



Office of the Secretary
6814 Princeton Pike
Pine Bluff, Arkansas 71602
Phone: 870-267-6200
Fax: 870-267-6244

SECRETARIAL DIRECTIVE

SUBJECT: Dress Code for Non-Uniformed Personnel

NUMBER: 2020-_____ **SUPERSEDES:** New Deleted: 01

APPLICABILITY: All Department of Corrections Non-Uniform Employees

REFERENCE: Ark. Code Ann. §§ 25-43-105,
25-43-108, and 25-43-403 **PAGE** 1 of 3

ISSUED BY: _____ **EFFECTIVE DATE:** _____ Deleted: Wendy Kelley
Deleted: January 2, 2020

I. POLICY:

It is the policy of the Department of Corrections to establish and monitor standards for employees' dress to reflect a professional appearance for the organization.

II. PURPOSE:

To ensure that the Departments non-uniformed employees dress in a professional manner as outlined in the dress code.

III. PROCEDURES:

Professional Dress Code Guidance - All non-uniform employees must wear clothing that is appropriate for their job and work site. Clothing and appearance should be neat, clean, in good business taste, and must not constitute a safety hazard. This agency is a professional organization that interfaces with other state agencies, the business community and the public. Employees must project a professional public image.

In keeping the Department's intention to maintain a dignified business atmosphere, extreme or unkempt hairstyles and distracting bodily accessories are not permitted. Jewelry should be modest and professional. Personal grooming and cleanliness must be maintained to present a clean appearance, with contemporary hairstyles, nail polish, and makeup consistent with the professional business world.

Examples of acceptable attire include, but are not limited to:

- Business suits, blouses, shirts, skirts, pants, ties, dresses
- Sweaters
- Shirts with collars
- Slacks and trousers
- Sports jackets and blazers
- Footwear designed for business purposes
- [Dress sandals, dress wedges, or dress heels](#)

Examples of unacceptable attire include, but are not limited to:

- Clothing with a printed message, slogan, political messages, picture or art depicting drugs, alcohol, smoking, sex, weapons, violence, or a message that is inflammatory, obscene, disrespectful, or potentially disruptive within a correctional environment;
- Dresses or blouses that are backless, strapless, sleeveless or have spaghetti straps unless such garments are covered by another article of clothing (sweater or jacket).
- Tank or muscle tops and crop tops unless such garments are covered by another article of clothing (sweater or jacket);
- Sheer or mesh clothing that exposes undergarments or midriffs or any clothing with exposed undergarments;
- Camouflage apparel;
- Miniskirts, defined as skirts above the knee or revealing the upper thigh;
- Athletic or tennis shoes, [flip-flops or thong sandals \(see description below\)](#);
- Hooded sweatshirts;
- Jeans or denim pants of any color, unless authorized by the Division Director;
- Shorts of any kind; or
- Costumes of any kind.

Safety Issues - Employees must not wear clothing that is unsafe. Accessories such as rings, necklaces, bracelets, and earrings must not present a potential safety hazard.

Division Directors may institute more stringent dress requirements for reasons of safety.

Legislative and other High-Profile Events - Employees attending meetings at the State Capitol, Governor's Office, with a Committee of the General Assembly, or other high-profile events must follow a "formal business" dress code as outlines below:

Men-must either wear business suits with neckties or wear sports coats or blazers with neckties, slacks or dress khakis and dress shoes.

Women-must wear business dresses or suits or jackets, sweaters or blouses with either slacks or professional skirts of modest length. Necklines and footwear must be modest and appropriate for business.

Personal Cleanliness - Employees are expected to practice good personal hygiene, select attire that is clean and in good repair, and present a professional image. Hair, including facial hair (beards, mustaches, sideburns), is expected to be well-groomed and clean, while neatly pressed clothing appropriate to the job is to be worn on duty. Hairstyles, clothing and jewelry are to conform to business, professional and departmental standards. Hair color should not be of an unnatural color. In addition, each employee is expected to shower and/or bathe daily and to attend to their personal hygiene as part of their professional appearance as an employee of the Department of Corrections.

Piercings and Tattoos - Items such as eyebrow, nose, tongue, and lip rings or studs are not to be worn on duty. Torso body piercings with visible jewelry that can be seen through or under clothing are not to be worn on duty. No offensive tattoos shall be visible while an employee is on duty. The term offensive tattoo includes any tattoo which might cause a negative reaction from staff or offenders. This includes, without limitation, any tattoo depicting a symbol or image associated with gang affiliation.

Revealing Attire - Employees are not permitted to wear revealing attire, (i.e. low-cut blouses and exposed cleavage), clothing that is too tight, bare midriff blouses, or hip-hugger. Athletic clothing, shorts, tank tops, sweatpants, undershirts, hats or logoed t-shirts are not acceptable.

Clothing and Footwear - Clothing and footwear should be appropriate to the workplace in terms of appearance and employee safety. Clothing that is frayed or has holes is not appropriate apparel. Pants/slacks must be hemmed and of a length that does not drag the floor.

Footwear must be selected for safety and comfort and be otherwise acceptable for a correctional environment. Thong sandals and flip-flops are not acceptable footwear. Thong sandals or flip-flops are defined as a backless shoe made of rubber or leather (or a similar material), plain or embellished with beads, etc., consisting of a sole held loosely on the foot by a v-shaped strap, that passes between the first (big) and second toes and around either side of the foot.

Deleted: Acceptable footwear must completely enclose the toes.

Exceptions - The maintenance, construction, mailroom, farm, industry, and information systems staff that install equipment or do other physical labor, and any employee on special assignment as determined by the Division Director, shall wear clothing suitable to their jobs and to their worksite. An exception may also be granted based upon a medical or health condition; however, the request must be reviewed and receive prior approval by the Warden / Center Supervisor, Area Manager, or Administrator.

Failure to Comply - Supervisors shall have the discretion to determine whether attire is unprofessional. Supervisors shall provide guidance as to proper attire and grooming. Supervisor must send an employee who reports to work in violation of established dress requirements home with instructions to change and return to work. The employee will be required to use annual leave. Continued dress code violations may result in disciplinary action.



Office of the Secretary

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SECRETARIAL DIRECTIVE

SUBJECT: Dress Code for Non-Uniformed Personnel

NUMBER: 2020-04

SUPERSEDES: 2020-01

APPLICABILITY: All Department of Corrections Non-Uniform Employees

REFERENCE: Ark. Code Ann. §§ 25-43-105,
 25-43-108, and 25-43-403

PAGE 1 of 3

ISSUED BY: Wendy Kelley

EFFECTIVE DATE: 4/1/2020

I. POLICY:

It is the policy of the Department of Corrections to establish and monitor standards for employees' dress to reflect a professional appearance for the organization.

II. PURPOSE:

To ensure that the Departments non-uniformed employees dress in a professional manner as outlined in the dress code.

III. PROCEDURES:

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- Sheer or mesh clothing that exposes undergarments or midriffs or any clothing with exposed undergarments;
- Camouflage apparel;
- Miniskirts, defined as skirts above the knee or revealing the upper thigh;
- Athletic or tennis shoes, flip-flops or thong sandals (see description below);
- Hooded sweatshirts;
- Jeans or denim pants of any color, unless authorized by the Division Director;
- Shorts of any kind; or
- Costumes of any kind.

Safety Issues - Employees must not wear clothing that is unsafe. Accessories such as rings, necklaces, bracelets, and earrings must not present a potential safety hazard.

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Exceptions - The maintenance, construction, mailroom, farm, industry, and information systems staff that install equipment or do other physical labor, and any employee on special assignment as determined by the Division Director, shall wear clothing suitable to their jobs and to their worksite. An exception may also be granted based upon a medical or health condition; however, the request must be reviewed and receive prior approval by the Warden/Center Supervisor, Area Manager, or Administrator.

Failure to Comply - Supervisors shall have the discretion to determine whether attire is unprofessional. Supervisors shall provide guidance as to proper attire and grooming. Supervisor must send an employee who reports to work in violation of established dress requirements home with instructions to change and return to work. The employee will be required to use annual leave. Continued dress code violations may result in disciplinary action.



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SECRETARIAL DIRECTIVE

SUBJECT: Employee Assistance Program

NUMBER: 2020-05

SUPERSEDES: New

APPLICABILITY: All Department of Corrections Employees

REFERENCE: Ark. Code Ann §§25-43-105,
 25-43-108 and 25-43-403

PAGE 1 of 3

ISSUED BY: Signature on File

EFFECTIVE DATE: June 24, 2020

I. POLICY:

To ensure access of all employees and members of their immediate families to services for identification and resolution of problems that may adversely affect employee job performance, and to regulate referrals agreed upon between supervisor and employee in conjunction with, or in lieu of, disciplinary action.

II. Purpose:

To ensure that all Arkansas Department of Corrections employees are informed of free and confidential support services available to them through the Employee Assistance Program.

III. DEFINITIONS:

Employee Assistance Program (EAP) - a program of behavioral health and substance abuse services offered to employees and dependents at no charge. All services are rendered by EAP counselors and include assessments, counseling, and issue resolution.

Supervisor – refers to any Warden, Center Supervisor, Area Manager, Administrator, or their designee.

Any discussion between a provider of EAP services and an employee is to be private, unless a release of information is signed by the employee, or the employee makes a threat of imminent harm to self or an identifiable person, or as otherwise mandated by law.

IV. PROCEDURES:

1. All state employees are eligible for EAP benefits, even if not enrolled in a health plan. Family members can participate in couple or family sessions with the employee. Dependents enrolled in a health plan are eligible for assistance with managed care benefits. This includes problems related to family, marital, anger management, grief/bereavement, stress management, peer relationships, parenting, finances, legal, school, elder care, etc.
2. Voluntary requests for treatment, absent any ongoing related disciplinary action, are handled directly between the employee and the EAP and are not to be considered cause for disciplinary actions.
3. Counseling services may be made available to employees following a Critical Incident. The Department will make post-trauma counseling and support services available to all employees involved, affected, or impacted by a critical incident through the EAP.
4. Any supervisor may refer an employee for assessment and treatment of chemical dependency, or for assessment of other problems which may be impairing job performance, including conduct problems such as those outlined in the Employee Conduct Standards.
5. Supervisor referrals may be related to disciplinary action, short of termination, or may be made in lieu of disciplinary action.
6. Supervisor referrals can be mandatory. An employee's failure to comply with EAP requirements after a mandatory referral will result in disciplinary action up to and including termination. Supervisor referrals for treatment of chemical dependency or other issues will require a signed release of information that allows the treatment provider to apprise the supervisor of the staff person's participation in the treatment program, but otherwise protects the confidentiality of treatment records.

7. Any individual referred for drug/alcohol treatment is to go to the EAP for assessment but is not required to use the services to which the EAP makes referral. The individual may choose any provider of chemical dependency treatment certified by the Arkansas Department of Human Services, Division of Aging, Adult, and Behavioral Health Services, or operating in a hospital accredited by the Joint Commission on Accreditation of Healthcare.
8. The supervisor will require the employee to take leave to attend sessions with the EAP for the purposes of assessment or treatment.
9. Failure to complete drug or alcohol treatment programs, or treatment accepted in lieu of or in conjunction with disciplinary action for which the employee has been mandated by a supervisor, or failure to follow instructions for aftercare, will be considered a violation of the referral agreement and may be cause for disciplinary action, up to or including termination of employment.
10. Referral agreements between supervisor and employee for treatment will be documented and signed by both. A copy will be sent to the Central Human Resources Office.
11. Each Warden/Center Supervisor will designate the Unit Human Resources Manager to provide information to all employees of the unit/center regarding the services available through the EAP and the procedures for accessing those services. Locations without a Human Resources Manager will receive EAP information from the Human Resources Administrator, or their designee.



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~~ADMINISTRATIVE DIRECTIVE~~

~~SUBJECT: Employee Assistance Program~~

~~NUMBER: 13-94 SUPERSEDES: 07-15~~

~~APPLICABILITY: All Staff~~

~~REFERENCE: AR 202; AR 225 PAGE 1 of 4~~

~~APPROVED: Original signed by Ray Hobbs EFFECTIVE DATE: 11/22/2013~~

~~I. POLICY:~~

~~To ensure access of all employees and members of their immediate families to services for identification and resolution of problems that may adversely affect employee job performance, and to regulate referrals agreed upon between supervisor and employee in conjunction with or in lieu of disciplinary action.~~

~~II. EXPLANATION:~~

- ~~1. Supervisor refers to any Warden, Center Supervisor, Administrator or designee of the same.~~
- ~~2. Employee Assistance Program (EAP) is a program of behavioral health and substance services offered to employees and dependents at no charge. All services are rendered by EAP counselors and include assessments, counseling, and issue resolution.~~
- ~~3. Any discussion between a provider of EAP services and an employee are held to be private, unless a release of information is signed by the employee, or unless the employee makes threat of imminent harm to self or an identifiable other, or as otherwise mandated by law.~~

III. PROCEDURE:

- ~~1. All state employees are eligible for EAP benefits even if not enrolled in a health plan. Family members can participate in couple or family sessions with the employee. Dependents enrolled in a health plan are eligible for assistance with managed care benefits. This includes problems related to family, marital, peer relationships, parenting, finances, school, elder care, etc.~~
- ~~2. Voluntary requests for treatment, absent any ongoing related disciplinary action, are handled directly between the employee and the EAP and if discovered are not to be considered cause for disciplinary action.~~
- ~~3. Any supervisor may refer an employee for assessment and treatment of chemical dependency, pursuant to the provisions of AR 202, or for assessment of other problems which the supervisor and employee agree may be impairing job performance, including conduct problems such as those outlined in the Employee Conduct Standards and the Employee Handbook.~~
- ~~4. Supervisor referrals may be related to disciplinary action, short of termination, or may be made in lieu of disciplinary action.~~
- ~~5. Supervisor referrals may be refused by staff who by their refusal, choose disciplinary action instead of treatment. Staff who accepts supervisor referrals for treatment of chemical dependency must also sign a release of information that allows the treatment provider to apprise the supervisor of the staff person's participation in the treatment program, but otherwise protects the confidentiality of treatment records.~~
- ~~6. Any individual referred for drug/alcohol treatment is to go to the EAP for assessment but is not required to use the services to which the EAP makes referral, but may choose any provider of chemical dependency treatment certified by the Arkansas Department of Health Bureau of Alcohol and Drug Abuse Prevention, or operating in a hospital accredited by the Joint Commission on Accreditation of Healthcare.~~
- ~~7. The supervisor may allow the employee to take sick leave to attend sessions with the EAP for the purposes of assessment or treatment of problems that appear to be having a negative impact on work performance.~~
- ~~8. Each warden/center supervisor will designate the Unit Human Resources Manager to provide information to all employees of the unit/center regarding the services available through the EAP and the procedures for accessing those services.~~

- ~~9. Failure to complete drug or alcohol treatment programs or treatment accepted in lieu of or in conjunction with disciplinary action for which the employee has been referred by a supervisor, or failure to follow instructions for aftercare, if any, in the 12 month period following discharge from a treatment program will be considered a violation of the referral agreement and may be cause for disciplinary action, up to or including termination of employment.~~
- ~~10. The referral agreement may be renegotiated between the employee and the supervisor, should unforeseen circumstances come to pass. It is the responsibility of the supervisor to notify the Unit Human Resources office of any renegotiation of a treatment plan taken in conjunction with, or in lieu of disciplinary action.~~
- ~~11. Referral agreements between supervisor and employee for treatment will be documented and signed by both. A copy will be kept in the supervisor's file for any voluntary agreement. A copy will be sent to the Central Human Resources office file only if the referral is in lieu of or in conjunction with disciplinary action. The agreement will be removed from the personnel file upon the satisfactory completion of the treatment program and 12 months of aftercare, if aftercare is recommended by the treatment provider.~~

REPEALED

ARKANSAS DEPARTMENT OF CORRECTION
Referral for Treatment

I, _____, in my capacity as supervisor of _____, do hereby refer this on this date ____/____/____, for treatment.

This referral is being made _____ () in lieu of disciplinary action
_____ () in conjunction with disciplinary action.

(Signed) _____ (Supervisor)

~~I, the employee named above, have been advised that I have the right to refuse this referral. I am also aware that I have the right of appeal if this action is taken in lieu of, or in conjunction with disciplinary action. I am also aware that I have the right to choose the provider of treatment services other than the one recommended by the Employee Assistance Program, so long as that provider operates a chemical dependency program certified by the Arkansas Department of Health Bureau of Alcohol and Drug Abuse Prevention, or is part of an accredited hospital, or is a licensed professional in private practice, or is part of a community mental health center. I understand that by signing this referral, I agree to complete the treatment program, and to participate in up to 12 months of aftercare if such is recommended by the treatment provider. Breach of this contract may result in my being subject to disciplinary action. I also agree, by my signature, to allow the treatment provider to provide information to my supervisor, as to my participation in treatment and aftercare. This constitutes only a partial waiver of confidentiality, and I intend that any clinical information developed in the course of my treatment is to remain confidential, except such disclosures as are mandated by law.~~

~~I seek referral to _____~~

~~(Signed) _____ Date: ____/____/____~~



**DIVISION OF
CORRECTION**

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ADMINISTRATIVE DIRECTIVE

SUBJECT: Emergency Furloughs

NUMBER: 20- _____ **SUPERSEDES:** 19-37

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APPLICABILITY: All employees and inmates

REFERENCE: AR 812 - Temporary Release/
Meritorious & Emergency Furloughs **PAGE:** 1 of 4

APPROVED: _____ **EFFECTIVE DATE:** _____

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I. POLICY:

It shall be the policy of the Division of Correction to grant emergency furloughs pursuant to established requirements and conditions for approved inmates.

II. PURPOSE:

In order to protect public safety and to assist division operations in relation to the consideration of requests for emergency furloughs, this Administrative Directive sets forth specific eligibility requirements and procedures for all emergency furloughs.

This Administrative Directive also provides for the timely and expeditious processing of emergency furlough requests.

