and agrees with the NCR. This information has been a training tool for all staff since the requirements are outlined in Policy 502.06 and not also included in the reclassification policy. Additionally, a request has been submitted to TDOC during the policy review process requesting the requirement to be included in the reclassification process. Training has been conducted with all U/M Teams regarding classification and PREA issues. Furthermore, an additional off site training will be conducted on May 30, 2008 for all U/M Teams regarding classification, PREA, and other items. The U/M and CCC will monitor/audit this area on a weekly basis to ensure future compliance.		

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2/26/08	Yes	Staffing	3	On 2/23/08, a part-time officer was working the critical Utility Escort/Search post. She was allowed to go home at 4:00 pm. No replacement was made for this critical post. Upon entering Central Control, only one officer was present. The other officer came in prior to my leaving. These are both designated as critical posts. Essential Item.	Wardens response dated 2/23/08. Concur. Captain did send officer home at 4 pm with no relief. This is a violation of policy and post orders. The weekend roster will be routinely checked against Kronos to assure proper staffing. The C/C officer left her post to take a break. This was not authorized by the supervisor and corrective action is being taken on the officer. This is a violation of policy and post orders and unacceptable.	Cure Verified: 5/30/08. Monitoring of this item indicated no further problems as of this date. Corrective Action Verified: 5/6/08: No further finding of noncompliance. Monitors Note: 3/31/08: CM will continue to monitor this item.	4/17/08 CMD note: Breach notification sent via e-mail 4/17, with hard copy to follow. 3/17/08 CMD note: Breach notification pending.
4/10/08	Yes	PREA	1	Two (2) out of twenty (20) checked did not have the predictor scales showing they were screened for PREA.	Warden's response dated 4/29/08: WCFA agrees with the non-compliance item. The Case Manager did complete the two (2) predictor scales in question, however, she did not ensure placement into the institutional file as required by policy. Training has been conducted with all unit teams to ensure that all Case Managers are in compliance with this requirement. Additionally, both predictor scales have been placed in the IIR.	Corrective Action Verified: May 30, 2008. Predictor scales are now in the institutional files.	
4/10/08	Yes	PREA	4c	Seven (7) out of thirty-seven (37) inmates identified as predators did not have the required quarterly contact not on TOMIS: LCDG.	Warden's response dated 4/29/08: The facility concurs with the NCR. The department heads responsible for monitoring this process failed to ensure that their employees completed the required quarterly contact notes on LCDG. The department heads were held accountable for the subpar performance of their staff in this area and lack of follow-up on their part. They were advised of the expectation that they are to review and monitor their employees and hold them accountable when the policy is not followed.	Corrective Action Verified: May 30, 2008. The seven (7) inmates now have a quarterly contact note.	
4/10/08	Yes	PREA	4d	Thirty-seven (37) out of thirty-seven (37) did not have the results of predator status review entered on LCLN during annual reclassification process.	Warden's response dated 4/29/08: WCFA acknowledges and agrees with the NCR. This information has been a training tool for all staff since the requirements are outlined in Policy 502.06 and not also included in the reclassification policy. Additionally, a request has been submitted to TDOC during the policy review process requesting the requirement to be included in the reclassification process. Training has been conducted with all U/M Teams regarding classification and PREA issues. Furthermore, an additional off site training will be conducted on May 30, 2008 for all U/M Teams regarding classification, PREA, and other items. The U/M and CCC will monitor/audit this area on a weekly basis to ensure future compliance.	Corrective Action Verified: May 30, 2008. All predators that have had an annual reclass since this finding had comments regarding predator status.	

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5/30/08	No	Drug Testing & Substance Abuse Treatment	8d (1)	Checked twenty (20) files, two (2) did not have a treatment plan. Inmate R. Cotey #430066 and inmate C. Gaines #322857 both entered the program on 3/27/08. Policy requires that treatment plan be done within a thirty (30) day timeframe.	Warden's response received 6/6/08: The facility agrees with the finding and both treatment plans are now completed. During the month of May, the Addictions Treatment Unit implemented a major procedural change in the method of assigning inmates to counselors which simplified the completion and tracking of the required documentation. Prior to this, from admission to completion, an inmate was assigned to four separate counselors and each counselor was required to complete a portion of the program documentation which created much confusion. in addition to this change, the ATU Manager will continue to audit the files and monitor the tracking sheets that have been put into place to ensure all requirements are completed.		

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5/30/08	Yes	Drug Testing & Substance Abuse Treatment	8d (1)	Checked twenty (20) files, two (2) did not have a treatment plan. Policy requires that treatment plan be done within a thirty (30) day timeframe.	Warden's response received 6/6/08: The facility agrees with the finding and both treatment plans are now completed. During the month of May, the Addictions Treatment Unit implemented a major procedural change in the method of assigning inmates to counselors which simplified the completion and tracking of the required documentation. Prior to this, from admission to completion, an inmate was assigned to four separate counselors and each counselor was required to complete a portion of the program documentation which created much confusion. In addition to this change, the ATU Manager will continue to audit the files and monitor the tracking sheets that have been put into place to ensure all requirements are completed.		
6/23/08	No	Use of Force	3h	On 6/15/08, at 6:09 p.m., TOMIS incident #747923 chemical agents were used. Notification was not made to CD till 7:45 p.m. TDOC policy 506.07 requires notification within one (1) hour of occurrence. Essential item.	Warden's response received 6/24/08: The Warden concurs there was a failure to communicate within the proscribed time frame. As the Use of Force occurred during the evening meal and the shift supervisor was managing the chow hall process of feeding he failed to call or have someone call in a timely manner. This has been addressed and supervisors directed to use the assigned Captain's cell phone if necessary immediately upon notification of a use of force. In some instances such as this one, they may need to make a preliminary notification then subsequently make a follow-up call if needed after the meal ends.		<u>7/21/08 CMD note. As an ESSENTIAL item, this item is subject to a Breach notification when found in non-compliance. This notification is pending.</u>

