

Department of Public Safety & Corrections State of Conisiana

JOHN BEL EDWARDS
GOVERNOR



JAMES M. LE BLANC SECRETARY

June 22, 2021

MEMORANDUM

TO:

The Honorable Willy J. Martin, Jr.

eriff of St. James Parish

FROM:

James M. Le Blanc

Secretary

RE:

St. James Parish Detention Center

Please see the attached monitoring report regarding the Basic Jail Guidelines (BJG) recertification inspection that was conducted on April 29, 2021. We will continue with annual monitoring and encourage the St. James Parish Detention Center to provide educational and substance abuse treatment opportunities to the offender population.

Thank you for your support of the BJG process.

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association Anthony Joseph, Warden, St. James Parish Detention Center Seth Smith, Chief of Operations Stephanie Michel, Acting Warden Aaron Hooper, BJG Team Leader

Department of Public Safety & Corrections State of Conisiana

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JAMES M. LE BLANC SECRETARY

June 22, 2021

MEMORANDUM

TO:

James M. Le Blanc

Secretary

FROM:

Markisha L. Stewart M. Stewart

Basic Jail Guidelines Administrator

RE:

St. James Parish Detention Center

The recertification inspection was conducted on April 29, 2021 and the following guidelines were found to be non-compliant:

BJG III-A-001 Rules and Discipline
BJG V-A-003 Programs and Services
BJG V-A-003-1 Educational Programs
BJG V-C-001 Substance Abuse Programs

At this time, we will continue with annual monitoring and recommend the facility provide educational and substance abuse treatment opportunities to the offender population.

Thank you.

Attachment



BJG RECERTIFICATION REPORT

03/24/2021

FACILITY NAME:

St. James Parish Jail

BJG MONITORS:

Aaron Hooper, BJG Team Leader

FACILITY STAFF:

Antony Joseph, Warden

Latanya Sterling, Asst Warden

BJG INSPECTION DATE:

April 29, 2021

PREVIOUS BJG INSPECTION DATE:

January 15, 2019

OPERATIONAL CAPACITY:

124

COUNT ON DAY OF VISIT:

62

Please see attached Excel Spreadsheet for each area reviewed for BJG compliance.

CONCERNS OR ISSUES FROM THE PREVIOUS BJG MONITORING INSPECTION:

Facility does not offer any educational or substance abuse programs.

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	13	0	13
Number of Local Offenders	44	5	49
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	57	5	62

Number of DOC Offenders that are:

Single Bunked	9
Double Bunked	4
Triple Bunked	0
Total	13

Number of DOC Offenders that are in restricted housing:

Single Bunked	0
Double Bunked	0
Triple Bunked	0
Total	0

Assaults (Please list monthly since the previous BJG monitoring visit.)

Month/Year	Off/Off	Off/Off w/sig inj	Offender/Staff	Off/Staff w/sig inj
January 2019	4	1	0	0
February 2019	0	0	0	0
March 2019	1	0	1	0
April 2019	0	0	0	Ö
May 2019	2	0	0	0
June 2019	1	0	1	0
July 2019	0	1	1	0
August 2019	2	0	0	0
September 2019	2	0	0	0
October 2019	2	0	1	0
November 2019	0	0	0	0
December 2019	1	0	1	0
January 2020	0	0	0	0
February 2020	1	0	0	0
March 2020	1	0	0	0
April 2020	0	0	0	0
May 2020	0	0	0	0
June 2020	0	0	0	0
July 2020	1	0	0	0
August 2020	0	0	0	0
September 2020	0	0	0	0
October 2020	0	0	0	0
November 2020	0	0	0	0
December 2020	0	0	0	0
January 2021	0	0	0	0
February 2021	0	0	0	0
March 2021	0 .	0	0	0

Seizure Findings (Please list monthly since the previous BJG monitoring visit.)

Month/Year	Illicit	Alcohol	Weapon	Cell Phone	Other
	Substance				
January 2019	1	0	0	0	4
February 2019	0	0	0	0	0
March 2019	3	0	4	0	35
April 2019	3	0	6	0	59
May 2019	0	0	0	0	0
June 2019	4	0	3	0	51
July 2019	1	0	2	0	5
August 2019	0	0	1	0	4
September 2019	0	0	2	0	10
October 2019	0	0	1	1	72
November 2019	0	0	0	0	_0
December 2019	0	0	0	0	12
January 2020	0	0	1	0	132
February 2020	1	0	5	0	202
March 2020	2	0	0	0	44
April 2020	0	0	1	0	38
May 2020	0	0	0	0	72
June 2020	0	0	2	0	56
July 2020	0	0	0	0	14
August 2020	0	0	0	0	39
September 2020	0	0	0	0	8

October 2020	0	0	4	0	22
November 2020	0	0	0	0	30
December 2020	0	0	0	0	0
January 2021	_ 0	0	0	0	23
February 2021	0	0	0	0	0
March 2021	0	0	0	0	16

GENERAL APPEARANCE/CLEANLINESS/COMMENTS OF THE FACILITY:

Living Area:

Overall the living areas were found tom be clean and organized

- Dorms dorm areas were in order and spaced out. Offenders' property was stored in lockers next to the beds
- Cell Block cell block areas clean and odor free

Culinary/Dining:

The tools and sharp objects were controlled on an inventoried locked shadow board. Cabling is used when knives are checked out. Cooler and freezer were found in good order with temperature log checks documented. Sample trays were labeled and kept from the last 72 hours. Dry storage had items labeled and stored off the ground

Bathrooms:

Bathrooms are clean and in order, contained soap and towels

Yard Areas:

Documentation provided showed that recreation was occurring on a regular basis - three times per week, weather permitting.

Maintenance:

Maintenance is done by the parish maintenance workers. A work order is called in to the office when maintenance at the facility is needed

COUNTS:

- How many formal counts are conducted each shift? There are three formal counts. One at morning shift change, one at noon and one evening shift change.
- How many counts are conducted each day? Four

Stick outs are counts that are conducted in areas other than housing units, such as food services and other areas of normally authorized locations. When conducting and submitting the counts, employees are to actually see the offender before turning in theses counts.

- How does the facility accomplish this? Stick out counts are called in to the main control on the
 offenders that or working on outside work crews. Work crews in the area bring offender in
 for noon count
- Does this process insure accountability and safe/secure operation of the facility? Yes

CLASSIFICATION SYSTEM:

Does the facility have any trustees that work outside the secure perimeter? Yes

If yes,

- What is their classification process to determine who is eligible for trustee status?
 Review of arrest history, review of prior job and custody charges. The classification process is suggested by administration and signed off by Warden Scott or his designee
- Does their classification process meet DPS&C, Corrections Services' criteria? Yes

OFFENDER DRUG TESTING: (Please list monthly since the previous BJG monitoring visit.)

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
January 2019	3	19	16%	0
February 2019	3	15	20%	0
March 2019	3	13	23%	0
April 2019	3	16	19%	0
May 2019	3	15	20%	0
June 2019	3	22	14%	0
July 2019	3	21	14%	0
August 2019	3	21	14%	0
September 2019	3	16	19%	0
October 2019	3	20	15%	0
November 2019	3	23	13%	0
December 2019	3	19	16%	0
January 2020	3	24	13%	0
February 2020	3	22	14%	0
March 2020	3	19	16%	0
April 2020	3	19	16%	0
May 2020	3	17	18%	0
June 2020	3	15	20%	0
July 2020	3	9	33%	0
August 2020	3	9	33%	0
September 2020	3	7	43%	0
October 2020	3	7	43%	0
November 2020	3	8	38%	0
December 2020	3	9	33%	0
January 2021	3	11	27%	0
February 2021	3	13	23%	0
March 2021	3	9	33%	0

Rules and Discipline

Does the facility's offender orientation include the application process for applying for restoration of good time? No

If yes.

- What is their restoration of good time application process for the offender population? N/A
- Does their restoration of good time application process meet DPS&C, Corrections Services' criterion? N/A

BJG AUTOMATED MONTHLY REPORTING REVIEW:

Has the facility been inputting the correct info timely? Yes

Does the reported info suggest any issues of concern or improvement? No

OFFENDER PROGRAMS:

GED Program

Number of GED Slots	0
Number of Participants	0
YTD Number of Completions	0

LIST ALL CERTIFIED TREATMENT PROGRAMS: (Attach Form B-04-003-B)

None

LIST ALL OTHER OFFENDER PROGRAMS:

Religious Services

GRIEVANCE PROCESS:

- Does grievance process include two levels of review? No, only sometimes two
- Who are the designees at each level? Asst. Warden and sometimes the Warden
- What is the specified time period for response at each level? 20 days

PREA COMPLIANCE:

- Is this facility required to be PREA compliant due to contract language? No
- Is this facility PREA compliant? N/A

If yes, date compliance received:

If this facility is required to be PREA compliant due to contract language, and has not done so, what is their plan of action for compliance? N/A

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Staff overall morale was good and seem to be working together towards common goals. All employees conducted themselves professionally and respectfully

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

No complaints were made by any offender during the walk through. I talked to the offenders working in the kitchen and in the trustee dorm. None of the offenders had any complaints about working in the kitchen or being at the facility.

RECOMMENDATION:

This facility does not offer any educational or substance abuse programs to the offender population. Warden is having a difficult time finding volunteers to come give classes to the small amount of offenders. At this time, annual monitoring visits are recommended.



