Department of Public Safety & Corrections

State of Louisiana

John Bel Edwards Governor



JAMES M. LE BLANC Secretary

MEMORANDUM

TO: The Honorable Douglas L. Hebert, III Sherift of St. Allen Parish FROM: James M. Le Blanc Secretary

DATE: August 20, 2021

RE: "Basic Jail Guidelines" Monitoring Report

I am happy to advise that pursuant to the attached monitoring report concerning the Allen Parish Jail, I am recertifying this facility in compliance with the "Basic Jail Guidelines" with annual monitoring. We'd also like to encourage full compliance with BJG IV-A-003 "Food/Dietary Allowances and IV-A-007 "Therapeutic/Special Diets".

Congratulations to you and your staff for this accomplishment and thank you for the hard work and dedication that are necessary to achieve this goal.

JML/mls

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association Mike Manuel, Warden, Allen Parish Jail Seth Smith, Chief of Operations Marcus Myers, Warden Jennifer Morgan, BJG Team Leader

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Department of Public Safety & Corrections

State of Louisiana

JOHN BEL EDWARDS GOVERNOR



JAMES M. LE BLANC Secretary

MEMORANDUM

TO: James M. Le Blanc Secretary

- FROM: Markisha L. Stewart M. Sturart Basic Jail Guidelines Administrator
- DATE: August 20, 2021
- RE: Allen Parish Jail

The recertification inspection for the above referenced facility was conducted on June 11, 2021. At this time, we would like to encourage full compliance with BJG IV-A-003 "Food/Dietary Allowances" and IV-A-007 "Therapeutic/Special Diets. Recertification with annual monitoring is recommended.

Thank you. MLS

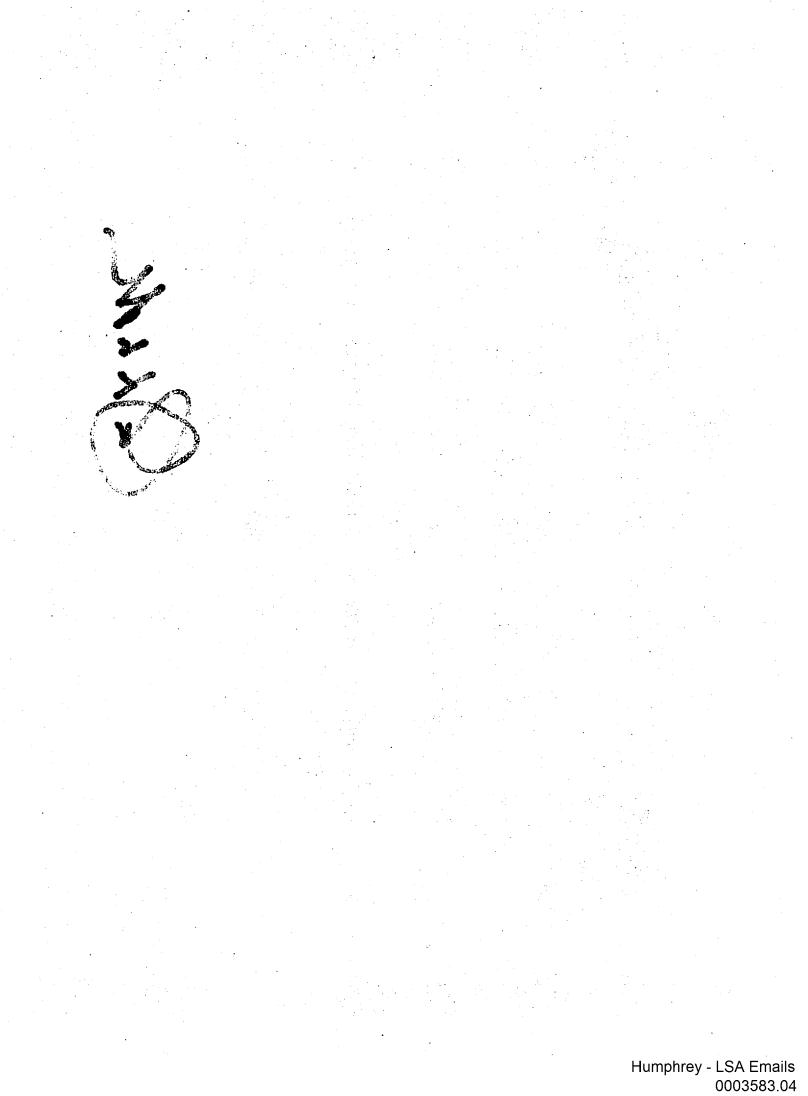
Attachment

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Btfice of the Secretary Department of Public Safety and Corrections By the authority vested in me, under Chapter 9, Title 36 of the Louisiana Revised Statutes, I, James M. Le Blanc, Secretary, do hereby recognize Allen Parish Jail in acknowledgement of Continued Compliance with the Basic Jail Guidelines Process Therefore, I have hereunto set my hand and caused to be affixed the seal of the Department of Public Safety and Corrections, at the City of Baton Rouge, 20th _____ day of August this in the year of our Lord _____ 2021

Attes

STILL DI





BJG RECERTIFICATION REPORT

FACILITY NAME: ALLEN PARISH JAIL BJG MONITORS: JENNIFER MORGAN, TEAM LEADER CHAD FIRMIN, TEAM MEMBER, WAYNE MILLUS, FACILITY STAFF: LISA RIVERS, MIKE MANUEL (WARDEN), LACODDIE JACKSON (ASST. WDN.) BJG INSPECTION DATE: JUNE 11, 2021 PREVIOUS BJG INSPECTION DATE: JUNE 21, 2019 OPERATIONAL CAPACITY: 180 COUNT ON DAY OF VISIT: 84

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

CONCERNS OR ISSUES FROM THE PREVIOUS BJG MONITORING INSPECTION:

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	8	0	8
Number of Local Offenders	68	8	76
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	76	8	84

Number of DOC Offenders that are:

Single Bunked	0
Double Bunked	
Triple Bunked	0
Total	8
Number of DOC Offenders that	at are in restricted housing:
Single Bunked	0

Double Bunked	0
Triple Bunked	0
Total	0

03/24/2021

Assaults (Please list monthly since the previous BJG monitoring visit	Assaults	(Please list monthl	y since the	previous BJG	monitoring visit.
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Month/Year	Off/Off	Off/Off w/sig inj	Offender/Staff	Off/Staff w/sig inj
APRIL 2020	2 non DOC	0	0	0
MAY 2020	2 non DOC	0	1 non DOC	0
JUNE 2020	4 non DOC	0	0	0
JULY 2020	2 non DOC	0	0	0
AUGUST 2020	3 non DOC	0	0	0
SEPTEMBER 2020	3 non DOC	0	0	0
OCTOBER 2020	0	0	0	0
NOVEMBER 2020	0	0	0	0
DECEMBER 2020	2 non DOC	0	0	0
JANUARY 2021	0	0	0	0
FEBRUARY 2021	2 non DOC	0	0	0
MARCH 2021	3 non DOC	0	0	0
APRIL 2021	1 non DOC	0	0	0
MAY 2021	2 non DOC	0	0	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
APRIL 2020	0	0	0	0	0
MAY 2020	0	0	0	0	0
JUNE 2020	0	0	0	0	0
JULY 2020	0	0	0	0	0
AUGUST 2020	0	0	0	0	0
SEPTEMBER 2020	0	0	0	0	0
OCTOBER 2020	0	0	0	0	0
NOVEMBER 2020	0	0	0	0	0
DECEMBER 2020	0	0	0	0	0
JANUARY 2021	0	0	0	0	0
FEBRUARY 2021	0	0	0	0	0
MARCH 2021	0	0	0	0	0
APRIL 2021	0	0	0	0	0
MAY 2021	0	0	0	0	0

GENERAL APPEARANCE/CLEANLINESS/COMMENTS OF THE FACILITY:

Living Area: Offenders are housed in a tier setting. DOC offenders are housed with parish offenders. The living areas appeared neat and clean at the time of inspection. The facility is not set up to separate DOC offenders from the parish offenders.