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2/26/08	Yes	Staffing	3	On 2/23/08, a part-time officer was working the critical Utility Escort/Search post. She was allowed to go home at 4:00 pm. No replacement was made for this critical post. Upon entering Central Control, only one officer was present. The other officer came in prior to my leaving. These are both designated as critical posts. Essential Item.	Wardens response dated 2/23/08. Concur. Captain did send officer home at 4 pm with no relief. This is a violation of policy and post orders. The weekend roster will be routinely checked against Kronos to assure proper staffing. The C/C officer left her post to take a break. This was not authorized by the supervisor and corrective action is being taken on the officer. This is a violation of policy and post orders and unacceptable.	Cure Verified: 5/30/08. Monitoring of this item indicated no further problems as of this date. Corrective Action Verified: 5/6/08: No further finding of noncompliance. Monitors Note: 3/31/08: CM will continue to monitor this item.	4/17/08 CMD note: Breach notification sent via e-mail 4/17, with hard copy to follow. 3/17/08 CMD note: Breach notification pending.
5/30/08	Yes	Drug Testing & Substance Abuse Treatment	8d (1)	Checked twenty (20) files, two (2) did not have a treatment plan. Both inmates entered the program on 3/27/08. Policy requires that treatment plan be done within a thirty (30) day timeframe.	Warden's response received 6/6/08: The facility agrees with the finding and both treatment plans are now completed. During the month of May, the Addictions Treatment Unit implemented a major procedural change in the method of assigning inmates to counselors which simplified the completion and tracking of the required documentation. Prior to this, from admission to completion, an inmate was assigned to four separate counselors and each counselor was required to complete a portion of the program documentation which created much confusion. In addition to this change, the ATU Manager will continue to audit the files and monitor the tracking sheets that have been put into place to ensure all requirements are completed.	Corrective Action Verified: 8/5/08: I checked five (5) files, in addition to the two (2) in noncompliance. No further finding of noncompliance.	
6/23/08	No	Use of Force	3h	On 6/15/08, at 6:09 p.m., TOMIS incident #747923 chemical agents were used. Notification was not made to CD till 7:45 p.m. TDOC policy 506.07 requires notification within one (1) hour of occurrence.	Warden's response received 6/24/08: The Warden concurs there was a failure to communicate within the proscribed timeframe. As the Use of Force occurred during the evening meal and the shift supervisor was managing the chow hall process of feeding he failed to call or have someone call in a timely manner. This has been addressed and supervisors directed to use the assigned Captain's cell phone if necessary immediately upon notification of a use of force. In some instances such as this one, they may need to make a preliminary notification then subsequently make a follow-up if needed after the meal ends.		
7/7/080	No	Security and Control - Security Equipment	12a (1)	Redacted			
7/7/08	No	Security and Control - Counts	7a	On 7/7/08, while monitoring count on H (ABC) unit, only one (1) officer conducted the count. Essential item.	Warden's response received 7/8/08: The facility concurs with Contract Monitor's non-compliant finding. Policy and procedures are in place however, staff did not follow in this instance. All staff involved have been counseled and/or received disciplinary action to ensure future compliance.		8/26/08 CMD note: As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. Due to the frequency of count-related issues, that notification is pending.

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7/14/08	No	Staffing	14c	Four (4) of the SORT members did not receive the required quarterly training for April, May, June 2008.	Warden's response received 7/16/08: The Warden agrees that Whiteville Correctional Facility failed to comply with TDOC Policy 506.07.2, amendment 07-16. Please note that the required training had been scheduled however, not within the compliance date. Practices have been reviewed and scheduling procedures addressed to ensure that no future violation may occur.		
7/30/08	No	Drug Testing & Substance Abuse Treatment	2e	An inmate was charged with a disciplinary for a positive drug screen, however, the disciplinary report was never processed by the disciplinary hearing officer, and no hearing was held. Essential Item.	Warden's response received 8/1/08: The facility does not concur in this NC finding. AW Perry conducted a thorough investigation of the drug screen procedures as it pertains to incident #750932. His findings were that no procedures were compromised by C/O Jackson. All disciplinary and tests were completed by Mr. Jackson and properly turned in for processing and a disciplinary was initiated by Officer Jackson. While the investigation is on-going at this point it does appear that at some point between the initiation of the DR by the U/A officer and the disciplinary reaching the D-board for hearing that it disappeared. The investigation into how the disciplinary disappeared and who is responsible is continuing, but the Drug testing policy in this case was conducted in accordance with the policy. We respectfully ask that this NCR be removed as a result of the preliminary findings of this investigation.		<u>8/26/08 CMD note: The issue of who was responsible for mishandling the disciplinary report is not at issue. The fact remains that an inmate with a positive drug test did not receive a disciplinary hearing. The non-compliance report is valid and will stand. As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. The determination of whether to issue such notification is pending. A follow-up response by the Warden, indicating the final results of the investigation, and corrective action, will be considered in making this decision.</u>
7/30/08	No	Security and Control - Counts	4f	On 7/29/08, WCF was unable to clear the 10:30 a.m. count. This resulted in an emergency count being done with it not clearing until 12:47 p.m. Essential item.	Warden's response received 8/1/08: Prior to this NCR facility management had already taken steps to improve the count process. The Warden agrees that the count function is of highest priority and has personally reviewed count processes with the Assistant Warden and Chiefs, and the Unit Managers. The entire management team is focusing on count with monitoring of daily counts being conducted by all management team staff to include out counts, housing unit counts and the count room process. We are identifying where specific employees may have become lax in this process and will take corrective measures where appropriate and retraining where appropriate. No facility can expect that every employee, at every count will always be perfect, and some errors will occur in the best situations from time to time. While it is not disputed that errors were made in the referenced count; it is important to remember that the process did catch the error and the count was not cleared until rectified as is the ultimate goal.		<u>8/26/08 CMD note: As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. The CMD was present for a discussion of this incident, which appears to have caused, in part, by an inexperienced staff member in the count room. The Associate Warden's explanation of the problem and corrective action plan is acceptable, and no Breach notification will be issued.</u>

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6/23/08	Yes	Use of Force	3h	On 6/15/08, at 6:09 p.m., TOMIS incident #747923 chemical agents were used. Notification was not made to CD till 7:45 p.m. TDOC policy 506.07 requires notification within one (1) hour of occurrence.	Warden's response received 6/24/08: The Warden concurs there was a failure to communicate within the proscribed timeframe. As the Use of Force occurred during the evening meal and the shift supervisor was managing the chow hall process of feeding he failed to call or have someone call in a timely manner. This has been addressed and supervisors directed to use the assigned Captain's cell phone if necessary immediately upon notification of a use of force. In some instances such as this one, they may need to make a preliminary notification then subsequently make a follow-up if needed after the meal ends.		9/9/08 CMD note: Breach notification issued 7/31/08. 7/21/08 CMD note. As an ESSENTIAL item, this item is subject to a Breach notification when found in non-compliance. This notification is pending.
7/7/080	Yes	Security and Control - Security Equipment	12a (1)	Redacted			
7/7/08	Yes	Security and Control - Counts	7a	On 7/7/08, while monitoring count on H (ABC) unit, only one (1) officer conducted the count. Essential item.	Warden's response received 7/8/08: The facility concurs with Contract Monitor's non-compliant finding. Policy and procedures are in place however, staff did not follow in this instance. All staff involved have been counseled and/or received disciplinary action to ensure future compliance.		9/9/08 CMD note: Breach notification issued 9/3/08. 8/26/08 CMD note: As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. Due to the frequency of count-related issues, that notification is pending.
7/14/08	Yes	Staffing	14c	Four (4) of the SORT members did not receive the required quarterly training for April, May, June 2008.	Warden's response received 7/16/08: The Warden agrees that Whiteville Correctional Facility failed to comply with TDOC Policy 506.07.2, amendment 07-16. Please note that the required training had been scheduled however, not within the compliance date. Practices have been reviewed and scheduling procedures addressed to ensure that no future violation may occur.		
7/30/08	Yes	Drug Testing & Substance Abuse Treatment	2e	An inmate was charged with a disciplinary for a positive drug screen, however, the disciplinary report was never processed by the disciplinary hearing officer, and no hearing was held. Essential Item.	Warden's response received 8/1/08: The facility does not concur in this NC finding. AW Perry conducted a thorough investigation of the drug screen procedures as it pertains to incident #750932. His findings were that no procedures were compromised by C/O Jackson. All disciplinary and tests were completed by Mr. Jackson and properly turned in for processing and a disciplinary was initiated by Officer Jackson. While the investigation is on-going at this point it does appear that at some point between the initiation of the DR by the U/A officer and the disciplinary reaching the D-board for hearing that it disappeared. The investigation into how the disciplinary disappeared and who is responsible is continuing, but the Drug testing policy in this case was conducted in accordance with the policy. We respectfully ask that this NCR be removed as a result of the preliminary findings of this investigation.		8/26/08 CMD note: The issue of who was responsible for mishandling the disciplinary report is not at issue. The fact remains that an inmate with a positive drug test did not receive a disciplinary hearing. The non-compliance report is valid and will stand. As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. The determination of whether to issue such notification is pending. A follow-up response by the Warden, indicating the final results of the investigation, and corrective action, will be considered in making this decision.

