

Department of Public Safety & Corrections' State of Louisiana

JOHN BEL EDWARDS
GOVERNOR



JAMES M. LE BLANC SECRETARY

<u>MEMORANDUM</u>

TO:

The Honorable James Pohlmann

herff of St. Bernard Parish

FROM:

James M. Le Blanc

Secretary

DATE:

August 20, 2021

RE:

St. Bernard Parish Prison

Please see the attached monitoring report regarding the Basic Jail Guidelines (BJG) annual inspection that was conducted on December 4, 2020. I am recertifying this facility in compliance with the "Basic Jail Guidelines" with annual monitoring.

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.

Thank you for your support of the BJG process.

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association Kevin Sensebe, Warden, St. Bernard Parish Prison Seth Smith, Chief of Operations Kirt Guerin, Warden Aaron Hooper, BJG Team Leader



07/28/20

BJG RECERTIFICATION REPORT

FACILITY NAME:

St. Bernard Parish Prison

BJG MONITORS:

Aaron Hooper, BJG Team Leader Billy Verret, BJG Team Member

Alia Burns, BJG Team Member

FACILITY STAFF:

Kevin Sensebe, Warden Justin Meyers, Major Chad Silcio, Major Jeffry Babin, Sergeant

BJG INSPECTION DATE:

12/4/2020

PREVIOUS BJG INSPECTION DATE: 12/12/2019

OPERATIONAL CAPACITY:

266

COUNT ON DAY OF VISIT:

202

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	14	1	15
Number of Local Offenders	130	20	150
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	37	0	37
Number of ICE Detainees	0	0	0
TOTAL	181	21	202

Number of DOC Offenders that are:

Single Bunked	6
Double Bunked	9
Triple Bunked	0
Total	15
Number of DOC Offenders that are in	restricted housing:
Single Bunked	0
Double Bunked	0
Triple Bunked	0

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

Month/Year	Off/Off	Off/Off w/sig inj	Offender/Staff	Off/Staff w/sig inj
December 2019	8	0	0	0
January 2020	8	0	0	0
February 2020	2	0	0	0
March 2020	9	0	0	0
April 2020	6	0	0	0
May 2020	6	0	0	0
June 2020	6	0	0	0
July 2020	4	0	0	0
August 2020	5	0	0	0
September 2020	7	0	0	0
October 2020	3	0	0	0
November 2020	5	1	0	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
December 2019	0	0	0	0	4
January 2020	0	0	0	0	7
February 2020	0	0	0	0	3
March 2020	0	0	0	0	10
April 2020	0	0	0	0	5
May 2020	0	0	0	0	6
June 2020	0	0	0	0	5
July 2020	0	0	0	0	2
August 2020	0	0	0	0	3
September 2020	0	0	0	0	10
October 2020	2	0	0	1	9
November 2020	0	0	0	0	4

GENERAL APPEARANCE/CLEANLINESS/COMMENTS OF THE FACILITY:

Living Area: Overall the living areas are found to be clean, organized, and odor free.

- Dorms Dorms areas were clean. Offender property was stored in the living area
- Cell Block The cell blocks were clean and odor free.

Culinary/Dining: The tools and sharps objects are controlled on an inventoried locked shadow board. Sample meal food trays are labeled and stored for at least the last five meals served. Cooler and freezer areas are found in good order with temperature logs checks documented. Offenders working in the kitchen area had gloves and hair nets on.

Bathrooms: Clean and in order. Bathrooms contained soap and paper towels.

Yard Areas: Yard and recreation areas provided three time per week if weather was permitting.

Maintenance: Facility has on staff maintenance personal daily. All maintenance tools are on inventory and checked daily.

COUNTS:

- How many formal counts are conducted each shift? They have three formal counts a day, one at 7:00 am shift change, one at noon and one at 7:00 pm shift change.
- How many counts are conducted each day? There are three formal counts daily and various counts are conducted at random.