Dorms - Offenders are housed in a tier setting. DOC offenders are housed with parish offenders. All dorms appeared neat and clean at the time of inspection.

Cell Block - There is a cellblock tier with double bunks in each cell. There were several local offenders in the cellblock. All cells were neat and clean at the time of inspection.

Culinary/Dining: The kitchen was clean at the time of inspection. Food was stored in a dry storage, refrigerators, and freezers. Food items were not dated. Food items stored six inches off ground. There was a master inventory of all kitchen tools. However, the tools where not signed in or out by individual offenders. The kitchen tools are maintained in a standup drawer tool box without a shadow board. Recommended dating all food items once a box or pallet was opened.

Bathrooms: Bathrooms are part of the living areas. The showers, wash basins, and toilets are at the end of the tier. Bathrooms were clean and neat in appearance at the time of inspection. There was some

discoloration under the shower heads due to hard water. Also, <mark>a few of the knobs of the shower controls</mark> were broken.

Yard Areas: Recreation yard is fenced in with a single strand of razor wire along the top of the fence. Cameras are also installed within the perimeter of the yard and monitored at the command post of the facility. The offenders are allowed one hour every morning and afternoon, weather permitting.

Maintenance: Maintenance is performed by the policy jury.

COUNTS: Compliant

- How many formal counts are conducted each shift? Three
- How many counts are conducted each day? Six

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?

Employees that are supervising the offenders call their stick out count into the control center.

Does this process insure accountability and safe/secure operation of the facility? Yes, all offenders are visually counted by the escorting officer.

CLASSIFICATION SYSTEM: Compliant

Does the facility have any trustees that work outside the secure perimeter? Yes, however, none of them are DOC.

- lf yes,
- What is their classification process to determine who is eligible for trustee status? Offenders are reviewed by staff for status change. Facility follows Dept. Reg. in regards to this screening process. Facility is using a screening form provided by DOC. This is a three tier process.
- 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
APRIL 2020	7	10	70	0
MAY 2020	4	11	36	0
JUNE 2020	4	15	27	0
JULY 2020	4	10	40	0
AUGUST 2020	4	7	57	0
SEPTEMBER 2020	4	11	36	0
OCTOBER 2020	4	7	57	0
NOVEMBER 2020	4	13	31	0
DECEMBER 2020	4	13	31	0
JANUARY 2021	4	10	40	0
FEBRUARY 2021	4	11	36	0
MARCH 2021	4	9	44	0
APRIL 2021	4	11	36	0
MAY 2021	4	8	50	0

Rules and Discipline: Non-Compliant

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

lf yes,

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

BJG AUTOMATED MONTHLY REPORTING REVIEW: Compliant 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	

LIST ALL CERTIFIED TREATMENT PROGRAMS: None

LIST ALL OTHER OFFENDER PROGRAMS: None

GRIEVANCE PROCESS: Compliant

- Does grievance process include two levels of review? Yes
- Who are the designees at each level?
 1st level officer; 2nd level Asst. Warden; 3rd level Warden
- What is the specified time period for response at each level?
 24 hours

PREA COMPLIANCE:

- Is this facility required to be PREA compliant due to contract language? Yes
- Is this facility PREA compliant? Yes
 If yes, date compliance received: May 2019 (will have recertification this year)

 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?

OTHER:

<u>STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS</u>: All staff seemed content and were very knowledgeable in their job duties.

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE: All offenders spoken to were content and voiced no complaints.

<u>RECOMMENDATION</u>: At this time, I recommend recertification with continued Annual Monitoring.



Office of State Fire Marshal

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



John Bel Edwards GOVERNOR

Inspection Report

Report # CB-20-008570-1

H. "Butch" Browning FIRE MARSHAL

No Deficient/Cautionary Codes cited.

		Lo	catio	n Inform	atio	n	_	
Inspection Type	Compliance	Building Inspection				Inspection D	ate	2/1/2021 10:09:44 AM
Structure ID	212663	No. of Bull	No. of Buildings 3 Facility Code J33				J33	
Capacity	196	Year Built		2015		Construction	Туре	Type IIIA / (211)
Bullding/Trade Na	me			Addres	s		-	
ALLEN PARISH JA	JIL			7340 HV	VY 28	6, OBERLIN, L	A 70655	
	κ	0	wner	Informa	tion	-		
Owner Type		Name			Con	tact Phone	Conta	ct Email
Municipal Project		WARDEN MIKE MANUEL (3			(337	7) 639-4353 MMANUEL@ALLENPARISHS		UEL@ALLENPARISHSO.CO
Address								
7340 HWY. 26, OB	ERLIN, LA 708	55						
		T	enant	Informa	ation			
Name			Suite	e Number		Floor Num	ber	Square Footage
		0	ccup	ancy De	tails			
Оссирапсу Туре		Details						
Institutional		INSTITUTIONAL BUI		TYPE: G	ROU Y TY	P I-3 (DETEN PE: CONDITIO	TION/CO ON 4	RRECTION);
Storage		TYPE OF STORAGE	FACIL	ITY: GRO	DUP S	S-1 (MODERA	TE HAZA	RD)
			Co	mments	1			· · · · · · · · · · · · · · · · · · ·
NO APPARENT DE	FICIENCIES	NOTED AT TIME OF I	NSPE	CTION. C	URR	ENT POPULA	TION IS 5	59 INMATES.

		Inspecto	r Information	
Name:	Lyndon Neal	Badge Number: 697	Inspector Signature:	
		Person to whom requ	irements were explained	
Name:	Mike manual	Title: Warden	Signature:	

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

(800) 554 0006

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 R. S. 40: 1621 violation of an order constitutes a separate offense and may be punished as such at the discretion of court.



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Detention or Incarceration Notice of Violations

Routine/Renewal

Permit Number	Permit Name		
02-05-204	Allen Parish Public Safety Complex-224		
Name of Establishment	Owner Name		
Allen Parish Public Safety Complex-2	224		
Address	Date	Time	
7340 Highway 26 Oberlin, LA 70655	07/21/2021	10:20 AM	

LAC TITLE 51 PART XVIII

Category	Code Reference	Description of Violations
Building Requirement	101	3 - The walls are in disrepair. Tier A and Tier C- Peeling paint on shower wall and some areas of dome. Cell block walls are rusted (except cell 2,8,11) [Repeat]
Building Requirement	101	5 - The floors are not smooth and easily cleanable, water on floor by window in Tier A and one cell. [Repeat]
Building Requirement	101	6 - The ceilings are not in good repair. Tier A ceiling dry wall damage by window and around lighting in dome
Approved Plumbing	101	41 - Drinking fountain is in disrepair. Tier C

Comments:

Copy of report emailed to ljackson@allenparishso.com mmanuel@allenparishso.com Verbal acknowledgement of report provided by Michael Manuel, Warden