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7/30/08	Yes	Security and Control - Counts	4f	On 7/29/08, WCF was unable to clear the 10:30 a.m. count. This resulted in an emergency count being done with it not clearing until 12:47 p.m. Essential item.	Warden's response received 8/1/08: Prior to this NCR facility management had already taken steps to improve the count process. The Warden agrees that the count function is of highest priority and has personally reviewed count processes with the Assistant Warden and Chiefs, and the Unit Managers. The entire management team is focusing on count with monitoring of daily counts being conducted by all management team staff to include out counts, housing unit counts and the count room process. We are identifying where specific employees may have become lax in this process and will take corrective measures where appropriate and retraining where appropriate. No facility can expect that every employee, at every count will always be perfect, and some errors will occur in the best situations from time to time. While it is not disputed that errors were made in the referenced count; it is important to remember that the process did catch the error and the count was not cleared until rectified as is the ultimate goal.		8/26/08 CMD note: As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. The CMD was present for a discussion of this incident, which appears to have caused, in part, by an inexperienced staff member in the count room. The Associate Warden's explanation of the problem and corrective action plan is acceptable, and no Breach notification will be issued.

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6/23/08	Yes	Use of Force	3h	On 6/15/08, at 6:09 p.m., TOMIS incident #747923 chemical agents were used. Notification was not made to CD till 7:45 p.m. TDOC policy 506.07 requires notification within one (1) hour of occurrence.	Warden's response received 6/24/08: The Warden concurs there was a failure to communicate within the proscribed timeframe. As the Use of Force occurred during the evening meal and the shift supervisor was managing the chow hall process of feeding he failed to call or have someone call in a timely manner. This has been addressed and supervisors directed to use the assigned Captain's cell phone if necessary immediately upon notification of a use of force. In some instances such as this one, they may need to make a preliminary notification then subsequently make a follow-up if needed after the meal ends.	Corrective Action Verified: 9/28/08. No further finding of noncompliance.	9/9/08 CMD note: Breach notification issued 7/31/08. 7/21/08 CMD note. As an ESSENTIAL item, this item is subject to a Breach notification when found in non-compliance. This notification is pending.
7/7/080	Yes	Security and Control - Security Equipment	12a (1)	Redacted			
7/7/08	Yes	Security and Control - Counts	7a	On 7/7/08, while monitoring count on H (ABC) unit, only one (1) officer conducted the count. Essential item.	Warden's response received 7/8/08: The facility concurs with Contract Monitor's non-compliant finding. Policy and procedures are in place however, staff did not follow in this instance. All staff involved have been counseled and/or received disciplinary action to ensure future compliance.	Corrective Action Verified: 9/28/08. No further finding of noncompliance.	9/9/08 CMD note: Breach notification issued 9/3/08. 8/26/08 CMD note: As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. Due to the frequency of count-related issues, that notification is pending.
7/14/08	Yes	Staffing	14c	Four (4) of the SORT members did not receive the required quarterly training for April, May, June 2008.	Warden's response received 7/16/08: The Warden agrees that Whiteville Correctional Facility failed to comply with TDOC Policy 506.07.2, amendment 07-16. Please note that the required training had been scheduled however, not within the compliance date. Practices have been reviewed and scheduling procedures addressed to ensure that no future violation may occur.		

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7/30/08	Yes	Drug Testing & Substance Abuse Treatment	2e	On 7/7/08, i/c #750932, inmate Burl #315577 and Collins #393206 were charged with positive drug screen. Inmate Collins was processed correctly. Inmate Burl's disciplinary report was never received by disciplinary chairperson. No hearing was held.	Warden's response received 8/1/08: The facility does not concur in this NC finding. AW Perry conducted a thorough investigation of the drug screen procedures as it pertains to incident #750932. His findings were that no procedures were compromised by C/O Jackson. All disciplinary and tests were completed by Mr. Jackson and properly turned in for processing and a disciplinary was initiated by Officer Jackson. While the investigation is on-going at this point it does appear that at some point between the initiation of the DR by the U/A officer and the disciplinary reaching the D-board for hearing that it disappeared. The investigation into how the disciplinary disappeared and who is responsible is continuing, but the Drug testing policy in this case was conducted in accordance with the policy. We respectfully ask that this NCR be removed as a result of the preliminary findings of this investigation. <i>F/U investigation: 9/17/08.</i> WCF has made procedural changes to enhance the disciplinary process and ensure accountability and the integrity of the process. Also some staffing changes have been		8/26/08 CMD note: The issue of who was responsible for mishandling the disciplinary report is not at issue. The fact remains that an inmate with a positive drug test did not receive a disciplinary hearing. The non-compliance report is valid and will stand. As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. The determination of whether to issue such notification is pending. A follow-up response by the Warden, indicating the final results of the investigation, and corrective action, will be considered in making this decision.
7/30/08	Yes	Security and Control - Counts	4f	On 7/29/08, WCF was unable to clear the 10:30 a.m. count. This resulted in an emergency count being done with it not clearing until 12:47 p.m. Essential item.	Warden's response received 8/1/08: Prior to this NCR facility management had already taken steps to improve the count process. The Warden agrees that the count function is of highest priority and has personally reviewed count processes with the Assistant Warden and Chiefs, and the Unit Managers. The entire management team is focusing on count with monitoring of daily counts being conducted by all management team staff to include out counts, housing unit counts and the count room process. We are identifying where specific employees may have become lax in this process and will take corrective measures where appropriate and retraining where appropriate. No facility can expect that every employee, at every count will always be perfect, and some errors will occur in the best situations from time to time. While it is not disputed that errors were made in the referenced count; it is important to remember that the process did catch the error and the count was not cleared until rectified as is the ultimate goal.		8/26/08 CMD note: As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. The CMD was present for a discussion of this incident, which appears to have caused, in part, by an inexperienced staff member in the count room. The Associate Warden's explanation of the problem and corrective action plan is acceptable, and no Breach notification will be issued.

