

DATE OF REPORT	OUT-STANDING ISSUE Y/N	Monitoring Instrument	ITEM NO.	NON-COMPLIANCE ISSUE	CONTRACTOR RESPONSE/DATE/ CORRECTIVE ACTION TAKEN	DATE/METHOD OF CONFIRMATION BY MONITOR/COMMENTS	TDOC MANAGEMENT COMMENTS/NOTES
7/5/05	Yes	Staffing	16	Security Addendum not signed by staff.	Warden's response dated 8/10/05: We dispute the non-compliance in that at this time the purpose for the Security Addendum has not yet been carried out. NCIC terminals have not been installed at CCA facilities contracting with TDOC. Therefore, the non-compliance notification is premature. <b>[NOTE: Warden's original response of 7/18/05 was subsequently withdrawn and this response submitted.]</b>	<b>CM note 1/5/06:</b> Item outstanding, under review.	<b>10/24/05 CMC note:</b> ...the contractor is expected to provide appropriate training to staff, and to document such training on the form contained by the addendum. A copy of the signed agreement may be forwarded to the Liaisons' office for filing, however, it would also be appropriate to maintain a copy in institutional training or personnel files.
9/19/05	Yes	Special management Inmates	(NIN) No item number	Inmate was segregated pending investigation for fighting on 9/14/2005 at 10:50 am. He was assigned to a cell but the occupant would not allow him to enter so staff placed inmate in a shower stall while arrangements could be made. Segregation staff continued to document the inmates location throughout the night as being in the shower. At approximately 6:30pm 9/15/05, after over 30 hours the inmate was removed from the shower and placed in a segregation cell. Staff has not completed any type of reports to reflect the incident that occurred.	Warden's response dated 9/27/05: Warden called Asst. Commissioner shortly after this occurred and discussed this situation with him. There is no violation of policy or contract in this case as the decision to remain in the shower was made by the inmate. Supervisory staff acted on good intentions in following the Warden's previous directives to avoid uses of force/use of OC when I/M's refused to allow restraints to be applied to remove them from a shower based on reasoning that after a period of time they would decide on their own to allow removal from the shower without the need for force. In a number of cases over the last several weeks this occurred after a brief period and no need to use force. Secondly if OC agent had been used we then would have had to put the inmate back into the shower for decontamination. It is my belief that in such situations force should be a last response as long as the inmate is not presenting a risk of harm to himself or others.		<b>11/23/05 CMC Note:</b> Plan of Action submitted by Warden, is under review. <b>11/7/05 CMC note:</b> Letter has been issued by Commissioner indicating that this is a breach and that subsequent breaches may result in liquidated damages.
10/27/05	No	Policies and Procedures Manual and Operations Plan	1d	WCFA does not have a current TDOC approved segregation handbook.	Warden's response dated 11/3/05: The above write up references TDOC policy 502.04. Upon detailed research of the said policy, there is no reference to a "segregation handbook." Policy requires inmates to be orientated and that orientation may occur using a written packet of information. Although, policy and/or the contract does not require a segregation handbook, Whiteville Correctional Facility does issue a "segregation information packet" to all inmates placed in segregation and an orientation is completed of segregation rules and regulation. The CR-2110 is also signed by the segregated inmate(s) and placed in his institutional file for viewing. In addition, the Segregation Packet" is reviewed on an annual basis.	<b>CM note 1/6/05:</b> Item outstanding, WCFA in process of TDOC approval for segregation rules. <b>CM Note 11/10/05:</b> WCFA staff provided CCA form 1-13a showing that the appropriate segregation policies had been reviewed by WCFA staff on annual basis.	<b>11/23/05 CMC Note:</b> E-mail of clarification sent to Warden 11/4/05 indicating that a separate handbook, per se, may not be required, however, approval in writing by TDOC is required for any rules for the unit which differ from those of the general population and are not authorized by TDOC policy. Determination as to whether this is in non-compliance will be made when CM determines if all rules for segregated inmates have been approved by TDOC.

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11/16/05	Yes	Release Procedures	3	Several improper actions were taken by WCFA staff concerning the release to detainer of an inmate.	Warden's response dated 11/21/05 indicates that procedures were examined and new procedures are being put in place to cross check staff more closely to ensure this does not occur again; records staff were counseled and trained again on proper release procedures.	<b>Verified 2/14/06:</b> By review of inmate releases, TOMIS entries and reports and facility inmate records.	
12/6/05	No	<b>Staffing</b>	<b>11b</b>	Two non-security positions were not filled within 45 days. Position #118064, Clinical Supervisor, Position #118068, Registered Nurse.	Warden's response dated 12/8/05: WCF has advertised locally and nationally in an attempt to fill these positions. WCF continues to practice due diligence in filling these positions however have not at this point been able to recruit applicants. Recruitment continues in an effort to fill these positions as expeditiously as possible. We are covering the CNS position with an acting supervisor until the position is filled and covering the RN position with overtime .	<b>CM note 2/13/06:</b> Item still in non-compliant and is outstanding. RN position filled 1/10/06, vacant 81 days. Acting RN named to Clinical Supervisor position 1/9/06 ( memo dated 2/10/06 to reflect this announcement).	<u><b>2/10/06 CMC note: A determination of breach status is pending additional information concerning RN coverage and acting CNS credentials.</b></u>