Tier A-one urinal not working, one urinal does not shut off, Two toilets are flushing slow (urinals are in excess of requirements)

total pop 72 (14 women 58 men)

Number Licensee 172	1 For	Number in Attendance 72	License Anniversary 06/30/2021
Sanitarian Name/Print Jared Reed	Phone # 337-639-4186	Sanitarian Signature	R.S.# 1198
The above mentioned violations v	vere called to my attention and v	vere explained to me in detail. I hereby agree to	
Correct Critical Violations by		Correct Non-Critical Violation	ns by
		Signature of Recipient	
Name/Title			

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Humphrey - LSA Emails 0003583.10



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Retail Food Notice of Violations

Routine/Renewal

Permit Number	Permit Name	Permit Name		
02-0094069-1	ALLEN PARISH PUBL	ALLEN PARISH PUBLIC SAFETY COMPLEX Prison Kitchen		
Name of Establishment ALLEN PARISH PUBLIC SAFETY COMPLEX		Owner Name LAW ENFORCEMENT	DISTRICT OF ALLEN PARISH	
Address		Date	Time	
7340 HIGHWAY 26 OBERLIN, LA 70655		12/16/2019	10:45 AM	

LAC TITLE 51 PART XXIII

Category	Code Reference	Description of Violations	
FOOD PROTECTION	1501	54 - 1501.1 - Food is not stored in a clean, covered containeropened bag of dry food in cooler	
UTENSILS/EQUIPMENT/SINGLE SERVICE	2513	74 - 2513 - The flow pressure of the hot water rinse is not between 15-25 pounds per square inch-pressure was over 25 during rinse cycle	
UTENSILS/EQUIPMENT/SINGLE SERVICE	2501	75 - 2501.2 - Non-food contact surfaces of equipment have an accumulation of dust, dirt, food residue and other debrisfryer exterior and behind service door	
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3703	106 - 3703.4 - Walls/ceilings or attached equipment are not in good repairhalf wall behind tilting skillet and flaking paint by preparation table	

Comments:

ljackson@allenparishso.com mreed@allenparishso.com mmanuel@allenparishso.com

NOTICE RS 40:31.38 (ACT 66)

RS 40:31.38 (ACT 66) authorizes the Louisiana Department of Health to charge a fee of \$150 to any permitted food establishment that fails to correct the necessary sanitary code violations to be in compliance at the time of its follow up inspection (1st reinspection). Re-inspections are required when there are five or more uncorrected non-critical violations and/or one or more uncorrected critical violations remaining at the conclusion of an inspection. The fee is only charged if the necessary violations are not corrected before the 2nd re-inspection and other subsequent re-inspections. Establishments can avoid this fee if the violations noted on the routine inspection report are corrected by, or during, the follow up inspection. If a fee is assessed, the \$150 fee is payable within 30 days' notice, and failure to pay shall result in revocation of the permit.

Sanitarian Name/Print Jared Reed	Phone # 337-639-4186	Sanitarian Signature Joneol Report	R.S. # 1198	
The above mentioned violations	were called to my attention and were ex	cplained to me in detail. I hereby agree to		
Correct Critical Violations by		Correct Non-Critical Violations by		
Name/Title Maryland Reed		Signature of Recipient	\mathcal{D}	

MEMORANDUM FOR:	Office of Detention Oversight Auditor(s)
FROM:	Michael Manuel Allen Parish Public Safety Complex Warden
SUBJECT:	Food Service Recent Annual Inspection

Statement of Fact

Due to the COVID-19 pandemic, Mr. Jared Reed, with State of Louisiana, Department of Health and Office of Public Health, has not been to the facility. He has telephone the Food Service Manager on several occasions to ensure Health & Safety are in compliance.

3/29/21

Michael Manuel, A.P.P.S.C. Warden

1.

		12/22/2020		
Facility: Allen Parish Prison	Date Conducted: June 11, 2021			
Ionitors: Jennifer Morgan, Chad Firmin, Wayne Millus				
	BASIC JAIL GUIDELINES (BJG)			
PART I - SAFETY				
A. PROTECTION FROM INJURY AND ILLNESS	1			
References: ACA CJS 1-1A-01, 1-1A-02, 1-1A-03, 1-1A-04, 1-1A-05, 1-1C-05, 1- 4A-03, 1-4A-04	Findings	Response		
I-A-001 Safety/Sanitation/Inspections The facility complies with all applicable laws and regulations of the State Sanitation Officer and the State Fire Marshal. The following inspections are implemented: •Weekly anatation inspections of all facility areas by a qualified departmental staff member. •Weekly inspections of all food service areas, including dining and food preparation areas and equipment. •Water temperature in housing areas is checked and recorded daily. •Comprehensive and thorough monthly inspections by a safety/sanitation specialist for compliance with sanitation, safety and fire prevention standards. •At least annual inspections by the State Sanitation Officer and the State Fire Marshal. Visual Inspection: completed inspection checklists and reports, documentation of corrective action. Inspection reports	Compliant - daily/weekly inspections being done. FM- 2/2021 DHH-9/2019 (due to covid)			
1-A-002 Disposal of Materials Disposal of liquid, solid, and hazardous material complies with applicable government regulations. Visual Inspection: trash disposal contract, completed inspection reports, include documentation that deficiencies were corrected	Compliant - contract for disposal of materials; remove sanitation policies and inspection reports from file as they don't pertain to this standard. Put Health and Saftey Sanitation general policy.			
I-A-003 Vermin and Pests Vermin and pests are controlled. There is a written and implemented plan for the control of vermin and pests.	Compliant - contract with Adam Pest Control			
Visual Inspection: pest control contracts, trash disposal contracts, inspection reports				
I-A-004 Housekeeping The facility is clean and in good repair. There is a written housekeeping plan that provides for the ongoing cleanliness and sanitation of the facility.	Compliant - plan in place for maintaining clean facillity.			
Visual Inspection: inspection reports, completed forms, documentation of correction of identified deficiencies				
1.4-005 Water Supply 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 facility complies with the requirements of the state health officer. There is a specific plan for addressing deficiencies, if any, that is approved by the state health officer. Visual Inspection: documentation of approval by DHH or local authority, plan for	Compliant - water provided and maintained by City of Oberlin. Remove DHH inspections and kitchen temperature sheets as they do not pertain to this standard.			
addressing deficiencies				
B. VEHICLE SAFETY				
References: Dept. Reg. C-03-003/OP-A-3	Findings	Response		
I-B-001 Offender Transport Escorted and unescorted absences of state offenders are governed by R.S. 15:811	Compliant - transportation log in file.			