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9/2/08	No	Security Management Inmates	3d	Inmate Barnhill #433067 was scheduled to finish his punitive time at 1:30 p.m. on 8/27/08. He was not released from segregation, nor was he placed on pending status. Approval was not obtained from CD for him to remain in segregation. He was also not issued a disciplinary. Inmate William Piercy #363223 was scheduled to be released from segregation at 1:25 p.m. on 9/1/08. According to LIMC, he did not leave till 8:50 p.m. CM checked the segregation logbook and it reflected he did to leave till 2100. This was in excess of seven (7) hours past his scheduled release time.	Warden's response received 9/4/08: On 8/27/08, inmate Barnhill's #433067 punitive segregation status (RCA) was exhausted. He refused a new housing assignment. The steps to properly re-segregate him were not taken by the segregation staff, therefore the CD was not notified by the SS on duty. Employees were found to be negligent and are being held accountable. On 9/1/08, at 1:25 p.m. inmate Piercy #363223 completed his pending hearing status and was being released to K unit. He refused to go to K unit. He was placed back into a cell for holding and the Captain was notified. He contacted the CD and received authorization to re-segregate him on RCA. He remained in segregation with no active LIBD initiated. 2nd shift captain released the inmate due to his LIBD had expired. Due to the failure to communicate between 1st & 2nd shifts, the captain was not aware of a disc. pending for RCA. I/M agreed to go to population with another unit assignment and was released. At no point, was the inmate held without CD authorization but with better communication he could have been released to pop. earlier.		
9/2/08	No	Special Management Inmates	NIN	On 8/26/08, CM requested to view PELCO camera system to ensure the administrative segregation inmates were being allowed recreation. The inmates received their recreation. However in the course of viewing PELCO, the following was observed: I/M Scales #368349 (medium custody) had been brought in the seg. unit for pending board status. He had not been placed in his cell, when i/m McGee #298224, (administrative segregation custody) inmate was escorted from the shower to segregation cell 107 by one (1) officer.	Warden's response received 9/4/08: On 8/26/08, staff failed to follow procedure in escorting i/m McGee #298224. Staff have been properly trained with specialized segregation training. Seg. Supervisor was present but failed to monitor staff. All staff concerned will receive personnel actions for this failure to comply with procedures.		
9/2/08	No	Use of Force	NIN	On 8/26/08, the issuance log, in central control, showed a MK-9 being issued @ 8:30 a.m., the MK-9 was in the cabinet, however the issuance log did not show it had been returned.	Warden's response received 9/4/08: The MK-9 fogger in question was issued to a captain. The captain turned the MK-9 into Central Control at 4:30 p.m. Second shift staff did not properly record the fogger being turned in. Third shift captain failed to follow proper procedures during her third shift equipment check. Proper training with second shift staff was completed by ACOS. A letter of concern was issued to 3rd shift captain.		

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9/9/08	No	Security and control - Counts	4f	On 9-8-08, WCF was unable to clear the 4:30 p.m. count. An emergency count was done at 6:00 p.m. with it clearing at 6:30 p.m. Inmate George E. Harris #366524 and Mark D. Cole 3156495 was returned by Gibson count sheriff's department at 12:47 p.m. according to the sally port logbook. Both inmates were returned to the housing unit without the count room being notified. Essential Item.	Warden's response received 9/15/08: It was determined that the 2 referenced inmates did in fact leave the property/intake area and went back to the units/cells they had been assigned to before they went to court. The property room supervisor admits she was busy and forgot to contact the count room and the CR officer that the two inmates had returned. As a result of this incident, the facility has implemented another step to ensure there is not a reoccurrence. Upon the arrival of any inmate(s) to the vehicle gate, the vehicle gate officer will notify the count room and the shift supervisor in addition to the property room staff making the second notification.		<u>11/10/08 CMD note: Letter of Concern e-mailed.</u> <u>10/31/08 CMD note: This is an essential item. The same item was found in non-compliance in the previous monitoring period. A notification of Breach was considered, however, since the problem was not in the count room, and the problem was discovered and corrected, as stated by the Warden, a Breach notification is being withheld. A notice of concern will be issued concerning count issues.</u>

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7/14/08	Yes	Staffing	14c	Four (4) of the SORT members did not receive the required quarterly training for April, May, June 2008.	Warden's response received 7/16/08: The Warden agrees that Whiteville Correctional Facility failed to comply with TDOC Policy 506.07.2, amendment 07-16. Please note that the required training had been scheduled however, not within the compliance date. Practices have been reviewed and scheduling procedures addressed to ensure that no future violation may occur.	Corrective Action Verified: 11/12/08: All members received quarterly training for Jul. Aug. Sept. 08.	
7/30/08	Yes	Drug Testing & Substance Abuse Treatment	2e	On 7/7/08, i/c #750932, 2 inmates were charged with positive drug screen. One was processed correctly. The other disciplinary report was never received by disciplinary chairperson. No hearing was held.	Warden's response received 8/1/08: The facility does not concur in this NC finding. AW conducted a thorough investigation of the drug screen procedures as it pertains to incident #750932. His findings were that no procedures were compromised by the C/O. All disciplinary and tests were completed by the C/O and properly turned in for processing and a disciplinary was initiated by the Officer. While the investigation is on-going at this point it does appear that at some point between the initiation of the DR by the U/A officer and the disciplinary reaching the D-board for hearing that it disappeared. The investigation into how the disciplinary disappeared and who is responsible is continuing, but the Drug testing policy in this case was conducted in accordance with the policy. We respectfully ask that this NCR be removed as a result of the preliminary findings of this investigation. <i>F/U investigation:</i> 9/17/08. WCF has made procedural changes to enhance the disciplinary process and ensure accountability and the integrity of the process. Also some staffing changes have been made.	On 11/12/08 a NCR was issued for a recurrence of similar issue.	8/26/08 CMD note: The issue of who was responsible for mishandling the disciplinary report is not at issue. The fact remains that an inmate with a positive drug test did not receive a disciplinary hearing. The non-compliance report is valid and will stand. As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. The determination of whether to issue such notification is pending. A follow-up response by the Warden, indicating the final results of the investigation, and corrective action, will be considered in making this decision.
7/30/08	Yes	Security and Control - Counts	4f	On 7/29/08, WCFA was unable to clear the 10:30 a.m. count. This resulted in an emergency count being done with it not clearing until 12:47 p.m. Essential item.	Warden's response received 8/1/08: Prior to this NCR facility management had already taken steps to improve the count process. The Warden agrees that the count function is of highest priority and has personally reviewed count processes with the Assistant Warden and Chiefs, and the Unit Managers. The entire management team is focusing on count with monitoring of daily counts being conducted by all management team staff to include out counts, housing unit counts and the count room process. We are identifying where specific employees may have become lax in this process and will take corrective measures where appropriate and retraining where appropriate. No facility can expect that every employee, at every count will always be perfect, and some errors will occur in the best situations from time to time. While it is not disputed that errors were made in the referenced count; it is important to remember that the process did catch the error and the count was not cleared until rectified as is the ultimate goal.	Per letter of concern dated November 10, 2008, CM will continue to monitor this item.	8/26/08 CMD note: As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. The CMD was present for a discussion of this incident, which appears to have caused, in part, by an inexperienced staff member in the count room. The Associate Warden's explanation of the problem and corrective action plan is acceptable, and no Breach notification will be issued.