III. DEFINITIONS:

A. Emergency Furlough - The temporary release, subject to appropriate supervision, of an inmate due to the critical illness and/or death of an immediate family member.

B. Immediate Family -

For the purpose of this policy, immediate family members are defined as the inmate's father, mother, sister, brother, spouse, child, grandparent, grandchild, aunt, uncle, mother-in-law, father-in-law, and any other person whose relationship with the inmate has been verified as that of a parent/guardian. In order to be considered, the immediate family member should be on the inmate's Visitation list, Relatives

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and Associates list, or Emergency Contact list.

- C. Critical Illness - Any illness from which the immediate family member is not expected to survive or from which death is imminent within a matter of days.

III. PROCEDURE:

To submit a request for an emergency furlough, the inmate or a family member of the inmate will contact the unit Chaplain, providing the Chaplain with the details and documentation necessary to support the basis for the request. In accordance with Religious Services Manual Policy No. 640, the Chaplain will promptly forward the request, and all related information to the Warden/Center Supervisor and otherwise complete the duties as required by the Religious Services Manual, including required notifications. The Chaplain will inform the requesting inmate or family member that an emergency furlough is granted to qualified inmates solely at the discretion of the Warden/Center Supervisor, and that if granted, all costs related to the furlough are the responsibility of the inmate's or the inmate's family.

A. EMERGENCY FURLOUGHS:

The Division of Correction may, at the discretion of the Warden/ Center Supervisor, permit the emergency furlough of an inmate in the case of the critical illness or death of a member of the inmate's immediate family.

In the discretion of the Warden/Center Supervisor, up to two emergency furloughs may be granted due to a critical illness. If two emergency furloughs are granted due to a critical illness and the immediate family member subsequently dies, another furlough may be granted for the inmate to attend the funeral. Cases of critical illness must be confirmed to the Warden/Center Supervisor or his or her designee by the ill relative's attending physician.

1. Inmates under Sentence of Death, Life Without Parole, or Life:

An inmate who is serving a sentence of Death, Life without Parole, or Life may be permitted an emergency furlough, but only upon the prior written approval of the Director. In such cases, the inmate may be permitted a four-hour (excluding travel time) furlough to visit with the critically ill patient or to attend the funeral of the deceased family member.

2. Inmates in Class I-A and I-B Status:

An Inmate in Class I-A and I-B who has been on a meritorious furlough during this cycle, may also be released on an emergency furlough under the terms of this Administrative Directive. Such emergency furlough shall not exceed three days in duration.

3. Inmates in Other Class Statuses:

All other inmates except those having achieved Class I-A and I-B may be released on an emergency furlough under the terms of this Administrative Directive. The emergency furlough shall not exceed Forty-Eight hours in duration, but under normal circumstances will include only travel time to services and travel back to the facility.

4. Procedural Requirements

- a. In all cases, before approving an emergency furlough, the unit Warden/Center Supervisor or designee shall be satisfied that the inmate to whom an emergency furlough is granted:
- (1) does not presently have an abnormal, uncontrollable propensity for violence;
 - (2) does not constitute a security risk;
 - (3) is capable of abiding by the terms and conditions of a furlough; and
 - (4) will not be endangered or endanger another person during such release.
- b. Inmates who are approved for an emergency furlough will be released only to the custody of an Arkansas certified law enforcement officer (480 Hour Course of the Arkansas Law Enforcement Training Academy) with a current full certification as a Law Enforcement Officer or a County Sheriff. The escorting law enforcement officer must be employed as a full-time law enforcement officer, with a Sheriff Department, City Police Department, or the Arkansas State Police Department. If two (2) escorting officers are required, the primary escorting officer must be a full-time Law Enforcement Officer employed by one of the agencies mentioned above. The second escorting officer can be one with a Certification as an Auxiliary Law Enforcement Officer, Part-Time Officer, or Specialized Police Personnel. If the furlough only requires one escorting officer, that officer must be a full-time law enforcement officer employed by one of the agencies mentioned above. All escorting officers will be responsible for the signing out, transportation, supervision, custody and arrangements for housing in the jail, if necessary, and delivery of the inmate back to the unit that they were transported from.

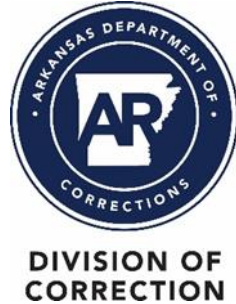
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- c. Any fee charged by the escorting officer for the transportation, supervision, and custody of the inmate shall be the sole responsibility of the inmate and the inmate's family. Any such fee charged shall be reasonable in amount, considering the circumstances of the furlough, including distance of transportation and duration of furlough.
- d. All inmates, other than Class 1-A, 1-B, or 1-C status, should remain in their inmate uniform and restraints at all times while on emergency furlough.
- e. A Class I-A or I-B inmate, in the discretion of the Warden/Center Supervisor or designee, may be released to a family member, friend, or other approved individual who will be responsible for the inmate while on emergency furlough, if the inmate has been on a Meritorious Furlough during the cycle of having I-A or I-B status.
- f. The Warden/Center Supervisor or designee shall notify the Sheriff of the county and the Chief of Police of the city or town, if applicable, where the inmate will visit the critically ill immediate family member or attend the funeral of such family member.
- g. If the inmate's victim or victim's family has requested notification of the inmate's movements, the Warden/Center Supervisor or designee shall notify the victim or victim's family, as applicable, of the inmate's emergency furlough.
- h. Any approved escort that is found to have allowed any misconduct while the inmate is in his/her custody will be placed on a list maintained by the Chaplaincy Division indicating escorts that are not allowed to continue as escorts. The Director may, at their discretion and upon written request, restore the ability of a barred officer to escort an inmate on furlough.

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ADMINISTRATIVE DIRECTIVE

SUBJECT: Emergency Furloughs

NUMBER: 20-03

SUPERSEDES: 20-02

APPLICABILITY: All employees and inmates

REFERENCE: AR 812 - Temporary Release/
 Meritorious & Emergency Furloughs

PAGE: 1 to 5

APPROVED: Original signed by Dexter Payne

EFFECTIVE DATE: 4/3/2020

I. POLICY:

It shall be the policy of the Division of Correction to grant emergency furloughs pursuant to established requirements and conditions for approved inmates.

II. PURPOSE:

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- B. Immediate Family – For the purpose of this policy, immediate family members

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- C. Critical Illness - Any illness from which the immediate family member is not expected to survive or from which death is imminent within a matter of days.

IV. **PROCEDURE:**

To submit a request for an emergency furlough, the inmate or a family member of the inmate will contact the unit Chaplain, providing the Chaplain with the details and documentation necessary to support the basis for the request. In accordance with Religious Services Manual Policy No. 640, the Chaplain will promptly forward the request, and all related information to the Warden/Center Supervisor and otherwise complete the duties as required by the Religious Services Manual, including required notifications. The Chaplain will inform the requesting inmate or family member that an emergency furlough is granted to qualified inmates solely at the discretion of the Warden/Center Supervisor, and that if granted, all costs related to the furlough are the responsibility of the inmate's or the inmate's family.

A. **EMERGENCY FURLOUGHS:**

The Division of Correction may, at the discretion of the Warden/ Center Supervisor, permit the emergency furlough of an inmate in the case of the critical illness or death of a member of the inmate's immediate family.

In the discretion of the Warden/Center Supervisor, up to two emergency furloughs may be granted due to a critical illness. If two emergency furloughs are granted due to a critical illness and the immediate family member subsequently dies, another furlough may be granted for the inmate to attend the funeral. Cases of critical illness must be confirmed to the Warden/Center Supervisor or his or her designee by the ill relative's attending physician.

1. Inmates under Sentence of Death, Life Without Parole, or Life:

An inmate who is serving a sentence of Death, Life without Parole, or Life may be permitted an emergency furlough, but only upon the prior written approval of the Director. In such cases, the inmate may be permitted a four-hour furlough (excluding travel time) to visit with the critically ill patient or to attend the funeral of the deceased family member.

2. Inmates in Class I-A and I-B Status:

An Inmate in Class I-A and I-B who has been on a meritorious furlough during this cycle, may also be released on an emergency furlough under the terms of this Administrative Directive. Such emergency furlough shall not exceed three days in duration.

3. Inmates in Other Class Statuses:

All other inmates except those having achieved Class I-A and I-B may be released on an emergency furlough under the terms of this Administrative Directive. The emergency furlough shall not exceed Forty-Eight hours in duration, but under normal circumstances will include only travel time to services and travel back to the facility.

4. Procedural Requirements

a. In all cases, before approving an emergency furlough, the unit Warden/Center Supervisor or designee shall be satisfied that the inmate to whom an emergency furlough is granted:

- (1) does not presently have an abnormal, uncontrollable propensity for violence;
- (2) does not constitute a security risk;
- (3) is capable of abiding by the terms and conditions of a furlough; and
- (4) will not be endangered or endanger another person during such release.

b. Inmates who are approved for an emergency furlough will be released only to the custody of an Arkansas certified law enforcement officer (480 Hour Course of the Arkansas Law Enforcement Training Academy) with a current full certification as a Law Enforcement Officer or a County Sheriff. The escorting law enforcement officer must be employed as a full-time law enforcement officer, with a Sheriff Department, City Police Department, or the Arkansas State Police Department. If two (2) escorting officers are required, the primary escorting officer must be a full-time Law Enforcement Officer employed by one of

the agencies mentioned above. The second escorting officer can be one with a Certification as an Auxiliary Law Enforcement Officer, Part-Time Officer, or Specialized Police Personnel. If the furlough only requires one escorting officer, that officer must be a full-time law enforcement officer employed by one of the agencies mentioned above. All escorting officers will be responsible for the signing out, transportation, supervision, custody and arrangements for housing in the jail, if necessary, and delivery of the inmate back to the unit that they were transported from.

- c. Any fee charged by the escorting officer for the transportation, supervision, and custody of the inmate shall be the sole responsibility of the inmate and the inmate's family. Any such fee charged shall be reasonable in amount, considering the circumstances of the furlough, including distance of transportation and duration of furlough.
- d. All inmates, other than Class 1-A or 1-B status inmates, should remain in their inmate uniform and restraints at all times while on emergency furlough.
- e. A Class I-A or I-B inmate, in the discretion of the Warden/Center Supervisor or designee, may be released to a family member, friend, or other approved individual who will be responsible for the inmate while on emergency furlough, if the inmate has been on a Meritorious Furlough during the cycle of having I-A or I-B status.
- f. The Warden/Center Supervisor or designee shall notify the Sheriff of the county and the Chief of Police of the city or town, if applicable, where the inmate will visit the critically ill immediate family member or attend the funeral of such family member.
- g. If the inmate's victim or victim's family has requested notification of the inmate's movements, the Warden/Center Supervisor or designee shall notify the victim or victim's family, as applicable, of the inmate's emergency furlough.
- h. Any approved escort that is found to have allowed any misconduct while the inmate is in his/her custody will be

placed on a list maintained by the Chaplaincy Division indicating escorts that are not allowed to continue as escorts. The Director may, at their discretion and upon written request restore the ability of a barred officer to escort an inmate on furlough.



DIVISION OF CORRECTION

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Pine Bluff, AR 71602
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www.adc.arkansas.gov



Arkansas Department of Corrections

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ADMINISTRATIVE DIRECTIVE

SUBJECT: Publications

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NUMBER: 20-xx

SUPERSEDES: 17-17

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APPLICABILITY: Division Staff and Inmates

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REFERENCE: AR-864-Publications

PAGE: 1 of 5

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AD-Inmate Correspondence

AD-Inmate Property Control

AD-Inmate Grievance Procedure

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APPROVED: _____

EFFECTIVE DATE: _____

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I. POLICY:

Inmates may receive publications only from recognized commercial, religious or charitable outlets. All publications are subject to inspection and may be rejected when the publication presents a danger to the security, discipline, or good order of the institution or is inconsistent with rehabilitative goals.

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II. PURPOSE:

This Administrative Directive establishes the process by which the Division of Correction determines which publications may be received by the inmate population.

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III. DEFINITIONS:

A. Publication: A book, magazine, catalog, advertising brochure, religious tract, newspaper, periodical, newsletter, or any type of image or text. The term publication does not include a personal letter.

B. Commercial Outlet: A publisher, bookstore, educational or vocational institute, or other entity whose primary business is the sale and distribution of printed materials,

- C. Charitable Outlet: A religious group or an incorporated non-profit organization established to promote literacy or to provide literature for inmates.
- D. Nudity: A depiction in which genitalia, buttock(s) or female breasts are fully exposed.
- E. Sexually Explicit: A depiction or description of actual or simulated sexual acts including sexual intercourse, anal or oral sex, masturbation, sadism, sado-masochism, bondage, bestiality, or excretory functions which the average adult, taking the material as a whole and applying statewide contemporary community standards, would find appeals to the prurient interest, and which material, taken as a whole, lacks serious literary, scientific, political, or artistic value.
- F. Security Terrorist Threat Group (STTG): Any group of inmates that the Division of Correction reasonably believes poses a threat to the security of the institution or the physical safety of other inmates or staff by virtue of the group's nature, purpose or activities.

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IV. PROCEDURES:

- A. The Warden/Center Supervisor shall designate staff to review incoming publications.
- B. A publication will be rejected if it contains contraband or if the material presents a danger to the security, discipline, or good order of the institution, or is inconsistent with rehabilitative goals. A publication containing pictorial or textual material meeting any one or more of the following categories may be rejected:
 - 1. Material that incites, advocates, aids or abets a riot, work stoppage, or any other behavior that may be detrimental to the safe, secure, and orderly operation of the institution;
 - 2. Material that advocates or assists criminal activity, which is an act or omission prohibited and punished by law to include but not limited to:
 - a. Material advocating, or describing, or assisting methods of escape or eluding capture or which contain blueprints, drawings, or depictions of Division facilities;
 - b. Maps or drawings depicting a geographical region that could reasonably be construed to assist methods of escape or eluding capture, or otherwise be a threat to security;
 - c. Material advocating or providing instructions on identity theft;
 - d. Material that incites, encourages, advocates, or promotes act of violence such as but not limited to sexual assaults and physical assaults;
 - 3. Depictions, descriptions, or instructions regarding the introduction, manufacture, concealment, or use of guns, knives or any other weaponry, including realistic

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pictures of such weapons suitable to aid in the manufacture of such weapons, or facsimiles of such weapons;

- 4. Depictions, descriptions, or instructions regarding the operation of security devices such as locks, cameras, or alarms;
- 5. STTG materials including, but not limited to, codes, signs, symbols, photographs, drawings, training materials, and catalogs;
- 6. Depictions, descriptions, or instructions on the use of hands, feet, or the head as weapons or of other fighting techniques;
- 7. Depictions, descriptions, or instructions on the manufacture, cultivation, or introduction of drugs, alcohol, tobacco, or poisons;
- 8. Instructions or patterns for tattoos, or other skin modification techniques or equipment;
- 9. Material that incites, encourages, advocates, or promotes racism or any other illegal act of discrimination, or that is likely to be disruptive, produce violence, or cause a threat to the offender population or staff;
- 10. Material that depicts nudity; however, material that includes the depiction of nudity as illustrative of and as part of broader medical, educational, anthropological, or artistic content will not be rejected solely on the basis that the material includes nudity;
- 11. Sexually explicit material, whether pictorial or textual, which could reasonably pose a threat to the safety, security, discipline, or good order of the institution, or is inconsistent with rehabilitative goals;
- 12. Posters measuring more than two hundred (200) square inches;
- 13. Publications containing a product insert which, by itself, would be deemed contraband; and
- 14. Publications which meet two (2) of the following conditions:
 - a. Books that measure more than 9" x 11".
 - b. Hardback books thicker than two (2) inches.
 - c. Softback books thicker than four (4) inches.
 - d. Any book heavier than three (3) pounds.

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Maps or drawings depicting a geographical region that could reasonably be construed to assist methods of escape or eluding capture, or otherwise be a threat to security.¶

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Depictions, descriptions, or instructions regarding the operation of security devices such as locks, cameras, or alarms; ¶
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The Warden has the authority to waive these conditions on legal, educational and religious publications.

15. Photobooks are not considered an allowable publication and will not be permitted.

Note: Inmates are only allowed five (5) individual photos. This does not include digital photos (refer to Inmate Correspondence AD).

C. Publications recommended for rejection will be referred to the Warden/Center Supervisor for final decision. With respect to any publication, the decisions must be made on the contents of an individual publication, not previous issues of the same publication.

D. Items within the package cannot be separated; therefore, the package is rejected in its entirety.

Note: For any publication rejected solely because it contains a product insert, if the product insert(s) can be removed, the publication is acceptable.

E. The Warden must approve or reject the publication within thirty (30) days of receipt. If the publication is rejected, the inmate must be notified, in writing, of any decision to reject and the basis for rejection of the publication. The inmate is also notified of appeal procedures and options for disposing of the publication. The inmate must sign that the notice of rejection has been received. Should the inmate refuse to sign, an employee will attest to the fact that the inmate was duly notified.

F. The decision to reject a publication may be appealed to the Central Office Publication Review Committee. The Committee members are to be assigned by the Director or his/her designee. The appeal must be initiated within ten (10) days of the receipt of written notification of the Warden/Center Supervisor's decision to reject the publication. Rejection of a Publication is not grievable.

G. Any rejected publication will be held safe by the Warden/Center Supervisor or his/her designee until the appeal process has been completed, or until the ten (10) day period for filing an appeal has expired.

H. Options for disposing of an unacceptable publication are:

1. Destruction;
2. Return of the publication to the sender at the expense of the inmate unless return postage is guaranteed;
3. Mailing the publication to a third party at the expense of the inmate;

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4. Giving to a third party during visitation.

UNIT NAME

To: Use inmate name here

From: Use Deputy/Assistant Warden/Warden name here

Publication: Name of publication, date or identifying information here

Date:

The Unit Publication Review Committee has denied your publication for the reason(s) listed below:

[List applicable Policy Numbers]

Other (explain)

Committee Member/Title Date Committee Member/Title Date

Committee Member/Title Date Committee Member/Title Date

This decision is consistent with AR 864/Publications (AD). You will have TEN (10) days upon receipt of this notification to appeal. Send your appeal to the Unit Mailroom and the mailroom will present it to the Central Office Publication Review Committee.