Escorted and unescorted absences of state offenders are governed by R.S. 15:811 and 833 and DPS&C Department Regulation No. C-03-003 "Escorted Absences."	
Visual Inspection: documentation of staff training, documentation of medical, funeral, etc. foutside trips)	
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/P5-D-3, C-02-001/OP-A-5, C-02-010/OP-B-3, C-05-001/M-1-4	Findings	Response
I-C-001 Emergency Plan There is a written plan, submitted to the Secretary of DPS&C, that specify the procedures to be followed in situations that threaten facility security. Such situations include but are not limited to riots, hunger strikes, disturbances, taking of 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 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 in fnecssary. There are written procedures for significant unsual 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 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 800-803-8748 during 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 Reports, UORs," Category A, B and C.		
Visual Inspection: training records, facility logs, documentation of approval of plan, documentation of annual review, documentation of staff receipt, training on the plan		

	Findings	Response
I-C-002 Immediate Release of Offenders There is a means for the immediate release of inmates from locked areas in case of emergency and there are provisions for a backup system. The facility has exits that are properly positioned, are clear from obstruction, and are distinctly and permanently marked to ensure the timely evacuation of offenders and staff in the event of fire or other emergency. Visual Insection: facility records/loas	Compliant - system in place for emergency release.	
The Inspection: In	Compliant - Current Fire Marshall reports cites no deficiencies.	
I-C-004 Facility Furnishings Facility furnishings meet fire-safety-performance requirements. Visual Tospection: Specifications for all furnishings.	Compliant - furnishings meet fire safety performance requirements.	
I-C-005 Flammable, Caustic and Toxic Materials	Compliant - policy in place for control and use of flammable, toxic and caustic materials.	
reports. Documentation of incidents that involved FTC materials. Inventories.		
I-C-006 Operational Capacity The number of offenders present does not exceed the operational capacity as determined by the state fine marshal and state health officer. The state fine marshal will determine a capacity primarily based upon exiting capabilities. The state health officer will determine a capacity based upon the ratio of plumbing factures to offenders and square footage. The operational capacity will he the lower of these two figures.	Compliant - facility operates within capacity.	

PART II - SECURITY		
A. PROTECTION FROM HARM	,	
References: ACA CJS 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- F-47, B-02-001/JS-B-1, C-02-007/0P-C-3	Findings	Response
II-A-001 Control There is 24-hour monitoring and coordinating of the facility's security, life safety, and communications systems. Visual Inspection: facility records/logs, maintenance records, records of staff deployment	Compliant - facility has 24 hour camera monitoring system.	
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 annual review and updating, photos of perimeter controls	Compliant - perimeter is secure. No one can access the jail without being allowed entry through locked door.	
11-A-003 Sufficient Staff class of parameters of parameters of the second staffing plan. This 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 BIG.	Compliant - copy of shift logs in file showing adequate staff.	
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.	Compliant - female staff members are on each shift.	
Visual Inspection: records of staff deployment, facility logs 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 - Offenders are not allowed to have control over one another.	
Visual Inspection: writen policy and procedure IT-A-006 Staff Log Correctional staff maintain a permanent log and prepares shift reports that record routine information, emergency stuations 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. Admission and release of offenders; 4. Shift activities; 5. Entry/ext of all visitors including legal/medical; 6. Unusual occurrences or facility emergencies (including but not limited to major and minor disturbances such as riots, hostage situations, fires, escapes, deaths, for reporting requirements to DPSAC Visual Inspection: copies of log book, records of staff deployment	Compliant - Staff logs in file, shift activities, incident reports completed on occurrances at facility.	

	Findings	Response
II-A-007 Counts	Compliant - three formal counts are conducted each	Response
The facility has a system for physically counting offenders. At least one formal	shift for a total of six counts daily.	
count is conducted for each shift, with no less than 3 counts daily. The system		
includes strict accountability for offenders assigned to work and other approved		
temporary absences Visual Inspection: completed forms, facility records/logs.		
II-A-008 Offender Population Management System	Compliant - photos, fingerprints, Bill of information in	
There is an offender population management process that includes records on the	files.	
admission, processing, and release of offenders. Written policy, procedure, and	mes.	
practice provide for offender case record management that includes at a minimum,		
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.		
1. Master prison form;		
2. Bill of Information and Court Minutes OR Uniform Commitment Order;		
3. One photograph;		
Reports of disciplinary actions, grievances, incidents, or crimes committed while in anticident.	1	
custody; 5. Records of program participation, work assignments, classification actions:		
 Records of 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).	10 (A ²)	
In addition to the maintenance of the above information, the following shall be		
collected and forwarded to the DPS&C Pre-Class Coordinator either by fax to 225-		
342-3759 or email to DOC-HQ_Supplemental@la.gov.		
1. Master prison form;		
2. Fingerprints: one FBI print card from AFIS;		
 One photograph; 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 Acknowledoment Form (cash and property receipts).		
Visual Inspection: completed forms, reports, offender record		
II-A-009 Reception - Legal Commitment and Medical Service Prior to accepting custody of an offender, staff determine that the offender is legally	Compliant - legal commitment is determined by DOC	
committed to the facility, and that the offender is not in need of immediate medical	Headquarters prior to transfer to facility.	
attention.		
Visual Inspection: Completed Admission forms, facility logs.		
II-A-010 Admissions	Compliant - need to place copy of admission policy in	
Admission processes for a newly admitted offender include, but are not limited to:	file, Remove Tool and Key Control policy.	
 Searching of the offender and personal property; 	inel itemore roor and ney control poneji	
 Inventorying and providing secure storage of personal property; 		
 Providing an itemized receipt for personal property; 		
 Recording of 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.		
	-	
Visual Inspection: intake and admission forms, screening forms, inventory form, receipt form		
II-A-011 Out of State Offenders	Compliant - facility does not house out of state	
The names of any out of state offender (federal or state) to be housed at a local ja		
or privately managed facility shall be submitted to the Chief of Operations prior to	L.	
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		
(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		

Humphrey - LSA Emails 0003583.15

	Findings	Response
II-A-012 Classification System	Compliant - Offenders are assigned housing and	Response
Written policy, procedure, and practice provide for a written offender classification	appropriate custody levels upon intake.	
plan that includes custody required and assignment to appropriate housing.	appropriate custody revers upon intake.	
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 - facility does not house youthful offenders.	
Offenders subject to juvenile jurisdiction are housed in adult facilities only under the	1	
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, 		
 Supervision and programming needs or the juveniles to ensure their safety, security, and education; 		
Classification and housing plans;		
Appropriately trained staff.		
CAS 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 offender are housed on	
Male and female offenders must be housed in separate rooms/cells with reasonable	separate tiers out of sight and sound of each other.	
sight and sound separation.	separate tiels out or sight and sound of each other.	
Visual Inspection: offender housing records, offender classification records, diagram o	d	
facility showing male/female housing areas		
II-A-016 Photo Identification	Compliant - offenders are issued IDs.	
The facility shall provide each DPS&C offender with photo identification, which the		
offender shall carry/wear on their person at all times.	-	
Visual Inspection: Offender identification card/wristband.		
II-A-017 Drug Free Workplace	Compliant - policy in place and drug tests are conducted	
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 - policy in place and drug tests are conducted	
Written policy, procedure, and practice provide for alcohol/drug testing, both		
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 - transfers are requested through LA	
All transfers of DPS&C offenders to other than DPS&C facilities shall be reported to	DPS&C.	
the QAS, at least one day prior to all scheduled transfers and within one business	Drac.	
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 LocalJailTranfers@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 logs, documentation of transfers of DPS&C offenders to othe	r	
than DPS&C facilities	Press Prest and shares and the state	
II-A-020 Frequency of Cell Checks	Compliant - cell checks are performed hourly.	
Written policy, procedure, and practice provide secure, safe housing by establishing the fragment of call checks in all callblack areas not to average four (4) hours. Stafe		
the frequency of cell checks in all cellblock areas not to exceed four (4) hours. Staf		
will document these checks in their staff logs. Visual Inspection: Facility logs, documentation of frequency of cell checks.		
and a second sec		
B. USE OF PHYSICAL FORCE		
References: ACA CJS 1-2B-01, 1-2B-02, 1-2B-03, 1-2B-05, 1-2B-06, 1-4D-12,		The second second second second second second
Dept. Regs. B-06-001 HC-08/IS-D-HCP33, HC-29/IS-D-HCP40, C-01-008/OP-A-	Findings	Response
19, C-02-006/OP-A-16, C-03-003/OP-A-3	Compliant Has of Fanny when the	
II-B-001 Use of Force	Compliant - Use of Force, when necessary, is	
The use of force is restricted to instances of justifiable self-defense, protection of others, protection of accessing and then only as a last	documented in occurance reports.	
others, protection of property, and prevention of escapes, and then only as a last 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		
Operations within three business days Visual Inspection: facility records, logs, incident reports, training records	-	
Visual Inspection: facility records, logs, incident reports, training records II-B-002 Use of Restraints	Compliant - Use of Restraints is never used as a form	
Written policy, procedure, and practice provide that mechanical restraints, such as	of punishment. They are used when necessary for the	
handcuffs and leg irons, are never applied as punishment. There are defined	security and safety of the facility.	
circumstances under which supervisory approval is needed prior to application.	security and safety of the facility.	
Restraints on offenders for medical and psychiatric purposes are only applied in		
accordance with policies and procedures approved by the health authority,		
including:		