		12/22/2020
Facility: ST. James Parish Jail	Date Conducted: 04/29/2021	41/21/2030
Monitors: Aaron Hooper, BJG Team Leader,	The state of the s	
	BASIC JAIL GUIDELINES (BJG)	
PART I - SAFETY		
A. PROTECTION FROM INJURY AND ILLNESS		
References: ACA CJS 1-1A-01, 1-1A-02, 1-1A-03, 1-1A-04, 1-1A-05, 1-1C-05, 1-		
IA-03, 1-4A-04	Findings	Response
I-A-001 Safety/Sanitation/Inspections	Compliant- The facility is conducting weekly	
The facility complies with all applicable laws and regulations of the State Santation	inspections. FM and DHH inspections are done on	
Officer and the State Fire Marshal.	time. All deficient items on FM and DHH reports were	
The following inspections are implemented:	corrected by this inspection.	
•Weekly sanitation inspections of all facility areas by a qualified departmental staff	confected by this hispection.	
nember.		
Weekly inspections of all food service areas, including dining and food preparation		
reas and equipment.		
 Water temperature in housing areas is checked and recorded daily. Comprehensive and thorough monthly inspections by a safety/sanitation specialist 	-	
or compliance with sanitation, safety and fire prevention standards.		
•At least annual inspections by the State Sanitation Officer and the State Fire		
Marshal.		
/isual Inspection: completed inspection checklists and reports, documentation of		
corrective action, inspection reports		
-A-002 Disposal of Materials	Compliant	
Disposal of liquid, solid, and hazardous material complies with applicable		
lovernment regulations. (Isual Inspection: trash disposal contract, completed inspection reports, include		
focumentation that deficiencies were corrected		
I-A-003 Vermin and Pests	Compliant -The facility has pest control contracts in	
/ermin and pests are controlled. There is a written and implemented plan for the	place	
control of vermin and pests.		
/isual Inspection: pest control contracts, trash disposal contracts, inspection reports		
I-A-004 Housekeeping	Compliant - housekeeping plans will be implemented	:
	daily to ensure that all areas of the jail are kept clean,	
provides for the ongoing cleanliness and sanitation of the facility.	sanitary and healthy.	
risual Inspection: inspection reports, completed forms, documentation of correction of	minically three incarcity.	
dentified deficiencies		
I-A-005 Water Supply	Compliant	
The facility's potable water source and supply is certified at least annually by an		
independent, outside source to be in compliance with the State Sanitary Code. The		j
acility complies with the requirements of the state health officer. There is a specific		1
san for addressing deficiencies, if any, that is approved by the state health officer.		
risual Inspection: documentation of approval by DHH or local authority, plan for		
uddressing deficiencies		
	i	
8. VEHICLE SAFETY References: Dept. Reg. C-03-003/OP-A-3	Findings	Response
I-B-001. Offender Transport	Compliant	Response
Scorted and unescorted absences of state offenders are governed by R.S. 15:811	Companie	
and 833 and DPS&C Department Regulation No. C-03-003 "Escorted Absences."		1
Visual Inspection: documentation of staff training, documentation of medical, funeral,	:	
(c. (outside trius)		
C. EMERGENCY PREPAREDNESS/RESPONSE		
References: ACA CJS 1-1C-01, 1-1C-02, 1-1C-03, 1-1C-04, 1-1C-06, 1-1C-07, 1-		
7E-01, Dept. Regs. A-04-002/PS-D-3, C-02-001/OP-A-5, C-02-010/OP-B-3, C-	Findings	Response
35-001/AM-1-4		
I-C-001 Emergency Plan	Compliant -An emergency plan is in place. Employees	
There is a written plan, submitted to the Secretary of DPS&C, that specify the	are trained and knowledgeable of the plans.	
procedures to be followed in situations that threaten facility security. Such	Emergency plan exit maps are posted around the	
situations include but are not limited to nots, hunger strikes, disturbances, taking of	facility.	
hostages, and natural or man made disasters. These plans are made available to all applicable personnel and are reviewed annually and updated as needed. All		1
facility personnel are trained annually in the implementation of the emergency plan.		
An evacuation plan is used in the event of fire or major emergency. The plan is	"	
approved by the state fire marshal, reviewed annually, and updated, if necessary.		
There are written procedures for significant unusual occurrences or facility		
emergencies including but not limited to natural or man-made disasters; major		
disturbances such as nots, hostage situations, escapes, fires, deaths, serious illness		į į
or injury and assaults or other acts of violence. Such procedures include the reporting of these incidents to the DPS&C, OAS, telephone 800-803-8748 during		:
normal business hours or the control center at EHCC, telephone 800-842-4399 after		
hours, when they involve DPS&C offenders. In addition, the facility shall follow the		
incident reporting procedures as outlined in Dept. Reg. C-05-001/AM-I-4, "Activity		ļ.
Reports, UORs," Category A, B and C.		
	·	
The state of the s		
visual Inspection: training records, facility logs, documentation of approval of plan,		
documentation of annual review, documentation of staff receipt, training on the plan		

Facility - Date

BJG Compilence



	Findings	Response
1-C-002 Immediate Release of Offenders There is a means for the immediate release of immates from locked areas in case of emergency and there are provisions for a backup system. The facility has exits shat are properly positioned, are clear from obstruction, and are distinctly and permaneently marked to ensure the timely evacuation of offenders and staff in the event of fire or other emergency. Visual Insection: facility records/form	Compliant -An emergency plan is in place, drills are being conducted and logged to reflect that training is taking place. Evacuation plans are posted throughout the detention center in the event of fire or a major emergency.	
The Inspection - Insular Vession to a The facility complies with the requirements of the state fire marshal. There is a specific plan for addressing deficiencies, if any, that is approved by the State Fire Marshal. The State Fire Marshal approves any variances, exceptions, or embalancies. Visual Inspection: documentation of fire alarm and detection system maintenance and testing. Plans for addressing deficiencies.	Compliant- All exits are clearly marked and free from obstruction. Evacuation routes are clearly posted and easily understood throughout the facility. Policy is in place for the immediate release of offenders from all areas.	
I-C-004 Facility Furnishings Facility furnishings reget fire-safety-performance requirements. Visual Inspection: Specifications for all familishings.	Compliant	
1-C-005 Flammable, Caustic and Toxic Materials Written policy, procedure and practice govern the control and use of all flammable, toxic and caustic materials. Visual Traipection: Staff training records, offender training records, internal inspection reports. Decumentation of Incidents that involved FTC materials. Inventories.	Compliant	
I-C-006 Operational Capacity The number of offenders present does not exceed the operational capacity as determined by the state fire marshal and state heath officer. The state fire marshal will determine a capacity primarily based upon exiting capabilities. The state heath officer will determine a capacity based upon the ratio of plumbing fixtures to offenders and square feotage. The operational capacity will be the lawer of these two floures.		

PART II - SECURITY		
A. PROTECTION FROM HARM		
References: ACA CIS 1-2A-01, 1-2A-04, 1-2A-05, 1-2A-06, 1-2A-08, 1-2A-11, 1- 2A-13, 1-2A-14, 1-2A-16, 1-2A-17, 1-2A-19, 1-2A-20, Dept. Regs. A-02-008/AM- [-47, B-02-001/IS-B-1, C-02-007/OP-C-3	Findings	Response
II-A-00. Centrol There is 24-hour monitoring and coordinating of the facility's security, life safety, and communications systems. Visual Inspections facility records/logs, maintenance records, records of staff deployment.	Compliant	
II-A-002 Secure Perimeter The facility's perimeter is controlled by appropriate means to ensure that offenders are secured remain within the perimeter and that access by the general public is denied without proper authorization. Visual Inspection: documentation of receipt of job description by staff, documentation of anoual review and updating, photos of perimeter controls.	Compliant	
III.A.003. Sufficient Staff There is a written document describing the facility's organization and staffing plan. Thes should include an organizational chart that groups similar functions, services and activities. Each facility meets minimum security staffing requirements which reflect good correctional practice. Sufficient staff, including a designated supervisor, are provided at all times to perform functions relating to the security, custody, and supervision of offenders and, as needed to operate the facility in conformance with the USC. Visual Inspection: records of staff deployment, facility logs, documentation of annual review of staffing analysis and plan.	Compliant	
II-A-004 Female Offenders and Female Staff When a female offender is housed in a facility, at least one female staff member is on duty at all times. It is a facility loss that it is a facility loss.	Compliant -Female staff work in female offender dorms. When male staff make rounds in the female dorms, they must have a female staff member with	
II-A-005 No Offender Control Over Others No Offender or group of offenders is given control, or allowed to exert authority over other offenders. Visual Inspection: written policy and procedure	Compliant	
IT-A-006 Staff Log Correctional staff maintain a permanent log and prepares shift reports that record routine information, emergency situations and unusual incidents. The facility shall maintain written records or logs which continuously document the following information: 1. Personnel on duty; 2. Offender population; 3. Adhitission and release of offenders; 5. Entry/exit of all visitors including legal/medical; 5. Entry/exit of all visitors including legal/medical; 5. Unisual occurrences or facility emergencies (including but not limbed to major and minor disturbances such as nicts, hostage situations, fires, escapes, deaths, serious illness or injury and assaults or other acts of violence.) Refer to BIG 1-C-001 for senorition requirements to DESAC.	Compliant -Logs are placed in all areas of the facility and contain required information. Facility forms are also completed for notification of incidents to administration.	