If you choose not to appeal the decision you will have FIFTEEN (15) days to exercise options 2, 3, 4, 5, or 6, (if applicable) before the publication will be destroyed.

- 1. Appeal
2. Destruction
3. Return the publication to sender at your own expense
4. Mail the publication to a third party at your own expense Address:
5. Give to 3rd party at Visitation
6. Authorize removal of insert(s) and release any and all claims

*OPTION:

*Failure to exercise an option will be considered authorization for destruction.

Inmate Signature Date

Refused to sign

Witness Date

Publication File
Inmate file
Warden
Inmate

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For any publication rejected solely because it contains a product insert, removing the product insert(s)



**DIVISION OF
CORRECTION**

6814 Princeton Pike
Pine Bluff, AR 71602
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www.adc.arkansas.gov

ADMINISTRATIVE DIRECTIVE

SUBJECT: Publications

NUMBER: 20-04

SUPERSEDES: 17-17

APPLICABILITY: Division Staff and Inmates

REFERENCE: AR-864-Publications
AD-Inmate Correspondence
AD-Inmate Property Control
AD-Inmate Grievance Procedure

PAGE: 1 of 5

APPROVED: Original Signed by Dexter Payne

EFFECTIVE DATE: 4/10/2020

I. POLICY:

Inmates may receive publications only from recognized commercial, religious or charitable outlets. All publications are subject to inspection and may be rejected when the publication presents a danger to the security, discipline, or good order of the institution or is inconsistent with rehabilitative goals.

II. PURPOSE:

This Administrative Directive establishes the process by which the Division of Correction determines which publications may be received by the inmate population.

III. DEFINITIONS:

- A. Publication: A book, magazine, catalog, advertising brochure, religious tract, newspaper, periodical, newsletter, or any type of image or text. The term publication does not include a personal letter.
- B. Commercial Outlet: A publisher, bookstore, educational or vocational institute, or other entity whose primary business is the sale and distribution of printed materials.

- C. Charitable Outlet: A religious group or an incorporated non-profit organization established to promote literacy or to provide literature for inmates.
- D. Nudity: A depiction in which genitalia, buttock(s) or female breasts are fully exposed.
- E. Sexually Explicit: A depiction or description of actual or simulated sexual acts including sexual intercourse, anal or oral sex, masturbation, sadism, sado-masochism, bondage, bestiality, or excretory functions which the average adult, taking the material as a whole and applying statewide contemporary community standards, would find appeals to the prurient interest, and which material, taken as a whole, lacks serious literary, scientific, political, or artistic value.
- F. Security Terrorist Threat Group (STTG): Any group of inmates that the Division of Correction reasonably believes poses a threat to the security of the institution or the physical safety of other inmates or staff by virtue of the group's nature, purpose or activities.

IV. PROCEDURES:

- A. The Warden/Center Supervisor shall designate staff to review incoming publications.
- B. A publication will be rejected if it contains contraband or if the material presents a danger to the security, discipline, or good order of the institution, or is inconsistent with rehabilitative goals. A publication containing pictorial or textual material meeting any one or more of the following categories may be rejected:
 - 1. Material that incites, advocates, aids or abets a riot, work stoppage, or any other behavior that may be detrimental to the safe, secure, and orderly operation of the institution;
 - 2. Material that advocates or assists criminal activity, which is an act or omission prohibited and punished by law to include but not limited to:
 - a. Material advocating, or describing, or assisting methods of escape or eluding capture or which contain blueprints, drawings, or depictions of Division facilities;
 - b. Maps or drawings depicting a geographical region that could reasonably be construed to assist methods of escape or eluding capture, or otherwise be a threat to security;
 - c. Material advocating or providing instructions on identity theft;
 - d. Material that incites, encourages, advocates, or promotes act of violence such as but not limited to sexual assaults and physical assaults;
 - 3. Depictions, descriptions, or instructions regarding the introduction, manufacture, concealment, or use of guns, knives or any other weaponry, including realistic

pictures of such weapons suitable to aid in the manufacture of such weapons, or facsimiles of such weapons;

4. Depictions, descriptions, or instructions regarding the operation of security devices such as locks, cameras, or alarms;
5. STTG materials including, but not limited to, codes, signs, symbols, photographs, drawings, training materials, and catalogs;
6. Depictions, descriptions, or instructions on the use of hands, feet, or the head as weapons or of other fighting techniques;
7. Depictions, descriptions, or instructions on the manufacture, cultivation, or introduction of drugs, alcohol, tobacco, or poisons;
8. Instructions or patterns for tattoos, or other skin modification techniques or equipment;
9. Material that incites, encourages, advocates, or promotes racism or any other illegal act of discrimination, or that is likely to be disruptive, produce violence, or cause a threat to the offender population or staff;
10. Material that depicts nudity; however, material that includes the depiction of nudity as illustrative of and as part of broader medical, educational, anthropological, or artistic content will not be rejected solely on the basis that the material includes nudity;
11. Sexually explicit material, whether pictorial or textual, which could reasonably pose a threat to the safety, security, discipline, or good order of the institution, or is inconsistent with rehabilitative goals;
12. Posters measuring more than two hundred (200) square inches;
13. Publications containing a product insert which, by itself, would be deemed contraband; and
14. Publications which meet two (2) of the following conditions:
 - a. Books that measure more than 9" x 11".
 - b. Hardback books thicker than two (2) inches.
 - c. Softback books thicker than four (4) inches.
 - d. Any book heavier than three (3) pounds.

The Warden has the authority to waive these conditions on legal, educational and religious publications.

15. Photobooks are not considered an allowable publication and will not be permitted.

Note: Inmates are only allowed five (5) individual photos. This does not include digital photos (refer to Inmate Correspondence AD).

C. Publications recommended for rejection will be referred to the Warden/Center Supervisor for final decision. With respect to any publication, the decisions must be made on the contents of an individual publication, not previous issues of the same publication.

D. Items within the package cannot be separated; therefore, the package is rejected in its entirety.

Note: For any publication rejected solely because it contains a product insert, if the product insert(s) can be removed, the publication is acceptable.

E. The Warden must approve or reject the publication within thirty (30) days of receipt. If the publication is rejected, the inmate must be notified, in writing, of any decision to reject and the basis for rejection of the publication. The inmate is also notified of appeal procedures and options for disposing of the publication. The inmate must sign that the notice of rejection has been received. Should the inmate refuse to sign, an employee will attest to the fact that the inmate was duly notified.

F. The decision to reject a publication may be appealed to the Central Office Publication Review Committee. The Committee members are to be assigned by the Director or his/her designee. The appeal must be initiated within ten (10) days of the receipt of written notification of the Warden/Center Supervisor's decision to reject the publication. Rejection of a Publication is not grievable.

G. Any rejected publication will be held safe by the Warden/Center Supervisor or his/her designee until the appeal process has been completed, or until the ten (10) day period for filing an appeal has expired.

H. Options for disposing of an unacceptable publication are:

1. Destruction;
2. Return of the publication to the sender at the expense of the inmate unless return postage is guaranteed;
3. Mailing the publication to a third party at the expense of the inmate;

4. Giving to a third-party during visitation.

UNIT NAME

To: Use inmate name here

From: Use Deputy/Assistant Warden/Warden name here

Publication: Name of publication, date or identifying information here

Date:

The Unit Publication Review Committee has denied your publication for the reason(s) listed below:

_____ [List applicable Policy Numbers]

___ Other (explain) _____

Committee Member/Title Date Committee Member/Title Date

Committee Member/Title Date Committee Member/Title Date

This decision is consistent with AR 864/Publications (AD). You will have TEN (10) days upon receipt of this notification to appeal. **Send your appeal to the Unit Mailroom** and the mailroom will present it to the Central Office Publication Review Committee.

If you choose **not** to appeal the decision you will have FIFTEEN (15) days to exercise options 2, 3, 4, 5, or 6, (if applicable) before the publication will be destroyed.

- 1. Appeal
- 2. Destruction
- 3. Return the publication to sender at your own expense
- 4. Mail the publication to a third party at your own expense Address: _____
- 5. Give to 3rd party at Visitation
- 6. Authorize removal of insert(s) and release any and all claims

***OPTION:** _____

***Failure to exercise an option will be considered authorization for destruction.**

Inmate Signature Date

Refused to sign

Witness Date

Publication File
Inmate file
Warden
Inmate



DIVISION OF CORRECTION

6814 Princeton Pike
Pine Bluff, AR 71602
Phone: 870-267-6999
Fax: 870-267-6244
www.adc.arkansas.gov



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ADMINISTRATIVE DIRECTIVE

SUBJECT: Inmate Withdrawal Requests

NUMBER: 20- _____ **SUPERSEDE:** 19-18

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APPLICABILITY: All ADC Inmates

REFERENCE: AR 109 – Funds of Offenders PAGE 1 of 7
ACA Standards

APPROVED: _____ **EFFECTIVE DATE:** _____
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I. POLICY:

It shall be the policy of the Division of Correction (ADC) to provide for the control and accountability of inmates' personal funds, and a mechanism to ensure inmate requests for withdrawal of personal funds are monitored to prevent fraud, money laundering and criminal activity while incarcerated.

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II. PROCEDURES:

A. Unit Responsibility

1. Inmates must complete a *Personal Withdrawal Request Form* (attached) to disburse funds from their account. Inmates must provide, with the form, documentation verifying the authenticity of the withdrawal.

Examples of disbursements to be requested by use of this form are as follows:

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- a. Personal request from an inmate (pay bills, hobby craft materials, tools, etc) - Make Request payable to appropriate recipient/vendor.
- b. ID Card Replacement – Make request payable to Inmate Welfare Fund.
- c. Inmate Council Donations/Purchases – Make request payable to ADC (Name of Unit) Inmate Council.
- d. Chapel Donations – Make request payable to ADC (Name of Unit) Chaplain or ADC (Name of Unit) Chapel Construction Fund.
- e. Restitution – Make request payable to ADC.
- f. Child Support - Make payable to Office of Child Support Enforcement or as required by court order.
- g. Other Dependent Support – Must be on inmate’s eOMIS relatives and associates list.

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Examples of documentation to be provided with the Personal Withdrawal Request Form are as follows:

- a. Actual bill - Utility bill, hobby craft order, etc.
- b. ID Card Replacement - Approval of Classification Officer.
- c. Restitution - Copy of Disciplinary and Court Results.
- d. Child Support - Court Case number.

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- 2. Inmate must complete an *Inmate Transfer Request Form* (attached) to disburse funds to an incarcerated family member within the ADC. Relationship must be verified by eOMIS relatives and associates list.
- 3. All inmate withdrawal requests must be approved by the Warden or Deputy Warden.

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4. Wardens, Deputy Warden, or Business Managers shall investigate large, and/or suspicious requests before submission to Inmate Banking for processing. eOMIS can be used to verify relatives and associates, addresses, previous inmate banking activity, etc. All suspicious requests shall be reported immediately to the Internal Affairs Division or Internal Audit for approval.

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5. Unit Business Managers shall maintain a signature list of unit personnel authorized to witness inmate's signature, and shall verify such signature on the form as well as Warden's signature.

6. Unit Business Manager shall submit forms to Inmate Banking via U.S. Mail, along with any necessary self-addressed stamped envelope and documentation that is to be mailed to requested payee.

7. Unit Business Manager shall request mailroom clerk to print individual receipts for distribution to inmates. Receipts will include inmate name and ADC#, unit of assignment, barracks and bed location to enhance distribution to the inmates.

8. If an inmate was terminated from a work release unit and returned to a parent unit, he or she can only spend no more than 10% of the money earned while in work release with the balance remaining until released. The inmate can only transfer \$50 every 60 days from their saving account to their ADC account and must be a class I or class II inmate, who is not assigned to restrictive housing. If the transfer is needed in order to send money home, documentation must be provided and all transfers must be approved by the Warden/Center Supervisor. The forms must then be forward to the Director's Office for final approval.

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B. Inmate Banking Responsibility

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1. Inmate Banking shall maintain a signature list of authorized Wardens, Deputy Wardens and Business Managers and shall verify such signature on the form.

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2. If inmate's account balance is insufficient, or forms are not signed by the Unit Warden or Deputy Warden and Business Manager forms will be returned to unit via U.S. Mail for return to the inmate.

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3. Inmate Banking shall process the withdrawal request and mail checks as defined on the request. Checks returned to Inmate Banking due to incorrect mailing address will be voided and

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credited to the inmate’s account. Any documentation that was submitted to payee will be returned to the Unit Business Manager for return to the inmate.

C. Freezing of Inmate Funds

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1. An inmate’s account is subject to being frozen upon reasonable suspicion of illegal or fraudulent activity or violation of department policy involving inmate funds. Upon the freezing of an inmate’s account, the inmate may no longer withdraw or spend the funds held in the account. Any liens, filing fees, work release upkeep, legal postage, court or department mandated child support, etc., will continue to be withdrawn from the account unless otherwise noted.
2. Reasonable suspicion means the funds in the inmate’s account are more likely than not the product of illegal or fraudulent activity or acquired in violation of department policy. An inmate may invoke the inmate grievance procedure to challenge the freezing of his/her account.
3. The Director, Chief Deputy Director, or their designee, shall determine if an inmate’s account should be frozen based upon a finding of reasonable suspicion. An “Approval to Freeze Inmate Bank Account” form shall be completed and signed by the Director, Chief Deputy Director, or their designee. The signed form shall then be forwarded to Inmate Banking authorizing the account to be frozen. Inmate Banking shall immediately freeze the account as directed and notify the appropriate Unit Business Manager. The Unit Business Manager shall immediately notify the inmate, in writing, of this action.
4. Upon completion of the investigation pertaining to the frozen inmate account, Inmate Banking and the inmate involved shall be notified by the Director, Chief Deputy Director, or designee, with instructions as to the disposition or release of the funds.

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<#>AR 109 - Funds of Offenders¶
<#>ACA Standards¶

INMATE PERSONAL WITHDRAWAL REQUEST FORM

ADC Unit

Inmate Name _____ ADC Number _____ Barracks Number _____

PLEASE PRINT REQUESTED INFORMATION

Date of Request _____ Amount of Request \$ _____
_____ Dollars

Check is to be Payable To: _____

Check is to be Mailed To: _____ Name

_____ Street or P.O. Box

_____ City, State, Zip

Purpose of Withdrawal Request _____

Inmate Signature

ADC Witnessed Signature

Approved: Circle One YES
NO _____
Reason for Denial

Warden or Deputy
Warden -Print Name

Warden or Deputy
Warden Signature

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Business Manager – Print Name

Business Manager Signature

Inmate Banking: Inmate Funds Available – Circle One Yes No

INMATE TRANSFER OF FUNDS REQUEST

ADC Unit

Inmate Name _____ ADC Number _____ Barracks Number _____

PLEASE PRINT REQUESTED INFORMATION

Date of Request _____ Amount of Request \$ _____
_____ Dollars

Transfer To:
Inmate Name _____ ADC# _____

Purpose of Transfer Request _____

Inmate Signature ADC Witnessed Signature

Approved: Circle One YES
NO _____
Reason for Denial

Warden or Deputy Warden or Deputy
Warden -Print Name Warden Signature

Business Manager – Print Name Business Manager Signature

Inmate Banking: Inmate Funds Available – Circle One Yes No

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APPROVAL TO FREEZE INMATE BANKING ACCOUNT

Inmate Name

ADC Number

Unit

Date

As per the Division's policy on Inmate Withdrawal Requests, the above inmate's funds shall be suspended, as of the above date, pending investigation of suspected illegal or fraudulent activity in violation of department policy involving inmate funds.

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Signature

Title



6814 Princeton Pike
 Pine Bluff, AR 71602
 Phone: 870-267-6999
 Fax: 870-267-6244
 www.adc.arkansas.gov

**DIVISION OF
 CORRECTION**

ADMINISTRATIVE DIRECTIVE

SUBJECT: Inmate Withdrawal Requests

NUMBER: 20-05

SUPERSEDE: 19-18

APPLICABILITY: All Division of Correction Inmates

**REFERENCE: AR 109 – Funds of Offenders
 ACA Standards**

PAGE 1 of 7

APPROVED: Original Signed by Dexter Payne

EFFECTIVE DATE: 4/20/2020

I. POLICY:

It shall be the policy of the Division of Correction (DOC) to provide for the control and accountability of inmates' personal funds, and a mechanism to ensure inmate requests for withdrawal of personal funds are monitored to prevent fraud, money laundering and criminal activity while incarcerated.

II. PROCEDURES:

A. Unit Responsibility

1. Inmates must complete a Personal Withdrawal Request Form to disburse funds from their account. Inmates must provide, with the form, documentation verifying the authenticity of the withdrawal.

Examples of disbursements to be requested by use of this form are as follows:

- a. Personal request from an inmate (pay bills, hobby craft materials, tools, etc.) - Make request payable to appropriate recipient/vendor.
- b. ID Card Replacement – Make request payable to Inmate Welfare Fund.
- c. Inmate Council Donations/Purchases – Make request payable to DOC (Name of Unit) Inmate Council.
- d. Chapel Donations – Make request payable to DOC (Name of Unit) Chaplain or DOC (Name of Unit) Chapel Construction Fund.
- e. Restitution – Make request payable to DOC.
- f. Child Support - Make payable to Office of Child Support Enforcement or as required by court order.
- g. Other Dependent Support – Must be on inmate’s Relatives and Associates list in the Electronic Offender Management Information System (eOMIS).

Examples of documentation to be provided with the Personal Withdrawal Request Form are as follows:

- a. Actual bill – Utility bill, hobby craft order, etc.
 - b. ID Card Replacement - Approval of Classification Officer.
 - c. Restitution - Copy of Disciplinary and Court Results.
 - d. Child Support - Court Case number.
2. Inmate must complete an Inmate Transfers of Funds Request Form to disburse funds to an incarcerated family member within the DOC. The relationship must be verified by the inmate’s Relatives and Associates list in eOMIS.
 3. All inmate withdrawal requests must be approved by the Warden or Deputy Warden.

