

Virginia Department of Corrections CQI Public Meeting Oct. 2, 2025, at 1:30 P.M.

In Person Meeting
Location: 6900 Atmore Drive
Richmond, VA 23225

Agenda/Minutes:

- I. Call to order
- II. Roll Call of Committee Members
 - a) Committee members present: P. Targonski; A. Brennan; R. Tyler; A. Wyatt; J. Fink; M. Cary; T. Fuller.
 - b) Committee members absent: S. Herrick; J. Walters; R. Provau.
- III. New Business
 - a. VADOC Health Services Unit- ACA Healthcare Outcome Measure Review 1st and 2nd Quarter 2025-Distarti Whitehead.
 - b. Reviewed publicly available ACA information data from other state prison settings.
 - i. Presentation available at: Reports and Publications Virginia Department of Corrections
 - c. A. Brenan made a motion to enter the presentation into the record and post on DOC website. A. Wyatt second. With no further discussion, the Committee voted 7-0 in favor.
- IV. Public Comment
 - a. No members of the public were present.
- V. Actions for next quarter
 - a. P. Targonski recommended continuing to use the ACA Standards as health outcome measures.
 - b. Further explore genesis of California model. How is it being used in context of their practice or if strictly settlement driven.
 - c. A. Wyatt made a subsequent motion, which was seconded by T. Fuller. With no further discussion, the Committee voted 7-0 in favor.

With no comments and there being no further business, the Committee adjourned at 1:59 P.M.





Distarti Whitehead RN, MSN/Ed

HSU Quality Improvement Specialist

Health Care Outcomes

The below facilities passed the ACA audit during the 2nd quarter. There were no ACA audits during the 1st quarter of 2025

- Virginia Correctional Center for Women- April 2025
- State Farm Correctional Center for Women- April 2025
- River North Correctional Center April 2025
- Wise Correctional Unit- May 2025
- Central Virginia Correctional Unit 13- June 2025

Standard 1A

- Number of inmates diagnosed with MRSA
- Number of inmates diagnosed with active tuberculosis
- Number of inmates who are new converters on a TB test that indicates newly acquired TB infection
- Number of inmates who completed treatment for latent tuberculosis infection
- Number of inmates diagnosed with Hepatitis C viral infection (at any given time)
- Number of inmates diagnosed with HIV infection (at any given time)

Standard 1A

- Number of inmates with HIV infection who are being treated with HAART (at any given time)
- Number of selected inmates with HIV infection who have been on antiretroviral therapy for at least six months with a viral load of less than 50 cps/ml (at any given time)
- Number of inmates with an active individualized services/treatment plan for a diagnosed mental disorder(excluding sole diagnosis of substance abuse) (at any given time)

Standard 1A

- Number of inmate admissions to off-site hospitals
- Number of inmates transported off-site for treatment of emergency health conditions
- Number of inmate specialty consults completed
- Number of selected hypertensive inmates with a B/P reading >140mm hg/>90 mm hg (at any given time)
- Number of selected diabetic inmates who are under treatment for at least six months with a hemoglobin A1C level measuring greater than 9 percent (at any given time)
- The number of completed dental treatment plans

Standard 2A

- Number of health care staff with lapsed licensure or certification
- Number of new health care staff that completed orientation training prior to undertaking their job
- Number of occupational exposures to blood or other potentially infectious material
- Number of direct care staff with a conversion of a TB test that indicates newly acquired TB infection

Standard 3A

- Number of inmate grievances related to health care services found in favor of the offender
- Number of inmate grievances related to safety or sanitation
- Number of adjudicated inmate lawsuits related to the delivery of health care found in favor of the inmate

Standard 4A

- Number of problem identified by quality assurance program that were corrected
- Number of high-risk events or adverse outcomes identified by the quality assurance program
- Number of inmate suicide attempts
- Number of suicides
- Number of unexpected natural deaths
- Number of serious medication errors

Review of State Correctional Agency Websites

- Forty-nine state correctional agency websites were reviewed for facility specific American Correctional Association (ACA) audit findings and inmate population health measures. (Virginia Department of Corrections was excluded.)
- The review was performed using keyword searches (e.g., ACA accreditation/audit, health dashboard/measures) and by examining statistics/research and strategic planning links for relevant content.
- Although reference to ACA accreditation was found on over half of state websites, Arkansas was the only state identified as posting facility specific ACA audit findings. Of the 10 states posting reference to inmate health measures, California was the only state identified with an inmate population level health dashboard.

Arkansas: ACA Accreditation/Audit Example

ACA Accreditation

The Arkansas Department of Corrections is accredited by the American Correctional Association (ACA). Each of the various correctional facilities and administrative areas within the division undergo audits every three (3) years by ACA. Click the buttons below to view the most recent ACA reports for each division.

Division of Correction

Division of Community Correction

ACA is the oldest, and largest, association developed specifically for practitioners in the correctional profession. Since 1954, ACA has published operational standards designed to enhance correctional practices for the benefit of inmates, staff, administrators, and the public. ACA now publishes performance based standard manuals for all areas of the correctional profession.