	F1-47	
II-A-007 Counts	Findings	Response
The facility has a system for physically counting offenders. At least one formal	Compliant - Three formal counts each shift, four counts daily	
count is conducted for each shift, with no less than 3 counts daily. The system	COUNTS GAILY	
includes strict accountability for offenders assigned to work and other approved		
temporary absences	ļ	
Visual Inspection: completed forms, facility records/logs.		
II-A-008 Offender Population Management System There is an offender population management process that includes records on the	Compliant- All information is documented and	
admission, processing, and release of offenders. Written policy, procedure, and	maintained on each offender and is transferred with	
practice provide for offender case record management that includes at a minimum,	the offender if transferred out of the facility.	
maintenance of the following documents and information. This offender record and		
any reentry transition envelops shall be transferred with the offender at such time		
the offender is transferred to another local or DPS&C facility.		
Master prison form;		
2. Bill of Information and Court Minutes OR Uniform Commitment Order;		!
3. One photograph;		i i
4. Reports of disciplinary actions, grievances, incidents, or crimes committed while in		
custody; 5. Records of program participation, work assignments, classification actions;		
Records or program participation, work assignments, classification actions; Any government issued identification card (i.e., driver's license, social security		
card or birth certificate/birth card or any other valid identification);		
7. Offender health record (see BJG IV-D-004),		
, · · · · · · · · · · · · · · · · · · ·		
In addition to the maintenance of the above information, the following shall be	İ	
collected and forwarded to the DPS&C Pre-Class Coordinator either by fax to 225-		ļ ,
342-3759 or emzii to DOC-HQ_Supplemental@la.gov.		
Master prison form; Fingerprints: one FBI print card from AFIS;		
2. ringerprints: one rot print card from Aris; 3. One photograph;	i	
4. Bill of Information and Court Minutes or Uniform Commitment Order for each		
conviction (for probation violators both the original sentencing minutes and the		
revocation minutes are required);		
5. Jail credit letter;	·	
6. One Inventory Acknowledgment Form (cash and nonnerty receipts)		
Visual Inspection: completed forms, reports, affender record II-A-009 Reception - Legal Commitment and Medical Service	Complaint	
Prior to accepting custody of an offender, staff determine that the offender is legally	Complaint	
committed to the facility, and that the offender is not in need of immediate medical		
attention.		
Visual Enspection: Completed Admission forms, facility logs.		
II-A-010 Admissions	Compliant- Policy and procedure are in place and all	
Admission processes for a newly admitted offender include, but are not limited to:	admission forms are thorough and completed	
•Searching of the offender and personal property:		
Inventorying and providing secure storage of personal property;		
Providing an itemized receipt for personal property; Recording of basic personal data;		
Performing or basic personal data; Performing a criminal history check;		
Photographing and fingerprinting;		
•Separating from the general public;		
 Providing a health screening to assess and identify any health and safety needs; 		
Providing information about access to health services, copay requirements and		
submitting grievances.		
Yisual Inspection: intake and admission forms, screening forms, inventory form,		
receipt form		
III-A-011 Out of State Offenders	Compliant	
The names of any out of state offender (federal or state) to be housed at a local jail or privately managed facility shall be submitted to the Chief of Operations prior to		
the offender(s) entering the State of LA. No such offender shall be housed if the		
offender would be classified as maximum custody under the LA DPS&C classification		
procedures.		
Any offender convicted and sentenced to incarceration by a court in another state		
(federal or state) shall not be released in the State of LA. Any out of state offender	1	
(federal or state) housed in a local jail or privately managed facility shall be		
returned to an appropriate correctional facility located within the state where the		
offender was convicted and sentenced for release in that state, prior to the		
offender's release date. Visual Inspection: offender record, submittal to chief of operations of out-of-state		
offenders to be housed at the facility, release/transfer documentation	<u></u>	



	Findings	Response
II-A-012 Classification System	Compliant	
Written policy, procedure, and practice provide for a written offender classification plan that includes custody required and assignment to appropriate housing.		
Offender management and housing assignment considers age, gender, legal status,		
custody needs, special problems and needs, and behavior. All offenders are classified using an objective classification process that at a minimum:		
Identifies the appropriate level of custody for each offender		
Identifies appropriate housing assignment		
Identifies the offender's interest and eligibility to participate in available programs		
Visual Inspection: offender housing records, offender classification records II-A-013 Prohibition on Youthful Offenders	Compliant	
Offenders subject to juvenile jurisdiction are housed in adult facilities only under the	Company	
conditions established by law. If juveniles are committed to the facility, a plan is in		
place to provide for the following: • Supervision and programming needs of the Juveniles to ensure their safety,		
security, and education;		į
Classification and housing plans; Appropriately trained staff.		
OAS shall be notified of offenders who are under the age of 18 that are sentenced		
to the DPS&C as an adult for transfer to the appropriate institution.		
Visual Inspection: admission and housing, offender records, classification records II-A-014 Separation in Classification	Compliant	
Male and female offenders must be housed in separate rooms/cells with reasonable	Composite	
sight and sound separation. Visual Inspection: offender housing records, offender classification records, diagram of		
facility showing male/female housing areas		
II-A-016 Photo Identification	Compliant	
The facility shall provide each DPS&C offender with photo identification, which the offender shall carry/wear on their person at all times.		
Visual Enspection: Offender Identification card/wristband.		
II-A-017 Drug Free Workplace	Compliant	
Written policy, procedure, and practice provide for a drug-free workplace, which includes at a minimum pre-employment testing, post-accident testing, reasonable		
suspicion/probable cause testing, and quarterly random testing of all employees.		
Visual Inspection: drug testing lab fee bills for drug testing of facility employees		
(including pre-employment, post accident, reasonable suspicion/probable cause,		
random). II-A-018 Offender Drug Testing	Compliant	
Written policy, procedure, and practice provide for alcohol/drug testing, both	Compilation	
randomly and for probable cause. Facility policy will require that a minimum of 5%		
of the DPS&C offender population shall be drug tested on a monthly basis. Visual Inspection: Facility log, documentation of alcohol/drug testing of offenders.		
II-A-019 Offender Transfers	Compliant	
All transfers of DPS&C offenders to other than DPS&C facilities shall be reported to the CAS, at least one day prior to all scheduled transfers and within one business		
day for all non-scheduled transfers. The DOC offender transfer form shall be		
submitted by the transferring facility to OAS at least one day prior to the transfer occurring by fax to 225-342-2439 or by email to LocalDailTranfers@la.gov.		
Offenders should not be transferred to other than DPS&C facilities within 60 days of		
release, unless for disciplinary reasons.		
An offender scheduled for an appearance before the Committee on Parole shall not be transferred prior to the scheduled hearing date. However, if the transfer is		
deemed unavoidable by the Warden due to security concerns, the Warden shall		
obtain prior approval for an exception from the DPS&C Chief of Operations or designee. Staff from the sending facility shall notify the Committee on Parole as		
soon as it is known that the offender must be transferred.		
Visual Inspection: facility togs, documentation of transfers of DPS&C offenders to other		
than DPS&C facilities	<u> </u>	
II-A-020 Frequency of Cell Checks Written policy, procedure, and practice provide secure, safe housing by establishing	Compliant	
the frequency of cell checks in all cellblock areas not to exceed four (4) hours. Staff		
will document these checks in their staff loos.		
Visual Inspection: Facility logs, documentation of frequency of cell checks.	L	
B. USE OF PHYSICAL FORCE	<u> </u>	
References: ACA CJS 1-28-01, 1-28-02, 1-28-03, 1-28-05, 1-28-06, 1-40-12, Dept. Rogs. B-06-001 HC-08/IS-D-HCP33, HC-29/IS-D-HCP40, C-01-008/OP-A-	Findings	Dognanca
19, C-02-006/OP-A-16, C-03-003/OP-A-3	<u> </u>	Response
II-B-001 Use of Force The use of force is restricted to instances of justifiable self-defense, protection of	Compliant-Training is conducted on an annual basis	
others, protection of property, and prevention of escapes, and then only as a last	and reports are clear and concise.	
resort and in accordance with appropriate statutory authority. Written policy,		
procedure, and practice govern the use of force and provide that force shall never- be used as punishment. When an incident involving use of force with a DPS&C		
offender results in the termination and/or arrest of an employee, the facility shall		
immediately report the incident to the DPS&C, Office of Adult Services, telephone		
number 800-803-8748 during normal business hours or the control center at Elayn Hunt Correctional Center, telephone number 800-842-4399 after hours. In addition,		
the facility shall provide a written report of the incident to the DPS&C, Chief of		
Congrations within those business days. Visual Inspections facility records, logs, incident reports, training records		
II-B-002 Use of Restraints	Compliant-Policy and Procedure are in place to	
Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined	indicate when and where restraints are to be utilized.	
circumstances under which supervisory approval is needed prior to application.		
Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority.		
accordance with policies and procedures approved by the health authority, including:	1	
Conditions under which restraints may be applied;		
Types of restraints to be applied; Identification of a qualified medical or behavioral health professional who may		
authorize the use of restraints after reaching the conclusion that less intrusive		
measures are not a viable afternative; - Monitoring procedures;		
Length of time restraints are to be applied;		
Documentation of efforts for less restrictive treatment alternatives; An after invident regime;		
An After incident review. Visual Inspection: facility records, logs	<u> </u>	