4. Wardens, Deputy Warden, or Business Managers shall investigate large, and/or suspicious requests before submission to Inmate Banking for processing. eOMIS can be used to verify relatives and associates, addresses, previous inmate banking activity, etc. All suspicious requests shall be reported immediately to the Internal Affairs Division or Internal Audit for approval.
5. Unit Business Managers shall maintain a verified list of signatures of unit personnel who are authorized to sign as witnesses on inmate withdrawal request forms. The signatures of all authorized staff, including the Warden, will be verified by the Business Manager to deter fraudulent activity.
6. Unit Business Managers shall submit inmate withdrawal request forms to Inmate Banking via U.S. Mail, along with any necessary self-addressed stamped envelope and documentation that is to be mailed to the requested payee.
7. Unit Mailroom Clerks shall print individual receipts for distribution to inmates. Receipts will include the inmate's name and ADC#, unit of assignment, barracks and bed location to enhance distribution to the inmates.
8. If an inmate was terminated from a work release unit and returned to a parent unit, he or she can only spend no more than 10% of the money earned while in work release. The balance remaining will be given to the inmate upon release on parole or discharge. The inmate can only transfer \$50 every 60 days from their saving account to their ADC account and must be a class I or class II inmate, who is not assigned to restrictive housing. If the transfer is needed in order to send money home, documentation must be provided, and all transfers must be approved by the Warden/Center Supervisor. The forms must then be forwarded to the Director's Office for final approval.

B. Inmate Banking Responsibility

1. Inmate Banking shall maintain a signature list of authorized Wardens, Deputy Wardens and Business Managers and shall verify such signature on the form.
2. If inmate's account balance is insufficient, or forms are not signed by the Unit Warden or Deputy Warden and Business Manager forms will be returned to the unit via U.S. Mail for return to the inmate.

3. Inmate Banking shall process the withdrawal request and mail checks as defined on the request. Checks returned to Inmate Banking due to incorrect mailing address will be voided and credited to the inmate's account. Any documentation that was submitted to payee will be returned to the Unit Business Manager for return to the inmate.

C. Freezing of Inmate Funds

1. An inmate's account is subject to being frozen upon reasonable suspicion of illegal or fraudulent activity or violation of department policy involving inmate funds. Upon the freezing of an inmate's account, the inmate may no longer withdraw or spend the funds held in the account. Any liens, filing fees, work release upkeep, legal postage, court or department mandated child support, etc., will continue to be withdrawn from the account unless otherwise noted.
2. Reasonable suspicion means the funds in the inmate's account are more likely than not the product of illegal or fraudulent activity or acquired in violation of department policy. An inmate may invoke the inmate grievance procedure to challenge the freezing of his/her account.
3. The Director, Chief Deputy Director, or their designee, shall determine if an inmate's account should be frozen based upon a finding of reasonable suspicion. An "Approval to Freeze Inmate Bank Account" form shall be completed and signed by the Director, Chief Deputy Director, or their designee. The signed form shall then be forwarded to Inmate Banking authorizing the account to be frozen. Inmate Banking shall immediately freeze the account as directed and notify the appropriate Unit Business Manager. The Unit Business Manager shall immediately notify the inmate, in writing, of this action.
4. Upon completion of the investigation pertaining to the frozen inmate account, Inmate Banking and the inmate involved shall be notified by the Director, Chief Deputy Director, or designee, with instructions as to the disposition or release of the funds.

INMATE PERSONAL WITHDRAWAL REQUEST FORM

DOC Unit

Inmate Name

ADC Number

Barracks Number

PLEASE PRINT REQUESTED INFORMATION

Date of Request _____ Amount of Request \$ _____

Dollars

Check is to be Payable To: _____

Check is to be Mailed To: _____ Name

Street or P.O. Box

City, State, Zip

Purpose of Withdrawal Request _____

Inmate Signature

ADC Witnessed Signature

Approved: Circle One

YES

NO

If No, please list Reason for Denial

Warden or Deputy Warden- Printed Name

Warden or Deputy Warden Signature

Business Manager – Printed Name

Business Manager Signature

Inmate Banking: Inmate Funds Available – Circle One

Yes

No

INMATE TRANSFER OF FUNDS REQUEST

DOC Unit

Inmate Name

ADC Number

Barracks Number

PLEASE PRINT REQUESTED INFORMATION

Date of Request _____ Amount of Request \$ _____

Dollars

Transfer To:

Inmate Name _____ ADC# _____

Purpose of Transfer Request _____

Inmate Signature

ADC Witnessed Signature

Approved: Circle One YES NO

If No, please list Reason for Denial

Warden or Deputy Warden- Printed Name

Warden or Deputy Warden Signature

Business Manager – Printed Name

Business Manager Signature

Inmate Banking: Inmate Funds Available – Circle One Yes No

APPROVAL TO FREEZE INMATE BANKING ACCOUNT

Inmate Name

ADC Number

Unit

Date

As per the Division's policy on Inmate Withdrawal Requests, the above inmate's funds shall be suspended, as of the above date, pending investigation of suspected illegal or fraudulent activity in violation of department policy involving inmate funds.

Signature

Title



DIVISION OF CORRECTION

ADMINISTRATIVE DIRECTIVE

6814 Princeton Pike
Pine Bluff, AR 71602
Phone: 870-267-6999
Fax: 870-267-6244
www.adc.arkansas.gov

SUBJECT: Inmate Property Control

NUMBER: 20- SUPERSEDE: 18-46

APPLICABILITY: To all employees and inmates

REFERENCE: AR 841 - Inmate Property Control Page 1 of 16

APPROVED: EFFECTIVE DATE:

I. POLICY:

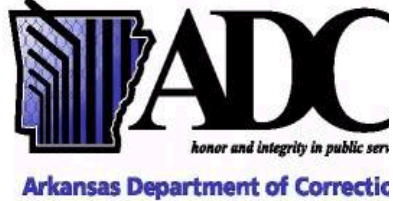
This policy is to establish uniform standards for possession of personal and state property by inmates within the Division of Correction. The responsibility for the administration of this policy is assigned to the Unit Warden/Center Supervisor (hereafter referred to as Warden) of each Unit/Center (hereafter referred to as Unit).

II. DEFINITIONS:

- A. Legal Materials: Pleadings and resource documents such as case law, court rules, statutes, transcripts, notes or legal forms.
- B. Inmate Personal Property: All items of approved property belonging to an inmate. (Attachment #1 and Attachment #2).
- C. Unit Property Control Officer: A staff member, assigned by the Warden, who is responsible for the inventory and storage of inmate personal property.
- D. Receiving Unit: Initial intake unit or unit receiving an inmate upon transfer.
- E. Transferring Unit: Unit that is transferring an inmate to another unit.
- F. Property Box: A storage box provided by the Division for inmate property.

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- G. Excessive Property: Property possessed by an inmate over and above that permitted by this policy.
- H. Unauthorized Property: Property possessed by an inmate that is not permitted in any amount or constitutes a nuisance as defined in AR 841, and will be treated as contraband.
- I. Contraband: Any item or items determined by the Board of Corrections or ADC to jeopardize the safety, security, or good order of its institutions, including but not limited to items which are illegal, authorized property that has been altered, unauthorized property, property in excess of established unit/center limits, property in an inmate's possession in an unauthorized area, spoiled food items, property accumulated for the purpose of barter or trade, property obtained through trafficking and trading or for which no reasonable explanation is given for its origin, or banned by policies.
- J. Issued property: State owned property issued to an inmate upon entry or transfer to a unit or facility of the ADC.
- K. Media Player: An electronic device that may be used to store electronic mail, photos and downloaded music. It also has the ability to function as a radio.

III. PROCEDURES

A. UNIT PROPERTY CONTROL OFFICERS DUTIES (UPCO):

1. Be responsible for the retention and issuance of approved items to inmates upon arrival at a unit.
2. Ensure all inmate property is free of contraband during each inventory.
3. Inscribe each inmate's personal property with the inmate's ADC number to the extent possible. Ensure all footwear is notched.
4. Determine and list all personal items taken from the inmate and provide for excess or unauthorized items to be disposed of as provided herein (see form F-841-5).
5. Ensure all books stored and/or transferred are not property of the unit library. Any books in the possession of an inmate at the time of transfer/release belonging to any unit within the ADC shall be returned to the unit library or the Agency Librarian.
6. Ensure all records identifying and pertaining to storage of inmate personal property are appropriately filed and maintained in the inmate's institutional file and the Inmate Personal Property Record (Form 841-1) is completed accurately and legibly.
7. Provide a system for identification and accounting of items issued by the Unit to the inmate.
8. Be responsible for the secure storage of sealed inmate property storage container.

9. Shall not permit inmates to inventory, document or store any other inmate's personal property.
10. Delegate responsibility to subordinates on a limited basis to ensure ordinary and prudent operations. However, delegation of responsibility will be made only to qualified personnel and then only with the agreement of the Warden.
11. Complete an inventory of all stored items in the event the UPCO is replaced. This will ensure the former UPCO is relieved of responsibility for the property and signifies the new UPCO's acceptance of responsibility.
12. Maintain up-to-date Form 841-1 forms for distribution as follows: White (Original) Institutional File and Pink-Inmate copy
13. Retain confiscated property at the sending unit where it was confiscated.
14. Ensure that all completed property forms are scanned into eOMIS promptly upon completion. This shall serve as the UPCO's documentation for reference.

B. INTAKE INVENTORY PROCESS OF INITIAL COMMITMENTS

1. Inventory of Personal Property, Issuance of State Property & Medication and Medical Devices
 - a. Upon commitment to the Division of Correction, each inmate must have all funds, if applicable, and personal property inventoried by the appropriate intake officer or the UPCO using Form 841-1. During this inventory, the UPCO or designee will determine what items are authorized for retention.
 - b. Each Unit receiving a newly assigned inmate must provide the inmate with the minimum clothing, bedding, and personal hygiene items required (Attachment #1).
 - c. New commitments will not be allowed to keep driver's license, social security card, other identification cards, valuable documents, or money on their person. Each of these items will be scanned and the originals kept in the institutional file. At the request of the Unit, a birth certificate, driver's license, social security card, or similar item mailed to the Unit for an inmate's institutional file shall be scanned and the originals kept in the institutional file. Any money possessed by a new commitment will be placed into the inmate's account.
 - d. A receipt will be prepared for any funds, which may include money orders, veterans, social security, dividend, and certified checks. The original of the receipt will accompany the money to the Unit business office. Both the UPCO and the inmate will retain a copy of the receipt. The Unit Business

Manager will transfer funds to Trust Fund Centralized Banking. The funds will be available to the inmate regardless of Unit assignment.

- e. All medications will be inventoried and delivered to the medical staff who will determine whether to continue the medications. Receipt of medications will be signed by the officer and a medical staff member. If it is determined that the medication must be destroyed, the destruction will be conducted by the appropriate medical staff and performed in accordance with pharmaceutical and state health regulations.
- f. The use or issuance of medical devices/equipment shall be processed in accordance with the appropriate policy and advice of medical authority.

C. EXCESSIVE AND UNAUTHORIZED PROPERTY AT INTAKE

- 1. Amounts allowed. Items listed on Attachment #1 and 2 and those approved items purchased from the commissary are considered the total possible number of personal property items appropriate for retention by an inmate.
- 2. An inmate may possess personal property, both non-expendable and expendable, not exceeding a combined total of Two Hundred Dollars and no/cents (\$200.00).
- 3. Any inmate found to possess unauthorized/excessive items must within fourteen (14) days beginning with the date of arrival at ADC; choose from one of the following options:
 - (a) Mail the items at the inmate's expense to a party of the inmate's choosing;
 - (b) Donation to the state; however, receipts must be received and placed in the inmate's institutional file. No item(s) will be given to any employee for his/her personal use; however, clothing may be donated to the state; or
 - (c) Destruction, if authorized by the inmate completing and signing the destruction section of Form F-841-5 and destruction is witnessed by the UPCO and another staff member; or
 - (d) Pick-up by a party of the inmate's choosing from the unit where it was confiscated if the inmate has been transferred from that unit. Pick up must occur within thirty (30) days from the date the inmate chooses this option to have the item picked up. Confiscated property will not be transferred with the inmate or to another more convenient location for pick-up. Any person authorized by an inmate to receive excess personal property will sign the appropriate section of the F-841-5 form.
- 4. Items not disposed of as provided in (3) (a), (b), (c) or (d) will be destroyed.

D. TRANSFERS AND SUBSEQUENT INVENTORIES

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1. Whether the transfer is temporary or permanent, both sending and receiving Units shall inventory all property and clothing on a Form F-841-1 at all sending and receiving institutions, 48 hour on and 48 hour off relief, and segregation. The Form F-841-1 shall be signed by the UPCO or designee with his/her name printed, signed and AASIS number thereon or a designee and by the inmate with ADC# written. If the inmate refuses to sign the inventory or is incapable of signing due to emergency or behavior, a second officer will sign in the presence of the inmate. It will be the inmate's responsibility to maintain the pink copy of the current property inventory form at all times in the process.
2. Upon completion of the form, give the inmate the pink copy and place the white original in the bag with the property. The original must be scanned into eOMIS before being placed into the property bag. The bag will be sealed with notations on the seal of the date, name, and ADC # of the inmate. Upon arrival at the new location or upon return to the inmate, as soon as possible, the inmate, if he/she desires to have his copy completed, will hand the pink copy to the UPCO and inventory completed. The completed pink copy will be returned to the inmate. When the receiving/returning unit completes the inventory, the Form F-841-1 shall be signed by the UPCO with his/her name printed, signed and AASIS number thereon or a designee and by the inmate with ADC# written. If the inmate refuses or is unavailable to sign the inventory, a second officer will sign in the presence of the inmate.
3. The completed white original will be forwarded to the records office to be placed in the inmate's institutional file and the inmate will keep the pink copy. Property inventory shall be immediately scanned into eOMIS.

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E. EXCESSIVE PROPERTY AND CONTRABAND AFTER INTAKE

1. Any property found in the possession of an inmate, which is not listed on either Form 841-1 or 841-3 or approved for purchase from the commissary will be deemed contraband.
2. Form 401 must be completed to identify all property taken from the inmate as either excess/contraband or disciplinary/criminal evidence. After completion the form must be immediately scanned into eOMIS. The form must include at least the inmate name, ADC Number, date of receipt, a description of the property item(s) in sufficient detail for easy identification; the reason the property was taken from the inmate; disposition of the items; and the confiscating officer and inmate will co-sign the form. If the inmate refuses to sign the form it will be signed by a second officer in the presence of the inmate.
3. Hold property until proceedings complete. Confiscated items to be used for disciplinary, grievance or judicial proceedings will be secured until proceedings are completed. Photograph all items if necessary, attach to the Property Confiscation Form, Form F-401 and document all actions relative to these items on Form F-401.
4. Unauthorized property shall be disposed of as follows:

- (a) Mail the items at the inmate's expense to a party of the inmate's choosing. No lien will be placed on the inmate's account for postage to mail unauthorized property.
 - (b) Destruction, if authorized by the inmate completing and signing the destruction section of Form F-841-5 and destruction is witnessed by the UPCO and another staff member; or
 - (c) Pick-up by a party of the inmate's choosing during visitation or from the Unit where it was confiscated if the inmate has been transferred from that unit. Confiscated property will not be transferred with the inmate or to another more convenient location for pick-up. Any person authorized by an inmate to receive excess personal property will sign the appropriate section of the F-841-5 form.
5. A disciplinary may be written on all confiscated property as unauthorized excessive or contraband.
6. Contraband will be destroyed.
7. The inmate can be instructed to produce the Form F-841-1 form in the event of a search.
8. Weapons and drugs confiscated and not used as evidence in disciplinary or judicial proceedings will be disposed of pursuant to instructions from Internal Affairs.
9. Wireless telephone devices that are confiscated may be donated to a non-profit or other outside agency in lieu of destruction at the discretion of the Director. No mobile or wireless telephone device will be donated without first obtaining written approval from Internal Affairs to insure the preservation of evidence to any charges pending.
10. Medical devices, including, but not limited to eyeglasses, prostheses, canes, knee or other braces, which are confiscated upon no proof of medical script or medical necessity shall be returned to the medical department of the Unit from which it was confiscated.

F. ADDITIONS AND CHANGES TO PERSONAL PROPERTY INVENTORY

1. The only means by which an inmate can acquire personal property/expendable items is by one of the following:
 - a. purchases from a Unit commissary,
 - b. medical items issued by health service administrators, and
 - c. authorized vendors of publications, religious, and work craft items.
2. Issuing staff must complete a Property Addition Form 841-3, which must be scanned into eOMIS upon completion immediately.

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- 3. Any property found in the possession of an inmate, which is not listed on either Form F-841-1 or Form F-841-3 will be considered contraband.
- 4. The deletion of an item(s) from an inmate’s personal property form must be made by the UPCO or designee.
- 5. The distribution of F-841-1 forms associated with this document will be as follows: White (Original) –Institutional File and Pink-Inmate copy.