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2/13/06	No	Disciplinary Procedures	4d	On February 10th while housed in segregation, an inmate refused to except a general population cell assignment and was charged with (RCA) refusing cell assignment. On Feb.13th staff self reported to TDOC Liaison that the disciplinary report had not been served according to policy. The inmate was ordered again to leave segregation and refused, a new (RCA) disciplinary was issued.	Wardens response dated 2/16/06: Subsequent review of the disciplinaries received by the Disciplinary Board Chairperson indicated that an inmate had received a disciplinary report for refusal of a cell assignment on 10 February 2006, thus changing his status from punitive (a release) to Pre-Hearing Detention. However, this report had not been served in a timely manner. Upon observation, TDOC personnel were immediately notified by WCF staff and the problem self-reported. At that time, the recourse for correction was also described to TDOC personnel. It was determined the inmate would be released from the segregation unit on 13 February 06. Yet, inmate White again refused the cell assignment and refused housing in general population. Thus, another disciplinary report was generated and served to the inmate on 13 Feb. in accordance with policy. WCF had previously implemented processes to prevent this type incident; however as the segregation SCO failed to alert the shift supervisor of the Disciplinary report it was not logged and followed up on by the shift supervisor(s). The negligent staff members responsible for ensuring inmates a		
2/27/06	No	Records and Reports	NIN	Inmates had work related injuries and were seen by WCF medical staff for these injuries according to CR-2592, Accident/ Incident/ Traumatic injury reports. Staff failed to enter TOMIS LIBJ (Incident) reports for inmate work related injuries as required by TDOC policy, Furthermore the inmates work supervisor failed to verify and complete the witness version section	Warden's response dated 3/7/06: The TOMIS LIBJ entries have been completed on the above inmates. Also, each work supervisor verified and completed the witness version section of CR-2592 (please see attached). To ensure future compliance, all work supervisors will receive training on the policy and proper procedures involving inmate injuries/accidents.		

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12/6/05	Yes	<b>Staffing</b>	<b>11b</b>	Two non-security positions were not filled within 45 days. Position #118064, Clinical Supervisor, Position #118068, Registered Nurse.	Warden's response dated 12/8/05: WCF has advertised locally and nationally in an attempt to fill these positions. WCF continues to practice due diligence in filling these positions however have not at this point been able to recruit applicants. Recruitment continues in an effort to fill these positions as expeditiously as possible. We are covering the CNS position with an acting supervisor until the position is filled and covering the RN position with overtime .	<b>CM note 3/6/06:</b> Item now compliant. RN position filled 1/10/06. Clinical Supervisor position filled 2/20/06.	<b>4/24/CMC note: Liquidated damages assessed 4/17/06.</b> 4/15/06 CMC note: Notice of Breach and Assessment of Liquidated Damages letter dated 3/13/06 sent by Commissioner. Response dated 3/27/06 received. Follow-up visit to facility made 4/4/06; final determination of Damages amount pending. 2/10/06 CMC note: A determination of breach status is pending additional information concerning RN coverage and acting CNS credentials.

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2/27/06	Yes	Records and Reports	NIN	Inmates had work related injuries and were seen by WCF medical staff for these injuries according to CR-2592, Accident/ Incident/ Traumatic injury reports. Staff failed to enter TOMIS LIBJ (Incident) reports for inmate work related injuries as required by TDOC policy, Furthermore the inmates work supervisor failed to verify and complete the witness version section of CR-2592.	Warden's response dated 3/7/06: The TOMIS LIBJ entries have been completed on the above inmates. Also, each work supervisor verified and completed the witness version section of CR-2592 (please see attached). To ensure future compliance, all work supervisors will receive training on the policy and proper procedures involving inmate injuries/accidents.	<b>CM note:</b> AW has initiated training and procedures for staff to ensure compliance. CM will continue to monitor.	
3/14/06	No	Use of Force	4g(2)	A pre-planned non-emergency Use of Force occurred in segregation in which chemical agents (OC) were used to extract an inmate from his cell due to him flooding the cell. Even though medical staff was present during this incident there isn't documentation to show the inmate's medical file was reviewed prior to the Use of Force (chemical agents).	Warden's response dated 3/20/06: Prior to the use of force in Segregation, Asst. Shift Supervisor met with LPN in the Medical Department and advised her that a pre-planned non-emergency use of force was going to be conducted. Therefore the nurse reviewed the inmate's chart to ensure there were no health restrictions or contraindications pertaining to administering chemical agents. After review the nurse concluded there were no health restrictions. However, she did not document this in the medical chart.		

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3/24/06	No	Special management Inmates	NIN	Punitive segregated inmate was placed inside a segregation recreation pen with a (AS) administrative segregated inmate.	Warden's response dated 3/24/06: Immediately upon notification by facility staff that an officer had mistakenly placed a punitive segregation inmate into the segregation rec cage with another inmate who was max custody, the Warden directed that the Chief of Security personally investigate. After determining that the error had in fact occurred, Chief of security at the Warden's direction self-reported the incident to the Contract Monitor. The officers involved in making the error received corrective action.		

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10/27/05	Yes	Policies and Procedures Manual and Operations Plan	1d	WCFA does not have a current TDOC approved segregation handbook.	Warden's response dated 11/3/05: The above write up references TDOC policy 502.04. Upon detailed research of the said policy, there is no reference to a "segregation handbook." Policy requires inmates to be orientated and that orientation may occur using a written packet of information. Although, policy and/or the contract does not require a segregation handbook, Whiteville Correctional Facility does issue a "segregation information packet" to all inmates placed in segregation and an orientation is completed of segregation rules and regulation. The CR-2110 is also signed by the segregated inmate(s) and placed in his institutional file for viewing. In addition, the Segregation Packet" is reviewed on an annual basis.	<b>Verified 4/28/06:</b> Asst. Comm approved 4/11/06. <b>CM note 1/6/05:</b> Item outstanding, WCFA in process of TDOC approval for segregation rules. <b>CM Note 11/10/05:</b> WCFA staff provided CCA form 1-13a showing that the appropriate segregation policies had been reviewed by WCFA staff on annual basis.	<b>11/23/05 CMC Note:</b> E-mail of clarification sent to Warden 11/4/05 indicating that a separate handbook, per se, may not be required, however, approval in writing by TDOC is required for any rules for the unit which differ from those of the general population and are not authorized by TDOC policy. Determination as to whether this is in non-compliance will be made when CM determines if all rules for segregated inmates have been approved by TDOC.
12/6/05	Yes	<b>Staffing</b>	<b>11b</b>	Two non-security positions were not filled within 45 days. Position #118064, Clinical Supervisor, Position #118068, Registered Nurse.	Warden's response dated 12/8/05: WCF has advertised locally and nationally in an attempt to fill these positions. WCF continues to practice due diligence in filling these positions however have not at this point been able to recruit applicants. Recruitment continues in an effort to fill these positions as expeditiously as possible. We are covering the CNS position with an acting supervisor until the position is filled and covering the RN position with overtime .	<b>Verified 5/5/06:</b> By review of WCFA staffing legend, all positions filled within contracted time limits. <b>CM note 3/6/06:</b> Item now compliant. RN position filled 1/10/06. Clinical Supervisor position filled 2/20/06.	<b>4/24/CMC note: Liquidated damages assessed 4/17/06.</b> 4/15/06 CMC note: Notice of Breach and Assessment of Liquidated Damages letter dated 3/13/06 sent by Commissioner. Response dated 3/27/06 received. Follow-up visit to facility made 4/4/06; final determination of Damages amount pending. 2/10/06 CMC note: A determination of breach status is pending additional information concerning RN coverage and acting CNS credentials.
2/27/06	Yes	Records and Reports	NIN	Inmates had work related injuries and were seen by WCF medical staff for these injuries according to CR-2592, Accident/ Incident/ Traumatic injury reports. Staff failed to enter TOMIS LIBJ (Incident) reports for inmate work related injuries as required by TDOC policy, Furthermore the inmates work supervisor failed to verify and complete the witness version section of CR-2592.	Warden's response dated 3/7/06: The TOMIS LIBJ entries have been completed on the above inmates. Also, each work supervisor verified and completed the witness version section of CR-2592 (please see attached). To ensure future compliance, all work supervisors will receive training on the policy and proper procedures involving inmate injuries/accidents.	<b>Verified 4/28/06:</b> By review of TOMIS and (CR-2592) Accident Incident Traumatic injury reports. <b>CM note:</b> AW has initiated training and procedures for staff to ensure compliance. CM will continue to monitor.	