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 alternative;
 Monatoring procedures;
 Length of time restraints are to be applied;
 obcurrentation of efforts for less restrictive treatment alternatives;
 An after incident review.
 Visual Inspection: facility records, logs

BJG Compliance

	Findings	Response
11-8-002-1 Use of Restraints for Pregnant Offenders Written policy, procedure, and practice complies with the following requirements: Restraints During Pregnancy-Related Transportation •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 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.	Compliant - facility does not house pregnant offenders.	
Visual Inspection: facility records, logs		
II-0-003 Use of Firearms The use of firearms complies with the following requirements. •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 studions, 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 freasme. Visual Inspection: training records, safety regulation and inspection reports, photos of equipment used for unloading and reloading	Compliant - Firearms training is conducted annually.	
II-B-004 Written Reports 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 force 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	Compliant - reports are submitted in a timely manner.	
and an approximation of the second seco		
C. CONTRABAND/SEARCHES	1	
References: ACA CJS 1-2C-01, 1-2C-04, Dept. Reg. C-02-003/OP-A-8	Findings	Response
II-C-001 Procedures for Searches Written policy, procedure and practice guide searches of facilities and offenders to control contraband. Manual or instrument inspection of body cavities is conducted only when there is reasonable belief that the offender is concealing contraband and when authorized by the facility administrator or designee. Health care personnel will conduct manual or instrument inspections in private.	Compliant - facility conducts random searches.	

Visual Inspection: observation, facility records and logs, offender and staff interviews

D. ACCESS TO KEYS, TOOLS, UTENSILS		
References: ACA CJS 1-2D-01	Findings	Response
	Compliant - tools and utensils are inventoried and signed in/out upon use. Facility uses a chit system instead of keys. Letters in file need to be signed. Inventory and sign out sheets need to be added to file for 2019, 2020 and 2021.	
Visual Inspection: documentation of perpetual inventories		

Visual Inspection: documentation of perpetual inventories

PART III - ORDER		
A. OFFENDER DISCIPLINE		
References: ACA CJS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. B- 05-001/0P-C-1	Findings	Response
III-A-001 Rules and Discipline Prior to being placed in the general population, each offender is provided with an orientation that includes facility rules and regulations, including access to medical care and the process for applying for restoration of good time. The facility shall follow and provide the DPS&C "Disciplinary Rules and Procedures for Adult Offenders", to the offender population. •If the Sheriff or local jail administrator believes that a loss of good time is appropriate, then the incident shall be fully documented and the offender transferred to the DPS&C for a disciplinary hearing to ensure due process in accordance with La. R.S. 15:571.4. The offender must sign and date a statement acknowledging receipt of this information. Visual Inspection: offender records, disciplinary records, receipt of disciplinary rules, documentation of orientation	Compliant - offenders are given a copy of the LA DPS&C Disciplinary Rules and Procedures for Adult Offenders upon intake. Recommend changing intake form to state LA DPS&C Disciplinary Rules and Procedures for Adult Offenders	

PART IV - CARE	1	
A. FOOD SERVICES		
References: ACA CJA 1-4A-01, 1-4A-02, 1-4A-04,1-4A-06, Dept. Reg. C-06-001/IS-C-1	Findings	Response
IV-A-001 Food Storage Facilities There are sanitary facilities for the storage of all foods that comply with applicable state and/or federal guidelines. Visual Inspection: DHI inspection reports, internal inspection reports	Compliant - Recommend dating photos in file and removing the letters and inspections as they are not relevant to this standard.	
IV-A-002 Food Service Facilities Toilet and hand basin facilities are available to food service personnel in the food preparation area. Visual Trapection: DHH inspection reports, photos	Compliant - toilet and hand basin facilities in food service area are in good working order at the time of this inspection.	
IV-A-003 Food/Dietary Allowances The facility's dietary allowances are reviewed at least annually by a qualified nutritionis tor 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 utersil(s) for each hot meal.	Non-Compliant - recommend adding dated signed menus for 2020 and 2021.	
Visual Inspection: annual reviews, nutritionist or dietician qualifications, documentation of at least annual review and quarterly menu evaluations IV-A-004 Records of Meals Served Written policy, procedure, and practice require that accurate records are maintained of all meals served.	Compliant - Weekly menus are included in file.	
Visual Traspection: facility logs IV-A-005 Denial of Food as Discipline Prohibited Written policy, procedure, and practice preclude the denial of food as a disciplinary measure. Visual Traspection: facility logs	Compliant - policy in place against denial of food for diciplianary purposes, however, facility has had no disciplinary reports for DOC offenders.	
Viva-RoOG Food Service Management Written policy, procedure, and practice require that three meals (including two hot 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. Visual Inspection: records of meals served and times served, facility logs	Compliant - recommend removing temperature logs and adding dated menus for 2019, 2020 and 2021 to file.	
IV-A-007 Therapeutic/Special Diets Therapeutic and/or special diets are provided as prescribed by appropriate clinicians 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. Visual Inspection: health records, diet records or forms, documentation of warden's approval prescipations diet.	Non-Compliant - recommend dating menus and adding documentation of therapeutic/special menus for 2020 and 2021.	
INV-A-008 Health Protection for Food Service 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 uterisis. 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 tollet facilities.	Compliant - hygiene and visual inspections done daily. TB tests done annually.	