G. SPECIAL ITEMS OF PERSONAL PROPERTY

- 1. ADC is not responsible for sentimental value of any item.
- 2. Watch, Ring, & Religious Medal: An inmate may have one watch, one ring, and one religious medal or emblem. These items shall not have a value over \$50 each and liability for loss of said item is limited to that amount. An exception may be made for the wedding band with a signed waiver of liability by the inmate, F-841-4 which must be scanned into eOMIS after completion. Any jewelry, which is deemed unauthorized during initial commitment will be disposed of as outlined in herein.
- 3. Religious medal or emblem: must be suspended from the ID card chain and worn inside the uniform shirt and is not to be any larger than 1 and 1/2 inches in length or width and no thicker than 1/8 of an inch. A committee consisting of the UPCO, a ranking Correctional Officer and the Unit Chaplain must approve any questionable medal or emblem. Any religious medal or emblem will be mailed directly from a commercial source with a copy of the invoice included. Any religious medal or emblem, which is deemed unauthorized during initial commitment will be disposed of as outlined herein.
- 4. Personal photographs: Inmates are limited to five (5) personal photographs. A personal photograph is defined as a photograph intended for individual viewing, as opposed to a commercially produced photograph that is published and sold to the public. Photographs can be no larger than 8 1/2” x 11” in size. Such photographs may contain either single or multiple digital images/pictures on one (1) side of the page only. When digital images/pictures are cut from an 8 1/2” x 11” sheet, it they will no longer be considered as one. Each digital image/picture cut from that sheet will be counted as one of the five authorized photographs. Digital images and photocopies are considered the same. Prohibited photos are photos which contain (1) nude or sexually suggestive photographs, or (2) contain subject matter that is disruptive in nature or would threaten security or the good order of the institution. Liability for loss of a photograph is limited to \$2.50 per photograph or per 8 1/2” x 11” size pages regardless of number of photos contained on any one page. Inmates are advised not to retain sole copies of important or sentimental family photographs due to the possibility of damage or loss. Electronic photographs which are transferred to an inmate’s MP3 Player will not be subject to the same numerical restrictions as noted above.
- 5. Legal Materials –An inmate may retain legal materials, which provided the quantity of those materials can be stored in his/her assigned property box. These materials include, but are not limited to mail, court transcripts or documents, research, pleading papers, etc.

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- (a) The inmate is responsible for the disposal of those materials as outlined herein. Inmates may access stored legal materials by utilizing the inmate request system.
- (b) At the time of transfer, the inmate must notify the UPCO that he or she has legal materials belonging to another inmate and turn those materials or work over to the UPCO. Any inmate transferring with legal materials or work belonging to another inmate is subject to disciplinary action.
- (c) The inmate is responsible for notifying the UPCO if they possess a trial transcript, or if one is received by the inmate by mail or delivery for addition to his/her personal inventory. The only information required is the date of the deposition, case number, and the name of the person deposed.
6. Work Craft Materials – work craft or hobby craft materials are governed by the appropriate administrative directive and all inmates participating in the work craft program must meet the criteria for the unit to which they are assigned. Materials will be transferred with the inmate to the new unit. If the inmate does not qualify for work craft or hobby craft or the new unit does not have a work craft or hobby craft program, the materials will be disposed of as per the work craft or hobby craft policy. Liability for tools and materials is limited to a cumulative of \$200.00 including all other items of personal property.
7. Inmates are not allowed to possess an MP3 Player and a radio. If the inmate owns a radio and wishes to purchase an MP3 Player, then the inmate is responsible for disposing of the radio as addressed in this policy. Possession of both the radio and the MP3 Player will result in disciplinary action and the radio being considered as contraband and dealt with accordingly.

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H. DISPOSITION OF PERSONAL PROPERTY IN THE EVENT OF INMATE DEATH

1. Immediately upon the inmate's death, the UPCO will inventory the inmate's property using Form F-841-2, which must be immediately scanned into eOMIS upon completion and place property in a property storage bag. The inmate's funds will be retained in his/her inmate banking account.
2. The individual previously designated by the inmate to receive his/her personal property and/or funds will be notified, and the property given to them. (See form F-841-2).
3. In the event that personal property or funds are not designated, it may only be released to:
 - a. A person possessing a filed stamped Affidavit for Collection of Small Estate,
 - b. A person possessing Letters of Administration or Letters of Testamentary, or
 - c. The Public Administrator.
4. The individual to whom personal property or funds are released will be required to sign a detailed receipt; Form 841-2 then will be placed in the deceased inmate's file.

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- 5. In the event that personal property is not claimed, it will be held for a period of one (1) year from the inmate's death. After such time, it will be destroyed or donated to the state. Destruction must be approved by the Warden, witnessed by the UPCO and one other employee selected by the Warden, and properly documented.
- 6. In the event that funds are not claimed, disposition will be in accordance with procedures issued by the Administrative Services Division.
- 7. Designated family members will be notified when the personal property of a deceased inmate is received from the medical examiner's office and may be picked up from the inmate's last assigned unit.

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I. RELEASE FROM CUSTODY

All stored property, will be returned to the inmate at the time of release from custody. At time of release all monies on an inmate's account will be processed according to ADC Administrative Regulations. Legal materials left by an inmate upon his or her release from custody will be destroyed.

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J. LIABILITY FOR LOST, DAMAGED, OR DESTROYED PERSONAL PROPERTY

- 1. Items of personal property, including watch, ring, religious medal or emblem, legal materials photographs, Media Players, and work craft tools and materials, for which liability is found against the ADC for lost or damaged property or the ADC determines before litigation that it is liable for such loss to an inmate will be replaced with the same type or similar item up to \$200.00 total.
- 2. No monetary reimbursement will be made for any electronically downloaded material on the player. This may consist of music, photos and correspondence. These items can be replaced by the player distributor.
- 3. Money shall not be placed on the books of an inmate if it is possible to replace a lost or damaged item with the same type or similar type of item.
- 4. Inmates who fail to produce a commissary receipt for 'food items' will not be entitled to a replacement or reimbursement. Food items will be replaced (if satisfactorily proven) with a like item or as reasonable a replacement as possible.
- 5. In the event that personal photographs are lost, damaged, or destroyed, the ADC will be responsible for only five (5) photographs. Liability is limited to \$2.50 each or a maximum of \$12.50.
- 6. An inmate assumes the risk of loss of food items placed in storage and subsequently destroyed as a result of vermin, mold or expiration. It is impossible for the ADC to protect against unforeseeable risks and therefore, ADC assumes no liability for losses of this type.
- 7. When an emergency situation is declared by the Unit's Warden, or

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their designee, the Division is not responsible for any property in the affected area which is lost, stolen, damaged, consumed or discarded.

- 8. Inmates must submit a stolen property report for any missing or stolen property. Failure to submit a stolen property report will absolve the DOC from any/all liability for missing or stolen property.

IV. ATTACHMENTS:

- F-841-3 Property Addition Form
- F-841-4 Waiver of Liability
- F-841-5 Disposition of Inmate Property
- F-401 Confiscation Form
- Attachment # 1 Minimum State Issued Requirements
- Attachment # 2 Non-State Issued Property Authorized for Inmate Possession

V. REFERENCES:

- AR 841 Inmate Property Control
- AR 005 Reporting of Incidents
- AR 109 Funds of Offenders
- Punitive Housing/Restriction AD
- Release Process AD
- Inmate Correspondence AD
- Searches of Staff and Control of Contraband AD
- Work Craft Program AD
- Electronically Downloadable Devices (Media Player & Tablets) AD

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SCAN INTO EOMIS UPON COMPLETION

F-401

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STATE OF ARKANSAS - DIVISION OF CORRECTION

CONFISCATED FORM - AREA OR PERSON

(Check One) Inmate Visitor Staff Area

Unit: Building or Area: Barracks Cell

Date and Time of Search: : pm: am

Officer(s) Conducting Search: (Print)

Officer(s) Conducting Search: (Signature)

Inmate Name: ADC #:

Deleted: DEPARTMENT

Articles Seized (description and number of items):

Number	Description

Reason Seized: Voluntarily Produced Excess Property Contraband Disciplinary/Criminal Evidence

Other

Inmate Signature: () Refused to Sign

Area/Shift/Supervisor: (Signature)

Disposition of Contraband:

Copy Delivered to Inmate: Date: Time:

Delivered By: (Signature)

Disciplinary Written: () No () Yes By:

Voluntarily Produced Excess articles only may be mailed to:

Inmate authorizes deduction of postage from pen store account for voluntarily produced excess property only:

() No () Yes Inmate Signature:

To be completed by UPCO

Destruction Date:

UPCO: (Signature) Witnessing Staff: (Signature)

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SCAN INTO EOMIS UPON COMPLETION **F-841-3**
ARKANSAS DIVISION OF CORRECTION
PROPERTY ADDITION FORM

Date: _____ Unit: _____

Inmate's Name: _____ ADC#: _____
Printed

Issuing Department: _____ Date Issued: _____

Please indicate below the appropriate item to be added to an inmate's personal property file. It is important to submit a detailed description of any item(s) that are added, i.e., number of items, brand, color, size, etc.

- | | | |
|-------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Radio | <input type="checkbox"/> Watch | <input type="checkbox"/> Ring |
| <input type="checkbox"/> Earbuds | <input type="checkbox"/> Combination Lock | <input type="checkbox"/> Sweat Shirt |
| <input type="checkbox"/> Shoes | <input type="checkbox"/> Religious Medallion | <input type="checkbox"/> Sweat Pants |
| <input type="checkbox"/> MP3 Player | | |

Other: _____

Detail description of item: _____

Name & Signature of issuing staff: _____ AASIS#: _____

Signature of Inmate: _____ Date: _____ ADC#: _____

This form is to be completed in the event of an addition to an inmate's personal property.

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SCAN INTO EOMIS UPON COMPLETION

F-841-4

WAIVER OF LIABILITY

I, Inmate _____, ADC # _____,
 (Print Name)
 acknowledge that there is a \$50 limit per item and a \$200 limit on the total value of personal property I am permitted to possess, to include work craft tools and materials. I further acknowledge that the value of my ring or other item may exceed the \$50 limit; however, in exchange for maintaining possession of my ring or other item over \$50, I relieve the ADC of any liability regarding claims exceeding the \$50 value limitation or \$200.00 limitation for the total value of the personal property inmates are permitted to possess.

Inmate's Signature

Date

Witnessed by (Employee)

Date

Original - Institutional file Pink copy - Inmate Scanned copy - UPCO

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SCAN INTO EOMIS UPON COMPLETION

Arkansas Division of Correction
PROPERTY DISPOSAL NOTICE AND FORM

F-841-5

Inmate Name & ADC# Unit/Center Date

DELIVERED BY: BADGE #

This NOTICE and FORM is delivered to you on the above date to advise you the following item(s) will not be allowed to be in your possession or stored while at this unit/center. (Give complete description and quantity of items).

Check here if additional space is needed. Each additional sheet must be signed and dated.

I am aware of the disposition options for my stored property. If after 30 days, I have not exercised one of these options my property will be destroyed in accordance with policy. By CIRCLING OPTION 1, 2, OR 3 & COMPLETING THE INFORMATION, I, Inmate ADC#, authorize the disposition of my excess, unauthorized property confiscated at intake or my voluntarily produced excess property in the following manner:

#1: BY MAIL

Name Street Address City State Zip
Check if you are requesting: First Class Mail Parcel Post Mail Insured Mail

I authorize the deduction of the cost of postage from my inmate account to cover the expense of mailing. I must have sufficient money on my account to use this option.

Item(s) Mailed By Signature of Staff On Date

#2: BY PICK UP AT VISITATION

Name Street Address City State

It is my responsibility to inform this person of the need to pick up this property within fourteen (14) days of the item. If the items are not picked up in 14 days, the item(s) will be disposed of by destruction.

Picked up by: (Print/Sign)

#3: BY DESTRUCTION

Item(s) destroyed by on

by Signature of Destruction Official & Date Signature of Staff Witness & Date

ALTERNATE DISPOSAL

The method of disposition listed above was not accomplished within the specified time frame, or the items confiscated are unauthorized, excessive or altered and the item(s) were destroyed.

Signature of UPCO & Date Signature Staff Witness & Date

Original - Institutional file Pink copy - Inmate Scanned copy- UPCO

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ATTACHMENT 1

MINIMUM STATE ISSUED REQUIREMENTS

CLOTHING AND PERSONAL HYGIENE ITEMS – Upon arrival at a receiving unit, the inmate should be issued and/or have available to him/her the following items. He/she shall be accountable thereafter for each item.

Male Clothing Provided

- 3 shirts
- 3 pants
- 1 pair of shoes
- 3 under shorts
- 3 pair cotton socks
- 1 cap/toboggan (depending on seasonal requirements)
- 1 jacket or coat (depending on seasonal requirements)
- 2 thermal top and bottom (depending on seasonal and/or job requirements)

Hygiene Items Provided

- bath soap (as needed)
- 1 toothbrush
- 1 tube of toothpaste
- 1 safety razor
- bath towels (as needed)
- 1 pocket comb

Female Clothing Provided

- 3 shirts
- 3 pants
- 1 pair of shoes
- 3 pair panties
- 3 bras
- 1 jacket or coat (depending on seasonal requirements)
- 3 pair socks
- 2 thermal top and bottom (depending on seasonal and/or job requirements)

Hygiene Items Provided

- bath soap (as needed)
- 1 toothbrush
- 1 tube toothpaste
- 1 safety razor
- bath towels (as needed)
- feminine hygiene items

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Bed Clothing – Each inmate should be issued the following items upon arrival at a reception or regular unit/center:

- 1 mattress
- 1 pillow
- 2 sheets
- 1 blanket
- 1 laundry bag

Revised

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Original – Institutional file Pink Copy – Inmate Scanned copy – JPCO ¶

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ATTACHMENT 2

PERSONAL PROPERTY ITEMS AUTHORIZED FOR INMATE POSSESSION AND NOT ISSUED BY STATE

CLOTHING

- 1 Sweat shirt (white)
1 Sweat pant (white)
1 Pair shower shoes
1 Pair cloth gloves
2 Bathrobes (white) (female)
1 Pair gym shoes
1 Pair civilian shoes (work release)
**5 Undershirts
**8 Pairs panties
**8 Bras
**5 Pairs socks

PERSONAL HYGIENE ITEMS

- 1 Shaving cream
1 Deodorant – roll/stick
1 Shampoo
1 Denture adhesive
1 Hair dressing
1 Hair brush
1 Depilatory preparation
** Feminine hygiene items
** Beauty aid products
1 Laundry bag
1 Pair nail clippers
(as sold on Commissary)

** Includes some items issued by state
NOTE: No pressurized cans of flammable materials are allowed.

MEDICAL ITEMS

- Issued as prescribed and with medical approval:
1 Pair eyeglasses/contact lenses
1 Pair dentures
Prosthetic
Body support devices

LEGAL MATERIAL

Papers and documents of a legal nature may be retained by the inmate in a reasonable quantity. A reasonable quantity of legal papers and documents may be retained by an inmate with his/her assigned storage box provided by the unit.

Deleted:

MISCELLANEOUS

- 1 Radio or MP3 Player, battery operated
1 Leased Tablet
1 Set headphones and/or earphones
1 Watch (wrist/pocket) - \$50 maximum value
1 Ring – \$50 maximum value
1 Religious medal (not to exceed 1 1/2" in length or width and no thicker than 1/8")
Religious articles (as approved)
Personal papers and letters
10 Envelopes
4 Batteries (AA or AAA only)
5 Photographs
Any 3 newspapers in Inmate's name
Any 3 issues of each magazine subscription in Inmate's name
10 Books (includes religious, textbooks & pleasure), subject to weight and size restrictions
Work craft item(s)
Hand held video games

OTHER

Four horizontal lines for additional items.



**DIVISION OF
CORRECTION**

6814 Princeton Pike
Pine Bluff, AR 71602
Phone: 870-267-6999
Fax: 870-267-6244
www.adc.arkansas.gov

ADMINISTRATIVE DIRECTIVE

SUBJECT: Inmate Property Control

NUMBER: 20-06

SUPERSEDE: 18-46

APPLICABILITY: To all employees and inmates

REFERENCE: AR 841 - Inmate Property Control

Page 1 of 16

APPROVED: Director Dexter Payne

EFFECTIVE DATE: 5/1/2020

I. POLICY:

This policy is to establish uniform standards for possession of personal and state property by inmates within the Division of Correction. The responsibility for the administration of this policy is assigned to the Unit Warden/Center Supervisor (hereafter referred to as Warden) of each Unit/Center (hereafter referred to as Unit).

II. DEFINITIONS:

- A. Legal Materials: Pleadings and resource documents such as case law, court rules, statutes, transcripts, notes or legal forms.
- B. Inmate Personal Property: All items of approved property belonging to an inmate. (Attachment #1 and Attachment #2).
- C. Unit Property Control Officer: A staff member, assigned by the Warden, who is responsible for the inventory and storage of inmate personal property.
- D. Receiving Unit: Initial intake unit or unit receiving an inmate upon transfer.
- E. Transferring Unit: Unit that is transferring an inmate to another unit.
- F. Property Box: A storage box provided by the Division for inmate property.
- G. Excessive Property: Property possessed by an inmate over and above that permitted by this policy.

- H. Unauthorized Property: Property possessed by an inmate that is not permitted in any amount or constitutes a nuisance as defined in AR 841, and will be treated as contraband.
- I. Contraband: Any item or items determined by the Board of Corrections or ADC to jeopardize the safety, security, or good order of its institutions, including but not limited to items which are illegal, authorized property that has been altered, unauthorized property, property in excess of established unit/center limits, property in an inmate's possession in an unauthorized area, spoiled food items, property accumulated for the purpose of barter or trade, property obtained through trafficking and trading or for which no reasonable explanation is given for its origin, or banned by policies.
- J. Issued property: State owned property issued to an inmate upon entry or transfer to a unit or facility of the ADC.
- K. Media Player: An electronic device that may be used to store electronic mail, photos and downloaded music. It also has the ability to function as a radio.

III. PROCEDURES

A. UNIT PROPERTY CONTROL OFFICERS DUTIES (UPCO):

1. Be responsible for the retention and issuance of approved items to inmates upon arrival at a unit.
2. Ensure all inmate property is free of contraband during each inventory.
3. Inscribe each inmate's personal property with the inmate's ADC number to the extent possible. Ensure all footwear is notched.
4. Determine and list all personal items taken from the inmate and provide for excess or unauthorized items to be disposed of as provided herein (see form F-841-5).
5. Ensure all books stored and/or transferred are not property of the unit library. Any books in the possession of an inmate at the time of transfer/release belonging to any unit within the ADC shall be returned to the unit library or the Agency Librarian.
6. Ensure all records identifying and pertaining to storage of inmate personal property are appropriately filed and maintained in the inmate's institutional file and the Inmate Personal Property Record (Form 841-1) is completed accurately and legibly.
7. Provide a system for identification and accounting of items issued by the Unit to the inmate.
8. Be responsible for the secure storage of sealed inmate property storage container.