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3/14/06	Yes	Use of Force	4g(2)	A pre-planned non-emergency Use of Force occurred in segregation in which chemical agents (OC) were used to extract an inmate from his cell due to him flooding the cell. Even though medical staff was present during this incident there isn't documentation to show the inmate's medical file was reviewed prior to the Use of Force (chemical agents).	Warden's response dated 3/20/06: Prior to the use of force in Segregation, Asst. Shift Supervisor met with LPN in the Medical Department and advised her that a pre-planned non-emergency use of force was going to be conducted. Therefore the nurse reviewed the inmate's chart to ensure there were no health restrictions or contraindications pertaining to administering chemical agents. After review the nurse concluded there were no health restrictions. However, she did not document this in the medical chart.		
3/24/06	Yes	Special management Inmates	NIN	Punitive segregated inmate was placed inside a segregation recreation pen with a (AS) administrative segregated inmate.	Warden's response dated 3/24/06: Immediately upon notification by facility staff that an officer had mistakenly placed a punitive segregation inmate into the segregation rec. cage with another inmate who was max custody, the Warden directed that the Chief of Security personally investigate. After determining that the error had in fact occurred, Chief of security at the Warden's direction self-reported the incident to the Contract Monitor. The officers involved in making the error received corrective action.		
4/7/06	No	Use of Force	3h	An unplanned non-emergency Use of Force occurred in segregation, an inmate refused to remove his arm from the cell door food flap. Officer used physical force to secure the food flap and supervisory staff entered TOMIS incident report (00653467). According to Accident / Incident / Traumatic injury report CR-2592, medical staff didn't see inmate Rollins until 6:30pm. Also according to TOMIS incident report, Commissioners Designee was not notified until 8:00pm, which wasn't within the policy time frame of 1 hour of occurrence. According to the facility incident reports for this date, no emergency or unusually occurrences to prevent the notification from being completed in a timely manner occurred.	Warden's response dated 4/14/06: The Shift Supervisor and the Segregation officer on duty at the time of the incident were counseled regarding procedures to follow in the event of any force being utilized. In addition, accident injury reporting procedures will be addressed in the next Supervisor meeting.		

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4/13/06	No	Staffing	16	Signed acknowledgement of Security Addendum (Appendix F) as required by Contract is not present in WCFA staff personnel files. Moreover WCFA has failed to initiate training for applicable contract employees who will have access to inmate institutional records containing NCIC reports. This training will inform staff on proper use of, and confidentiality requirements of, those reports.		<b>CM note 4/28/06:</b> Warden has contacted Asst.Comm. regarding this issue and will forward a response upon his advisement.	
4/18/06	No	Special management Inmates	4e	Upon review of segregated inmates with restraint orders, approximately 19 inmates housed in segregation with different security classifications have restraint requirements posted on their cell doors. A memorandum from the warden/designee to the commissioner's designee for review detailing the actions taken did not occur within the next business day as required by policy.	Warden's response dated 4/27/06: The initial process was to submit a restraint memo to individual inmate's segregation file. We were under the perception that when TDOC Liaison reviewed these files on a daily basis she would review the restraint memo in the process. Asst.Warden has instructed the Shift Supervisor to forward a copy to her office immediately upon restraint restriction sanctions being applied. If the restraint restriction is warranted after regular business hours, the Shift Supervisor's have been instructed to slide a copy under the TDOC Liaison's office door.		
4/18/06	No	Special management Inmates	4g	According to TOMIS incident (00653688) report posted 4/9/06, Inmate had covered his cell door window obstructing the officer's view. Staff obtained verbal approval from the chief of security and commissioner's designee to remove inmates property and place him on property restriction. The commissioner's designee was not notified by memorandum by the next business day for review and approval as required by policy.	Warden's response dated 4/24/06:An interview was conducted with Shift Supervisor who was on duty. He stated he gained approval from TDOC Liaison on 040906 to place Inmate on property restriction. He drafted the restriction memo and placed the memo on Inmates cell door as required. However, he was unaware that the Warden's signature was required. Shift Supervisor was counseled concerning property procedures and understands that property restriction memos require the Warden/Designee and the TDOC Liaison's signature.		