	Findings	Response
II-B-002-1 Use of Restraints for Pregnant Offenders	Compliant	
Written policy, procedure, and practice complies with the following requirements:	- Simplication	
Posterior Desire Beauty and Proceedings Water of Holowing requirements.		
Restraints During Pregnancy-Related Transportation	1	
 Restraints shall not be used on a pregnant offender (1) during any pregnancy 		
related medical distress, (2) while she is being transported to a medical facility or		
LCIW unless there are compelling grounds to believe that the offender presents	1	
either of the following:		
 a) An immediate and serious threat of physical harm to herself, staff, or others; 		
b) A substantial flight risk and the offender cannot be reasonable contained by		
other means.		
 If restraints are utilized during transportation, the offender shall not be cuffed 		
behind the back or restrained using waist restraints.		
Visual Inspection: facility records, logs		
II-B-003 Use of Firearms	Compliant	
The use of firearms complies with the following requirements.	Compilatio	
 Weapons are subject to stringent safety regulations and inspections. 		
 A secure weapons locker is located outside the secure perimeter of the facility. 		
 Except in emergency situations, firearms and authorized weapons are permitted 		
only in designated areas to which offenders have no access.		
 Employees supervising offenders outside the facility perimeter follow procedures 		
for the security of weapons.		
 Employees are instructed to use deadly force only after other actions have been 		
tried and found ineffective, unless the employee believes that a person's life is		
immediately threatened.		
 Employees on duty use only firearms or other security equipment that have been 		
approved by the facility administrator.		
· Appropriate equipment is provided to facilitate safe unloading and loading of		
frearms		
Visual Inspection: training records, safety regulation and inspection reports, photos of		
equipment used for unloading and reloading		
II-B-004 Written Reports	Compliant	
	Compliant	
Written reports are submitted to the facility administrator or designee no later than		
the conclusion of the tour of duty when any of the following occur:		
Discharge of a firearm or other weapon		
•Use of less lethal devices to control offenders		
Use of force to control offenders		
 Offender(s) remaining in restraints at the end of the shift 		
 Emergency distribution of security equipment 		
Visual Inspection: completed reports, facility records and logs		
Tribal Inspection: completed reports, lacinty records and logs		
C. CONTRABAND/SEARCHES		
	Findings	Response
References: ACA CJS 1-2C-01, 1-2C-04, Dept. Reg. C-02-003/OP-A-8	Findings	Response
References: ACA CJS 1-2C-01, 1-2C-04, Dept. Reg. C-02-003/OP-A-8 II-C-001 Procedures for Searches	Compliant-The facility conducts visual body searches	Response
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Facility - Date BJG Compliance



PART IV - CARE	1	
A. FOOD SERVICES		
References: ACA CJA 1-4A-01, 1-4A-02, 1-4A-04,1-4A-06, Dept. Rog. C-06- 001/JS-C-1	Findings	Response
IV-A-001 Food Storage Facilities	Compliant	
There are sanitary facilities for the storage of all foods that comply with applicable		
state and/or federal guidelines.		
Visual Enspection: DHH Inspection reports, Internal inspection reports		
IV-A-002 Food Service Facilities	Compliant	
Toilet and hand basin facilities are available to food service personnel in the food		
preparation area.		
Visual Inspection: DHH inspection reports, photos		
IV-A-003 Food/Dietary Allowances	Compliant	
The facility's dictary allowances are reviewed at least annually by a qualified		
nutritionist or dietician to ensure they meet the national recommended dietary		
allowances for basic nutrition for appropriate age groups. Menu evaluations are		
conducted at least quarterly by food service supervisory staff to verify adherence to		
the established basic daily servings. Written policy, procedure, and practice		
require that food service staff plan menus and substantially follow the plan. The		
planning and preparation of all meals shall take into consideration nutritional		
characteristics and caloric adequacy. The facility shall provide a tray/plate and		
utensil(s) for each hot meal.		
Visual Inspection: annual reviews, nutritionist or dictician qualifications,	1	
documentation of at least annual review and quarterly menu evaluations		
IV-A-004 Records of Meals Served	Compliant	
Written policy, procedure, and practice require that accurate records are maintained	·	
of all meals served.		
Viscal Inspection: facility logs		
IV-A-005 Denial of Food as Discipline Prohibited	Compliant	
Written policy, procedure, and practice preclude the denial of food as a disciplinary		
measure.		
Visual Inspection: facility logs		
IV-A-006 Food Service Management	Compliant- two hot meals daily, 3 meals within 24 hrs	
Written policy, procedure, and practice require that three meals (including two hot	and no more then 14 hrs apart.	
meals) are provided under staff supervision at regular meal times during each 24-		
hour period, with no more than 14 hours between the evening meal and breakfast.		
Variations may be allowed based on weekend and holiday food service demands		
provided basic nutritional goals are met. Offenders shall be provided an ample		
opportunity to eat for each meal.		ļ
Visual Inspection: records of meets served and times served, facility logs IV-A-007 Therapeutic/Special Diets	Constitue	
Therapeutic and/or special diets are provided as prescribed by appropriate clinicians	Compliant	
or when religious beliefs require adherence to religious dietary laws. Written policy,		
procedure, and practice provide for special diets as prescribed by appropriate		
medical or dental personnel.	1	
Visual Inspection: health records, diet records or forms, documentation of warden's	1	
accroved of relicious diet		
IV-A-008 Health Protection for Food Service	Compliant	
There is adequate protection for all offenders and staff in the facility and for		
offenders and other persons working in food service. All persons involved in the		
preparation of the food receive a pre-assignment inspection by appropriate kitchen		
staff, to ensure freedom from diarrhea, skin infections, and other illnesses		
transmissible by food or utensils. Offenders working in food services are monitored		
each day for health and cleanliness by appropriate kitchen staff. All food handlers		
are instructed to wash their hands upon reporting to duty and after using toilet		
facilities		
Visual Inspection: Inspection reports, completed forms, documentation of daily monitoring for health and cleanliness.	j	
MANAGEMENT OF THE STATE OF THE	<u> </u>	



B. HYGIENE	1	
References: ACA CJS 1-48-01, 1-48-02, 1-48-03, 1-48-04, Dept. Reg. 8-06-001/HC-34/IS-C-3	Findings	Response
IV-B-001 Plumbing Fixtures - Toilets and Washbasins Offenders have access to toilets and washbasins with temperature-controlled hot and cold running water 24 hours per day. Offenders are able to use toilet facilities without staff assistance when they are confined in their cells/sleeping areas.	Compliant-There are operable toilets and washbasins in all areas of the facility. Both hot and cold water worked in all washbasins.	
Visual Inspection: maintenance records or reports, inspections, documentation of periodic measurement of water temperature, offender grievanoss IV-B-002 Plumbing Fixtures - Showers Offenders, including those in medical housing units or infirmaries, have access to operable showers with temperature-controlled hot and cold running water 24 hours per day, on a reasonable schedule, (a minimum of three times per week). Water for showers is thermostatically controlled to temperatures ranging from 100 degrees	Compliant-There are operable showers in all areas of the facility	
to 120 degrees Fahrenheit. Visual Inspection: maintenance records or reports, inspections		
TV-B-OB. Clothing The Facility has an obligation to provide adequate institutional dothing appropriate to the season and the offender's work status, including adequate changes of clothing to allow for regular laundering. The facility may fulfill this obligation by furnishing clothing or permitting the offender to secure and wear his own clothing, except that when the offender does not provide adequate clothing for himself, the facility shall furnish same.	Compliant	
Visual Inspection: documentation of dothing issue, documentation of deaning and storage		
IV-B-004 hygiene/Bedding Issue The facility shall provide adequate bedding and linen, including a clean mattress, sheets, pillow and blanket, not to exclude a mattress with integrated pillow. There are provisions for linen and towel exchange at least weekly. There are provisions for blanket exchange at least monthly.	Compliant	
visual Impection: documentation of issue and exchange TV-B-005 Personal Hygiene Articles and services necessary for maintaining personal hygiene shall be available to all offenders including atoms specifically needed for females. Such items shall be provided to any offender (make or female) who is indigent. Each offender shall be provided soap, toilet paper, toothbrush, toothpaste and shaving equipment.	Compliant-Clear and concise policy. Documentation was provided showing the issuing of hygene iteams.	
Visual Inspection: documentation that items are provided, list of items available	<u> </u>	
C. CONTINUUM OF HEALTH CARE SERVICES References: ACA CIS 1-72-14, 1-4C-01, 1-4C-03, 1-4C-04, 1-4C-06, 1-4C-07, 1-4C-08, 1-4C-09, 1-4C-10, 1-4C-03, 1-4C-01, 1-4D-03, 1-4D-04, 1-4D-06, Dopt. Rogs. B-05-001/IS-D-2, HC-01/IS-D-HP13, HC-02/IS-D-HCP14, HC-05/IS-D-HCP20, HC-06A/IS-D-HCP41, HC-05B/IS-D-HCP20, HC-06A/IS-D-HCP41, HC-05B/IS-D-HCP30, HC-073, HC-073, HC-074, HC-17/IS-D-HCP34, HC-17/IS-D-HCP34, HC-17/IS-D-HCP34, HC-17/IS-D-HCP34, HC-17/IS-D-HCP34, HC-18/IS-D-HCP34, HC-18/	Findings	Response
IN-C-00.1 Access to Care/Clinical Services At the time of admission/Intake, all offenders are informed about procedures to access health services, including any copay requirements, as well as procedures for submitting grievances. Medical care is not denied based on an offender's ability to pay. The facility has a designated health authority with responsibility for health care services. When the health authority is other than a physician, final clinical judgments rest with a single, designated, responsible physician. Written policy, procedure, and practice provide for the delivery of health care services, including medical, dental and behavioral health services under the control of a designated health care authority who shall be a physician or a licensed or registered health care provider or health agency. Access to these services shall be unimpeded in the sense that correctional staff should not approve or disapprove offender requests for services in accordance with the facility's health care plan. Oral health services include access to diagnostic x-rays, treatment of dental pain, development of individual treatment plans, extractions of non-restorable teeth, and referral to a dental specialist, including an oral surgeon. Specially non primary refinal services are received by DOSAC. The acquirect shall be extracted by the an accordance with R.S. ISSBJ, DPSAC offenders may be assessed a on-payment for receiving medical or dental treatment, including prescription or nonprescription drugs. The corpayment fee schedule shall be approved by the DPSAC. Such fee schedule for DPSAC offenders housed in local jail facilities shall not exceed the DPSAC approved rate in accordance with Dept. Reg. 8-06-001 In-CO2/15-O-HCP14, unless prior approval has been granted by the Secretary of the DPSAC. »DPSAC offenders may be required to file a claim with his/her private medical or health care insurer, or any public medical assistance program, under which he/she is consent and form which the offenders may are a chain a chiral reside	Compliant-Offenders receive a facility handbook upon admissions that contains all necessary information on assessing health care and the co-pay requirements. There is a \$5 co-pay. The co-pays are approved by DPS&C.	
is covered and from which the offender may make a claim for payment or reimbursement of the cost of any such medical treatment. Visual Impaction: Documentation that offenders are informed about health care and the greeness system, a health record, medical copayment fee schedule.		
IV-C-002 Adequate Equipment and Supplies Adequate equipment and supplies for medical services are provided as determined by the health care authority and are in working order. Visual Inspection: Photos	Compliant	