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

- How does the facility accomplish this? Stick out counts are called into the facility
- Does this process insure accountability and safe/secure operation of the facility? Yes

CLASSIFICATION SYSTEM:

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

- What is their classification process to determine who is eligible for trustee status? Think stream, Motions and ARMS are the screening systems used to determine trustee status. If they are on probation, the offender's information is searched in CAJUN to further determine if they qualify for trustee status. The offender's history is reviewed as well as their current charges. The Warden signs off on it.
- 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
December 2019	2	6	12%	0
January 2020	2	10	20%	0
February 2020	2	10	20%	0
March 2020	2	12	22%	0
April 2020	2	10	20%	0
May 2020	2	8	18%	0
June 2020	2	8	18%	0
July 2020	2	12	22%	0
August 2020	2	20	10%	0
September 2020	2	10	20%	0
October 2020	2	8	18%	0
November 2020	2	15	33%	0

BJG AUTOMATED MONTHLY REPORTING REVIEW:

Has the facility been inputting the correct info timely?

Yes

163

Does the reported info suggest any issues of concern or improvement?

No

OFFENDER PROGRAMS:

GED Program

Number of GED Slots	2
Number of Participants	1
YTD Number of Completions	0

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

GED

LIST ALL OTHER OFFENDER PROGRAMS:

Religious Services

PREA COMPLIANCE:

- Is this facility required to be PREA compliant due to contract language? Νο
- Is this facility PREA compliant? No

If yes, date compliance received:

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

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Staff overall morale was good. Staff seem to be working together towards common goals. Administration has grown in their role on general operations and supervision

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

No offenders voiced any complaints during the walk through. Food portions were controlled and adequate.

RECOMMENDATION:

At this time, recertification with annual monitoring visits is recommended.



Facility: St. Bernard Parish Prison	Date Conducted: 12-4-2020	07/28/20		
Monitors: Aaron Hooper, BJG Team Leader, Billy Verret, BJG Team Member , Alia Burns, BJG Team Member				
	BASIC JAIL GUIDELINES (BJG)			
PART I - SAFETY				
A. PROTECTION FROM INJURY AND ILLNESS References: ACA CJS 1-1A-01, 1-1A-02, 1-1A-03, 1-1A-04, 1-1A-05, 1-1C-05, 1-				
4A-03, 1-4A-04	Findings	Response		
I-A-001 Safety/Sanitation/Inspections The facility compiles with all applicable laws and regulations of the State Sanitation Officer and the State Fire Marshal. The following inspections are implemented: - Weekly sanitation 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	Compliant - Weekly sanitation inspections are conducted. Fire Marshal inspection done annual.			
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 1-A-002 Disposal of Materials	Compliant			
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				
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. Visual Inspection: pest control contracts, trash disposal contracts, inspection reports	Compliant -The facility has pest control contracts and trash disposal contracts in place.			
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. Visual Inspection: inspection reports, completed forms, documentation of correction of	Compliant			
identified deficiencies I-A-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 addressing deficiencies	Compliant			
	1			
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 and 833 and DPS&C Department Regulation No. C-03-003 "Escorted Absences."	Compliant			
Visual Inspection: documentation of staff training, documentation of medical, funeral, etc. (outside trips)				
C. EMERGENCY PREPAREDNESS/RESPONSE				
References: ACA C1S 1-1C-01, 1-1C-02, 1-1C-03, 1-1C-04, 1-1C-06, 1-1C-07, 1- TC-01, Dept. Regs. A-04-002/PS-D-3, C-02-001/OP-A-5, C-02-010/OP-B-3, C- 05-001/AM-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, if necessary. There are written procedures for significant unusual occurrences or facility emergencies including but not limited to natural or man-made disasters; major disturbances such as riots, 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 800-804-8199 after hours, when they involve DPS&C offenders. In addition, the facility shall follow the incident reporting procedures as outlined in Dept. Reg. C-05-001/AM-1-4, "Activity Reports, UORs," Category A, B and C.	Compliant- An emergency plan is in place, drills are being conducted and logged to reflect that training is taking place. Evacuation plans are posted throughout the detention center in the event of fire or a major emergency.			
Visual Inspection: training records, facility logs, documentation of approval of plan, documentation of annual review, documentation of staff receipt, training on the plan				