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3/14/06	Yes	Use of Force	4g(2)	A pre-planned non-emergency Use of Force occurred in segregation in which chemical agents (OC) were used to extract an inmate from his cell due to him flooding the cell. Even though medical staff was present during this incident there isn't documentation to show the inmate's medical file was reviewed prior to the Use of Force (chemical agents).	Warden's response dated 3/20/06: Prior to the use of force in Segregation, Asst. Shift Supervisor met with LPN in the Medical Department and advised her that a pre-planned non-emergency use of force was going to be conducted. Therefore the nurse reviewed the inmate's chart to ensure there were no health restrictions or contraindications pertaining to administering chemical agents. After review the nurse concluded there were no health restrictions. However, she did not document this in the medical chart.	<b>Verified 5/17/06:</b> By review of TOMIS reports.	
3/24/06	Yes	Special management Inmates	NIN	Punitive segregated inmate was placed inside a segregation recreation pen with a (AS) administrative segregated inmate.	Warden's response dated 3/24/06: Immediately upon notification by facility staff that an officer had mistakenly placed a punitive segregation inmate into the segregation rec. cage with another inmate who was max custody, the Warden directed that the Chief of Security personally investigate. After determining that the error had in fact occurred, Chief of security at the Warden's direction self-reported the incident to the Contract Monitor. The officers involved in making the error received corrective action.	<b>Verified 5/24/06:</b> By review of TOMIS, segregation reports and log entries.	
4/7/06	No	Use of Force	3h	An unplanned non-emergency Use of Force occurred in segregation, an inmate refused to remove his arm from the cell door food flap. Officer used physical force to secure the food flap and supervisory staff entered TOMIS incident report (00653467). According to Accident / Incident / Traumatic injury report CR-2592, medical staff didn't see inmate Rollins until 6:30pm. Also according to TOMIS incident report, Commissioners Designee was not notified until 8:00pm, which wasn't within the policy time frame of 1 hour of occurrence. According to the facility incident reports for this date, no emergency or unusually occurrences to prevent the notification from being completed in a timely manner occurred.	Warden's response dated 4/14/06: The Shift Supervisor and the Segregation officer on duty at the time of the incident were counseled regarding procedures to follow in the event of any force being utilized. In addition, accident injury reporting procedures will be addressed in the next Supervisor meeting.		

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4/13/06	No	Staffing	16	Signed acknowledgement of Security Addendum (Appendix F) as required by Contract is not present in WCFA staff personnel files. Moreover WCFA has failed to initiate training for applicable contract employees who will have access to inmate institutional records containing NCIC reports. This training will inform staff on proper use of, and confidentiality requirements of, those reports.		<b>CM note 4/28/06:</b> Warden has contacted Asst.Comm. regarding this issue and will forward a response upon his advisement.	
4/18/06	No	Special management Inmates	4e	Upon review of segregated inmates with restraint orders, approximately 19 inmates housed in segregation with different security classifications have restraint requirements posted on their cell doors. A memorandum from the warden/designee to the commissioner's designee for review detailing the actions taken did not occur within the next business day as required by policy.	Warden's response dated 4/27/06: The initial process was to submit a restraint memo to individual inmate's segregation file. We were under the perception that when TDOC Liaison reviewed these files on a daily basis she would review the restraint memo in the process. Asst.Warden has instructed the Shift Supervisor to forward a copy to her office immediately upon restraint restriction sanctions being applied. If the restraint restriction is warranted after regular business hours, the Shift Supervisor's have been instructed to slide a copy under the TDOC Liaison's office door.		
4/18/06	No	Special management Inmates	4g	According to TOMIS incident (00653688) report posted 4/9/06, Inmate had covered his cell door window obstructing the officer's view. Staff obtained verbal approval from the chief of security and commissioner's designee to remove inmates property and place him on property restriction. The commissioner's designee was not notified by memorandum by the next business day for review and approval as required by policy.	Warden's response dated 4/24/06:An interview was conducted with Shift Supervisor who was on duty. He stated he gained approval from TDOC Liaison on 040906 to place Inmate on property restriction. He drafted the restriction memo and placed the memo on Inmates cell door as required. However, he was unaware that the Warden's signature was required. Shift Supervisor was counseled concerning property procedures and understands that property restriction memos require the Warden/Designee and the TDOC Liaison's signature.		

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7/5/05	Yes	Staffing	16	Security Addendum not signed by staff.	Warden's response dated 8/10/05: We dispute the non-compliance in that at this time the purpose for the Security Addendum has not yet been carried out. NCIC terminals have not been installed at CCA facilities contracting with TDOC. Therefore, the non-compliance notification is premature. <b>[NOTE: Warden's original response of 7/18/05 was subsequently withdrawn and this response submitted.]</b>	<b>CM note 4/13/06:</b> NCR issued: Contractor has failed to initiate training. 1/5/06: Item outstanding, under review.	<b>10/24/05 CMC note:</b> ...the contractor is expected to provide appropriate training to staff, and to document such training on the form contained by the addendum. A copy of the signed agreement may be forwarded to the Liaisons' office for filing, however, it would also be appropriate to maintain a copy in institutional training or personnel files.
4/7/06	No	Use of Force	3h	An unplanned non-emergency Use of Force occurred in segregation, an inmate refused to remove his arm from the cell door food flap. Officer used physical force to secure the food flap and supervisory staff entered TOMIS incident report (00653467). According to Accident / Incident / Traumatic injury report CR-2592, medical staff didn't see inmate Rollins until 6:30pm. Also according to TOMIS incident report, Commissioners Designee was not notified until 8:00pm, which wasn't within the policy time frame of 1 hour of occurrence. According to the facility incident reports for this date, no emergency or unusually occurrences to prevent the notification from being completed in a timely manner occurred.	Warden's response dated 4/14/06: The Shift Supervisor and the Segregation officer on duty at the time of the incident were counseled regarding procedures to follow in the event of any force being utilized. In addition, accident injury reporting procedures will be addressed in the next Supervisor meeting.	<b>Verified 6/29/06:</b> By review of Use of Force documentation, TOMIS reports and segregation logs.	
4/13/06	No	Staffing	16	Signed acknowledgement of Security Addendum (Appendix F) as required by Contract is not present in WCFA staff personnel files. Moreover WCFA has failed to initiate training for applicable contract employees who will have access to inmate institutional records containing NCIC reports. This training will inform staff on proper use of, and confidentiality requirements of, those reports.		<b>CM note 4/28/06:</b> Warden has contacted Asst.Comm. regarding this issue and will forward a response upon his advisement. <b>Verified 6/13/06:</b> Facility training was provided to designated staff.	