ACA Performance-Based Standards are the measure used by the U.S. Department of Justice (DOJ) to meet, and exceed, the requirements for a constitutional minimal standard of care under the Civil Rights of Institutionalized Person's Act, 42 U.S.C. § 1997 et seq.

Arkansas Division Of Correction ACA Accreditation Reports

ADC Central Office l Arkansas Correctional Industries l Benton Unit l Cummins Unit l Delta Regional Unit l East Arkansas Regional Unit l Grimes Unit l Larry B. Norris Unit (formerly Maximum Security Unit) l McPherson Unit l Mississippi County Work Release Center l North Central Unit l Northwest Arkansas Work Release Center l Omega Supervision Sanction Center | Ouachita River Correctional Unit l Pine Bluff Complex l Texarkana Regional Correctional Center l Tucker Unit l Varner/Varner Supermax Unit l Willis H. Sargent Training Academy l Wrightsville Complex

ADC Central Office/Administration Annex East

2020 Report:

Mandatory Standards Score: 100% Non-Mandatory Standards Score: 99.26%

Arkansas Correctional Industries (ACI)

2022 Report:

Mandatory Standards Score: 100% Non-Mandatory Standards Score: 100%

Benton Unit

2022 Report:

Mandatory Standards Score: 100% Non-Mandatory Standards Score: 100%

https://doc.arkansas.gov/aca-accreditation/

California: Inmate Population Health Dashboard Example

STATEWIDE COMPARISON: July 2025

| Measures | SW | ASP | CAL | CCI | CCWF | CEN | CHCF | CIM | CIW | СМС | CMF | COR | CRC | CTF | FSP |
|---|-------|------|------|-----|------|-----|-------|-----|------|-----|------|------|-----|-----|------|
| Specialty backlog per 1,000 | 2.1.7 | 47.0 | 2.0 | 211 | 23.0 | 3.3 | 7-1.7 | 5,2 | 73.1 | EE | 33.1 | 31.3 | 2.1 | 7.0 | 10.0 |
| Population Health Management | | | | | | | | | | | | | | | |
| Adult Immunizations | | | | | | | | | | | | | | | |
| Adult Immunizations (All) | 74% | 68% | 78% | 70% | 68% | 79% | 80% | 84% | 83% | 73% | 77% | 74% | 76% | 75% | 75% |
| Tdap/Td | 83% | 75% | 85% | 81% | 77% | 86% | 88% | 90% | 88% | 84% | 84% | 88% | 81% | 86% | 84% |
| Hepatitis B | 66% | 63% | 71% | 56% | 63% | 69% | 72% | 80% | 83% | 62% | 75% | 66% | 70% | 73% | 73% |
| Pneumococcal | 64% | 57% | 64% | 57% | 56% | 62% | 74% | 78% | 70% | 60% | 70% | 58% | 72% | 61% | 62% |
| Zoster | 72% | 64% | 62% | 58% | 64% | 76% | 82% | 83% | 87% | 72% | 77% | 71% | 75% | 73% | 69% |
| Asthma Care | | | | | | | | | | | | | | | |
| Asthma Care (All) | 89% | 94% | 92% | 93% | 94% | 94% | 89% | 94% | 91% | 88% | 88% | 88% | 94% | 89% | 89% |
| Asthma SABA Utilization | 93% | 97% | 93% | 94% | 93% | 95% | 94% | 96% | 94% | 92% | 90% | 89% | 94% | 93% | 93% |
| Persistent Asthma ICS Treatment | 82% | 88% | 87% | 86% | 96% | 91% | 77% | 91% | 82% | 73% | 82% | 86% | 93% | 80% | 81% |
| Cardiovascular Disease Care | | | | | | | | | | | | | | | |
| Cardiovascular Disease Care (All) | 90% | 91% | 89% | 79% | 93% | 91% | 92% | 96% | 88% | 86% | 90% | 86% | 96% | 90% | 89% |
| Controlling High Blood Pressure (<140/90) | 91% | 92% | 90% | 80% | 95% | 91% | 93% | 97% | 94% | 90% | 92% | 88% | 96% | 91% | 90% |
| Statin Therapy | 82% | 79% | 57% | 76% | 79% | 82% | 88% | 88% | 66% | 62% | 82% | 75% | 96% | 76% | 76% |
| Diabetes Care | | | | | | | | | | | | | | | |
| Diabetes Care (All) | 87% | 89% | 84% | 71% | 91% | 81% | 88% | 90% | 90% | 88% | 86% | 88% | 92% | 87% | 90% |
| A1C <8% | 81% | 90% | 78% | 70% | 91% | 71% | 84% | 84% | 85% | 78% | 81% | 80% | 86% | 78% | 83% |
| Average Blood Pressure <140/90 mm Hg | 95% | 99% | 100% | 89% | 99% | 97% | 93% | 98% | 97% | 97% | 93% | 91% | 98% | 95% | 95% |
| Kidney Health Evaluation | 82% | 82% | 78% | 47% | 89% | 73% | 84% | 87% | 87% | 92% | 81% | 88% | 89% | 84% | 92% |
| Statin | 90% | 97% | 91% | 20% | 9.4% | 92% | 92% | 92% | 91% | 92% | 90% | 92% | 92% | 29% | 90% |

Source: https://cchcs.ca.gov/dashboard/