The state of the s	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.	Compliant -Proper exit signs are up and properly positioned to be visually seen and evacuation routes are properly posted throughout facility.	
Visual Inspection: I facility records/loos I-C-003 Fire Safety/Code Conformance The facility complies with the requirements of the state fire marshal. There is a specific plan for addressing deficiencies, if any, that is approved by the State Fire Marshal. The State Fire Marshal approves any variances, exceptions, or emission deficiencies. Visual Inspection: documentation of fire alarm and detection system maintenance and testing, plans for addressing deficiencies.	Compliant -Facility has documentation for the fire alarm maintenance being tested and checked.	
I-C-004 Facility Furnishings Facility furnishings Facility furnishings meet fire-safety-performance requirements. Visual Inspection: Seedifactions for all furnishings.	Compliant	
I-C-005 Flammable, Caustic and Toxic Materials Written policy, procedure and practice govern the control and use of all flammable, toxic and caustic materials. Visual Inspection: Staff training records, offender training records, internal inspection reports. Documentation of incidents that involved FTC materials. Inventories.	Compliant -Policy in place and MSDS on site.	
I-C-006 Operational Capacity The number of offenders present does not exceed the operational capacity as determined by the state fire marshal and state health officer. The state fire marshal will determine a capacity primarily based upon exiting capabilities. The state health officer will determine a capacity based upon the ratio of plumbing fixtures to offenders and square footage. The operational capacity will be the lower of these two figures. Visual Inspection facility count sheets	Compliant	

PART II - SECURITY		
A. PROTECTION FROM HARM		
References: ACA CIS 1-2A-01, 1-2A-04, 1-2A-05, 1-2A-06, 1-2A-08, 1-2A-11, 1- 2A-13, 1-2A-14, 1-2A-16, 1-2A-17, 1-2A-19, 1-2A-20, Dept. Regs. A-02-008/AM- F-47, B-02-001/IS-8-1, C-02-007/OP-C-3		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 -The facility has well kept documentation of all there counts on offenders.	
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	
II-A-003 Sufficient Staff There is a written document describing the facility's organization and 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. Visual Inspection: records of staff deployment, facility logs, documentation of annual review of staffing analysis and plan	Compliant	
II-A-004 Female Offenders and Female Staff When a female offender is housed in a facility, at least one female staff member is on duty at all times. Visual Inspection: records of staff deployment, facility logs	Compliant - Female staff work in female offender dorms. When male staff make rounds in the female dorms, they must have a female staff member with	
II-A-005 No Offender Control Over Others No offender or group of offenders is given control, or allowed to exert authority over other offenders.	Compliant	· · · · · · · · · · · · · · · · · · ·
Visual Inspection: written policy and procedure IT-A-006 Staff Log Correctional staff maintain a permanent log and prepares shift reports that record routine information, emergency situations and unusual incidents. The facility shall maintain written records or logs which continuously document the following information: 1. Personnel on duty; 2. Offender population; 3. Admission and release of offenders; 4. Shift activities; 5. Entry/exit 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, serious illness or injury and assaults or other acts of violence.) Refer to B/G 1-C-001 for reporting requirements to DPSAC Visual Inspection: copies of log book, records of staff deployment	Compliant -Logs are placed in all areas of the facility and contain required information. Facility forms are completed for notification of incidents to the administration.	