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9/2/08	Yes	Security Management Inmates	3d	An inmate was scheduled to finish his punitive time at 1:30 p.m. on 8/27/08. He was not released from segregation, nor was he placed on pending status. Approval was not obtained from CD for him to remain in segregation. He was also not issued a disciplinary. Another inmate was scheduled to be released from segregation at 1:25 p.m. on 9/1/08. According to LIMC, he did not leave till 8:50 p.m. CM checked the segregation logbook and it reflected he did to leave till 2100. This was in excess of seven (7) hours past his scheduled release time.	Warden's response received 9/4/08: On 8/27/08, the first inmate's punitive segregation status (RCA) was exhausted. He refused a new housing assignment. The steps to properly re-segregate him were not taken by the segregation staff, therefore the CD was not notified by the SS on duty. Employees were found to be negligent and are being held accountable. On 9/1/08, at 1:25 p.m. the other inmate completed his pending hearing status and was being released to K unit. He refused to go to K unit. He was placed back into a cell for holding and the Captain was notified. He contacted the CD and received authorization to re-segregate him on RCA. He remained in segregation with no active LIBD initiated. 2nd shift captain released the inmate due to his LIBD had expired. Due to the failure to communicate between 1st & 2nd shifts, the captain was not aware of a disc. pending for RCA. I/M agreed to go to population with another unit assignment and was released. At no point, was the inmate held without CD authorization but with better communication he could have been released to pop. earlier.	Corrective Action Verified: 11/12/08 No further finding of non-compliance.	
9/2/08	Yes	Special Management Inmates	NIN	On 8/26/08, CM requested to view PELCO camera system to ensure the administrative segregation inmates were being allowed recreation. The inmates received their recreation. However in the course of viewing PELCO, the following was observed: an inmate (medium custody) had been brought in the seg. unit for pending board status. He had not been placed in his cell, when i/m another inmate (administrative segregation custody) inmate was escorted from the shower to segregation cell 107 by one (1) officer.	Warden's response received 9/4/08: On 8/26/08, staff failed to follow procedure in escorting the A/S inmate. Staff have been properly trained with specialized segregation training. Seg. Supervisor was present but failed to monitor staff. All staff concerned will receive personnel actions for this failure to comply with procedures.	Corrective Action Verified: 11/12/08 No further finding of non-compliance.	
9/2/08	Yes	Use of Force	NIN	On 8/26/08, the issuance log, in central control, showed a MK-9 being issued @ 8:30 a.m., the MK-9 was in the cabinet, however the issuance log did not show it had been returned.	Warden's response received 9/4/08: The MK-9 fogger in question was issued to a captain. The captain turned the MK-9 into Central Control at 4:30 p.m. Second shift staff did not properly record the fogger being turned in. Third shift captain failed to follow proper procedures during her third shift equipment check. Proper training with second shift staff was completed by ACOS. A letter of concern was issued to 3rd shift captain.	Corrective Action Verified: 11/12/08 No further finding of non-compliance.	

DATE OF REPORT	OUT-STANDING ISSUE Y/N	Monitoring Instrument	ITEM NO.	NON-COMPLIANCE ISSUE	CONTRACTOR RESPONSE/DATE/ CORRECTIVE ACTION TAKEN	DATE/METHOD OF CONFIRMATION BY MONITOR/COMMENTS	TDOC MANAGEMENT COMMENTS/NOTES
9/9/08	Yes	Security and control - Counts	4f	On 9-8-08, WCFA was unable to clear the 4:30 p.m. count. An emergency count was done at 6:00 p.m. with it clearing at 6:30 p.m. 2 inmates were returned by Gibson count sheriff's department at 12:47 p.m. according to the sally port logbook. Both inmates were returned to the housing unit without the count room being notified. Essential Item.	Warden's response received 9/15/08: It was determined that the 2 referenced inmates did in fact leave the property/intake area and went back to the units/cells they had been assigned to before they went to court. The property room supervisor admits she was busy and forgot to contact the count room and the CR officer that the two inmates had returned. As a result of this incident, the facility has implemented another step to ensure there is not a reoccurrence. Upon the arrival of any inmate(s) to the vehicle gate, the vehicle gate officer will notify the count room and the shift supervisor in addition to the property room staff making the second notification.	Per letter of concern dated November 10, 2008, CM will continue to monitor this item.	11/10/08 CMD note: Letter of Concern e-mailed. 10/31/08 CMD note: This is an essential item. The same item was found in non-compliance in the previous monitoring period. A notification of Breach was considered, however, since the problem was not in the count room, and the problem was discovered and corrected, as stated by the Warden, a Breach notification is being withheld. A notice of concern will be issued concerning count issues.
10/15/08	No	Inmate Identification	1 & 2	Of the twenty-five (25) annual reclassification that indicated a new photograph was needed, nine (9) had not been updated. Eighteen (18) did not have the updated photographs placed in the Volume I and II of the inmate record.	Warden's response received 10/20/08: WCFA concurs. An immediate plan of action has been completed. The STG coordinator will verify that all inmates on the annual reclass list dated back to January have received an updated photo. STG coordinator will print these out to be placed in the IIR. The classification supervisor will continue to send out the spreadsheet to the STG coordinator and records supervisor. The records supervisor will be responsible to ensure a tickler file has been established to monitor those inmates in need of updated photo.		
10/16/08	No	Disciplinary Procedures	4d	An inmate was placed in segregation on 10/14/08 pending disciplinary hearing; however he was not issued a disciplinary report according to LIBL. Another inmate was placed back in segregation on 10/13/08 pending disciplinary hearing; however he was not issued a disciplinary report according to LIBL.	Warden's response received 10/20/08: WCFA concurs. The final check of these packets is with the shift supervisors, there are step by step instructions attached to each packet. Staff responsible will be held accountable. Chief Scott and ACOS Rice will monitor this process for the next few weeks to help train staff.		

DATE OF REPORT	OUT-STANDING ISSUE Y/N	Monitoring Instrument	ITEM NO.	NON-COMPLIANCE ISSUE	CONTRACTOR RESPONSE/DATE/ CORRECTIVE ACTION TAKEN	DATE/METHOD OF CONFIRMATION BY MONITOR/COMMENTS	TDOC MANAGEMENT COMMENTS/NOTES
7/30/08	Yes	Drug Testing & Substance Abuse Treatment	2e	On 7/7/08, i/c #750932, two inmates were charged with positive drug screen. One was processed correctly. The other disciplinary report was never received by disciplinary chairperson. No hearing was held.	Warden's response received 8/1/08: The facility does not concur in this NC finding. AW conducted a thorough investigation of the drug screen procedures as it pertains to incident #750932. His findings were that no procedures were compromised by the C/O. All disciplinary and tests were completed by the C/O and properly turned in for processing and a disciplinary was initiated by the Officer. While the investigation is on-going at this point it does appear that at some point between the initiation of the DR by the U/A officer and the disciplinary reaching the D-board for hearing that it disappeared. The investigation into how the disciplinary disappeared and who is responsible is continuing, but the Drug testing policy in this case was conducted in accordance with the policy. We respectfully ask that this NCR be removed as a result of the preliminary findings of this investigation. <i>F/U investigation</i> : 9/17/08. WCF has made procedural changes to enhance the disciplinary process and ensure accountability and the integrity of the process. Also some staffing changes have been made.	On 11/12/08 a NCR was issued for a reoccurrence of similar issue.	8/26/08 CMD note: The issue of who was responsible for mishandling the disciplinary report is not at issue. The fact remains that an inmate with a positive drug test did not receive a disciplinary hearing. The non-compliance report is valid and will stand. As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. The determination of whether to issue such notification is pending. A follow-up response by the Warden, indicating the final results of the investigation, and corrective action, will be considered in making this decision.
7/30/08	Yes	Security and Control - Counts	4f	On 7/29/08, WCFA was unable to clear the 10:30 a.m. count. This resulted in an emergency count being done with it not clearing until 12:47 p.m. Essential item.	Warden's response received 8/1/08: Prior to this NCR facility management had already taken steps to improve the count process. The Warden agrees that the count function is of highest priority and has personally reviewed count processes with the Assistant Warden and Chiefs, and the Unit Managers. The entire management team is focusing on count with monitoring of daily counts being conducted by all management team staff to include out counts, housing unit counts and the count room process. We are identifying where specific employees may have become lax in this process and will take corrective measures where appropriate and retraining where appropriate. No facility can expect that every employee, at every count will always be perfect, and some errors will occur in the best situations from time to time. While it is not disputed that errors were made in the referenced count; it is important to remember that the process did catch the error and the count was not cleared until rectified as is the ultimate goal.	Per letter of concern dated November 10, 2008, CM will continue to monitor this item.	8/26/08 CMD note: As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. The CMD was present for a discussion of this incident, which appears to have caused, in part, by an inexperienced staff member in the count room. The Associate Warden's explanation of the problem and corrective action plan is acceptable, and no Breach notification will be issued.