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	Findings	Response
IV-C-003 Provision of Treatment	Compliant	
The facility has a designated health authority responsible for health care services. Requests for health services are triaged by health trained persons to ensure that		
needs are addressed in a timely manner in accordance with the severity of the		
illness. Written policy, procedure and practice provide that anyone who provides		
health care services to offenders be licensed, registered or certified as appropriate		
to their respective professional disciplines. Such personnel shall only practice as authorized by their license, registration or certification. Standing orders are used in		
the treatment of offenders only when authorized in writing by a physician or dentist.		
(Standing orders are used in the treatment of identified conditions and for the on-		
sight emergency treatment of an offender.)		
Visual Inspection: documentation of health authority designation, contract, billing		
records, sick call request form, a health record, clinical provider schedules, current		
IV-C-004 Personnel Qualifications/Credentials	Compliant	·
Correctional or other personnel who do not have health care licenses may only		
provide limited health care services as authorized by the responsible health care		
authority and in accordance with appropriate training. This would typically involve		
the administration of medication, the following of standing orders as authorized by the responsible health care authority and the administration of first aid/CPR in	l .	
accordance with POST training. Written policy, procedure and practice approved by		
the health authority require dispensing and administering prescribed medications by		
qualified personnel.		
Visual Inspection: health records, completed medication administration form,		
personnel records, copies of current credentials or licensure, documentation of compliance with standing orders, health record entries, staff training records		
IV-C-005 24 Hour Care	Compliant	
Written policy, procedure, and practice ensure that offenders have access to 24-		
hour emergency medical, dental, and mental health services, including on-site first aid, basic life support, and transfer to community based services. This requirement		
may be met by agreement with a local state hospital, a local private hospital, on-cal		
qualified health care personnel (see IV-C-003), or on-duty qualified health care		
personnel. Decisions regarding access to emergency medical services shall not be		
the sole province of correctional or other non-health personnel except in accordance with IV-C-004.		
Visual Inspection: designated facility, provider lists, transportation logs IV-C-006 Health Screens	Compliant	
Written policy, procedure and practice require that all DPS&C offenders receive a	Compliant	
health screening by health trained or qualified health care personnel upon intake		
into the facility unless there is documentation of a health screening within the		
previous 90 days. Screening is conducted in accordance with protocols established		
by the health authority. If completed by health trained personnel, all intake health screens are to be reviewed by health care personnel as soon as possible. If a		
facility uses a different screening form, it shall be required to have at a minimum		
the questions in the Intake Health Care Screening form (IV-C-006-A) provided by		
DPS&C. The purpose of the health screening is to protect newly admitted offenders		
who pose a health safety threat to themselves or others from not receiving adequate medical attention. This should include inquiry into:		
Current medical, dental or behavioral health problems and communicable		
diseases;		
2. Current treatment plan;		
Current medications, including psychotropic; History of hospitalization;		
History of hospitalization; Sulcidal risk assessment;		
Use of alcohol or other drugs including need for possible detoxification;		
7. Possibility of pregnancy;	i	
Observation of the following: Appearance and behavior;		
b. Body deformities and other physical abnormalties;		
c. Ease of movement;		
d. Current physical traumas or characteristics and a determination of whether or		
not the offender should be recommended for immediate transfer to the DS&C for appropriate care:		
e. Any physical impairment (hearing, vision, mobility) or other disability which	l	
would impede the offender's access to programs or services. Offenders identified	ĺ	
with such an impairment or disability shall be transferred to the DPS&C for further	İ	
[evaluation and determination of appropriate housing placement, [Reference 2008 Resolution Agreement: US DOJ and LA DPS&C.]		
9. Current health insurance.		
Visual Inspection: health records, completed screening form, transfer logs IV-C-006-1 Pregnancy Management	Compliant	
Written policy, procedure and practice require that all pregnant offenders have	Compliant	
access to obstetrical services by a qualified provider.		
The local fall facility shall notify the Department's Medical Director, when a DPS&C		
offender is pregnant to ensure proper placement or if transfer to a DPS&C facility is necessary.	<u> </u>	
Visual Inspection: written policy and procedure, health record where pregnant offender received obstatrical services by a qualified provider, notification to DPS&C		
when DPS&C offender is pregnant , transfer logs		



IV-C-007 Communicable Disease and Infection Control Program	Findings	Response
Communicable diseases are managed in accordance with a written plan approved by the health authority in consultation with local public health officials. The plan	Compliant	
includes for the screening, surveillance, treatment, containment, and reporting of infectious diseases. The plan shall comprise of testing to detect communicable		
diseases, including TB testing within 14 days of arrival at the facility. If there is		
documented evidence of TB testing within the last 12 months, new testing is not required. Qualified health care staff will evaluate for signs and symptoms of TB.		
Infection control measures include the availability of personal protective equipment for staff and hand hygiene promotion throughout the facility. Procedures for		
handling biohazardous waste and decontaminating medical and dental equipment		
must comply with applicable local, state and federal regulations. Visual Inspection: health records, clinic visit logs, documentation of waste pic up		
and/or cleaning logs		
IV-C-008 Annual TB Testing Written policy, procedure and practice require annual testing or medical evaluation	Compliant-The facility conducted TB testing on all offenders at no cost to the offender. This is done upon	
for signs and/or symptoms of tuberculosis on all offenders. Annual TB testing will be provided at no cost to the offender. The facility's designated health care	intake and annually	
authority shall contact the DPS&C Medical Director, telephone number 225-342-		
1320, when an offender's test for medical signs and/or symptoms of tuberculosis is reported positive. The DPS&C Medical Director will determine if the offender		
requires physician or mid-level evaluation, based on the reported positive signs or symptoms.		
Visual Inspection: health records		
IV-C-009 Chronic Care Program Offenders with chronic conditions, such as diabetes, hypertension and mental illness	Compliant	
receive periodic care by a qualified health care provider in accordance with individual treatment plans, inclusive as deemed appropriate by the respective health		
care provider. For offenders whose chronic disease cannot be reasonably managed		
by the local jail facility, a Medical Transfer Request for DOC Offenders at Local Facilities Form C-05-004-B may be submitted to the ARDC.		
Visual Inspection: health records		
IV-C-010 Pharmaceuticals Written policy, procedure, and practice approved by the health authority provide for	Compliant	
the proper management of pharmaceuticals. Offenders are provided medication as prescribed.		
Visual Inspection: health records, completed medication administration forms, Inventories		
IV-C-011 First Aid Kits	Compliant	
First aid kits are available in areas of the facility as designated by the responsible health care authority and shall be immediately accessible to housing units.		
Visual Inspection: location of first aid kits within the facility IV-C-012 Access to Sick Call	Compliant-The facility has a computer system set up in	
There is a process for all offenders to initiate requests for health services on a daily	the day areas for offender to send in their sick call	
basis. Written policy, procedure and practice require that sick call is conducted by a physician and/or other qualified health care personnel who are licensed, registered	forms. If the offender needs to make sick call and is not in the area of the computer system, they notify	
or certified as appropriate to their respective professional discipline and who practice only as authorized by their license, registration or certification. Sick call	security staff and a form is given to medical staff. The	
shall be available to all offenders as follows:	requests are triaged and scheduled daily visits.	
■Facilities with fewer than 100 offenders - 1 time per week; ■Facilities with 100 to 300 offenders - 3 times per week;		+
 Facilities with more than 300 offenders - 4 times per week. If an offender's custody status precludes attendance at sick call, then arrangements 		
shall be made to provide such services in the place of the offender's detention.		
Visual Inspection: written policy and procedure IV-C-013 Infirmary Care	Compliant-The facility has a nurse daily on staff from	
If infirmary care is provided onsite, it complies with applicable state regulations and	6am to 6pm. If there is an emergency after hours, a	
local licensing requirements. Provision include 24 hour emergency on-call consultation with a physician, dentist and mental health professional. Written	doctor and nurse are on call 24/7. Health care services is contracted through Correct Health and they	
policy, procedure and practice provide that any offender who is identified as requiring a medical, dental or mental health need for which care is not readily	provide a wide range of services. If medical staff	
available from the local facility, shall be immediately transferred to DPS&C. It is particularly important that smaller facilities recognize the commitment of the DPS&C	determines the health issues to be emergency, offenders are transported to St. James Hospital.	
to accept into their custody any state offender whose condition is problematic.		
Visual Inspection: admission or inpatient records, staffing schedule, completed form C- 05-004-8		
TV-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, Compassionate Release)	Compliant	
Any offender sentenced to DPS&C custody that meets the medical criteria to be		
released on Medical Parole, Medical Treatment Furlough or Compassionate Release may be considered after submission of the required documentation in accordance		
with the corresponding Dept. Reg. to the DPS&C's Chief Nursing Officer via email to MedicalDirector@corrections.state.la.us or by fax to 225-342-7240.		
Visual Inspection: health records, documentation of approval of DPS&C's Chief Nursing		
Officer IV-C-014 Suicide Prevention and Intervention	Compliant-Mental health staff evaluates each offender	
There is a written suicide prevention and intervention program that is approved by a behavioral health professional who meets the educational and license/certification	and determines the treatment. The staff receives	
criteria specified by his/her respective professional discipline. The program must	annual suicide prevention training.	
include specific procedures for handling intake, screening, identifying and continually supervising the suicide-prone offender. Observation of the suicide-prone		
offender will vary from continual observation to intervals no greater than fifteen (15) minutes. All staff with responsibility for offender supervision are trained		
visual Inspection: health records, documentation of staff training, documentation of		
observation of suicide watches.	<u> </u>	