9. Shall not permit inmates to inventory, document or store any other inmate's personal property.
10. Delegate responsibility to subordinates on a limited basis to ensure ordinary and prudent operations. However, delegation of responsibility will be made only to qualified personnel and then only with the agreement of the Warden.
11. Complete an inventory of all stored items in the event the UPCO is replaced. This will ensure the former UPCO is relieved of responsibility for the property and signifies the new UPCO's acceptance of responsibility.
12. Maintain up-to-date Form 841-1 forms for distribution as follows: White (Original) Institutional File and Pink-Inmate copy
13. Retain confiscated property at the sending unit where it was confiscated.
14. Ensure that all completed property forms are scanned into eOMIS promptly upon completion. This shall serve as the UPCO's documentation for reference.

B. INTAKE INVENTORY PROCESS OF INITIAL COMMITMENTS

1. Inventory of Personal Property, Issuance of State Property & Medication and Medical Devices
 - a. Upon commitment to the Division of Correction, each inmate must have all funds, if applicable, and personal property inventoried by the appropriate intake officer or the UPCO using Form 841-1. During this inventory, the UPCO or designee will determine what items are authorized for retention.
 - b. Each Unit receiving a newly assigned inmate must provide the inmate with the minimum clothing, bedding, and personal hygiene items required (Attachment #1).
 - c. New commitments will not be allowed to keep driver's license, social security card, other identification cards, valuable documents, or money on their person. Each of these items will be scanned and the originals kept in the institutional file. At the request of the Unit, a birth certificate, driver's license, social security card, or similar item mailed to the Unit for an inmate's institutional file shall be scanned and the originals kept in the institutional file. Any money possessed by a new commitment will be placed into the inmate's account.
 - d. A receipt will be prepared for any funds, which may include money orders, veterans, social security, dividend, and certified checks. The original of the receipt will accompany the money to the Unit business office. Both the UPCO and the inmate will retain a copy of the receipt. The Unit Business Manager will transfer funds to Trust Fund Centralized Banking. The funds will be available to the inmate regardless of Unit assignment.

- e. All medications will be inventoried and delivered to the medical staff who will determine whether to continue the medications. Receipt of medications will be signed by the officer and a medical staff member. If it is determined that the medication must be destroyed, the destruction will be conducted by the appropriate medical staff and performed in accordance with pharmaceutical and state health regulations.
- f. The use or issuance of medical devices/equipment shall be processed in accordance with the appropriate policy and advice of medical authority.

C. EXCESSIVE AND UNAUTHORIZED PROPERTY AT INTAKE

1. Amounts allowed. Items listed on Attachment #1 and 2 and those approved items purchased from the commissary are considered the total possible number of personal property items appropriate for retention by an inmate.
2. An inmate may possess personal property, both non-expendable and expendable, not exceeding a combined total of Two Hundred Dollars and no/cents (\$200.00).
3. Any inmate found to possess unauthorized/excessive items must within fourteen (14) days beginning with the date of arrival at ADC; choose from one of the following options:
 - (a) Mail the items at the inmate's expense to a party of the inmate's choosing;
 - (b) Donation to the state; however, receipts must be received and placed in the inmate's institutional file. No item(s) will be given to any employee for his/her personal use; however, clothing may be donated to the state; or
 - (c) Destruction, if authorized by the inmate completing and signing the destruction section of Form F-841-5 and destruction is witnessed by the UPCO and another staff member; or
 - (d) Pick-up by a party of the inmate's choosing from the unit where it was confiscated if the inmate has been transferred from that unit. Pick up must occur within thirty (30) days from the date the inmate chooses this option to have the item picked up. Confiscated property will not be transferred with the inmate or to another more convenient location for pick-up. Any person authorized by an inmate to receive excess personal property will sign the appropriate section of the F-841-5 form.
4. Items not disposed of as provided in (3) (a), (b), (c) or (d) will be destroyed.

D. TRANSFERS AND SUBSEQUENT INVENTORIES

1. Whether the transfer is temporary or permanent, both sending and receiving Units shall inventory all property and clothing on a Form F-841-1 at all sending and

receiving institutions, 48 hour on and 48 hour off relief, and segregation. The Form F-841-1 shall be signed by the UPCO or designee with his/her name printed, signed and AASIS number thereon or a designee and by the inmate with ADC# written. If the inmate refuses to sign the inventory or is incapable of signing due to emergency or behavior, a second officer will sign in the presence of the inmate. It will be the inmate's responsibility to maintain the pink copy of the current property inventory form at all times in the process.

2. Upon completion of the form, give the inmate the pink copy and place the white original in the bag with the property. The original must be scanned into eOMIS before being placed into the property bag. The bag will be sealed with notations on the seal of the date, name, and ADC # of the inmate. Upon arrival at the new location or upon return to the inmate, as soon as possible, the inmate, if he/she desires to have his copy completed, will hand the pink copy to the UPCO and inventory completed. The completed pink copy will be returned to the inmate. When the receiving/returning unit completes the inventory, the Form F-841-1 shall be signed by the UPCO with his/her name printed, signed and AASIS number thereon or a designee and by the inmate with ADC# written. If the inmate refuses or is unavailable to sign the inventory, a second officer will sign in the presence of the inmate.
3. The completed white original will be forwarded to the records office to be placed in the inmate's institutional file and the inmate will keep the pink copy. Property inventory shall be immediately scanned into eOMIS.

E. EXCESSIVE PROPERTY AND CONTRABAND AFTER INTAKE

1. Any property found in the possession of an inmate, which is not listed on either Form 841-1 or 841-3 or approved for purchase from the commissary will be deemed contraband.
2. Form 401 must be completed to identify all property taken from the inmate as either excess/contraband or disciplinary/criminal evidence. After completion the form must be immediately scanned into eOMIS. The form must include at least the inmate name, ADC Number, date of receipt, a description of the property item(s) in sufficient detail for easy identification; the reason the property was taken from the inmate; disposition of the items; and the confiscating officer and inmate will co-sign the form. If the inmate refuses to sign the form it will be signed by a second officer in the presence of the inmate.
3. Hold property until proceedings complete. Confiscated items to be used for disciplinary, grievance or judicial proceedings will be secured until proceedings are completed. Photograph all items if necessary, attach to the Property Confiscation Form, Form F-401 and document all actions relative to these items on Form F-401.
4. Unauthorized property shall be disposed of as follows:

- (a) Mail the items at the inmate's expense to a party of the inmate's choosing. No lien will be placed on the inmate's account for postage to mail unauthorized property.
 - (b) Destruction, if authorized by the inmate completing and signing the destruction section of Form F-841-5 and destruction is witnessed by the UPCO and another staff member; or
 - (c) Pick-up by a party of the inmate's choosing during visitation or from the Unit where it was confiscated if the inmate has been transferred from that unit. Confiscated property will not be transferred with the inmate or to another more convenient location for pick-up. Any person authorized by an inmate to receive excess personal property will sign the appropriate section of the F-841-5 form.
5. A disciplinary may be written on all confiscated property as unauthorized excessive or contraband.
6. Contraband will be destroyed.
7. The inmate can be instructed to produce the Form F-841-1 form in the event of a search.
8. Weapons and drugs confiscated and not used as evidence in disciplinary or judicial proceedings will be disposed of pursuant to instructions from Internal Affairs.
9. Wireless telephone devices that are confiscated may be donated to a non-profit or other outside agency in lieu of destruction at the discretion of the Director. No mobile or wireless telephone device will be donated without first obtaining written approval from Internal Affairs to insure the preservation of evidence to any charges pending.
10. Medical devices, including, but not limited to eyeglasses, prostheses, canes, knee or other braces, which are confiscated upon no proof of medical script or medical necessity shall be returned to the medical department of the Unit from which it was confiscated.

F. ADDITIONS AND CHANGES TO PERSONAL PROPERTY INVENTORY

1. The only means by which an inmate can acquire personal property/expendable items is by one of the following:
 - a. purchases from a Unit commissary,
 - b. medical items issued by health service administrators, and
 - c. authorized vendors of publications, religious, and work craft items.
2. Issuing staff must complete a Property Addition Form 841-3, which must be scanned into eOMIS upon completion immediately.

3. Any property found in the possession of an inmate, which is not listed on either Form F-841-1 or Form F-841-3 will be considered contraband.
4. The deletion of an item(s) from an inmate's personal property form must be made by the UPCO or designee.
5. The distribution of F-841-1 forms associated with this document will be as follows: White (Original) –Institutional File and Pink-Inmate copy.

G. SPECIAL ITEMS OF PERSONAL PROPERTY

1. ADC is not responsible for sentimental value of any item.
2. Watch, Ring, & Religious Medal: An inmate may have one watch, one ring, and one religious medal or emblem. These items shall not have a value over \$50 each and liability for loss of said item is limited to that amount. An exception may be made for the wedding band with a signed waiver of liability by the inmate, F-841-4 which must be scanned into eOMIS after completion. Any jewelry, which is deemed unauthorized during initial commitment will be disposed of as outlined in herein.
3. Religious medal or emblem: must be suspended from the ID card chain and worn inside the uniform shirt and is not to be any larger than 1 and 1/2 inches in length or width and no thicker than 1/8 of an inch. A committee consisting of the UPCO, a ranking Correctional Officer and the Unit Chaplain must approve any questionable medal or emblem. Any religious medal or emblem will be mailed directly from a commercial source with a copy of the invoice included. Any religious medal or emblem, which is deemed unauthorized during initial commitment will be disposed of as outlined herein.
4. Personal photographs: Inmates are limited to five (5) personal photographs. A personal photograph is defined as a photograph intended for individual viewing, as opposed to a commercially produced photograph that is published and sold to the public. Photographs can be no larger than 8 1/2" x 11" in size. Such photographs may contain either single or multiple digital images/pictures on one (1) side of the page only. When digital images/pictures are cut from an 8 1/2" x 11" sheet, it they will no longer be considered as one. Each digital image/picture cut from that sheet will be counted as one of the five authorized photographs. Digital images and photocopies are considered the same. Prohibited photos are photos which contain (1) nude or sexually suggestive photographs, or (2) contain subject matter that is disruptive in nature or would threaten security or the good order of the institution. Liability for loss of a photograph is limited to \$2.50 per photograph or per 8 1/2" x 11" size pages regardless of number of photos contained on any one page. Inmates are advised not to retain sole copies of important or sentimental family photographs due to the possibility of damage or loss. Electronic photographs which are transferred to an inmate's MP3 Player will not be subject to the same numerical restrictions as noted above.
5. Legal Materials –An inmate may retain legal materials, which provided the quantity of those materials can be stored in his/her assigned property box. These materials include, but are not limited to mail, court transcripts or documents, research, pleading papers, etc.

- (a) The inmate is responsible for the disposal of those materials as outlined herein. Inmates may access stored legal materials by utilizing the inmate request system.
 - (b) At the time of transfer, the inmate must notify the UPCO that he or she has legal materials belonging to another inmate and turn those materials or work over to the UPCO. Any inmate transferring with legal materials or work belonging to another inmate is subject to disciplinary action.
 - (c) The inmate is responsible for notifying the UPCO if they possess a trial transcript, or if one is received by the inmate by mail or delivery for addition to his/her personal inventory. The only information required is the date of the deposition, case number, and the name of the person deposed.
6. Work Craft Materials – work craft or hobby craft materials are governed by the appropriate administrative directive and all inmates participating in the work craft program must meet the criteria for the unit to which they are assigned. Materials will be transferred with the inmate to the new unit. If the inmate does not qualify for work craft or hobby craft or the new unit does not have a work craft or hobby craft program, the materials will be disposed of as per the work craft or hobby craft policy. Liability for tools and materials is limited to a cumulative of \$200.00 including all other items of personal property.
 7. Inmates are not allowed to possess an MP3 Player and a radio. If the inmate owns a radio and wishes to purchase an MP3 Player, then the inmate is responsible for disposing of the radio as addressed in this policy. Possession of both the radio and the MP3 Player will result in disciplinary action and the radio being considered as contraband and dealt with accordingly.

H. DISPOSITION OF PERSONAL PROPERTY IN THE EVENT OF INMATE DEATH

1. Immediately upon the inmate's death, the UPCO will inventory the inmate's property using Form F-841-2, which must be immediately scanned into eOMIS upon completion and place property in a property storage bag. The inmate's funds will be retained in his/her inmate banking account.
2. The individual previously designated by the inmate to receive his/her personal property and/or funds will be notified, and the property given to them. (See form F-841-2).
3. In the event that personal property or funds are not designated, it may only be released to:
 - a. A person possessing a filed stamped Affidavit for Collection of Small Estate,
 - b. A person possessing Letters of Administration or Letters of Testamentary, or
 - c. The Public Administrator.
4. The individual to whom personal property or funds are released will be required to sign a detailed receipt; Form 841-2 then will be placed in the deceased inmate's file.

5. In the event that personal property is not claimed, it will be held for a period of one (1) year from the inmate's death. After such time, it will be destroyed or donated to the state. Destruction must be approved by the Warden, witnessed by the UPCO and one other employee selected by the Warden, and properly documented.
6. In the event that funds are not claimed, disposition will be in accordance with procedures issued by the Administrative Services Division.
7. Designated family members will be notified when the personal property of a deceased inmate is received from the medical examiner's office and may be picked up from the inmate's last assigned unit.

I. RELEASE FROM CUSTODY

All stored property, will be returned to the inmate at the time of release from custody. At time of release all monies on an inmate's account will be processed according to ADC Administrative Regulations. Legal materials left by an inmate upon his or her release from custody will be destroyed.

J. LIABILITY FOR LOST, DAMAGED, OR DESTROYED PERSONAL PROPERTY

1. Items of personal property, including watch, ring, religious medal or emblem, legal materials photographs, Media Players, and work craft tools and materials, for which liability is found against the ADC for lost or damaged property or the ADC determines before litigation that it is liable for such loss to an inmate will be replaced with the same type or similar item up to \$200.00 total.
2. No monetary reimbursement will be made for any electronically downloaded material on the player. This may consist of music, photos and correspondence. These items can be replaced by the player distributor.
3. Money shall not be placed on the books of an inmate if it is possible to replace a lost or damaged item with the same type or similar type of item.
4. Inmates who fail to produce a commissary receipt for 'food items' will not be entitled to a replacement or reimbursement. Food items will be replaced (if satisfactorily proven) with a like item or as reasonable a replacement as possible.
5. In the event that personal photographs are lost, damaged, or destroyed, the ADC will be responsible for only five (5) photographs. Liability is limited to \$2.50 each or a maximum of \$12.50.
6. An inmate assumes the risk of loss of food items placed in storage and subsequently destroyed as a result of vermin, mold or expiration. It is impossible for the ADC to protect against unforeseeable risks and therefore, ADC assumes no liability for losses of this type.
7. When an emergency situation is declared by the Unit's Warden, or

their designee, the Division is not responsible for any property in the affected area which is lost, stolen, damaged, consumed or discarded.

8. Inmates must submit a stolen property report for any missing or stolen property. Failure to submit a stolen property report will absolve the DOC from any/all liability for missing or stolen property.

IV. ATTACHMENTS:

- F-841-3 Property Addition Form
- F-841-4 Waiver of Liability
- F-841-5 Disposition of Inmate Property
- F-401 Confiscation Form
- Attachment # 1 Minimum State Issued Requirements
- Attachment # 2 Non-State Issued Property Authorized for Inmate Possession

V. REFERENCES:

- AR 841 Inmate Property Control
- AR 005 Reporting of Incidents
- AR 109 Funds of Offenders
- Punitive Housing/Restriction AD
- Release Process AD
- Inmate Correspondence AD
- Searches of Staff and Control of Contraband AD
- Work Craft Program AD
- Electronically Downloadable Devices (Media Player & Tablets) AD

SCAN INTO EOMIS UPON COMPLETION

F-401

STATE OF ARKANSAS – DIVISION OF CORRECTION

CONFISCATED FORM – AREA OR PERSON

(Check One) Inmate Visitor Staff Area

Unit: _____ Building or Area: _____ Barracks _____ Cell _____

Date and Time of Search: _____ / _____ / _____ : pm: am

Officer(s) Conducting Search: (Print) _____

Officer(s) Conducting Search: (Signature) _____

Inmate Name: _____ ADC #: _____

Articles Seized (description and number of items):

Number	Description

Reason Seized: Voluntarily Produced Excess Property Contraband Disciplinary/Criminal Evidence

Other _____

Inmate Signature: _____ () Refused to Sign

Area/Shift/Supervisor: (Signature) _____

Disposition of Contraband: _____

Copy Delivered to Inmate: Date: _____ Time: _____

Delivered By: (Signature) _____

Disciplinary Written: () No () Yes By: _____

Voluntarily Produced Excess articles only may be mailed to:

Inmate authorizes deduction of postage from pen store account for voluntarily produced excess property only:

() No () Yes Inmate Signature: _____

To be completed by UPCO

Destruction Date: _____ / _____ / _____

UPCO: (Signature) _____ Witnessing Staff: (Signature) _____

SCAN INTO EOMIS UPON COMPLETION
ARKANSAS DIVISION OF CORRECTION
PROPERTY ADDITION FORM

F-841-3

Date: _____ Unit: _____

Inmate's Name: _____ ADC#: _____
Printed

Issuing Department: _____ Date Issued: _____

Please indicate below the appropriate item to be added to an inmate's personal property file. It is important to submit a detailed description of any item(s) that are added, i.e., number of items, brand, color, size, etc.