DATE OF REPORT	OUT-STANDING ISSUE Y/N	Monitoring Instrument	ITEM NO.	NON-COMPLIANCE ISSUE	CONTRACTOR RESPONSE/DATE/ CORRECTIVE ACTION TAKEN	DATE/METHOD OF CONFIRMATION BY MONITOR/COMMENTS	TDOC MANAGEMENT COMMENTS/NOTES
9/2/08	Yes	Special Management Inmates	NIN	On 8/26/08, CM requested to view PELCO camera system to ensure the administrative segregation inmates were being allowed recreation. The inmates received their recreation. However in the course of viewing PELCO, the following was observed: an inmate (medium custody) had been brought in the seg. unit for pending board status. He had not been placed in his cell, when i/m another inmate (administrative segregation custody) inmate was escorted from the shower to segregation cell 107 by one (1) officer.	Warden's response received 9/4/08: On 8/26/08, staff failed to follow procedure in escorting the A/S inmate. Staff have been properly trained with specialized segregation training. Seg. Supervisor was present but failed to monitor staff. All staff concerned will receive personnel actions for this failure to comply with procedures.	On NCR's dated 12/2/08 and 12/4/08, similar incidents occurred regarding maximum security inmates.	
9/9/08	Yes	Security and control - Counts	4f	On 9-8-08, WCFA was unable to clear the 4:30 p.m. count. An emergency count was done at 6:00 p.m. with it clearing at 6:30 p.m. twp inmates were returned by Gibson count sheriff's department at 12:47 p.m. according to the sally port logbook. Both inmates were returned to the housing unit without the count room being notified. Essential Item.	Warden's response received 9/15/08: It was determined that the 2 referenced inmates did in fact leave the property/intake area and went back to the units/cells they had been assigned to before they went to court. The property room supervisor admits she was busy and forgot to contact the count room and the CR officer that the two inmates had returned. As a result of this incident, the facility has implemented another step to ensure there is not a reoccurrence. Upon the arrival of any inmate(s) to the vehicle gate, the vehicle gate officer will notify the count room and the shift supervisor in addition to the property room staff making the second notification.	Per letter of concern dated November 10, 2008, CM will continue to monitor this item.	11/10/08 CMD note: Letter of Concern e-mailed. 10/31/08 CMD note: This is an essential item. The same item was found in non-compliance in the previous monitoring period. A notification of Breach was considered, however, since the problem was not in the count room, and the problem was discovered and corrected, as stated by the Warden, a Breach notification is being withheld. A notice of concern will be issued concerning count issues.
10/15/08	Yes	Inmate Identification	1 & 2	Of the twenty-five (25) annual reclassification that indicated a new photograph was needed, nine (9) had not been updated. Eighteen (18) did not have the updated photographs placed in the Volume I and II of the inmate record. Essential item.	Warden's response received 10/20/08: WCFA concurs. An immediate plan of action has been completed. The STG coordinator will verify that all inmates on the annual reclass list dated back to January have received an updated photo. STG coordinator will print these out to be placed in the IIR. The classification supervisor will continue to send out the spreadsheet to the STG coordinator and records supervisor. The records supervisor will be responsible to ensure a tickler file has been established to monitor those inmates in need of updated photo.	Corrective Action Verified: 12/15/08: All missing photographs have been done and placed in the IIR.	12/29/08 CMD note: This is an essential instrument item, and could therefore be subject to a Breach notification. The CM, however, indicates that the problem has been corrected by the facility. No Breach notification will be issued at this time, however, any subsequent non-compliance may result in such action.
10/16/08	Yes	Disciplinary Procedures	4d	An inmate was placed in segregation on 10/14/08 pending disciplinary hearing; however he was not issued a disciplinary report according to LIBL. Another inmate was placed back in segregation on 10/13/08 pending disciplinary hearing; however he was not issued a disciplinary report according to LIBL. Essential item.	Warden's response received 10/20/08: WCFA concurs. The final check of these packets is with the shift supervisors, there are step by step instructions attached to each packet. Staff responsible will be held accountable. Chief Scott and ACOS Rice will monitor this process for the next few weeks to help train staff.	Corrective Action Verified: 12/4/08: No further finding of non-compliance.	12/29/08 CMD note: This is an essential instrument item, and could therefore be subject to a Breach notification. The CM, however, indicates that the problem has been corrected by the facility. No Breach notification will be issued at this time, however, any subsequent non-compliance may result in such action.

DATE OF REPORT	OUT-STANDING ISSUE Y/N	Monitoring Instrument	ITEM NO.	NON-COMPLIANCE ISSUE	CONTRACTOR RESPONSE/DATE/ CORRECTIVE ACTION TAKEN	DATE/METHOD OF CONFIRMATION BY MONITOR/COMMENTS	TDOC MANAGEMENT COMMENTS/NOTES
11/6/08	No	PREA	1	Four (4) of twenty (20) checked did not have the predictor scales showing they were screened for PREA.	Warden's response received 11/10/08: Case managers are to evaluate their caseloads and identify those inmates who arrived to WCFA before 2006. They will then look in the IIR to ensure a predictor scale is there. If not, they will complete a PREA assessment to include the contact note and paperwork. It will then be forwarded to records to be filed in the IIR.	Corrective Action Verified: 12/15/08: All inmates have been identified that have been at WCFA prior to 2006. All inmates had a predictor scale or it have been done and placed in the IIR.	
11/12/08	No	Drug Testing and Substance Abuse Treatment	2e	On 10/17/08, TOMIS incident #765290, an inmate was charged with positive drug screen. The inmate was never served the disciplinary, therefore no hearing was held. Essential item.	Warden's response received 11/25/08: Drug testing officer completed the disciplinary and took it to the count room to be logged and entered. Once entered on TOMIS, the DR was logged on the tracking sheet to be served. The person who picked up the disciplinary did not sign for it and we were unable to confirm who may have taken it. To prevent future occurrences, we have changed steps #7and #9 of our procedures. #7. The DR will be assigned to a staff member to be served. #9. Shift Supervisor will check the DR log to be sure that'll all disciplinaries have been served and properly logged.		<u>12/29/08 CMD note: This essential item was also found in non-compliance on 7/30/08. A Breach notification is pending.</u>
12/2/08	No	Special Management Inmates	4f	On 11/26/08, TOMIS incident #771014, a maximum security inmate was allowed out of his cell unrestrained. He then assaulted another inmate (medium custody), who was a worker in the segregation unit. Essential item.	Warden's response received 12/03/08: Warden agrees that the event occurred as described. The individual employee violated policy, post orders and training in opening the door of a maximum custody inmate without a second employee and without first securing the inmate with restraints. WCFA had earlier this year completed a specialized training program conducted for staff assigned to segregation and the employee involved in this incident had completed this training. The employee responsible has been terminated.		<u>12/29/08 CMD note: This essential item was also found in non-compliance subsequently on 12/4/08. A Breach notification is pending for both items.</u>
12/4/08	No	Special Management Inmates	1b	TOMIS incident #771899 was a Class A incident and no one at the facility notified the Assistant Commissioner or the Commissioner's Designee of the employee's injuries. Essential item.	Warden's response received 12/10/08: The failure in this instance to immediately contact the A/C was a result of communications to the designated ADO or to the Warden not being made when the medical determination at the hospital was known. At the time of the incident, the injuries were not believed to be serious. The employee was adamant that he did not want outside medical treatment. He was directed to go the ER as a precautionary measure due to the possibility of eye damage. When the injuries were found to be more serious, neither the Warden or ADO were updated. Central office staff had already contacted the C/M due to the TOMIS entry. As a result a directive had been put out to all supervisors and all ADO's specifying responsibilities of contacting the A/C whenever a Class A incident occurs. The directive was provided to C/M.		<u>12/29/08 CMD note: A Breach notification is being withheld at this time, due to the apparent unusual circumstances of this incident, however, such notification may result from any future non-compliance.</u>