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DI C DIE Officiale Broths	Findings	NESPONSE
IV-C-015 Offender Deaths	Compliant	
Written policy, procedure and practice specify and govern the actions to be taken in the event of an offender's death, which includes notification of the coroner of all		
offender deaths. All attempts to contact the coroner regarding any death shall be		
thoroughly documented. Such procedures shall also include the reporting		
requirements as outlined in BJG I-C-001. In addition, a written report of all offender		
deaths shall be submitted to DPS&C on Form C-05-001-X (via email to		
catanotily@corrections.state.la.us or via fax to 225-342-3349).		
Visual Inspection: notification, reporting requirements, report to DPS&C		
IV-C-016 Notification	Compliant-Policies in place to notify family members if	
A visit with an immediate family member when the offender is admitted to an ICU or trauma center due to a serious bodily injury or due to being a terminally ill	the offender is on ICU.	
offender for the duration of the offender's admission to the ICU or trauma center,		
unless the Warden or designee provides written notice within 6 hours of the		
offender's admission to the ICU or trauma center to any immediate family member		
seeking visitation why such visitation cannot be granted, pursuant to La. R.S.		
15:833(A) and Dept. Reg. C-02-008;	· ·	
•If the offender's admission to the ICU or trauma center occurs between 8:00 pm		
and 4:00 am, the Warden or designee shall provide the required written notification		
within 24 hours of the time the serious bodily injury occurred.		
 Pursuant to La. R.S. 15:833(A), the Warden or designee shall attempt to notify the 		
offender's immediate family within 8 hours of the medical decision to transport the		
offender to the ICU or trauma center.	1	
Based on extenuating circumstances the Warden or designee may extend the definition of an offender's immediate family member.	1	
Visual Inspection: notification records	1	
	·	
D. HEALTH SERVICES STAFF		
References: ACA CIS 1-4D-02, 1-4D-04, 1-4D-05, 1-4D-07, 1-4D-08, 1-4D-09, 1-		
40-10, 1-40-17, 1-40-18, Dept. Regs. 8-06-001/HC-24/ISD-HCP44, HC-25/IS-D	Findings	Response
HCP9, HC-26/IS-D-HCP10, HC-33/AM-D-5 IV-D-001 Health Care Quarterly Meetings	Compliant	
The health authority meets with the facility administrator at least quarterly.	Compliant	
L		
Visual Inspection: documentation of meetings		
IV-D-002 Research	Compliant	
Written policy, procedure, and practice prohibit offender participation in		
pharmaceutical, medical, or cosmetic experiments. This policy does not preclude		
individual treatment of an offender based on his/her needs using a specific medical		
procedure that is not generally available.		
Visual Inspection: written policy and procedure		
IV-D-003 Health Care Personnel/Job Descriptions	Compliant	
Health care staff work in accordance with professional specific job descriptions	ì	
approved by the health authority.		
Visual Inspection: job descriptions		
IV-D-004 Confidentiality of Health Information	Compliant-Access to offender medical	
Information about an offender's health status is confidential. Nonmedical staff only	information/files are controlled and restricted to those	
have access to specific medical information on a "need to know" basis in order to	who have legal authority. Medical records are stored	
preserve the health and safety of the specific offender, other offenders, volunteers,	in a secured restricted area and are transported with	
visitors, or correctional staff.	the offender upon transfer to another local facility or	
An individual health record is maintained for all offenders in accordance with policies	to DPS&C.	
and procedures established by the health authority. The health record is made		
available to, and is used for documentation for all health care personnel. The active health record is maintained separately from the confinement case record and access		
is controlled. When an offender is transferred to DPS&C or another local	1	
facility, the offender's medical record is transferred as well.		
The state of the s	ļ	
	1	
Visual Inspection: health records, completed consent forms, completed refusal forms		
IV-D-005 Informed Consent	Compliant	
Informed consent standards of the jurisdiction are observed and documented for		
offender care in a language understood by the offender. In the case of minors, the		
information consent of a parent, guardian or legal guardian applies when required by law. Offenders routinely have the right to refuse medical interventions. When		
health care is rendered against an offender's will, it is in accordance with state laws		
and regulations. Involuntary administration of psychotropic medications to		
offenders may only be accomplished by DPS&C.		
Visual Inspection: health records, completed consent forms, completed refusal forms		
IV-D-006 Emergency Response	[
Emergency medical care, including first aid and basic life support, is provided by all	Compliant	
health care professionals and those health-trained correctional staff specifically		
designated by the facility administrator. All staff responding to health emergencies		
are trained in CPR. The health authority approves policies and procedures that		
ensure that emergency supplies and equipment, including automatic external		
defibrillators (AEDs) are readily available and in working order.		
<u> </u>		
Visual Inspection: verification of training, records and certificates		
IV-D-007 Internal Review/Quality Assurance	Compliant	
The health authority approves policies and procedures for identifying and evaluating	Compliant	
major risk management events related to offender health care, including offender		
deaths, preventable adverse outcomes and serious medication errors.		
I	1	
Visual Inspection: evaluation of major risk management events		



Written policy, procedure and practice provide for the prevention, detection, response, reporting and investigation of allegad and substantiated sexual assaults. (PREA) Information provided to offenders about sexual abuse/assault includes: •Prevention/intervention; •Self-protection; •Reporting sexual abuse/assault; •Treatment and counseling. When the occurrence/allegation of sexual assault or threat involves a DPS&C offender, the facility shall report the incident to DPS&C immediately, as outlined in BIG I-C-001. An investigation is conducted and documented whenever a sexual assault or threat is reported. Investigative reports, that include DPS&C offenders, shall be submitted to appropriate DPS&C Regional Team Leader on Form C-01-022-E. Victims of sexual assault are referred under appropriate security provisions to a	E. SEXUAL ASSAULT References: ACA CIS 1-4D-13, 1-4D-15, 1-4D-16, Dept. Regs. A-04-002/PS-D-3, C-01-022/0P-A-15	Findings	Response
community facility for treatment and gathering of evidence. Visual Inspection: documentation of reports to DPS&C, investigative reports	IV-E-001 Alleged and Substantiated Sexual Assaults Written policy, procedure and practice provide for the prevention, detection, response, reporting and investigation of alleged and substantiated sexual assaults. (PREA) Information provided to offenders about sexual abuse/assault includes: •Prevention/intervention; •Self-protection; •Reporting sexual abuse/assault; •Treatment and counseling. When the occurrence/allegation of sexual assault or threat involves a DPS&C offender, the facility shall report the incident to DPS&C immediately, as outlined in BJG I-C-001. An investigation is conducted and documented whenever a sexual assault or threat is reported. Investigative reports, that include DPS&C offenders, shall be submitted to appropriate DPS&C Regional Team Leader on Form C-01-022-E. Victims of sexual assault are referred under appropriate security provisions to a community facility for treatment and gathering of evidence.	allegations associated with DPS&C offenders during	

PART V - OFFENDER PROGRAMS AND ACTIVITY A. OFFENDER OPPORTUNITIES FOR IMPROVEMENT		
References: ACA CJS 1-5A-01, Dept. Reg. B-08-004/PS-F-1	Findings	Response
V-A-00.1 Volunteers/Registration There is an official registration and identification system for volunteers.	Compliant	
Visual Inspection: activity schedules, facility logs		
V-A-002 Volunteer Services A current schedule of volunteer services is available to all offenders and is posted in appropriate areas of the facility.	Compliant	
Visual Inspection: activity schedules, facility logs		
V-A-003 Programs and Services Written policy, procedure and practice provide for the availability of offender programs, services and counseling. Such programming may be obtained from acceptable internal or external sources which should include, at a minimum, assistance in obtaining individualized educational program instruction at a variety of levels. The local juil facility shall maintain class files on all DPS&C approved programming, whether the program is administered by DPS&C or other staff. The class files should include at a minimum: 1. Screening of offender(s) for program placement; 2. Offender application to program; 3. Program sign-in sheets and/or attendance rosters; 4. Signed copy of CTRP credit forms; 5. Documentation for staff oversight if program is not administered and/or overseen by DPS&C staff.	Non Compliant- the facility has no programs and services for the Offender population	
Visual Inspection: activity schedules, facility logs		
V-A-003-1 Educational Programming The DPS&C and the facility encourage educational programming which includes: 1. Adult Basic Education and/or Literacy 2. Industry Based Certification Training 3. Pell-eighle Post-Secondary Training Any planned or proposed programs for education in local jail facilities that house DPS&C offenders shall be submitted to the DPS&C Education Director.	Non Compliant - no educational programs	9
Visual Inspection: activity schedules, facility logs		