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4/18/06	No	Special management Inmates	4g	According to TOMIS incident (00653688) report posted 4/9/06, Inmate had covered his cell door window obstructing the officer's view. Staff obtained verbal approval from the chief of security and commissioner's designee to remove inmates property and place him on property restriction. The commissioner's designee was not notified by memorandum by the next business day for review and approval as required by policy.	Warden's response dated 4/24/06:An interview was conducted with Shift Supervisor who was on duty. He stated he gained approval from TDOC Liaison on 040906 to place Inmate on property restriction. He drafted the restriction memo and placed the memo on Inmates cell door as required. However, he was unaware that the Warden's signature was required. Shift Supervisor was counseled concerning property procedures and understands that property restriction memos require the Warden/Designee and the TDOC Liaison's signature.	<b>Verified 7/10/06:</b> By review of segregation documentation and procedures, property restriction procedures.	
6/2/06	No	Special management Inmates	NIN	Two inmates assaulted another inmate. Both were segregated and charged with the assault. Staff interviewed the assaulted inmate and he was allowed to stay in general population after he stated the incident was over and he didn't feel threatened. Incompatibles were enter and approved between all three inmate. After both inmates finished their punitive time, they were released back to general population with pending incompatibles.	Warden's response date: June 6, 2006, Facility acknowledges that an error was made in this instance and is taking measures to ensure that prior to segregation releases, incompatibles are checked.		

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6/28/06	No	Disciplinary Procedures	4a(5)	Five inmates were segregated pending investigation and charged on 6/16/06 with appropriate TOMIS entries completed in the AM. On 6/19/06 these inmates were escorted to the general population disciplinary hearing room to have their hearings in the PM, after the policy time limit of 72 hours had lapsed. This is at least the 9th time that a non-compliance report has been issued for the same/similar problem (ref. non-compliance reports dated 7/10/03, 7/18/03, 8/12/03, 8/19/03, 11/25/03, 2/25/04 4/15/04 and 4/25/05).	Warden's response dated: 7/5/06 Whiteville Correctional Facility acknowledges that the hearings of the said inmates were delayed until after the 72 hour time frame. However, with "good cause" as quoted in TDOC Policy 502.01 IV. DEFINITIONS: E. Good Cause: Circumstances beyond the control of the party (e.g. illness, previously unforeseen need for witness not immediately available, etc.)		

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6/28/06	Yes	Disciplinary Procedures	4a(5)	Five inmates were segregated pending investigation and charged on 6/16/06 with appropriate TOMIS entries completed in the AM. On 6/19/06 these inmates were escorted to the general population disciplinary hearing room to have their hearings in the PM, after the policy time limit of 72 hours had lapsed.	Warden's response dated: 7/5/06 Whiteville Correctional Facility acknowledges that the hearings of the said inmates were delayed until after the 72 hour time frame. However, with "good cause" as quoted in TDOC Policy 502.01 IV. DEFINITIONS: E. Good Cause: Circumstances beyond the control of the party (e.g. illness, previously unforeseen need for witness not immediately available, etc.)		

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8/8/06	No	Record and Reports	6a(3)	Inmate attempted suicide while housed in segregation. Staff was required to use force to regain control. Staff failed to enter TOMIS (LIBJ) and disciplinary reports concerning this and surrounding incidents.	Warden's response dated: 8/9/06, Whiteville Correctional Facility admits it failure to comply with policy and procedures on this particular incident. That Shift Supervisor on shift at the time in question has resigned due to his negligence in this matter. Management is taking all precaution to ensure this error does not occur in the future		
8/30/06	No	Disciplinary Procedures	4a(5)	Inmate was segregated pending investigation for protective custody on 8/19/06. After the PC review panel denied protective custody, the inmate refused a cell assignment in general population and was issued a disciplinary on 8/25/06. Inmates disciplinary hearing was not heard within to the policy time limit of 72 hours.	Warden's response dated: 9/1/06. Whiteville Correctional Facility agrees with the above noted non-compliance issue. The Disciplinary Chairman acknowledges the oversight and has been held accountable. Also, additional procedures are being developed to ensure future compliance in this area. Please note: that the Chief of Security discovered this error prior to the issued write-up and self reported to the Contract Monitor.		

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8/8/06	No	Record and Reports	6a(3)	Inmate attempted suicide while housed in segregation. Staff was required to use force to regain control. Staff failed to enter TOMIS (LIBJ) and disciplinary reports concerning this and surrounding incidents.	Warden's response dated: 8/9/06, Whiteville Correctional Facility admits it failure to comply with policy and procedures on this particular incident. That Shift Supervisor on shift at the time in question has resigned due to his negligence in this matter. Management is taking all precaution to ensure this error does not occur in the future	Verified 10/11/06: By review of infirmary records/logs, TOMIS records.	
8/30/06	No	Disciplinary Procedures	4a(5)	Inmate was segregated pending investigation for protective custody on 8/19/06. After the PC review panel denied protective custody, the inmate refused a cell assignment in general population and was issued a disciplinary on 8/25/06. Inmates disciplinary hearing was not heard within to the policy time limit of 72 hours.	Warden's response dated: 9/1/06. Whiteville Correctional Facility agrees with the above noted non-compliance issue. The Disciplinary Chairman acknowledges the oversight and has been held accountable. Also, additional procedures are being developed to ensure future compliance in this area. Please note: that the Chief of Security discovered this error prior to the issued write-up and self reported to the Contract Monitor.		