BJG Compliance

B. HYGIENE 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 - Tollets and Washbasins Offenders have access to tollets and washbasins with temperature-controlled hot and cold running water 24 hours per day. Offenders are able to use tollet facilities without staff assistance when they are confined in their cells/sleeping areas.	Compliant - there are toilets and washbasins in each cell and at the end of each tier with 24 hour access.	2
Visual Inspection: maintenance records or reports, inspections, documentation of periodic measurement of water temperature, offender grievances		
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 to 120 degrees Fahrenheit.	Compliant - cellblock offenders are escorted to shower daily. General Population offender have 24 hour access to showers in tier. Recommend updating pictures as the paint is peeling in the pictures in the file. Paint was not peeling at the time of this inspection.	
/isual Inspection: maintenance records or reports, inspections		
IV-B-003 Clothing The facility has an obligation to provide adequate institutional clothing 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 - Offenders are given one jumpsuit upon intake and allowed to exchange them daily.	
Visual Inspection: documentation of clothing issue, documentation of cleaning 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 - linens are issued at booking and exchanged twice weekly.	
Visual Inspection: documentation of issue and exchange		
IV-B-005 Personal Hygiene Articles and services necessary for maintaining personal hygiene shall be available to all offenders including items specifically needed for females. Such items shall be provided to any offender (male or female) who is indigent. Each offender shall be provided scap, toilet paper, toothbrush, toothpaste and shaving equipment.	Compliant - hygiene items are given at booking and upon request after that.	
Visual Inspection: documentation that items are provided, list of items available		
C. CONTINUUM OF HEALTH CARE SERVICES		
References: ACA CIS 1-2A-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-13, 1-4C-15, 1-4D-01, 1-4D-03, 1-4D-04, 1-4D- 05, Dept. Regs. B-06-001/IS-D-2, HC-01/IS-D-HP13, HC-02/IS-D-HCP14, HC- 05/IS-D-HCP20, HC-06A/IS-D-HCP41, HC-068/IS-D-HCP42, HC-06C/IS-D- HCP46, HC-08/IS-D-HCP33, HC-09A/IS-D-HCP22, HC-11/IS-D-HCP34, HC-13/IS D-HCP16, HC-08/IS-D-HCP33, HC-038/IS-D-HCP20, B-06-003/AM-C-4, C-02- 008/0P-C-9, C-05-001/AM-I-4	Findings	Response
IV-C-001 Access to Care/Clinical Services At the time of admission/intake, all offenders are informed about procedures to access health services, including any copary 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.	Compliant - recommend removing extra parts of policy and orientation manual. Just place what is needed in file. Highlight pertinent information. Update license information (see file IV-C-003). Remove all documentation except 2019, 2020 and 2021.	
 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 providence health care particles or ballh services to these services that health and providence health care particles or ballh services to these services that health and providence health care particles are ballhower or the services that health are providence health care particles are ballhower or the services that health are providence health care particles are ballhower or the services that health are providence health are providence to the services that health are providence health are providence health are providence to the services that health are providence health are providence health are providence to the services that health are providence health are providence to the services that health are providence health are providence health are providence to the services that health are providence health are providence health are providence to the services that health are providence health are providence health are providence to the services that health are providence health are providence health are providence to the services the services that health are providence health are providence to the services the service to the services the services the services the services the services the service to the services the services the service to the services the service to the services the services the service to the service	6	

C. CONTINUUM OF HEALTH CARE SERVICES		
References: ACA CJS 1-2A-14, 1-4C-01, 1-4C-03, 1-4C-04, 1-4C-06, 1-4C-07, 1- 4C-08, 1-4C-09, 1-4C-13, 1-4C-15, 1-4D-01, 1-4D-03, 1-4D-04, 1-4D- 06, Dept. Regs. B-06-001/JS-D-2, HC-01/JS-D-HD-13, HC-02/JS-D-HCP14, HC- 05/JS-D-HCP20, HC-06A/JS-D-HCP41, HC-06B/JS-D-HCP42, HC-06C/JS-D- HCP46, HC-08/JS-D-HCP33, HC-09A/JS-D-HCP22, HC-11/JS-D-HCP34, HC-13/JS D-HCP16, HC-07/JS-D-HCP7, HC-38/JS-D-HCP20, B-06-003/AM-C-4, C-02- 008/OP-C-9, C-05-001/AM-I-4	Findings	Response
IV-C-001 Access to Care/Clinical Services At the time of admission/intake, all offenders are informed about procedures to 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 authority who shall be a physician or a licensed or registered health care authority who shall be a physician or a licensed or registered health care provide 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 ta a dental specialist, including an oral surgeon. Specially non primary clinical searches are croared by DESC. The converte chall be cubretide by the In accordance with RS. TSB31, DPSSC offenders may be assessed a co-payment for receiving medical or dental treatment, including prescription or nonprescription drugs. The co-payment fee schedule shall be approved by the DPS&C. Such fee schedule for DPS&C offenders housed in local jail facilities shall not exceed the DPS&C offenders housed in local jail facilities shall not exceed the DPS&C offenders may be required to the Scretary of the DPS&C. •DPS&C offenders may be required to the a claim with his/her private medical or health care insurer, or any public medical assistance program, under which he/she is	Compliant - recommend removing extra parts of policy and orientation manual. Just place what is needed in file. Highlight pertinent information. Update license information (see file IV-C-003). Remove all documentation except 2019, 2020 and 2021.	
the grevance 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.	Compliant - recommend keeping photos and adding something showing who the HCA is and whay supply you have on hand. Have policy signed by HCA.	
Visual Inspection: Photos		

	Findings	Response
IV-C-003 Provision of Treatment 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 liness. Writen 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	Compliant - need all providers licenses and standing orders.	
records, sick call request form, a health record, clinical provider schedules, current credentials/licensure		
IV-C-004 Personnel Qualifications/Credentials 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 accordance with POST training. Written policy, procedure and practice approved by the health authority require dispensing and administering prescribed medications by qualified personnel.	Compliant - need all providers licenses and documentation of pill call training (see IV-C-010)	
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 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-call 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.	Compliant - Only need current year agreements, as you could make them primary documentation. Need to add something in policy in regards to acess to emergency medical services not being the sole province of correctional or other non-medical personnel.	
Visual Inspection: designated facility, provider lists, transportation logs IV-C-006 Health Screens	Compliant - Need completed medical intake form, not	
Written policy, procedure and practice require that all DPS&C offenders receive a 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 (V-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:	booking information. Ensure that all bullets of standard are in policy and on form.	
Current medical, dental or behavioral health problems and communicable diseases; Current treatment plan; Current medications, including psychotropic; History of hospitalization; Suicidal risk assessment; G. Use of alcohol or other drugs including need for possible detoxification; Possibility of pregnancy; R. Observation of the followino: a. Appearance and behavior; b. Body detormities and other physical abnormalities;		
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 would impede the offender's access to programs or services. Offenders identified with such an impairment or disability shall be transferred to the DPS&C for further 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	Compliant - Colling door not house program	
IV-C-006-1 Pregnancy Management Written policy, procedure and practice require that all pregnant offenders have access to obstetrical services by a qualified provider. The local jail 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.	Compliant - facility does not house pregnant offenders.	
Visual Inspection: written policy and procedure, health record where pregnant offender received obstetrical services by a qualified provider, notification to DPS&C when DPS&C offender is pregnant, transfer logs		

	Findings	Response
IV-C-007 Communicable Disease and Infection Control Program Communicable diseases are managed in accordance with a written plan approved by the health authority in consultation with local public health officials. The plan 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 handing biohazardous wase and decontainnaiting 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	Compliant - TB testing done withing 14 days of arrival. Recommend placing something in policy that refers to handeling biohazards.	
IV-C-008 Annual TB Testing Written policy, procedure and practice require annual testing or medical evaluation 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 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	Compliant - need to add verbage to policy in regards to annual testing.	
IV-C-009 Chronic Care Program Offenders with chronic conditions, such as diabetes, hypertension and mental illness 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 the proper management of pharmaceuticals. Offenders are provided medication as prescribed. Visual Inspection: health records, completed medication administration forms,	Compliant - policy needs to state who HCA is. Recommend replacing all documentation with inventory checks for three years.	
Inventories IV-C-011 First Aid Kits 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.	Compliant - leave policy in file replace documentation with diagram or photos showing where they are located.	
Visual Inspection: location of first aid kits within the facility		
IV-C-012 Access to Sick Call There is a process for all offenders to initiate requests for health services on a daily 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 or certified as appropriate to their respective professional discipline and who practice only as authorized by their license, registration or certification. Sick call shall be available to all offenders as follows: •Facilities with 100 to 300 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	Compliant - recommend placing sick call requests in file. Remove S2 and S3.	
IV-C-013 Infirmary Care	Compliant - recommend removing licenses for anyone	
If infimary care is provided onsite, it complies with applicable state regulations and local licensing requirements. Provision include 24 hour emergency on-call consultation with a physician, dentist and mental health professional. Written 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 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 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-B		
TU-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, Compassionate Release) 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	Compliant - facility has not had any medical releases.	
United TV-C-014 Suicide Prevention and Intervention There is a written suicide prevention and intervention program that is approved by a behavioral health professional who meets the educational and license/certification criteria specified by his/her respective professional discipline. The program must include specific procedures for handling intake, screening, identifying and continually supervising the suicide-prone offender. Observation of the suicide-prone offender will vary fram continual observation to intervals no greater than fifteen (15) minutes. All staff with responsibility for offender supervision are trained answell-his indemendation of the oregan.	Compliant - recommend removing one of the policies from the file. Only need current statement of fact. In P4, just need 3 years documentation. Also, need to state times on watch.	