Facility - Date



	Findings	Response
II-A-007 Counts The facility has a system for physically counting offenders. At least one formal	Compliant	
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	"	
temnorary absences		
Visual Inspection: completed forms, facility records/logs,		
II-A-008 Offender Population Management System	Compliant	
There is an offender population management process that includes records on the admission, processing, and release of offenders. Written policy, procedure, and		
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.		
Master prison form;		
Bill of Information and Court Minutes OR Uniform Commitment Order;		
One photograph;	*	
4. Reports of disciplinary actions, grievances, incidents, or crimes committed while in		
custody; 5. 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).		
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-	Compliant	
342-3759 or email to DOC-HQ_Supplemental@la.gov.		
Master prison form;		
Fingerprints: one FBI print card from AFIS;	- Y	
3. One photograph;		
4. Bill of Information and Court Minutes or Uniform Commitment Order for each		
conviction (for probation violators both the original sentencing minutes and the		
revocation minutes are required);		
Jail credit letter; One Inventory Acknowledgment Form (cash and property receipts).		
Visual Inspection: completed forms, reports, offender record		
II-A-009 Reception - Legal Commitment and Medical Service	Compliant	
Prior to accepting custody of an offender, staff determine that the offender is legally		
committed to the facility, and that the offender is not in need of immediate medical		
attention.		
Visual Inspection: Completed Admission forms, facility logs. II-A-010 Admissions	C	
Admission processes for a newly admitted offender include, but are not limited to:	Compliant	
Searching of the offender and personal property;		
 Inventorying and providing secure storage of personal property; 		
Providing an itemized receipt for personal property;		
 Recording of basic personal data; 		
Performing 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	
The names of any out of state offender (federal or state) to be housed at a local jail		
or privately managed facility shall be submitted to the Chief of Operations prior to		
the offender(s) entering the State of LA. No such offender shall be housed if the offender would be classified as maximum custody under the LA DPS&C classification.		
procedures.		
Any offender convicted and sentenced to incarceration by a court in another state		
(federal or state) shall not be released in the State of LA. Any out of state offender		
(federal or state) housed in a local jail or privately managed facility shall be	Y	
returned to an appropriate correctional facility located within the state where the		
offender was convicted and sentenced for release in that state, prior to the		
offender's release date. Visual Inspection: offender record, submittal to chief of operations of out-of-state		
offenders to be housed at the facility, release/transfer documentation		