DATE OF REPORT	OUT- STANDING ISSUE Y/N	Monitoring Instrument	ITEM NO.	NON-COMPLIANCE ISSUE	CONTRACTOR RESPONSE/DATE/ CORRECTIVE ACTION TAKEN	DATE/METHOD OF CONFIRMATION BY MONITOR/COMMENTS	TDOC MANAGEMENT COMMENTS/NOTES
12/4/08	No	Special Management Inmates	4f	<p>On 12/3/08, a maximum custody inmate came out of his handcuffs and assaulted two (2) staff members, one (1) which had a serious injury. Upon review of PELCO camera system the following was observed: Other inmates were in the pod while he was being escorted from the shower; no leg restraints; at no time did either escorting officer have a hold on the handcuffs; one of the escorting officers walked away from the inmate prior to him being placed in the cell.</p> <p>Essential item.</p>	<p>Warden's response received 12/10/08: Warden concurs that the staff assigned to segregation on this occasion were negligent in the movement of a maximum custody inmate and failed to follow established policy and post orders regarding leg restraints. As a result of this incident and a previous incident, I have directed a Shift Supervisor be assigned to segregation indefinitely, but not less than the remainder of this year to supervise and mentor staff assigned to segregation and ensure compliance with procedures in place for that post.</p>		<p><u>12/29/08 CMD note: This essential item was also found in non-compliance previously on 12/2/08. A Breach notification is pending for both items.</u></p>

DATE OF REPORT	OUT-STANDING ISSUE Y/N	Monitoring Instrument	ITEM NO.	NON-COMPLIANCE ISSUE	CONTRACTOR RESPONSE/DATE/ CORRECTIVE ACTION TAKEN	DATE/METHOD OF CONFIRMATION BY MONITOR/COMMENTS	TDOC MANAGEMENT COMMENTS/NOTES
7/30/08	Yes	Drug Testing & Substance Abuse Treatment	2e	On 7/7/08, i/c #750932, two inmates were charged with positive drug screen. One was processed correctly. The other disciplinary report was never received by disciplinary chairperson. No hearing was held.	Warden's response received 8/1/08: The facility does not concur in this NC finding. AW conducted a thorough investigation of the drug screen procedures as it pertains to incident #750932. His findings were that no procedures were compromised by the C/O. All disciplinary and tests were completed by the C/O and properly turned in for processing and a disciplinary was initiated by the Officer. While the investigation is on-going at this point it does appear that at some point between the initiation of the DR by the U/A officer and the disciplinary reaching the D-board for hearing that it disappeared. The investigation into how the disciplinary disappeared and who is responsible is continuing, but the Drug testing policy in this case was conducted in accordance with the policy. We respectfully ask that this NCR be removed as a result of the preliminary findings of this investigation. <i>F/U investigation</i> : 9/17/08. WCF has made procedural changes to enhance the disciplinary process and ensure accountability and the integrity of the process. Also some staffing changes have been made.	On 11/12/08 a NCR was issued for a reoccurrence of similar issue.	8/26/08 CMD note: The issue of who was responsible for mishandling the disciplinary report is not at issue. The fact remains that an inmate with a positive drug test did not receive a disciplinary hearing. The non-compliance report is valid and will stand. As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. The determination of whether to issue such notification is pending. A follow-up response by the Warden, indicating the final results of the investigation, and corrective action, will be considered in making this decision.
7/30/08	Yes	Security and Control - Counts	4f	On 7/29/08, WCFA was unable to clear the 10:30 a.m. count. This resulted in an emergency count being done with it not clearing until 12:47 p.m. Essential item.	Warden's response received 8/1/08: Prior to this NCR facility management had already taken steps to improve the count process. The Warden agrees that the count function is of highest priority and has personally reviewed count processes with the Assistant Warden and Chiefs, and the Unit Managers. The entire management team is focusing on count with monitoring of daily counts being conducted by all management team staff to include out counts, housing unit counts and the count room process. We are identifying where specific employees may have become lax in this process and will take corrective measures where appropriate and retraining where appropriate. No facility can expect that every employee, at every count will always be perfect, and some errors will occur in the best situations from time to time. While it is not disputed that errors were made in the referenced count; it is important to remember that the process did catch the error and the count was not cleared until rectified as is the ultimate goal.	Per letter of concern dated November 10, 2008, CM will continue to monitor this item.	8/26/08 CMD note: As an ESSENTIAL instrument item, this is subject to notification of Breach of Contract. The CMD was present for a discussion of this incident, which appears to have caused, in part, by an inexperienced staff member in the count room. The Associate Warden's explanation of the problem and corrective action plan is acceptable, and no Breach notification will be issued.