BJG Compliance

Humphrey - LSA Emails 0003583.21

	Findings	Response
IV-C-015 Offender Deaths 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 BIG 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 catanotify@corrections.state.la.us or via fax to 225-342-3349).	Compliant - policy in place in regards to notification and documentation of deaths.	
Visual Inspection: notification, reporting requirements, report to DPS&C		
IV-C-016 Notification 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 iil 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 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. -Based on extenuating circumstances the Warden or designee may extend the definition of an offender's immediate family member. Visual Inspection: notification records	Compliant - Only need your current statement of fact. Remove all other documentation. You can state all three years on current statement of fact, if applicable.	
D. HEALTH SERVICES STAFF References: ACA CJS 1-4D-02, 1-4D-04, 1-4D-05, 1-4D-07, 1-4D-08, 1-4D-09, 1- 4D-10, 1-4D-17, 1-4D-18, Dept. Regs. B-06-001/HC-24/ISD-HCP44, HC-25/IS-D HCP9. HC-26/IS-D-HCP10. HC-33/AM-D-5		Response
IV-D-001 Health Care Quarterly Meetings The health authority meets with the facility administrator at least quarterly. Visual Inspection: documentation of meetings	Compliant - healthcare meetings are held monthly.	
IV-D-002 Research 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.	Compliant - policy in place prohibiting offender participation in experimental research.	
Visual Inspection: written policy and procedure	Compliant, ich descriptions for UC staff are namened	
IV-D-003 Health Care Personnel/Job Descriptions Health care staff work in accordance with professional specific job descriptions approved by the health authority.	Compliant - job descriptions for HC staff are approved by HC authority.	
Visual Inspection: job descriptions IV-D-004 Confidentiality of Health Information Information about an offender's health status is confidential. Nonmedical staff only have access to specific medical information on a "need to know" basis in order to preserve the health and safety of the specific offender, other offenders, volunteers, visitors, or correctional staff. An individual health record is maintained for all offenders in accordance with policies 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 facility, the offender's medical record is transferred as well. Visual Inspection: health records, completed consent forms, completed refusal forms		
IV-D-005 Informed Consent 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.	Compliant - make sure forms used for documentation are complete.	
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 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.	Compliant - emergency response training done annually.	
Visual Inspection: verification of training, records and certificates IV-D-007 Internal Review/Quality Assurance The health authority approves policies and procedures for identifying and evaluating major risk management events related to offender health care, including offender deaths, preventable adverse outcomes and serious medication errors.	Compliant - place healthcare policy in file showing show HCA is.	
Visual Inspection: evaluation of major risk management events		

Humphrey - LSA Emails 0003583.22

References: ACA CIS 1-40-13, 1-40-15, 1-40-16, Dept. Regs. A-04-002/PS-D-3, Findings V-E-001 Alleged and Substantiated Sexual Assaults Compliant - need to add verbage in relation to standard, remove blank forms if doing statement of esponse, reporting and investigation of alleged and substantiated sexual assaults. Prevention/intervention; Self-protection; Self-protection; Self-protection; Reporting sexual abuse/assault; Treatment and counseling. Predention is conducted and documented whenever a sexual assaults or threat involves a DPS&C iffender, the facility shall report, the incident to DPS&C immediately, as outlined in 301 G-C-001. Nn investigation of sexual assault are referred under appropriate security provisions to a oppropriate DPS&C Regional Team Leader on Form C-01-022-E. Reference. Self-protection;	
Written policy, procedure and practice provide for the prevention, detection, esponse, reporting and investigation of alleged and substantiated sexual assaults. PREX) Information provided to offenders about sexual abuse/assault includes: Self-protection; Self-protection; Neeporting 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 31G 1-C-001. In investigation is conducted and documented whenever a sexual assault or threat s reported. Investigative reports, that include DPS&C offenders, shall be submitted o appropriate DPS&C Regional Team Leader on Form C-01-022-E. Actims of sexual assault are referred under appropriate security provisions to a	Response
/isual Inspection: documentation of reports to DPS&C, investigative reports	r

PART V - OFFENDER PROGRAMS AND ACTIVITY	2	
A. OFFENDER OPPORTUNITIES FOR IMPROVEMENT		
References: ACA CIS 1-5A-01, Dept. Reg. B-08-004/PS-F-1	Findings	Response
V-A-001 Volunteers/Registration There is an official registration and identification system for volunteers.	Compliant - policy in place in relation volunteers	
Visual Inspection: activity schedules, facility logs		
V-A-002 Volunteer Services	Compliant - Schedule of volunteer services is available	
A current schedule of volunteer services is available to all offenders and is posted in appropriate areas of the facility.	to offenders when applicable.	
Visual Inspection: activity schedules, facility logs		
V-A-033 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 jail 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.	Compliant - place a letter in file in regards to offenders being transferred when requesting programming, since it is not offered at your facility. Also, add a copy of the policy, if you have one.	
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-eligible 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.	Compliant - place a letter in file in regards to offenders being transferred when requesting education, since it is not offered at your facility. Also, add a copy of the policy, if you have one.	
Visual Inspection: activity schedules, facility logs		