LA Department of Public Safety and Corrections



BJG Monitoring Report

TI A 612 Charles Charles Control	Findings	Response
II-A-012 Classification System	Compliant -A classification system is in place with	
Written policy, procedure, and practice provide for a written offender classification	written policy. Trustee status is determined by nature	
plan that includes custody required and assignment to appropriate housing.	of offenders crime, length of sentence, amount of bail	
Offender management and housing assignment considers age, gender, legal status, custody needs, special problems and needs, and behavior. All offenders are	sentenced.	
classified using an objective classification process that at a minimum:		
Identifies the appropriate level of custody for each offender	9	
Identifies appropriate housing assignment		
. Identifies the offender's interest and eligibility to participate in available programs		
Visual Inspection: offender housing records, offender classification records		
II-A-013 Prohibition on Youthful Offenders	Compliant	
Offenders subject to juvenile jurisdiction are housed in adult facilities only under the		
conditions established by law. If juveniles are committed to the facility, a plan is in place to provide for the following:		
Supervision and programming needs of the juveniles to ensure their safety,		
security, and education;		
Classification and housing plans;		
Appropriately trained staff.		
OAS shall be notified of offenders who are under the age of 18 that are sentenced		
to the DPS&C as an adult for transfer to the appropriate institution.		
Visual Inspection: admission and housing, offender records, classification records		
II-A-014 Separation in Classification	Compliant	
Male and female offenders must be housed in separate rooms/cells with reasonable	•	
sight and sound separation.		
Visual Inspection: offender housing records, offender classification records, diagram of		
facility showing male/female housing areas		
III-A-016 Photo Identification	Compliant- Upon admission, all offenders receive an	
The facility shall provide each DPS&C offender with photo identification, which the	institutional ID arm band.	
offender shall carry/wear on their person at all times. Visual Inspection: Offender identification card/wristband.	A	
II-A-017 Drug Free Workplace	Compliant	
Written policy, procedure, and practice provide for a drug-free workplace, which	Compilant	
includes at a minimum pre-employment testing, post-accident testing, reasonable		
suspicion/probable cause testing, and quarterly random testing of all employees.		
suspending productic cause reality, and quarterly rundom reality of an 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- Facility has an excellent policy/procedure in	
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.	5	
of the DPS&C offender population shall be drug tested on a monthly basis. Visual Inspection: Facility log, documentation of alcohol/drug testing of offenders.		
II-A-019 Offender Transfers	Compliant	
All transfers of DPS&C offenders to other than DPS&C facilities shall be reported to	Compliant	
the OAS, at least one day prior to all scheduled transfers and within one business		
day for all non-scheduled transfers. The DOC offender transfer form shall be		
submitted by the transferring facility to OAS at least one day prior to the transfer		
occurring by fax to 225-342-2439 or by email to 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	- AP	
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 other		
than DPS&C facilities		
II-A-020 Frequency of Cell Checks	Compliant	
Written policy, procedure, and practice provide secure, safe housing by establishing		
the frequency of cell checks in all cellblock areas not to exceed four (4) hours. Staff		
will document these checks in their staff logs. Visual Inspection: Facility logs, documentation of frequency of cell checks.		
visual inspection: racility logs, documentation of frequency of cell checks.		1
B. USE OF PHYSICAL FORCE		
References: ACA CJS 1-28-01, 1-28-02, 1-28-03, 1-28-05, 1-28-06, 1-40-12,		
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		
II-B-001 Use of Force	Compliant -Facility maintains a strict policy on Use of	
The use of force is restricted to instances of justifiable self-defense, protection of	Force. Training is conducted on an annual basis and	
others, protection of property, and prevention of escapes, and then only as a last	reports are clear and concise.	
resort and in accordance with appropriate statutory authority. Written policy,		
procedure, and practice govern the use of force and provide that force shall never		
he used as nunishment Visual Inspection: facility records, logs, incident reports, training records		
III-B-002 Use of Restraints	Compliant -Policy and procedures are in place to	
II-B-002 Use of Restraints Written policy, procedure, and practice provide that mechanical restraints, such as	Compliant -Policy and procedures are in place to indicate when and where restraints are to be utilized.	
Written policy, procedure, and practice provide that mechanical restraints, such as	indicate when and where restraints are to be utilized.	
	indicate when and where restraints are to be utilized. Documentation of this practice was demonstrated in	
Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined	indicate when and where restraints are to be utilized.	
Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg inons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application.	indicate when and where restraints are to be utilized. Documentation of this practice was demonstrated in	
Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in	indicate when and where restraints are to be utilized. Documentation of this practice was demonstrated in	
Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority,	indicate when and where restraints are to be utilized. Documentation of this practice was demonstrated in	
Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg frons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including: Conditions under which restraints may be applied; Types of restraints to be applied;	indicate when and where restraints are to be utilized. Documentation of this practice was demonstrated in	
Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including: - Conditions under which restraints may be applied; - Types of restraints to be applied; - Identification of a qualified medical or behavioral health professional who may	indicate when and where restraints are to be utilized. Documentation of this practice was demonstrated in	
Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including: Conditions under which restraints may be applied; Types of restraints to be applied; Identification of a qualified medical or behavioral health professional who may authorize the use of restraints after reaching the conclusion that less intrusive	indicate when and where restraints are to be utilized. Documentation of this practice was demonstrated in	
Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including: • Conditions under which restraints may be applied; • Types of restraints to be applied; • Identification of a qualified medical or behavioral health professional who may authorize the use of restraints after reaching the conclusion that less intrusive measures are not a viable alternative;	indicate when and where restraints are to be utilized. Documentation of this practice was demonstrated in	
Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including: - Conditions under which restraints may be applied; - Types of restraints to be applied; - Identification of a qualified medical or behavioral health professional who may authorize the use of restraints after reaching the conclusion that less intrusive measures are not a viable alternative; - Monitoring procedures;	indicate when and where restraints are to be utilized. Documentation of this practice was demonstrated in	
Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including: Conditions under which restraints may be applied; Types of restraints to be applied; Identification of a qualified medical or behavioral health professional who may authorize the use of restraints after reaching the conclusion that less intrusive measures are not a viable alternative; Monitoring procedures; Length of time restraints are to be applied;	indicate when and where restraints are to be utilized. Documentation of this practice was demonstrated in	
Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including: - Conditions under which restraints may be applied; - Types of restraints to be applied; - Identification of a qualified medical or behavioral health professional who may authorize the use of restraints after reaching the conclusion that less intrusive measures are not a viable alternative; - Monitoring procedures;	indicate when and where restraints are to be utilized. Documentation of this practice was demonstrated in	