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8/30/06	Yes	Disciplinary Procedures	4a(5)	Inmate was segregated pending investigation for protective custody on 8/19/06. After the PC review panel denied protective custody, the inmate refused a cell assignment in general population and was issued a disciplinary on 8/25/06. Inmates disciplinary hearing was not heard within to the policy time limit of 72 hours.	Warden's response dated: 9/1/06. Whiteville Correctional Facility agrees with the above noted non-compliance issue. The Disciplinary Chairman acknowledges the oversight and has been held accountable. Also, additional procedures are being developed to ensure future compliance in this area. Please note: that the Chief of Security discovered this error prior to the issued write-up and self reported to the Contract Monitor.	Verified 10/18/06: By review on disciplinary, segregation logs and TOMIS MGM reports.	
10/3/06	No	Classification Procedures	1d(2)	Inmate was classified minimum trusty. Notification of Committing Jurisdiction (CR-1850) not present in inmate's institutional file.	Warden's response dated: 10/6/06 These letters were re-sent and copies placed in the inmate's file. The Records Staff and Classifications Coordinator will ensure future copies are placed in the file immediately and not placed in the "to be filed" stack.		
10/6/06	No	Clothing, Sanitation and Hygiene	5a	Facility did not provide to TRICOR's Director of marketing an updated semi-annual summary of clothing need projections for July through December 06. Pervious projection dated Dec. 16, 2005 (for Jan. 2006).	Warden's response date 10/6/06: Facility concurs that by oversight this report was not submitted at the correct time. It has now been completed and submitted.		
10/13/06	No	Drug testing and Substance abuse treatment	1 through 27	While monitoring drug testing procedures this period, staff could not provide documentation to support testing for July and August 2006. Even though some documentation was present for Septembers testing, the 10% of population required weren't completed.	Warden's response dated: 10/16/06 Just prior to the audit of this area, the drug testing officer went on FMLA leave and has not returned to work. Facility staff was unable to find the required documentation. Another employee has been assigned the responsibility for drug testing.		
10/16/06	No	Records and Reports	10	Staff could not provide requested records/documentation required for conducting a complete quarterly audit of inmate drug testing procedures.	Warden's response dated: 10/18/06: As noted on the previous finding, the UA officer went on sudden FMLA leave just prior to the audit of this area and the supervisor's position had been vacant with the person hired for the position still in training. Changes in this area of assignment have been made and steps to correct the deficiencies and preclude their		

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10/18/06	No	Use of Force	4g(1,2,3)	A planned non-emergency use of force with chemical agents occurred to extract inmate from his cell. The warden/designee was not notified for prior approval of a large canister of OC chemical agents (MK-IX) to be used during this extraction. Medical staff had been notified nor was the inmates medical file reviewed prior". Staff with first-hand knowledge did enter a TOMIS report, (00675408) Use of Force chemical agents. This report does not reflect a true and accurate account of the incident as witnessed by the acting CD.	Warden's response dated: 10/23/06 An investigation was conducted by AW and Chief into this incident and the resulting use of force. Facility agrees that the Lt. who was just recently promoted into the position failed to follow applicable policy and that the TOMIS report contained information that was not completely accurate. The Lt. was counseled and will receive disciplinary action.		
10/19/06	No	Records and Reports	2b, 10	Staff with first-hand knowledge did enter a TOMIS report, (00675408) Use of Force chemical agents. This report does not reflect a true and accurate account of the incident as witnessed by the acting CD.	Warden's response dated: 10/23/06 First issue is a repeat of the other NC finding of same date and incident and as answered on that response, corrective action is being taken. As to the failure to provide incident reports, the facility acknowledges that due to several recent changes in staffing including the Chief of Security, Asst. Chief of Security and the Chief of Security's secretary, there was some confusion regarding the provision of the CCA incident report to the monitor and communications have been made to appropriate staff to provide the 5-1A to the monitor in the future.		
10/26/06	Yes	Special management Inmates	2b, 10	Inmate was segregated 10/16/06 pending an investigation for protective custody. The protective services routing form (CR-3241) was not provided to the Commissioners Designee for approval within the 72-hour policy guideline.	Warden's response date: 11/6/06 Corrective actions have been initiated to ensure that the CR-3241 form is completed and given to the Commissioner's Designee as soon as it is reviewed by the Chief of Security.		

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10/3/06	Yes	Classification Procedures	1d(2)	Inmate was classified minimum trusty. Notification of Committing Jurisdiction (CR 1850) not present in inmate's institutional file.	Warden's response dated: 10/6/06 These letters were re-sent and copies placed in the inmate's file. The Records Staff and Classifications Coordinator will ensure future copies are placed in the file immediately and not placed in the "to be filed" stack.		
10/6/06	Yes	Clothing, Sanitation and Hygiene	5a	Facility did not provide to TRICOR's Director of marketing an updated semi-annual summary of clothing need projections for July through December 06. Pervious projection dated Dec. 16, 2005 (for Jan. 2006).	Warden's response date 10/6/06: Facility concurs that by oversight this report was not submitted at the correct time. It has now been completed and submitted.		
10/13/06	Yes	Drug testing and Substance abuse treatment	1 through 7	While monitoring drug testing procedures this period, staff could not provide documentation to support testing for July and August 2006. Even though some documentation was present for Septembers testing, the 10% of population required weren't completed.	Warden's response dated: 10/16/06 Just prior to the audit of this area, the drug testing officer went on FMLA leave and has not returned to work. Facility staff was unable to find the required documentation. Another employee has been assigned the responsibility for drug testing.		
10/16/06	Yes	Records and Reports	10	Staff could not provide requested records/documentation required for conducting a complete quarterly audit of inmate drug testing procedures.	Warden's response dated: 10/18/06: As noted on the previous finding, the UA officer went on sudden FMLA leave just prior to the audit of this area and the supervisor's position had been vacant with the person hired for the position still in training. Changes in this area of assignment have been made and steps to correct the deficiencies and preclude their reoccurrence are being taken.		
10/18/06	Yes	Use of Force	4g(1,2, 3)	A planned non-emergency use of force with chemical agents occurred to extract inmate from his cell. The warden/designee was not notified for prior approval of a large canister of OC chemical agents (MK-IX) to be used during this extraction. Medical staff had been notified nor was the inmates medical file reviewed prior". Staff with first-hand knowledge did enter a TOMIS report, (00675408) Use of Force chemical agents. This report does not reflect a true and accurate account of the incident as witnessed by the acting CD.	Warden's response dated: 10/23/06 An investigation was conducted by AW and Chief into this incident and the resulting use of force. Facility agrees that the Lt. who was just recently promoted into the position failed to follow applicable policy and that the TOMIS report contained information that was not completely accurate. The Lt. was counseled and will receive disciplinary action.		