- | | | |
|------------------|---------------------------|-------------------|
| _____ Radio | _____ Watch | _____ Ring |
| _____ Earbuds | _____ Combination Lock | _____ Sweat Shirt |
| _____ Shoes | _____ Religious Medallion | _____ Sweat Pants |
| _____ MP3 Player | | |

Other: _____

Detail description of item: _____

Name & Signature of issuing staff: _____ AASIS#: _____

Signature of Inmate: _____ Date: _____ ADC#: _____

This form is to be completed in the event of an addition to an inmate's personal property.

Original – Institutional file Pink copy – Inmate Scanned copy – UPCO

SCAN INTO EOMIS UPON COMPLETION

F-841-4

WAIVER OF LIABILITY

I, Inmate _____, ADC # _____,

(Print Name)

acknowledge that there is a \$50 limit per item and a \$200 limit on the total value of personal

property I am permitted to possess, to include work craft tools and materials. I further

acknowledge that the value of my ring or other item may exceed the \$50 limit; however, in

exchange for maintaining possession of my ring or other item over \$50, I relieve the ADC of

any liability regarding claims exceeding the \$50 value limitation or \$200.00 limitation for the

total value of the personal property inmates are permitted to possess.

Inmate's Signature

Date

Witnessed by (Employee)

Date

Original – Institutional file Pink copy – Inmate Scanned copy – UPCO

F-841-4

Revised

SCAN INTO EOMIS UPON COMPLETION

F-841-5

Arkansas Division of Correction
PROPERTY DISPOSAL NOTICE AND FORM

Inmate Name & ADC# _____ Unit/Center _____ Date _____

DELIVERED BY: _____ BADGE # _____

This NOTICE and FORM is delivered to you on the above date to advise you the following item(s) will not be allowed to be in your possession or stored while at this unit/center. (Give complete description and quantity of items).

_____ Check here if additional space is needed. Each additional sheet must be signed and dated.

I am aware of the disposition options for my stored property. If after 30 days, I have not exercised one of these options my property will be destroyed in accordance with policy. By CIRCLING OPTION 1, 2, OR 3 & COMPLETING THE INFORMATION, I, Inmate _____, ADC# _____, authorize the disposition of my excess, unauthorized property confiscated at intake or my voluntarily produced excess property in the following manner:

#1: BY MAIL

Name _____ Street Address _____ City _____ State _____ Zip _____
Check if you are requesting: _____ First Class Mail _____ Parcel Post Mail _____ Insured Mail

I authorize the deduction of the cost of postage from my inmate account to cover the expense of mailing. I must have sufficient money on my account to use this option.

Item(s) Mailed By _____ On _____
Signature of Staff _____ Date _____

#2: BY PICK UP AT VISITATION

Name _____ Street Address _____ City _____ State _____

It is my responsibility to inform this person of the need to pick up this property within fourteen (14) days of the item. If the items are not picked up in 14 days, the item(s) will be disposed of by destruction.

Picked up by: _____ (Print/Sign)

#3: BY DESTRUCTION

Item(s) destroyed by _____ on _____
Print Staff Name _____ Date _____

by _____
Signature of Destruction Official & Date _____ Signature of Staff Witness & Date _____

ALTERNATE DISPOSAL

The method of disposition listed above was not accomplished within the specified time frame, or the items confiscated are unauthorized, excessive or altered and the item(s) were destroyed.

Signature of UPCO & Date _____ Signature Staff Witness & Date _____

ATTACHMENT 1**MINIMUM STATE ISSUED REQUIREMENTS**

CLOTHING AND PERSONAL HYGIENE ITEMS – Upon arrival at a receiving unit, the inmate should be issued and/or have available to him/her the following items. He/she shall be accountable thereafter for each item.

Male Clothing Provided

3 shirts
 3 pants
 1 pair of shoes
 3 under shorts
 3 pair cotton socks
 1 cap/toboggan (depending on seasonal requirements)
 1 jacket or coat (depending on seasonal requirements)
 2 thermal top and bottom (depending on seasonal and/or job requirements)

Hygiene Items Provided

bath soap (as needed)
 1 toothbrush
 1 tube of toothpaste
 1 safety razor
 bath towels (as needed)
 1 pocket comb

Female Clothing Provided

3 shirts
 3 pants
 1 pair of shoes
 3 pair panties
 3 bras
 1 jacket or coat (depending on seasonal requirements)
 3 pair socks
 2 thermal top and bottom (depending on seasonal and/or job requirements)

Hygiene Items Provided

bath soap (as needed)
 1 toothbrush
 1 tube toothpaste
 1 safety razor
 bath towels (as needed)
 feminine hygiene items

Bed Clothing – Each inmate should be issued the following items upon arrival at a reception or regular unit/center:

1 mattress	1 blanket
1 pillow	1 laundry bag
2 sheets	

Revised

ATTACHMENT 2**PERSONAL PROPERTY ITEMS AUTHORIZED FOR INMATE
POSSESSION AND NOT ISSUED BY STATE****CLOTHING**

- 1 Sweat shirt (white)
- 1 Sweat pant (white)
- 1 Pair shower shoes
- 1 Pair cloth gloves
- 2 Bathrobes (white) (female)
- 1 Pair gym shoes
- 1 Pair civilian shoes (work release)
- **5 Undershirts
- **8 Pairs panties
- **8 Bras
- **5 Pairs socks

PERSONAL HYGIENE ITEMS

- 1 Shaving cream
- 1 Deodorant – roll/stick
- 1 Shampoo
- 1 Denture adhesive
- 1 Hair dressing
- 1 Hair brush
- 1 Depilatory preparation
- ** Feminine hygiene items
- ** Beauty aid products
- 1 Laundry bag
- 1 Pair nail clippers
(as sold on Commissary)

** Includes some items issued by state

NOTE: No pressurized cans of flammable materials are allowed.

MEDICAL ITEMS

Issued as prescribed and with medical approval:

- 1 Pair eyeglasses/contact lenses
- 1 Pair dentures
- Prosthetic
- Body support devices

LEGAL MATERIAL

Papers and documents of a legal nature may be retained by the inmate in a reasonable quantity. A reasonable quantity of legal papers and documents may be retained by an inmate with his/her assigned storage box provided by the unit.

MISCELLANEOUS

- 1 Radio or MP3 Player, battery operated
- 1 Leased Tablet
- 1 Set headphones and/or earphones
- 1 Watch (wrist/pocket) - \$50 maximum value
- 1 Ring – \$50 maximum value
- 1 Religious medal (not to exceed 1 1/2" in length or width and no thicker than 1/8")
- Religious articles (as approved)
- Personal papers and letters
- 10 Envelopes
- 4 Batteries (AA or AAA only)
- 5 Photographs
- Any 3 newspapers in Inmate's name
- Any 3 issues of each magazine subscription in Inmate's name
- 10 Books (includes religious, textbooks & pleasure), subject to weight and size restrictions
- Work craft item(s)
- Hand held video games

OTHER



6814 Princeton Pike
Pine Bluff, AR 71602
Phone: 870-267-6200
Fax: 870-267-6244
www.adc.arkansas.gov

ADMINISTRATIVE DIRECTIVE

SUBJECT: Physical Assessments

NUMBER: 20-07

SUPERSEDES: AD 13-30
AD 14-02

APPLICABILITY: Security Personnel and Other Designated Categories of Positions

REFERENCE: AR 204 -Employment
AD-Family Medical Leave Act
AD-Employee Conduct Standards
SD-Employee Orientation, Training and Certification
Americans with Disabilities Act

Page 1 of 5

APPROVED: Director Dexter Payne

EFFECTIVE DATE: 5/12/2020

I. POLICY:

It is the policy of the Division of Correction that all employees are able to perform the essential functions of their job.

II. EXPLANATION:

In order to render proper service to the community and to inmates entrusted in their care, security personnel must be physically sound and free of any physical limitations, which might adversely affect the performance of their job duties. The security personnel's safety as well as the safety and lives of others will be endangered if these important physical qualifications are not met. This directive establishes the guidelines that all security and food service staff must pass a physical assessment test in order to remain safe, vigilant, and proactive. It is recognized that in the future other categories of positions within the Division may be designated as positions requiring post-offer physical assessments.

This policy applies to all active security staff and those applicants who have received a conditional offer of employment in positions classified as security or food service whose job title will be one of the following:

- Correctional Officer I
- Corporal
- Correctional Sergeant
- Lieutenant
- Captain
- Major
- Food Preparation Supervisor
- Food Preparation Manager

III. PROCEDURES:

A. Post-Offer Assessments

1. Successful security job applicants will be notified that an offer of employment is conditional upon passing a physical assessment to confirm that the applicant has the ability to physically perform the essential functions of the job. The applicant will also be notified of any other conditions upon which their employment is contingent.
2. The post-offer physical assessment will be performed by an appointed physician or trained/certified staff member by the Division.
3. The failure of the applicant to arrange or appear for the physical assessment in a reasonable time may result in the withdrawal of the offer of employment.
4. The results of the physical assessment will be forwarded directly to the Physical Assessment Coordinator.
5. Falsification of information by the applicant during the assessment will result in withdrawal of the offer of employment.
6. If the physical assessment confirms that the applicant has the ability to perform the essential functions of the offered job, and meets all other required conditions, if any, the applicant will be notified of the final approval and requested to complete the necessary documents for employment.

B. Active Security Staff Assessments

1. The physical abilities of a security employee relating to the essential job functions will be tested every two years based on the employees anniversary date or date of hire.

2. Determining whether an employee can perform the essential job functions must be consistent with business necessity and it must be job-related. The assessment will look at the individual's specific abilities and limitations concerning specific job demands.
3. The physical assessment will be performed at a date and time approved by the Division. A trained/certified staff member who has completed an appropriate certification course in administering physical assessments will conduct the assessment.

A. Scheduling of Assessments

Scheduling Coordinators will send out a list to the Unit Human Resources Managers a minimum of 30 days prior to an employee's anniversary date. Upon notification, the Unit Human Resources Manager will be responsible for notifying the employee (no less than one (1) week prior to the scheduled appointment) with the date, location, and time of the assessment.

If for any reason an employee knows they will be unable to appear for their physical assessment on the scheduled date, it is their responsibility to notify the Scheduling Coordinators as soon as possible. Failure to notify the Scheduling Coordinators of the inability to take their physical assessment on the scheduled date will result in a Written Warning, unless it is due to illness, an emergency, or being on Family Medical Leave (FMLA). Employees will be responsible for rescheduling any future assessments after the initial assessment.

B. Failure to Appear for Assessments

If an employee fails to appear for the initial assessment, the Scheduling Coordinator will notify the Unit Human Resources Manager and the Physical Assessment Coordinator. If the employee fails to appear due to illness, an emergency, or being on FMLA, they will be allowed to reschedule their assessment as soon as they return to work, without any disciplinary action. Otherwise, written reprimand will be administered by the Department Training Administrator and sent to the Unit Human Resources Manager in accordance with the current Employee Conduct Standards. The employee will have one week to submit to the assessment. If the employee still fails to complete the assessment as scheduled, progressive disciplinary actions will be administered, up to and including discharge. Employees will be responsible for rescheduling any future assessment.

C. Confirmation of Assessments

If the assessment confirms that the employee has the ability to continue to perform the essential job functions of a security or food service employee, the

result will be conclusive for a period of two (2) years, unless circumstances arise as to the ability of the employee to perform the essential job functions.

D. Failure of Assessments

If the employee fails to pass the initial physical assessment or any portion of the physical assessment for any reason, including blood pressure or physician's orders, they will be placed on Administrative Leave and allowed to utilize their accrued leave. The employee will then have thirty – (30) days from their initial assessment date to complete the assessment. If an employee fails to pass due to a medical reason, a doctor's release must be provided before they will be allowed to complete their physical assessment.

Upon the completion of the thirty (30) day period, if the employee is still unable to pass the assessment, he/she will be relieved of duties and discharged, unless it is determined that the employee fails the assessment due to a permanent disability, as defined by the Americans with Disabilities Act, or the employee is out on FMLA. The Administrative Directive on ADA and FMLA will then be followed.

In order to ensure consistency with the process of discipline, the Human Resources Administrator or the Associate Human Resources Administrator will be responsible for conducting the employee hearings and taking any appropriate disciplinary actions.

E. Temporary Illness

If an employee is on FMLA when the initial assessment is scheduled or placed on FMLA due to medical reasons when attempting to pass the assessment, they will be scheduled within 10 days from the date of their return to complete their assessment.

The Unit Human Resources Manager will be responsible for notifying the Scheduling Coordinator within 48 hours after an employee returns to work from an illness.

F. Extended Leave of Absence

If an employee is absent from work for an extended period other than FMLA, such as military leave, they will be rescheduled within 10 days from the date of their return to work to complete their assessment.

The Unit Human Resources Manager will be responsible for notifying the Scheduling Coordinators within 48 hours after an employee returns to work.

IV. ATTACHMENTS:

Security Essential Job Function Form

ARKANSAS DIVISION OF CORRECTION
Essential Job Function Questionnaire (Completed by Physician)
Food Preparation Supervisor

Employee Name: _____ Unit: _____

Work assignments within the unit, and unit-to-unit may vary. Regardless of assignment, the Arkansas Department of Correction requires as a qualification standard, that an individual not pose a direct threat to the health and safety of himself/herself or others.

Please have your physician read the following essential job functions and indicate whether "Yes" you do, or "No" you do not have the ability to perform each of these functions with or without reasonable accommodation. If the answer is "No", the employee should bring this to the attention of their Unit H.R. Manager.

False or incomplete information may serve as grounds to declare you ineligible for employment or for dismissal.

Yes No

		1.	Stand for prolonged periods of time – often for a full shift.
		2.	Walk for extended periods of time, on hard, sometimes uneven surfaces.
		3.	Verbally communicate clearly through spoken words to give directions and orders.
		4.	Visually observe, recognize, count and report actions of others.
		5.	Subdue or assist in subduing problem inmates and place them in handcuffs and or restraints.
		6.	Fire and qualify with a rifle and shotgun.
		7.	Drive a vehicle.
		8.	Write clear and accurate accounts of an incident.
		9.	Learn and perform CPR and be knowledgeable of administering basic first aid.
		10.	Be physically fit to protect oneself and to protect others from physical harm.
		11.	Life 40 pounds or more.
		12.	Ability to perform accurate counts.
		13.	Conduct pat down and strip searches and detect objects by touch.
		14.	Ability to work around any hazard associated with cooking and food preparation.
		15.	Teach / Demonstrate basic food preparation techniques (missing, blending, kneading, stirring, etc.)
		16.	Ability to carry injured inmate (with assistance) on backboard to stretcher.
		17.	Place and carry SCBA pack/tank on back, face must be clean shaven so SCBA/Gas masks can be worn in an appropriate manner.

Is this a permanent or temporary disability? _____

If you answered "NO" to any of the above questions, please provide in detail, an explanation on a separate sheet. I certify that I have read and have truthfully answered the above questions.

Physician's Name

Date

Physician's Signature

ARKANSAS DIVISION OF CORRECTION
Essential Job Function Questionnaire (Completed by Physician)
Food Preparation Manager

Employee Name: _____ Unit: _____

Work assignments within the unit, and unit-to-unit may vary. Regardless of assignment, the Arkansas Department of Correction requires as a qualification standard, that an individual not pose a direct threat to the health and safety of himself/herself or others.

Please have your physician read the following essential job functions and indicate whether "Yes" you do, or "No" you do not have the ability to perform each of these functions with or without reasonable accommodation. If the answer is "No", the employee should bring this to the attention of their Unit H.R. Manager.

False or incomplete information may serve as grounds to declare you ineligible for employment or for dismissal.

Yes No

		1.	Stand for prolonged periods of time – often for a full shift.
		2.	Walk for extended periods of time, on hard, sometimes uneven surfaces.
		3.	Verbally communicate clearly through spoken words to give directions and orders.
		4.	Visually observe, recognize, count and report actions of others.
		5.	Subdue or assist in subduing problem inmates and place them in handcuffs and or restraints.
		6.	Fire and qualify with a rifle and shotgun.
		7.	Drive a vehicle.
		8.	Write clear and accurate accounts of an incident.
		9.	Learn and perform CPR and be knowledgeable of administering basic first aid.
		10.	Be physically fit to protect oneself and to protect others from physical harm.
		11.	Life 40 pounds or more.
		12.	Ability to perform accurate counts.
		13.	Conduct pat down and strip searches and detect objects by touch.
		14.	Ability to work around any hazard associated with cooking and food preparation.
		15.	Teach / Demonstrate basic food preparation techniques (missing, blending, kneading, stirring, etc.)
		16.	Ability to carry injured inmate (with assistance) on backboard to stretcher.
		17.	Place and carry SCBA pack/tank on back, face must be clean shaven so SCBA/Gas masks can be worn in an appropriate manner.

Is this a permanent or temporary disability? _____

If you answered "NO" to any of the above questions, please provide in detail, an explanation on a separate sheet. I certify that I have read and have truthfully answered the above questions.

Physician's Name

Date

Physician's Signature

ARKANSAS DIVISION OF CORRECTION
Essential Job Function Questionnaire (Completed by Physician)
Chief of Security (Major)

Employee Name: _____ **Unit:** _____

Work assignments within the unit, and unit-to-unit may vary. Regardless of assignment, the Arkansas Department of Correction requires as a qualification standard, that an individual not pose a direct threat to the health and safety of himself/herself or others.

Please have your physician read the following essential job functions and indicate whether "Yes" you do, or "No" you do not have the ability to perform each of these functions with or without reasonable accommodation. If the answer is "No", the employee should bring this to the attention of their Unit H.R. Manager.

False or incomplete information may serve as grounds to declare you ineligible for employment or for dismissal.