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B. PROGRAMS Refurences: ACA CDS 1-4C-02, 1-58-01, 1-58-01-1, 1-58-01-2, 1-58-01-3, 1-58-		
02, 1-58-02-1, 1-58-02-2, 1-58-04, 1-50-01, 1-50-04, 1-50-06, Dept. Regs. A-04-		
002/PS-0-3, N-02-001/19-B-1 R-06-001/HC-17/IS-0-HCP7, B-08-005/FS-E-1,	Findings	Response
B-08-013/PS-C-1, B-09-003/AM-C-2, C-D1-012/PS-T-1, C-02-D08/DP-C-9, C-02-		
009/OF-C-7	Compliant-Offenders are released with property and	
V-B-001 Releasing Offenders Procedures for releasing offenders from the facility include, but are not limited to,	identification that was collected upon intake.	1
the following:	Offenders are released with two forms of	
•Return of personal property, to include any govt. issued ID (i.e., driver's license)	identification.	<u> </u>
that may have been collected from the offender during the intake process.		
Provide offender with/and have him/her sign for any reentry transition document		
envelopes and all its contents. •Frovision of a listing of available community resources.		
 Consideration by the prescribing health care practioner for a provision of a 5-day 		
supply of current maintenance medication (medication prescribed to stabilize a		
chronic medical or behavioral health illness), along with a prescription for a thirty		
(30) day of medication upon transfer or discharge. •Prior to release, offenders with serious medical and behavioral health conditions.		
are referred to available community services. Appropriate health information is		1
shared with the new providers in accordance with consent requirements.		
Provision of adequate street clothing for indigent offenders. Offender shall not		-
release in any prison issued attire, including but not limited to jumpsuits, striped		
scrubs, or stenciled clothing.		
Visual Inspection: completed release forms and documents, facility records and logs, offender records		
V-8-002 Visiting	Compliant	
Written policy, procedure and practice govern visiting. The number of visitors an		
offender may receive and the length of the visits may be limited only by the facility's		
schedule, space and personnel constraints or when the facility administrator can		
present clear and convincing evidence that such visitation jeopardizes the safety and security of the facility. Conditions under which visits may be denied and visitors		1
Imay be searched are defined in writing. Provisions are made for special visits in		
accordance with Bept. Reg. C-02-008.		1
Visual Inspection: activity schedule, facility logs V-8-903 Library Services		
Written Reading materials shall be available to offenders on a reasonable basis.	Compliant	
		1
Visual Inspection: activity schedule, facility logs		
V-B-004 Religious Programs	Compliant	
Written policy, procedure and practice define and provide reasonable offender opportunity for religious practice.	1	
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Visual Inspection: documentation of offender religious activities, activity schedule	A	
V-B-005 Exercise and Recreation Access Offenders have access to exercise and recreation opportunities. Written policy,	Compliant	
procedure, and practice provide for exercise opportunities adequate to ensure		<u> </u>
major muscle activity. Outdoor exercise shall be available on a regular basis (at		
least three times per week-weather permitting) for state inmates. If a state		
offender requires special management or has security supervision needs which	La contraction of the contractio	<u>.</u>
preclude the opportunity for outdoor exercise at a facility, then he shall be transferred to the DPS&C If a facility based on location, or other legitimate		
concern, does not make provision for outdoor exercise, then compensating,		
dedicated exercise facilities of adequate size to provide three exercise opportunities		<u> </u>
per week shall be available.	was a	
Visual Inspection: activity schedule, facility logs		
V-B-006 Transitional Work Program/Standard Operating Procedures	N/A	
Transitional Work programs shall be operated in accordance with the Standard Operating Procedures for Offender Work Release Programs established by the		
DPS&C.	Na consta	<u> </u>
		1
Visual Inspection: DPS&C monitoring report V-B-007 Participation in Transitional Work Programs	l MITA	
Participation in transitional work programs by state offenders shall comply with R.S.	N/A]
15:711 and DPS&C Department Regulation No. 8-02-901 "Assignment and Transfer		
of Offenders," Specific approval by the Secretary of DPS&C is required prior to		-
program assignment of state offenders. Refer to Standard Operating Procedures		
for Offender Transitional Work Programs.		
Visual Inspection: approval for participation by the Secretary of DPS&C		
V-B-008 Offender Work Program	N/A	
Participation in offender work programs by state offenders shall comply with the		
provision of R.S. 15:708 (parish jalls) or R.S. 15:832 (police maintenance).		
Visual Inspection offender voluntary participation, sheriff's approval of work program		
request, facility loss	1'	



	Findings	Response
V-B-009 Approval for Transitional Work Programs Any Sheriff interested in operation of a TWP facility shall obtain prior approval from the Chief of Operations. Refer to Standard Operating Procedures for Offender Transitional Work Programs.	N/A	
Visual Inspection: approval of Chief of Operations		
V-B-010 Proposed Expansions Any planned or proposed expansions for transitional work program or jail facilities that house DPS&C offenders shall be submitted to the Secretary of the DPS&C and the Executive Director of the LSA for consideration and approval.	N/A	
Visual Inspection:		
V-B-011 Mail and Correspondence Any Offenders may send and receive mail. Indigent offenders receive a specified postage allowance. Offenders are notified in writing when incoming or outgoing letters are withheld in part or in full. Written policy, procedure, and practice govern offender correspondence.	Compliant	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail		
V-B-012 Packages and Publications Written policy, procedure and practice govern offender access to publications and packages from outside sources.	Compliant	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail		

C. REENTRY		
References: Dept. Regs. B-01-001/IS-B-6, B-01-002/BOP3, B-01-004/IS-B-7, B- 06-001/HC-40/IS-D-HCP31	Findings	Response
V-C-001. Substance Abuse Programs The facility encourages offender participation in substance abuse programs when available. Visual Inspection: facility log, activity schedule	Non Compliant- no substance abuse programs offered to the offender population	
V-C-002 Reentry Programs The DPS&C and the facility encourages reentry programming which includes: 1. Employment opportunities through work release; 2. At least two forms of valid identification upon release; 3. The development of a residential plan prior to release; 4. Referral to community based service providers upon release; 5. Where feasible, recommend DPS&C offenders receive 100 hours of pre-release training at a regional reentry center prior to transfer to a TWP, or release from custody. The local jail facility shall maintain reentry transition document envelops for all DPS&C offenders, which include at a minimum, if applicable: 1. Any valid forms of identification; 2. Prescriptions and Medicald card; 3. Community service referrals.	Compliant-Offenders are releasing with two valid forms of identification.	
Visual Inspection: documentation of employment opportunity, documentation of two		
V-C-003 Pre-Parole Preparation The facility shall complete Form 8-01-004-C, Pre-Parole LARNA II Questionnaire for Local Jail Facilities, and submit via e-mail to DPS&C HQ at LCCALIarna@corrections.state.la.us or by fax to 225-342-0929 within the first two weeks of the month proceeding the scheduled hearing.	Compliant	
Visual Inspection: offender record, completed questionnaire		
V-C-004 Parole Board Procedures The facility Warden or his/her designee, of the local level facility in which the offender is housed, shall be present to provide information to members of the Parole Board regarding the offender's progress and disciplinary infractions during incarceration.	Compliant	
Visual Inspection: offender record, trip log, documentation showing facility Warden or designee presence at parole board		

PART VI - JUSTICE		
A. OFFENDER'S RIGHTS		
References: ACA CJS 1-6A-D1, 1-6A-D2, 1-6A-D3, 1-6A-D6, Dept. Reg. C-01- 004/OP-C-10	Findings	Response
VI-A-001 Access to Courts/Access to Legal Materials Written policy, procedure, and practice ensure the right of offenders to have access to courts. This includes reasonable access to legal reference materials or access to legal or paralegal assistance. Illiterate offenders shall be provided the assistance of a fellow offender or be furnished adequate assistance from the facility staff or other persons who have a legitimate connection with the legal issues being pursued. If an offender's requirements in this area are significant and complex, exceeding the capability of the local facility to meaningfully provide assistance, then the inmate shall be transferred to the DPS&C.		
Visual Inspection: facility log		
VI-A-002 Access to Counsel Written policy, procedure, and practice ensure offenders' confidential access to counsel. Such contact includes, but is not limited to telephone communications, uncensored correspondence and visits.	Compliant	
Visual Inspection: facility log, record of attorney interviews		
VI-A-003 Protection from Abuse Written policy, procedure, and practice protect offenders from personal abuse, corporal punishment, personal injury, disease, property damage, or harassment.	Compliant	
Visual Inspection: facility log, incident reports, staff training records		



B. FAIR TREATMENT OF OFFENDERS		
References: ACA C35 1-2A-15, 1-4C-01, 1-68-01, 1-68-02, Dept. Reg. 8-05- 005/OP-C-13	Findings	Response
VI-B-001 Discrimination Written policy, procedure, and practice provide that program access and administrative decisions are made without regard to offenders' race, religion, national origin, gender, sexual orientation, or disability.	Compliant	
Visual Inspection: facility records, grievances, activity logs		
VI-B-002 Grievance Process Offenders have reasonable access to a grievance remedy procedure that includes at least two levels of review if necessary. The grievance remedy procedure shall be an administrative means through which an offender may seek formal review of a complaint which relates to any aspect of his imprisonment if less formal procedures have not resolved the matter. Such complaints and grievances include, but are not imitted to, actions pertaining to conditions of confinement, personal injuries, medical complaints, time computations, the classification process, or challenges to rules, regulations, or policies. Through this procedure, offenders shall receive reasonable responses within a specified time period and where appropriate, meaningful remedies.		
Visual Inspection: grievances		

PART VII - ADMINISTRATION AND MANAGEMENT A. RECRUITMENT, RETENTION AND PROMOTION References: ACA-C35 1-1A-01, 1-18-01, 1-1C-01, 1-1C-07, 1-4C-13, 1-4D-05, 1-4D-04, 1-7B-02, 1-7B-06, Dept. Regs. A-02-028/AM-F-22, C-01-	Findings	Response
008/OP-A-19		
VIII-A-001 Training and Staff Development The facility conducts or participates in a training program which includes orientation for all new employees (appropriate to their job) prior to assuming a position or post. Such training must include: 1. Security procedures; 2. Hostage procedures; 3. Fire and emergency plan/ procedures; 4. Suicide precaution and signs of suicide risks; 5. Use of force policies; 6. Immate rules and regulations; 7. CPR and first aid; 8. Requirements of the Prison Rape Elimination Act (PREA); 9. Employees whose duties are the care, oustody and control of offenders must complete the Peace Officers Standards and Training (POST) Level 3 certification training program, which consists of the ACA core curriculum, within one year of employment.		
Visual Inspection: lesson plans, staff training records		
VII-A-002 Weapons Training All personnel authorized to use firearms and less-than-lethal weapons must demonstrate competency at least annually. Training includes decontamination procedures for individuals exposed to chemical agents.	Compliant-Deputies are POST certified and receive appropriate training regarding the use of handling and retention of weapons	20 1 20 20 20 20 20 20 20 20 20 20 20 20 20
Visual Inspection: personnel records, training records		No.