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10/26/06	Yes	Special management Inmates	2b	Inmate was segregated 10/16/06 pending an investigation for protective custody. The protective services routing form (CR-3241) was not provided to the Commissioners Designee for approval within the 72-hour policy guideline.	Warden's response date: 11/6/06 Corrective actions have been initiated to ensure that the CR-3241 form is completed and given to the Commissioner's Designee as soon as it is reviewed by the Chief of Security.		

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11/6/06	No	Use of Force	4g (2,3)	<p>Staff used OC from a (MK IV) canister on an inmate inside an unlocked cell without prior notification to medical staff or review of medical file. When reporting incident to the CD, shift supervisor failed to mention any details of inmate aggressive behavior. There is no documentation in inmates medical file to support that medical staff was advised during the pre-segregation evaluation that the inmate had chewed/swallowed an alleged substance, possibly drugs.</p>	<p>Warden's response, dated 11/28/06, makes the following points: 1. The CD's report that the Shift Supervisor had not told her about the inmate's alleged aggressive behavior was based only on her feelings. 2. The issue raised by the CM that the gas was used in a cell is irrelevant. 3. The use of force was spontaneous and did not require prior approval. 4. Policy does not require that medical be made aware that the inmate who was gassed was trying to swallow something (reportedly drugs) at the time. 5. TDOC staff fails to communicate with facility staff.</p>		<p><u>12/11/06 DCCO CM note: A review of the incident report and applicable policies provides the following responses to the points raised by the Warden: 1. The CD's report that the incident report did not correspond with what the Shift Supervisor told her is not based on her feelings, it is based on what she was told by the Shift Supervisor. 2. WCFA policy 9-112 A.5.E.5. states: "In all uses of gas in cells there shall be a review of medical files prior to using gas". The use of gas to make an inmate spit something out is questionable, and the cell door could simply have been closed if the inmate was aggressive. 3. Documentation indicates that prior to using gas, the Shift Supervisor called for a video camera, which was then dispatched to the area. This was not, therefore, a spontaneous use of force, but a planned use of force which requires prior TDOC approval. 4. As the Warden's response also states, it would have been appropriate for medical staff to have been made aware that the inmate had swallowed something. It is TDOC's position that it would also have been appropriate for this to be documented in the inmate's medical file, and for a drug screen to have been performed (since the inmate was thought to have swallowed drugs). Neither of these actions is documented. 5. TDOC staff regularly communicate with facility staff, both verbally and in writing, in an effort to facilitate the improvement of facility operation and to hold the facility responsible for operating the facility as required by the contract and approved policies.</u></p>

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10/26/06	No	Records and Reports	10	<p>On 10/30/06 staff used force (chemical agents) incident #00676614. The 5-1a incident report packet wasn't submitted to the CD by conclusion of the shift. This report was under the TDOC Liaisons door 11/2/06. Furthermore the 5-1a and TOMIS report does not reflect a true and accurate account of the incident told to the CM by the shift supervisor.</p>	<p>Warden's response, dated 11/28/06, makes the following points: 1. The report cited by the CM is required to be completed within 21 days. 2. The CM should have advised the Warden that the report was expected by the end of the shift. 3. The NCR is not specific enough to respond to. 4. The Liaisons do not work to improve facility operation and cooperation. 5. The Liaisons keep trying to find things that are wrong, resulting in inaccurate reports based on assumptions rather than facts. 6. The TDOC is not complying with many requirements of the contract, including weekly meetings between the Warden and Liaisons. 7. The Liaisons continue to seek minute details to report on without discussing them with the Warden in advance.</p>		<p><u>12/11/06 DCCO CM note: A review of the incident report and applicable policies provides the following responses to the points raised by the Warden: 1. Policy requires the Use of Force report to be submitted to the CD no later than the conclusion of shift. 2. The late submission of these reports was reported on an NCR 10/19/06. This should have served the purpose of informing the Warden that the CM expected policy requirements to be complied with. 3. This incident and the shortcomings of the facility's Use of Force report are dealt with in depth in the NCR for Use of Force item 4g above, which was submitted to the Warden simultaneously with this NCR. The Warden admits in his response that the Use of Force report in question was not accurate. 4. TDOC staff constantly communicate with facility staff, both verbally and in writing, in an effort to facilitate the improvement of facility operation and to hold the contractor responsible for operating the facility as required by the contract and approved policies. 5. There are many instances in which the Liaisons have discussed concerns with facility management prior to/in lieu of issuing NCRs, as well as cases in which the CM has withdrawn NCRs or NCRs have been withdrawn by TDOC management. Open communication does not preclude the use of the monitoring process required by the contract and policy. 6. WCFA management has been asked if weekly meetings would be useful, and have indicated that due to the close proximity of the Liaisons and Warden and their immediate access to each other, such meetings would not be helpful or necessary. 7. The issues discussed in the NCRs issued by the CM are not "minute". They are required by Policies and the contract, and are listed on the monitoring instruments with which the State safeguards its interests.</u></p>

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11/15/06	No	Disciplinary Procedures	4a (6)	10 inmates were segregated 10/31/06 after being on a segregation waiting list. The segregation packs with movement confinement forms were not immediately made available for commissioner's designee review until 11/13/06.	Warden's response dated: 11/20/06 On October 31, 2006, Disciplinary Chairperson SCO Ponds sought and received approval for the above Segregation placements and four additional inmates who are not on the above list, by notifying TDOC Bettie Hammond via telephone and discussing the placements. Additionally, per the Chief of Security's Secretary, on November 1, 2006, the segregation packs with movement confinement forms were placed in the TDOC Office. However, the employee who retrieved the files from the TDOC Office failed to check all of the files to ensure they were signed and therefore ten out of the fourteen files were not signed. The Assistant Warden and Chief of Security have counseled the Segregation		