Facility - Date

BJG Compliance

Intervence Compliant - packet in regards to releasing Compliant - packet in regards to releasing Proceeding of the basis	B. PROGRAMS	1	
Obj: PS-12, Re2-S01/PS-12, FS-22, S02/PS-12, SC2 S02/PS-12	B. PROGRAMS References: ACA CJS 1-4C-02, 1-58-01, 1-58-01-1, 1-58-01-2, 1-58-01-3, 1-58-		
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Visual Inspection: DPS&C monitoring report. N/A - If you have transferred anyone to TWP, you V-B-007 Participation in Transitional Work Programs N/A - If you have transferred anyone to TWP, you Participation in transitional work programs by state offenders shall comply with R.S. N/A - If you have transferred anyone to TWP, you System 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. N/A - If you have transfer order in file. Visual Inspection: approval for participation by the Secretary of DPS&C Compliant - medium custody cannot be trustee. May want to add regulation or verbage with trustee criteria. Visual Inspection: offender voluntary participation, sheriff's approval of work program Compliant - medium custody cannot be trustee. May want to add regulation or verbage with trustee			
V-B-007 Participation in Transitional Work Programs Participation in transitional work programs by state offenders shall comply with RS. Si211 and DPSSC Department Regulation No. B-02-001 "Assignment and Transfer of Offenders." Specific approval by the Secretary of DPSSC 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 DPSSC Visual Inspection: approval for participation by the Secretary of DPSSC Visual Inspection: approval for participation by the Secretary of DPSSC Visual Inspection: offender work program Participation in offender work program Visual Inspection: offender vork program Visual Inspection: offender vork program Visual Inspection: offender voluntary participation, sheriff's approval of work program Visual Inspection: offender voluntary participation, sheriff's approval of work program Visual Inspection: offender voluntary participation, sheriff's approval of work program Visual Inspection: offender voluntary participation, sheriff's approval of work program Visual Inspection: offender voluntary participation work pr	Dr Saux		
Participation in transitional work programs by state offenders shall comply with R.S. 15:711 and DPSKC Department Regulation No. B-02-001 "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 Participation in offender work programs by state offenders shall comply with the provision of R.S. 15:708 (parish jails) or R.S. 15:832 (police maintenance). Visual Inspection: offender voluntary participation, sheriff's approval of work program	Visual Inspection: DPS&C monitoring report		
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V-B-008 Offender Work Program Participation in offender work programs by state offenders shall comply with the provision of R.S. 15:708 (parsh jails) or R.S. 15:832 (police maintenance). Visual Inspection: offender voluntary participation, sheriff's approval of work program	for Offender Transitional Work Programs.		
V-B-008 Offender Work Program Participation in offender work programs by state offenders shall comply with the provision of R.S. 15:708 (parsh jails) or R.S. 15:832 (police maintenance). Visual Inspection: offender voluntary participation, sheriff's approval of work program	Visual Inspection: approval for participation by the Secretary of DPS&C		
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provision of R.S. 15:708 (parish jails) or R.S. 15:832 (police maintenance). criteria. Visual Inspection: offender voluntary participation, sheriff's approval of work program	Participation in offender work programs by state offenders shall comply with the		
Visual Inspection: offender voluntary participation, sheriff's approval of work program	provision of R.S. 15:708 (parish jails) or R.S. 15:832 (police maintenance).		
Transformation for the second se	Visual Inspection: offender voluntary participation, sheriff's approval of work program		
	request, facility logs		

BJG Compliance

	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. Visual Inspection: approval of Chief of Operations	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.	Compliant - no propsed expansions at this time.	
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 - Offenders are allowed to send and receive mail. Proper notification is given to offenders.	
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 - Offenders are allowed to receive packages. Proper notification is given to offenders.	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail		

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.	Compliant - if you have any offenders who transferred out for this reason, place transfer order in file.	
Visual Inspection: facility log, activity schedule		
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 Medicaid card; 3. Community service referrals.	Compliant - Need documentation of release identification (SS card, Birth Certificate, State ID)	
Visual Inspection: documentation of employment opportunity, documentation of two forms of identification, residential plan		
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 LOCALIama@corrections.state.la.us or by fax to 225-342-0929 within the first two weeks of the month proceeding the scheduled hearing.	Compliant - need completed LARNA in file. Removed blank forms.	
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 - Leave note, remove all other documentation.	
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 CDS 1-6A-02, 1-6A-03, 1-6A-05, Dept. Reg. C-01-004/0P-C-10

 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 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 innute shall be transferred to the DFS&C.
 Compliant - policy in place in regards to access to course.

 Vitaul Inspection: facility log
 Compliant - policy in place in regards to access to course.
 Compliant - policy in place in regards to access to course.

 Vitaul Inspection: facility log
 Compliant - policy in place in regards to access to counsel.
 Compliant - policy in place in regards to access to counsel.

 Vitaul regretion: facility log, incident question regretion regards to protection from Abuse
 Compliant - policy in place in regards to protection from abuse, corporal punishment, personal injury, disease, property damage, or harassment.

 Visual Inspection: facility log, incident reports, staff training records
 Compliant - policy in place in regards to protection from abuse, corporal punishment, jury, disease, property damage and harrassment.

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.

Visual Inspection: personnel records, training records

Findings	Response
Compliant - policy in place against discrimination of any kind.	
Compliant - Grievance process consists of three levels of review.	
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Findings	Response
Compliant - staff training done upon hire and annually.	
	Compliant - policy in place against discrimination of any kind. Compliant - Grievance process consists of three levels of review. Findings Compliant - staff training done upon hire and annually.

Compliant - weapons training done upon hire and annually.

Facility - Date

BJG Compliance

Humphrey - LSA Emails 0003583.26



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B. FACILITY ADMINISTRATION	Endingo	Pomenco
References: ACA CJS 1-40-02, 1-70-01, 1-70-03, Dept. Reg. C-05-001/AH-I-4 VII-B-001 Authority	Findings	Response
There is a statue or constitutional provision authorizing the establishment of the	Compliant - facility operates under the authority of the	
local jail facility or its parent agency.	Allen Parish Sheriff's Office.	
Visual Inspection:		
VII-B-002 Legal Assistance for Staff	Compliant - staff is provided legal assistance as	
Written policy, procedure and practice specify the circumstances and methods for	needed where it pertains to their job duties.	
the facility administrator and other staff to obtain legal assistance as needed in the	· · · · · · · · · · · · · · · · · · ·	
performance of their duties.		
Vicual Inspection: personnel or preining records		
VII-B-003 Independent Financial Audit	Compliant - Independent Financial Audits done	
Written policy, procedure and practice provide for an independent financial audit of	annually.	
the facility. This audit is conducted annually or as stipulated by statute or		
regulation.		
Visual Inspection: annual audit		
VII-B-004 Facility Insurance	Compliant - Facility has adequate insurance coverage.	
Written policy, procedure and practice provide for comprehensive facility insurance		
coverage.		
Visual Inspection: insurance policy		
VII-B-005 Offender Funds	Compliant - offender funds are controlled by GAAP.	
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 - facility operates under the authority of the	
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-B-007 Annual Compliance Statement	Compliant - Annual Compliance Statements are	
Written policy, procedure and practice demonstrate that the facility shall submit an	submitted in a timely manner.	
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:		
1. A copy of the current Fire Marshal Report;		
2. A copy of the current Health Inspection Report; 3. Any proposed or projected expansions;]	
14. Any proposed or projected expansions; 14. Any rehabilitative programs that are available;		
 Summary of any re-entry initiatives/programs implemented by the facility. 		
Visual Inspection: annual statement		
VII-8-008 Monthly Reporting	Compliant - Monthly reports are submitted in a timely	
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	manner.	
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.		
Visual Inspection: monthly report		
VII-B-009 Staff Meetings	Compliant - Staff meetings held monthly.	
Written policy, procedure and practice provide for regular meetings between the		
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		
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C. REASONABLE ACCOMMODATION	L	

References: ACA CIS 1-7E-01	Findings	Response
VUI-C-001 Facility Equipment/Reasonable Accommodation 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.	Compliant - facility is handicap accessible.	
Visual Impaction:	L	

INSPECTION REPORTS		
DEPARTMENT	Deficiencies	Corrective Action Taken
Fire Marshall	No apparent dificiencies noted at the time of inspection.	
Date of Current Report: 02/01/2021 Maximum Capacity: 196		
DHH - Health		
Date of Current Report: 12/16/2019		

	Food storage; water pressure; non-food contact surfaces of equiptment dirty; walls not in good repair. The inspector has not been out since 2019 due to	
Date of Current Report: 12/16/2019	covid.	

Facility - Date

BJG Compliance