B. FACILITY ADMINISTRATION		
References: ACA CJS 1-4D-02, 1-7D-01, 1-7D-03, Dept. Reg. C-05-001/AM-I-4	Findings	Response
VII-B-001 Authority	Compliant	
There is a statue or constitutional provision authorizing the establishment of the		
local jail facility or its parent agency.		
Visual Inspection:		
VII-B-002 Legal Assistance for Staff	Compliant	
Written policy, procedure and practice specify the circumstances and methods for		
the facility administrator and other staff to obtain legal assistance as needed in the		
performance of their duties.		
(<u></u>		
Visual Inspection: personnel or training records VII-B-003 Independent Financial Audit	C	
Written policy, procedure and practice provide for an independent financial audit of	Compliant	
the facility. This audit is conducted annually or as stipulated by statute or		
regulation.		
Visual Inspection: annual audit		
VII-B-004 Facility Insurance	Compliant	
Written policy, procedure and practice provide for comprehensive facility insurance		
coverage_		
Visual Inspection: Insurance policy		
VII-8-005 Offender Funds	Compliant	
Offenders' personal funds held by the facility are controlled by generally accepted		
accounting principals (GAAP). Any interest earned, other than operating funds,		
accrues to the benefit of the offenders.		
Visual Inspection: offender records		
VII-B-006 Organization	Compliant	
Written policies and procedures describe all facets of facility operation, maintenance		
and administration are reviewed annually and updated as needed. New or revised		
policies and procedures are disseminated to staff. A file for each guideline shall be		
maintained with documentation (primarily written) to support compliance.		
Visual Inspection: annual reviews, dissemination to staff		
VII-8-007 Annual Compliance Statement	Compliant	
Written policy, procedure and practice demonstrate that the facility shall submit an	Compilation	
annual statement confirming continued compliance with the BJG to the appropriate		
DPS&C Regional Team Leader. This statement, submitted by January 31st each		
year, is in writing and shall include:		
A copy of the current Fire Marshal Report;		
2. A copy of the current Health Inspection Report;		
3. Any proposed or projected expansions;		
Any rehabilitative programs that are available;		
5. Summary of any re-entry initiatives/programs implemented by the facility.		
Visual Enspection: annual statement		
VII-B-008 Monthly Reporting	Compliant	
Written policy, procedure and practice ensure that any facility with DPS&C offenders		
report activities to the Chief of Operations on a monthly basis in accordance with		
Dept. Reg. C-05-001/AM-I-4. These reports shall be submitted on automated reporting forms provided by the DPS&C, no later than the 15th day of the month for		
the previous month's activities. Automated reporting shall be completed, by the		
appropriate DPS&C Regional Team Leader, no later than the 20th day of the month		
for the previous month's activities.		
VII-B-009 Staff Meetings	C	
Written policy, procedure and practice provide for regular meetings between the	Compliant	
Sheriff, facility administrator, or designee and all department heads. There is		
formal documentation that such meetings are conducted at least monthly.		
Visual Inspection: staff meeting minutes/notes		
	•	
C. REASONABLE ACCOMMODATION	Fig. 42	
References: ACA CIS 1-7E-01	Findings	Response
VII-C-001 Facility Equipment/Roasonable Accommodation Reasonable accommodations is made to ensure that all parts of the facility are accessible	Compliant	
to the public are accessible and usable by staff and visitors with disabilities.		

C. REASONABLE ACCOMMODATION		
References: ACA CIS 1-7E-01	Findings	Response
VII-C-001 Facility Equipment/Rossonable Accommodation	Compliant	
Reasonable accommodations is made to ensure that all parts of the facility are accessible	_ ·	
to the public are accessible and usable by staff and visitors with disabilities.		
Visual Inspection:		



INSPECTION REPORTS					
DEPARTMENT	Deficiencies:	Corrective Action Taken			
Fire Marshall	No apparent deficiencies at time of inpection				
Date of Current Report: 1/20/2821 Maximum Capacity: 124					
DHH - Health	Due to Covid DHH inspectors have not been out to do an inspection since 2019 . All Deficiencies from the 2019 report were fixed on the date of inspection	Addition on processing more as some as some as some identification and identification and identification of the			
	2019 report were rised on the date or inspection				
Date of Current Report; 08/15/2019 Plaximum Capacity;		######################################			
	Due to Covid DHH inspectors have not been out to do				







STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Detention or Incarceration Notice of Violations

Routine/Renewal

Permit Number 47-01-224	Permit Name St. James Parish Jail-224			
Name of Establishment St. James Parish Jail-224	Owner Name			
Address 5800 Highway 44 Convent, LA 70723	Date 10/22/2019	Time 10:45 AM		

LAC TITLE 51 PART XVIII

NON-CRITICAL ITEMS: The established by this office.	ese items should	be corrected by the next regular inspection or according to the compliance schedule (see below)
Category	Code Reference	Description of Violations
Building Requirement	101	3 - The walls are in disrepair. MISSING WALL PLATE IN NORTH RIGHT HALL.NORTH LEFT HALL-HOLE IN WALL, TANK 5 WALL IS DAMAGED. HOLE IN WALL BY ROOM 166.
Approved Bathing Facilities	101	24 - There is chipped tile in the shower area. FLOOR TILE IN SOUTH RIGHT HALL IS CHIPPED
Lighting	101	27 - There is less than 20 foot-candles of lighting in the cell block area. LIGHT IN JAIL CELL 2 FOR FRONT LEFT HALL.

Comments:

HAND SINK CELL 5 DRAINS SLOWLY IN JUVENILE HALL. CELL DOOR ON NORTH RIGHT HALL CELL 4 IS NOT OPERATIONAL. BUTTON FOR SHOWER IN SOUTH RIGHT HALL NOT OPERATIONAL, ADDITIONAL SHOWER AVAILABLE.

Number Licensed For		Number in Attendance 70	License Anniversary 11/30/2019	
Sanitarian Name/Print Heather Bourg	Phone # 985-447-0954	Sanitarian Signature	R.S. # 3110	
The above mentioned violations were called to Correct Critical Violations by		o my attention and were explained to Correct Non-Critical V		
Name/Title DERRICK WASHINGTON, WARDEN		Signature of Recipient	S	



John Bel Edwards GOVERNOR

Office of State Fire Marshal

8181 Independence Blvd. Baton Rouge, LA 70806 (225) 925-4911 (800) 256-5452 Fax (225) 925-4241

Inspection Report

Report # CB-19-039549-1

No Deficient/Cautionary Codes cited.



H. "Butch" Browning FIRE MARSHAL

		Lo	catio	n Inform	ation	1			
Inspection Type	Compliance	Compliance Building Inspection			Inspection Date 1/		1/20/2021 9:47:46 AM		
Structure ID	20067	20067 No. of Building		1		Facility Code		J209	
Capacity	124 Year Buil			1987		Construction	Туре	Type IIIA / (211)	
Building/Trade N	lame		-	Addres	s				
SAINT JAMES DETENTION CENTER				5800 HI	GHW	AY 44, CONVE	NT, LA 70	0723	
		C	wner	Informa	ation				
Owner Type		Name	-		Cont	act Phone	Contact	Contact Email	
Municipal Project		SAINT JAMES DETE CENTER	NOITM	1	(225)	562-2210	ANTHO	NY.JOSEPH@STJAMESSH COM	
Address			100						
POST OFFICE B	OX 106, CONVE	NT, LA 70723							
		Т	enant	Informa	ation				
Name			Suite	Numbe	1	Floor Numb	er	Square Footage	
		C	ccup	ancy De	tails				
Occupancy Type	•	Details							
Institutional	INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 4			RECTION);					
			Co	mments	5				
ANNUAL INSPECT NO APPARENT I ACCEPTABLE FO	DEFICIENCIES	OTED. AT TIME OF INSPECT AND CERTIFICATION	TION. N.						
		Ins	pecto	or Inforn	natio	n			
Name: Devon J	evon Jackson Badge Number: 706 Inspector Signature:			~ gzL					
		Person to who	m req	uiremer	nts we	ere explaine	4		
			_	ature:	7				

For questions regarding the contents of this report, please call:

R. S. 40: 1621

Whoever fails to comply with any order issued by the Fire Marshal or his authorized representative under any provision of Part III, Chapter 7, Title 40 of the Louisiana Revised Statutes of 1950, R.S. 40:1569 excepted, shall be fined not more than five hundred dollars or imprisoned, for more than six months or both. Each day's violation of an order constitutes a separate offense and may be punished as such at the discretion of court.