	Findings	Response
II-B-002-1 Use of Restraints for Pregnant Offenders	Compliant	
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.		
Visual Inspection: facility records, logs		
II-B-003 Use of Firearms	Compliant	
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 situations, firearms and authorized weapons are permitted 		
only in designated areas to which offenders have no access.		
Employees supervising offenders outside the facility perimeter follow procedures		
for the security of weapons.		
•Employees are instructed to use deadly force only after other actions have been		
tried and found ineffective, unless the employee believes that a person's life is		
immediately threatened.		
•Employees on duty use only firearms or other security equipment that have been		
approved by the facility administrator.		
 Appropriate equipment is provided to facilitate safe unloading and loading of 		
finarms Visual Inspection: training records, safety regulation and inspection reports, photos of		
equipment used for unloading and reloading		
II-B-004 Written Reports	Compliant	
Written reports are submitted to the facility administrator or designee no later than		
the conclusion of the tour of duty when any of the following occur:		
Discharge of a firearm or other weapon		
•Use of less lethal devices to control offenders		
•Use of force to control offenders		
Offender(s) remaining in restraints at the end of the shift		
Emergency distribution of security equipment		
Visual Inspection: completed reports, facility records and logs		
	•	
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	Compliant	Haspanisa
Written policy, procedure and practice guide searches of facilities and offenders to		
control contraband. Manual or instrument inspection of body cavities is conducted	la l	
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.		
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
II-D-001 Key, Tool, and Utensil Control	Compliant -All keys, tools and utensils were accounted	
Keys, tools, culinary equipment and medical/dental instruments and supplies	for & maintained in a secure area. All items of this sort	
(syringes, needles and other sharps) are inventoried and use is controlled. Written	are logged in and out and accounted for on a daily	
policy, procedure and practice govern the control and use of keys, tools, culinary	basis.	
equipment, and medical/dental instruments and supplies.	Julio 131	
Visual Inspection: documentation of perpetual inventories		
	•	
PART III - ORDER		
A. OFFENDER DISCIPLINE		
A. OFFENDER DISCIPLINE References: ACA CJS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. B	ptast	Doggan
05-001/QP-C-1	rmanigs	Response
III-A-001 Rules and Discipline	Compliant	
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	4	
care. 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.		
Visual Inspection: offender records, disciplinary records, receipt of disciplinary rules,		
documentation of orientation		

Facility - Oate BJG Compliance



PART IV - CARE		
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	Compliant -Daily inspections are conducted in the	
There are sanitary facilities for the storage of all foods that comply with applicable	Food Service are to ensure storage areas are	
state and/or federal guidelines.	maintained in safe manner.	
Visual Inspection: DHH inspection reports, internal inspection reports	maintained in Safe manner.	
IV-A-002 Food Service Facilities	Compliant	
Toilet and hand basin facilities are available to food service personnel in the food		
preparation area.		
Visual Inspection: DHH inspection reports, photos		
IV-A-003 Food/Dietary Allowances	Compliant	
The facility's dietary allowances are reviewed at least annually by a qualified	- Compilation	
nutritionist or dietician to ensure they meet the national recommended dietary		
allowances for basic nutrition for appropriate age groups. Menu evaluations are		
conducted at least quarterly by food service supervisory staff to verify adherence to		
the established basic daily servings. Written policy, procedure, and practice		
require that food service staff plan menus and substantially follow the plan. The		
planning and preparation of all meals shall take into consideration nutritional		
characteristics and caloric adequacy. The facility shall provide a tray/plate and		
utensil(s) for each hot meal.		
Visual Inspection: annual reviews, nutritionist or dietician qualifications,		
documentation of at least annual review and quarterly menu evaluations		
IV-A-004 Records of Meals Served	Compliant -Sample trays kept and labeled for at least	
Written policy, procedure, and practice require that accurate records are maintained		
of all meals served.		
Visual Inspection: facility logs		
IV-A-005 Denial of Food as Discipline Prohibited	Compliant	
Written policy, procedure, and practice preclude the denial of food as a disciplinary		
measure.		
Visual Inspection: facility logs	And the state of t	
IV-A-006 Food Service Management	Compliant	
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		
IV-A-007 Therapeutic/Special Diets	Compliant	
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 of religious diet		
IV-A-008 Health Protection for Food Service	Compliant	
There is adequate protection for all offenders and staff in the facility and for	V	
offenders and other persons working in food service. All persons involved in the		
preparation of the food receive a pre-assignment inspection by appropriate kitchen		
staff, to ensure freedom from diarrhea, skin infections, and other illnesses		
transmissible by food or utensils. Offenders working in food services are monitored		
each day for health and cleanliness by appropriate kitchen staff. All food handlers		
are instructed to wash their hands upon reporting to duty and after using toilet		
facilities		
Visual Inspection: inspection reports, completed forms, documentation of daily monitoring for health and cleanliness		
Imonitoring for nearly and cleanliness		