Yes No

		1.	Standing for prolonged periods; while observing inmates.
		2.	Walking for extended periods of time; monitoring inmates.
		3.	Sitting for prolong periods of time at desk, control booth and tower.
		4.	Climb, ascend and descend stairs using hands, arms, feet and legs.
		5.	Subdue or assist in subduing inmates and placing them in handcuffs and or restraints.
		6.	Ability to respond to an emergency in a timely manner. (200 feet in 16.92 sec.)
		7.	Conduct pat searches and detect objects by touch.
		8.	Perform manual dexterity and hand/eye coordination to operate locks with keys and operation of control boards that unlock doors.
		9.	Fire and qualify with a rifle, shotgun and pistol.
		10.	Place and carry SCBA pack/tank on back, face must be clean shaven so SCBA/Gas masks can be worn in an appropriate manner.
		11.	Carry injured inmate (with assistance) on backboard to stretcher.
		12.	Drive vehicle in a safe manner.
		13.	Ability to observe and accurately count the action of inmates and others.
		14.	Ability to write legible reports and present oral reports as requested.

Is this a permanent or temporary disability? _____

If you answered "NO" to any of the above questions, please provide in detail, an explanation on a separate sheet. I certify that I have read and have truthfully answered the above questions.

Physician's Name

Date

Physician's Signature

ARKANSAS DIVISION OF CORRECTION
Essential Job Function Questionnaire (Completed by Physician)
Correctional Officer IV (Captain)

Employee Name: _____ **Unit:** _____

Work assignments within the unit, and unit-to-unit may vary. Regardless of assignment, the Arkansas Department of Correction requires as a qualification standard, that an individual not pose a direct threat to the health and safety of himself/herself or others.

Please have your physician read the following essential job functions and indicate whether "Yes" you do, or "No" you do not have the ability to perform each of these functions with or without reasonable accommodation. If the answer is "No", the employee should bring this to the attention of their Unit H.R. Manager.

False or incomplete information may serve as grounds to declare you ineligible for employment or for dismissal.

Yes No

		1.	Standing for prolonged periods; while observing inmates at assigned post.
		2.	Walking for extended periods of time; monitoring inmates.
		3.	Sitting for prolong periods of time at control booth or tower when assigned.
		4.	Climb, ascend and descend ladders or stairs using hands, arms, feet and legs.
		5.	Subdue or assist in subduing inmates and placing them in handcuffs and or restraints.
		6.	Ability to respond to an emergency in a timely manner. (200 feet in 16.92 sec.)
		7.	Conduct pat searches and detect objects by touch.
		8.	Perform manual dexterity and hand/eye coordination to operate locks with keys and operation of control boards that unlock doors.
		9.	Fire and qualify with a rifle, shotgun and pistol.
		10.	Place and carry SCBA pack/tank on back, face must be clean shaven so SCBA/Gas masks can be worn in an appropriate manner.
		11.	Carry injured inmate (with assistance) on backboard to stretcher.
		12.	Drive vehicle in a safe manner.
		13.	Ability to observe and accurately count the action of inmates and others.
		14.	Ability to write legible reports and present oral reports as requested.

Is this a permanent or temporary disability? _____

If you answered "NO" to any of the above questions, please provide in detail, an explanation on a separate sheet. I certify that I have read and have truthfully answered the above questions.

Physician's Name

Date

Physician's Signature

ARKANSAS DIVISION OF CORRECTION
Essential Job Function Questionnaire (Completed by Physician)
Correctional Officer III (Lieutenant)

Employee Name: _____ **Unit:** _____

Work assignments within the unit, and unit-to-unit may vary. Regardless of assignment, the Arkansas Department of Correction requires as a qualification standard, that an individual not pose a direct threat to the health and safety of himself/herself or others.

Please have your physician read the following essential job functions and indicate whether "Yes" you do, or "No" you do not have the ability to perform each of these functions with or without reasonable accommodation. If the answer is "No", the employee should bring this to the attention of their Unit H.R. Manager.

False or incomplete information may serve as grounds to declare you ineligible for employment or for dismissal.

Yes No

		1.	Standing for prolonged periods; while observing inmates at assigned post.
		2.	Walking for extended periods of time; monitoring inmates.
		3.	Sitting for prolong periods of time at control booth or tower when assigned.
		4.	Climb, ascend and descend ladders or stairs using hands, arms, feet and legs.
		5.	Subdue or assist in subduing inmates and placing them in handcuffs and or restraints.
		6.	Ability to respond to an emergency in a timely manner. (200 feet in 16.92 sec.)
		7.	Conduct pat searches and detect objects by touch.
		8.	Perform manual dexterity and hand/eye coordination to operate locks with keys and operation of control boards that unlock doors.
		9.	Fire and qualify with a rifle, shotgun and pistol.
		10.	Place and carry SCBA pack/tank on back, face must be clean shaven so SCBA/Gas masks can be worn in an appropriate manner.
		11.	Carry injured inmate (with assistance) on backboard to stretcher.
		12.	Drive vehicle in a safe manner.
		13.	Ability to observe and accurately count the action of inmates and others.
		14.	Ability to write legible reports and present oral reports as requested.

Is this a permanent or temporary disability? _____

If you answered "NO" to any of the above questions, please provide in detail, an explanation on a separate sheet. I certify that I have read and have truthfully answered the above questions.

Physician's Name

Date

Physician's Signature

ARKANSAS DIVISION OF CORRECTION

Essential Job Function Questionnaire

Correctional Sergeant

Employee Name: _____ **Unit:** _____

Work assignments within the unit, and unit-to-unit may vary. Regardless of assignment, the Arkansas Department of Correction requires as a qualification standard, that an individual not pose a direct threat to the health and safety of himself/herself or others.

Please have your physician read the following essential job functions and indicate whether "Yes" you do, or "No" you do not have the ability to perform each of these functions with or without reasonable accommodation. If the answer is "No", the employee should bring this to the attention of their Unit H.R. Manager.

False or incomplete information may serve as grounds to declare you ineligible for employment or for dismissal.

Yes No

		1.	Standing for prolonged periods; while observing inmates at assigned post.
		2.	Walking for extended periods of time; monitoring inmates.
		3.	Sitting for prolong periods of time at control booth or tower when assigned.
		4.	Climb, ascend and descend ladders or stairs using hands, arms, feet and legs.
		5.	Subdue or assist in subduing inmates and placing them in handcuffs and or restraints.
		6.	Ability to respond to an emergency in a timely manner. (200 feet in 16.92 sec.)
		7.	Conduct pat searches and detect objects by touch.
		8.	Perform manual dexterity and hand/eye coordination to operate locks with keys and operation of control boards that unlock doors.
		9.	Fire and qualify with a rifle, shotgun and pistol.
		10.	Place and carry SCBA pack/tank on back, face must be clean shaven so SCBA/Gas masks can be worn in an appropriate manner.
		11.	Carry injured inmate (with assistance) on backboard to stretcher.
		12.	Drive vehicle in a safe manner.
		13.	Ability to observe and accurately count the action of inmates and others.
		14.	Ability to write legible reports and present oral reports as requested.

Is this a permanent or temporary disability? _____

If you answered "NO" to any of the above questions, please provide in detail, an explanation on a separate sheet. I certify that I have read and have truthfully answered the above questions.

Applicant's Name

Date

Applicant's Signature

ARKANSAS DIVISION OF CORRECTION
Essential Job Function Questionnaire (Completed by Physician)
Correctional Officer I/II

Employee Name: _____ **Unit:** _____

Work assignments within the unit, and unit-to-unit may vary. Regardless of assignment, the Arkansas Department of Correction requires as a qualification standard, that an individual not pose a direct threat to the health and safety of himself/herself or others.

Please have your physician read the following essential job functions and indicate whether "Yes" you do, or "No" you do not have the ability to perform each of these functions with or without reasonable accommodation. If the answer is "No", the employee should bring this to the attention of their Unit H.R. Manager.

False or incomplete information may serve as grounds to declare you ineligible for employment or for dismissal.

Yes No

		1.	Standing for prolonged periods; while observing inmates at assigned post.
		2.	Walking for extended periods of time; monitoring inmates.
		3.	Sitting for prolong periods of time at control booth or tower when assigned.
		4.	Climb, ascend and descend ladders or stairs using hands, arms, feet and legs.
		5.	Subdue or assist in subduing inmates and placing them in handcuffs and or restraints.
		6.	Ability to respond to an emergency in a timely manner. (200 feet in 16.92 sec.)
		7.	Conduct pat searches and detect objects by touch.
		8.	Perform manual dexterity and hand/eye coordination to operate locks with keys and operation of control boards that unlock doors.
		9.	Fire and qualify with a rifle, shotgun and pistol.
		10.	Place and carry SCBA pack/tank on back, face must be clean shaven so SCBA/Gas masks can be worn in an appropriate manner.
		11.	Carry injured inmate (with assistance) on backboard to stretcher.
		12.	Drive vehicle in a safe manner.
		13.	Ability to observe and accurately count the action of inmates and others.
		14.	Ability to write legible reports and present oral reports as requested.

Is this a permanent or temporary disability? _____

If you answered "NO" to any of the above questions, please provide in detail, an explanation on a separate sheet. I certify that I have read and have truthfully answered the above questions.

Physician's Name

Date

Physician's Signature



PO Box 8707
 Pine Bluff, AR 71611-8707
 Phone: 870-267-6200
 Fax: 870-267-6244
 www.adc.arkansas.gov

~~ADMINISTRATIVE DIRECTIVE~~

~~SUBJECT: Physical Assessments for Current Employees~~

~~NUMBER: 13-30~~ ~~SUPERSEDES: 13-26~~

~~APPLICABILITY: Security Personnel and Other Designated Categories of Positions~~

~~REFERENCE: AR 204 Employment~~ ~~PAGE 1 of 4~~

~~APPROVED: Original signed by Ray Hobbs~~ ~~EFFECTIVE DATE: 10/11/2013~~

~~I. POLICY:~~

~~It is the policy of the Department of Correction that all employees be able to perform the essential functions of their job.~~

~~II. EXPLANATION:~~

~~In order to remain consistent with business necessity and determining whether an individual constitutes a "direct threat" to the safety of others and/or themselves, incumbent security employees will be required to perform a physical assessment test. Incumbent refers to those employees of the Department of Correction classified as security and food service. Specific classifications are as follows:~~

- ~~• Correctional Officer I~~
- ~~• Officer First Class~~
- ~~• Corporal~~
- ~~• Correctional Sergeant~~
- ~~• Lieutenant~~
- ~~• Captain~~
- ~~• Major~~

- ~~Food Preparation Supervisor~~
- ~~Food Preparation Manager~~

~~III. PROCEDURES:~~

~~Employees' physical abilities relating to essential job functions will be tested every two years. Assessments will be determined by employee anniversary dates.~~

~~Determining whether an employee can perform the essential job functions must be consistent with business necessity and it must be job-related. The assessment will look at the individual's specific abilities and limitations concerning specific job demands.~~

~~The physical assessment will be performed at a date and time set or approved by the Department. An appointed trained/certified staff of ADC, who has completed an appropriate certification course in administering physical assessments, will conduct the assessment.~~

~~A. Scheduling of Assessments~~

~~Lists will be sent to the Unit Human Resource Managers a minimum of 30 days prior to an employee's anniversary date. Upon notification from the Scheduling Coordinators, the Unit Human Resource Managers will be responsible for notifying the employee of the specific time and date of the assessment. Employees should be notified no less than one (1) week prior to the scheduled appointment.~~

~~If for any reason an employee knows they will be unable to appear for their physical assessment on the scheduled date, it is their responsibility to notify the Scheduling Coordinators as soon as possible. Failure to notify the Scheduling Coordinators of the inability to take their physical assessment on the scheduled date will result in a Written Warning, unless it is due to illness, an emergency, or being on Family Medical Leave (FMLA). Employees will be responsible for rescheduling any future assessments after the initial assessment.~~

~~B. Failure to Appear for Assessments~~

~~If an employee fails to appear for the initial assessment, the Scheduling Coordinator will notify the Unit Human Resource Manager and Central Human Resources. If the employee fails to appear due to illness, an emergency, or being on FMLA, they will be allowed to reschedule their assessment as soon as they return to work, without any disciplinary action. Otherwise, written reprimand will be administered by Central Human Resources and sent to the Unit HR Manager in accordance with the current Employee Conduct Standards. The employee will have one week to submit to the assessment. If the employee still fails to complete the assessment, as scheduled, progressive disciplinary actions will be~~

~~administered, up to and including discharge. Employees will be responsible for rescheduling any future assessment.~~

~~C. Confirmation of Assessments~~

~~If the assessment confirms that the employee has the ability to continue to perform the essential job functions of a security or food service employee, the result will be conclusive for a period of two (2) years, unless circumstances arise as to the ability of the employee to perform the essential job functions.~~

~~D. Failure of Assessments~~

~~If the employee fails to pass the initial physical assessment or any portion of the physical assessment for any reason, including blood pressure or physician's orders, they will be placed on Administrative Leave and allowed to utilize their accrued leave. The employee will then have thirty (30) days from their initial assessment date to complete the assessment. If an employee fails to pass due to a medical reason, a doctor's release must be provided before they will be allowed to complete their physical assessment.~~

~~Upon the completion of the thirty (30) day period, if the employee is still unable to pass the assessment, he/she will be relieved of duties and discharged, unless it is determined that the employee fails the assessment due to a permanent disability, as defined by the Americans with Disabilities Act, or the employee is out on FMLA. The Administrative Directive on ADA and FMLA will then be followed.~~

~~In order to ensure consistency with the process of discipline, the Human Resources Administrator or the Associate Human Resources Administrator will be responsible for conducting the employee hearings and taking any appropriate disciplinary actions.~~

~~E. Temporary Illness~~

~~If an employee is on FMLA when the initial assessment is scheduled or placed on FMLA due to medical reasons when attempting to pass the assessment, they will be scheduled within 10 days from the date of their return to complete their assessment.~~

~~The Unit Human Resources Manager will be responsible for notifying the Scheduling Coordinator within 48 hours after an employee returns to work from an illness.~~

F. ~~Extended Leave of Absence~~

~~If an employee is absent from work for an extended period other than FMLA, such as military leave, they will be rescheduled within 10 days from the date of their return to work to complete their assessment.~~

~~The Unit Human Resources Manager will be responsible for notifying the Scheduling Coordinators within 48 hours after an employee returns to work.~~

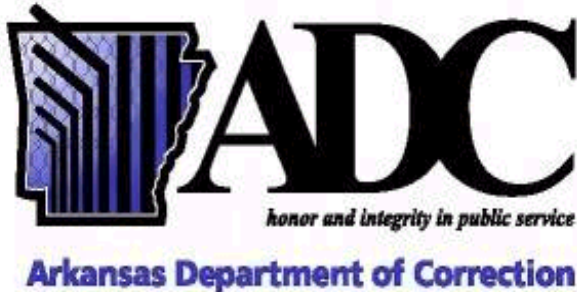
IV. ~~ATTACHMENTS:~~

~~— Security Essential Job Function Form~~

V. ~~REFERENCES:~~

~~— AR 204 — Employment~~

REPEALED



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ADMINISTRATIVE DIRECTIVE

SUBJECT: ~~Post-Offer Physical Assessment~~

NUMBER: ~~14-02~~

SUPERSEDE: ~~13-91~~

APPLICABILITY: ~~Security Personnel and Other Designated Categories of Positions~~

REFERENCE: ~~AR 204 Employment~~ **PAGE** ~~1 of 2~~

APPROVED: ~~Original signed by Ray Hobbs~~ **EFFECTIVE DATE:** ~~01/10/2014~~

I. POLICY:

~~It is the policy of the Department of Correction that all employees be able to perform the essential functions of their job.~~

II. EXPLANATION:

~~In order to render proper service to the community and to inmates entrusted in their care, security personnel must be physically sound and free of any physical limitations, which might adversely affect the performance of their duties. The security personnel's safety as well as the safety and lives of others will be endangered if these important physical qualifications are not met. Accordingly, a medical assessment is required following a conditional offer of employment to applicants for security personnel vacancies within the Department. It is recognized that in the future other categories of positions within the Department may also be designated as positions requiring post-offer physical assessments.~~

III. PROCEDURES:

- ~~1. Successful security job applicants will be notified that an offer of employment is conditional upon passing a physical assessment confirming that the applicant has the ability to physically perform the~~

~~essential functions of his/her job. The applicant will also be notified of any other conditions upon which their employment is contingent.~~

- ~~2. The post offer physical assessment will be performed by a department appointed physician trained/certified staff member.~~
- ~~3. The failure of the applicant to arrange or appear for the physical assessment in a reasonable time may result in the withdrawal of the offer of employment.~~
- ~~4. The results of the physical assessment will be forwarded directly to the Central Human Resources Division.~~
- ~~5. Falsification of information by the applicant during the assessment will result in withdrawal of the offer of employment.~~
- ~~6. If the physical assessment confirms that the applicant has the ability to perform the essential functions of the offered job, and meets all other required conditions, if any, the applicant will be notified of the final approval and requested to complete the necessary documents for employment.~~

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ADMINISTRATIVE MEMORANDUM

SUBJECT: Service Weapons

NUMBER: AM 20-01

SUPERSEDES: New

APPLICABILITY: All Employees of the Division of Correction

REFERENCE: § 12-27-143

PAGE 1 of 1

APPROVED: Original Signed by Dexter Payne

EFFECTIVE DATE: 4/27/2020

PROCEDURE:

Section I (Statutory Criteria)

When a Division of Correction employee retires from service or dies while still employed with the division with at least twenty (20) years of service, in recognition of, and appreciation for the service of the retiring or deceased employee, the Director may award the service weapon carried by the employee at the time of his or her retirement from service or death.

- (1) The employee;
- (2) The employee's spouse if the spouse is eligible under applicable state and federal laws to possess a firearm; or
- (3)(A) The surviving child of the employee if there is no surviving spouse and the surviving child is eligible under applicable state and federal laws to possess a firearm.

(B)(i) If there is more than one (1) surviving child of the employee, the service weapon may be awarded to the oldest surviving child if he or she is eligible under applicable state and federal laws to possess a firearm.

(ii) If the oldest of the surviving children is not eligible to possess a firearm under applicable state and federal laws, then the service weapon may be awarded to the next-oldest surviving child if he or she is eligible to possess a firearm under applicable state and federal laws.

Section II (Length of Issuance)

A retiree must have been issued a weapon for at least fifteen (15) years during the duration of his or her service time.