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10/3/06	Yes	Classification Procedures	1d(2)	Inmate was classified minimum trusty. Notification of Committing Jurisdiction (CR 1850) not present in inmate's institutional file.	Warden's response dated: 10/6/06 These letters were re-sent and copies placed in the inmate's file. The Records Staff and Classifications Coordinator will ensure future copies are placed in the file immediately and not placed in the "to be filed" stack.	Verified 12/15/06: By review inmate's institutional files.	
10/6/06	Yes	Clothing, Sanitation and Hygiene	5a	Facility did not provide to TRICOR's Director of marketing an updated semi-annual summary of clothing need projections for July through December 06. Pervious projection dated Dec. 16, 2005 (for Jan. 2006).	Warden's response date 10/6/06: Facility concurs that by oversight this report was not submitted at the correct time. It has now been completed and submitted.	Verified 10/6/06: Facility submitted Clothing projections memo.	
10/13/06	Yes	Drug testing and Substance abuse treatment	1 through 7	While monitoring drug testing procedures this period, staff could not provide documentation to support testing for July and August 2006. Even though some documentation was present for Septembers testing, the 10% of population required weren't completed.	Warden's response dated: 10/16/06 Just prior to the audit of this area, the drug testing officer went on FMLA leave and has not returned to work. Facility staff was unable to find the required documentation. Another employee has been assigned the responsibility for drug testing.	<b>CM note:</b> Monitored Jan 07 to ensure staff had time to correct.	
10/16/06	Yes	Records and Reports	10	Staff could not provide requested records/documentation required for conducting a complete quarterly audit of inmate drug testing procedures.	Warden's response dated: 10/18/06: As noted on the previous finding, the UA officer went on sudden FMLA leave just prior to the audit of this area and the supervisor's position had been vacant with the person hired for the position still in training. Changes in this area of assignment have been made and steps to correct the deficiencies and preclude their reoccurrence are being taken.	<b>CM note:</b> Non-compliance issued 10/19/06 and 11/6/06 for same or similir item, item outstanding.	
10/18/06	Yes	Use of Force	4g(1,2, 3)	A planned non-emergency use of force with chemical agents occurred to extract inmate from his cell. The warden/designee was not notified for prior approval of a large canister of OC chemical agents (MK-IX) to be used during this extraction. Medical staff had been notified nor was the inmates medical file reviewed prior". Staff with first-hand knowledge did enter a TOMIS report, (00675408) Use of Force chemical agents. This report does not reflect a true and accurate account of the incident as witnessed by the acting CD.	Warden's response dated: 10/23/06 An investigation was conducted by AW and Chief into this incident and the resulting use of force. Facility agrees that the Lt. who was just recently promoted into the position failed to follow applicable policy and that the TOMIS report contained information that was not completely accurate. The Lt. was counseled and will receive disciplinary action.		

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10/19/06	Yes	Records and Reports	2b, 10	Staff with first-hand knowledge did enter a TOMIS report, (00675408) Use of Force chemical agents. This report does not reflect a true and accurate account of the incident as witnessed by the acting CD.	Warden's response dated: 10/23/06 First issue is a repeat of the other NC finding of same date and incident and as answered on that response, corrective action is being taken. As to the failure to provide incident reports, the facility acknowledges that due to several recent changes in staffing including the Chief of Security, Asst. Chief of Security and the Chief of Security's secretary, there was some confusion regarding the provision of the CCA incident report to the monitor and communications have been made to appropriate staff to provide the 5-1A to the monitor in the future.	<b>CM note:</b> Non-compliance issued 10/19/06 and 11/6/06 for same or similar item, item outstanding.	
10/26/06	Yes	Special management Inmates	2b	Inmate was segregated 10/16/06 pending an investigation for protective custody. The protective services routing form (CR-3241) was not provided to the Commissioners Designee for approval within the 72-hour policy guideline.	Warden's response date: 11/6/06 Corrective actions have been initiated to ensure that the CR-3241 form is completed and given to the Commissioner's Designee as soon as it is reviewed by the Chief of Security.		
11/6/06	No	Use of Force	4g (2,3)	Staff used OC from a (MK IV) canister on an inmate inside an unlocked cell without prior notification to medical staff or review of medical file. When reporting incident to the CD, shift supervisor failed to mention any details of inmate aggressive behavior. There is no documentation in inmates medical file to support that medical staff was advised during the pre-segregation evaluation that the inmate had chewed/swallowed an alleged substance, possibly drugs.	Warden's response, dated 11/28/06, makes the following points: 1. The CD's report that the Shift Supervisor had not told her about the inmate's alleged aggressive behavior was based only on her feelings. 2. The issue raised by the CM that the gas was used in a cell is irrelevant. 3. The use of force was spontaneous and did not require prior approval. 4. Policy does not require that medical be made aware that the inmate who was gassed was trying to swallow something (reportedly drugs) at the time. 5. TDOC staff fails to communicate with facility staff.		<b>12/11/06 DCCO CM note (summarized):</b> The CD's report is based on what she was told by the Shift Supervisor. 2. WCFA policy requires medical review prior to gas use; use of gas to make an inmate spit something out is questionable, and the cell door could simply have been closed if the inmate was aggressive. 3. This was not a spontaneous use of force. 4. it would have been appropriate for medical staff to have been made aware that the inmate had swallowed something and for this to be documented in the inmate's medical file, and for a drug screen to have been performed. 5. TDOC staff regularly communicate with facility staff.

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11/15/06	Yes	Disciplinary Procedures	4a (6)	10 inmates were segregated 10/31/06 after being on a segregation waiting list. The segregation packs with movement confinement forms were not immediately made available for commissioner's designee review until 11/13/06.	Warden's response dated: 11/20/06 On October 31, 2006, Disciplinary Chairperson SCO Ponds sought and received approval for the above Segregation placements and four additional inmates who are not on the above list, by notifying TDOC Bettie Hammond via telephone and discussing the placements. Additionally, per the Chief of Security's Secretary, on November 1, 2006, the segregation packs with movement confinement forms were placed in the TDOC Office. However, the employee who retrieved the files from the TDOC Office failed to check all of the files to ensure they were signed and therefore ten out of the fourteen files were not signed. The Assistant Warden and Chief of Security have counseled the Segregation		