DATE OF REPORT	OUT-STANDING ISSUE Y/N	Monitoring Instrument	ITEM NO.	NON-COMPLIANCE ISSUE	CONTRACTOR RESPONSE/DATE/ CORRECTIVE ACTION TAKEN	DATE/METHOD OF CONFIRMATION BY MONITOR/COMMENTS	TDOC MANAGEMENT COMMENTS/NOTES
9/2/08	Yes	Special Management Inmates	NIN	On 8/26/08, CM requested to view PELCO camera system to ensure the administrative segregation inmates were being allowed recreation. The inmates received their recreation. However in the course of viewing PELCO, the following was observed: an inmate (medium custody) had been brought in the seg. unit for pending board status. He had not been placed in his cell, when i/m another inmate (administrative segregation custody) inmate was escorted from the shower to segregation cell 107 by one (1) officer.	Warden's response received 9/4/08: On 8/26/08, staff failed to follow procedure in escorting the A/S inmate. Staff have been properly trained with specialized segregation training. Seg. Supervisor was present but failed to monitor staff. All staff concerned will receive personnel actions for this failure to comply with procedures.	On NCR's dated 12/2/08 and 12/4/08, similar incidents occurred regarding maximum security inmates.	
9/9/08	Yes	Security and control - Counts	4f	On 9-8-08, WCFA was unable to clear the 4:30 p.m. count. An emergency count was done at 6:00 p.m. with it clearing at 6:30 p.m. twp inmates were returned by Gibson count sheriff's department at 12:47 p.m. according to the sally port logbook. Both inmates were returned to the housing unit without the count room being notified. Essential Item.	Warden's response received 9/15/08: It was determined that the 2 referenced inmates did in fact leave the property/intake area and went back to the units/cells they had been assigned to before they went to court. The property room supervisor admits she was busy and forgot to contact the count room and the CR officer that the two inmates had returned. As a result of this incident, the facility has implemented another step to ensure there is not a reoccurrence. Upon the arrival of any inmate(s) to the vehicle gate, the vehicle gate officer will notify the count room and the shift supervisor in addition to the property room staff making the second notification.	Per letter of concern dated November 10, 2008, CM will continue to monitor this item.	11/10/08 CMD note: Letter of Concern e-mailed. 10/31/08 CMD note: This is an essential item. The same item was found in non-compliance in the previous monitoring period. A notification of Breach was considered, however, since the problem was not in the count room, and the problem was discovered and corrected, as stated by the Warden, a Breach notification is being withheld. A notice of concern will be issued concerning count issues.
10/15/08	Yes	Inmate Identification	1 & 2	Of the twenty-five (25) annual reclassification that indicated a new photograph was needed, nine (9) had not been updated. Eighteen (18) did not have the updated photographs placed in the Volume I and II of the inmate record. Essential item.	Warden's response received 10/20/08: WCFA concurs. An immediate plan of action has been completed. The STG coordinator will verify that all inmates on the annual reclass list dated back to January have received an updated photo. STG coordinator will print these out to be placed in the IIR. The classification supervisor will continue to send out the spreadsheet to the STG coordinator and records supervisor. The records supervisor will be responsible to ensure a tickler file has been established to monitor those inmates in need of updated photo.	Corrective Action Verified: 12/15/08: All missing photographs have been done and placed in the IIR.	12/29/08 CMD note: This is an essential instrument item, and could therefore be subject to a Breach notification. The CM, however, indicates that the problem has been corrected by the facility. No Breach notification will be issued at this time, however, any subsequent non-compliance may result in such action.
10/16/08	Yes	Disciplinary Procedures	4d	An inmate was placed in segregation on 10/14/08 pending disciplinary hearing; however he was not issued a disciplinary report according to LIBL. Another inmate was placed back in segregation on 10/13/08 pending disciplinary hearing; however he was not issued a disciplinary report according to LIBL. Essential item.	Warden's response received 10/20/08: WCFA concurs. The final check of these packets is with the shift supervisors, there are step by step instructions attached to each packet. Staff responsible will be held accountable. Chief Scott and ACOS Rice will monitor this process for the next few weeks to help train staff.	Corrective Action Verified: 12/4/08: No further finding of non-compliance.	12/29/08 CMD note: This is an essential instrument item, and could therefore be subject to a Breach notification. The CM, however, indicates that the problem has been corrected by the facility. No Breach notification will be issued at this time, however, any subsequent non-compliance may result in such action.

DATE OF REPORT	OUT-STANDING ISSUE Y/N	Monitoring Instrument	ITEM NO.	NON-COMPLIANCE ISSUE	CONTRACTOR RESPONSE/DATE/ CORRECTIVE ACTION TAKEN	DATE/METHOD OF CONFIRMATION BY MONITOR/COMMENTS	TDOC MANAGEMENT COMMENTS/NOTES
11/6/08	No	PREA	1	Four (4) of twenty (20) checked did not have the predictor scales showing they were screened for PREA.	Warden's response received 11/10/08: Case managers are to evaluate their caseloads and identify those inmates who arrived to WCFA before 2006. They will then look in the IIR to ensure a predictor scale is there. If not, they will complete a PREA assessment to include the contact note and paperwork. It will then be forwarded to records to be filed in the IIR.	Corrective Action Verified: 12/15/08: All inmates have been identified that have been at WCFA prior to 2006. All inmates had a predictor scale or it have been done and placed in the IIR.	
11/12/08	No	Drug Testing and Substance Abuse Treatment	2e	On 10/17/08, TOMIS incident #765290, an inmate was charged with positive drug screen. The inmate was never served the disciplinary, therefore no hearing was held. Essential item.	Warden's response received 11/25/08: Drug testing officer completed the disciplinary and took it to the count room to be logged and entered. Once entered on TOMIS, the DR was logged on the tracking sheet to be served. The person who picked up the disciplinary did not sign for it and we were unable to confirm who may have taken it. To prevent future occurrences, we have changed steps #7and #9 of our procedures. #7. The DR will be assigned to a staff member to be served. #9. Shift Supervisor will check the DR log to be sure that'll all disciplinaries have been served and properly logged.		2/3/09 CMD note: Breach notification issued 1/16/08. 12/29/08 CMD note: This essential item was also found in non-compliance on 7/30/08. A Breach notification is pending.
12/2/08	No	Special Management Inmates	4f	On 11/26/08, TOMIS incident #771014, a maximum security inmate was allowed out of his cell unrestrained. He then assaulted another inmate (medium custody), who was a worker in the segregation unit. Essential item.	Warden's response received 12/03/08: Warden agrees that the event occurred as described. The individual employee violated policy, post orders and training in opening the door of a maximum custody inmate without a second employee and without first securing the inmate with restraints. WCFA had earlier this year completed a specialized training program conducted for staff assigned to segregation and the employee involved in this incident had completed this training. The employee responsible has been terminated.		2/3/09 CMD note: Breach notification issued 1/16/08. 12/29/08 CMD note: This essential item was also found in non-compliance subsequently on 12/4/08. A Breach notification is pending for both items.
12/4/08	No	Special Management Inmates	1b	TOMIS incident #771899 was a Class A incident and no one at the facility notified the Assistant Commissioner or the Commissioner's Designee of the employee's injuries. Essential item.	Warden's response received 12/10/08: The failure in this instance to immediately contact the A/C was a result of communications to the designated ADO or to the Warden not being made when the medical determination at the hospital was known. At the time of the incident, the injuries were not believed to be serious. The employee was adamant that he did not want outside medical treatment. He was directed to go the ER as a precautionary measure due to the possibility of eye damage. When the injuries were found to be more serious, neither the Warden or ADO were updated. Central office staff had already contacted the C/M due to the TOMIS entry. As a result a directive had been put out to all supervisors and all ADO's specifying responsibilities of contacting the A/C whenever a Class A incident occurs. The directive was provided to C/M.		12/29/08 CMD note: A Breach notification is being withheld at this time, due to the apparent unusual circumstances of this incident, however, such notification may result from any future non-compliance.

DATE OF REPORT	OUT-STANDING ISSUE Y/N	Monitoring Instrument	ITEM NO.	NON-COMPLIANCE ISSUE	CONTRACTOR RESPONSE/DATE/ CORRECTIVE ACTION TAKEN	DATE/METHOD OF CONFIRMATION BY MONITOR/COMMENTS	TDOC MANAGEMENT COMMENTS/NOTES
12/4/08	No	Special Management Inmates	4f	<p>On 12/3/08, a maximum custody inmate came out of his handcuffs and assaulted two (2) staff members, one (1) which had a serious injury. Upon review of PELCO camera system the following was observed: Other inmates were in the pod while he was being escorted from the shower; no leg restraints; at no time did either escorting officer have a hold on the handcuffs; one of the escorting officers walked away from the inmate prior to him being placed in the cell.</p> <p>Essential item.</p>	<p>Warden's response received 12/10/08: Warden concurs that the staff assigned to segregation on this occasion were negligent in the movement of a maximum custody inmate and failed to follow established policy and post orders regarding leg restraints. As a result of this incident and a previous incident, I have directed a Shift Supervisor be assigned to segregation indefinitely, but not less than the remainder of this year to supervise and mentor staff assigned to segregation and ensure compliance with procedures in place for that post.</p>		<p><u>2/3/09 CMD note: Breach notification issued 1/16/08.</u> 12/29/08 CMD note: This essential item was also found in non-compliance previously on 12/2/08. A Breach notification is pending for both items.</p>