	1	
B. HYGIENE References: ACA CJS 1-48-01, 1-48-02, 1-48-03, 1-48-04, Dept. Reg. B-06-		
001/HC-34/IS-C-3	Findings	Response
IV-B-001 Plumbing Fixtures - Toilets and Washbasins Offenders have access to toilets and washbasins with temperature-controlled hot and cold running water 24 hours per day. Offenders are able to use toilet facilities without staff assistance when they are confined in their cells/sleeping areas.	Compliant	
Visual Inspection: maintenance records or reports, inspections, documentation of		
periodic measurement of water temperature, offender grievances IV-B-002 Plumbing Fixtures - Showers	Compliant	
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.		
Visual Inspection: maintenance records or reports, inspections 1V-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 flurnishing clothing or permitting the offender to secure and wear his own clothing, except that when the offender does not provide adequate clothing for himself, the facility shall furnish same.	Compliant	
Visual Inspection: documentation of clothing issue, documentation of cleaning and storage		
IV-B-004 Hyglene/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 -Bedding and linen cleaned daily and proper documentation kept.	
Visual Inspection: documentation of issue and exchange IV-B-005 Personal Hygiene	Compliant	
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 soap, toilet paper, toothbrush, toothpaste and shaving equipment.		
Visual Inspection: documentation that items are provided, list of items available		
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-10, 1-4C-13, 1-4C-15, 1-4D-01, 1-4D-03, 1-4D-04, 1-4D-06, Dept. Regs. B-06-001/S-D-2, HC-01/JS-D-HR)3, 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-03/JS-D-HCP22, HC-11/JS-D-HCP3, HC-13/JS-D-HCP14, HC-05/JS-D-HCP3, HC-13/JS-D-HCP14, HC-05/JS-D-HCP34, HC-03/JS-D-HCP14, HC-05/JS-D-HCP14, HC-05/JS-	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 copay requirements, as well as procedures for submitting grievances. Medical care is not denied based on an offender's ability to pay. The facility has a designated health authority with responsibility for health care services. When the health authority is other than a physician, final clinical judgments rest with a single, designated, responsible physician. Written policy, procedure, and practice provide for the delivery of health care services, including medical, dental and behavioral health services under the control of a designated health care authority who shall be a physician or a licensed or	Compliant -Offenders receive all necessary information on accessing health care services, and co-Pay Requirement. Health care services are contracted through Correct Health and Provides a wide range of services.	
on a designated in the earth value during with standard to a be physical or a decised with registered health care provider or health agency. Access to these services shall be unimpeded in the sense that correctional staff should not approve or disapprove offender requests for services in accordance with the facility's health care plan. Oral health services include access to diagnostic x-rays, treatment of dental pain, development of individual treatment plans, extractions of non-restorable teeth, and referral to a dental specialist, including an oral surgeon. Specialty non primary clinical considers are characted by DRS&C. The requester shall be submitted by the fine accordance with R.S. 15:831, DPS&C offenders may be assessed a co-payment for receiving medical or detail 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 juil facilities shall not exceed the DPS&C approved rate in accordance with Dept. Reg. B-06-001 HC-02/IS-D-HCP14, unless prior approval has been granted by the Secretary of the DPS&C.		
DPS&C offenders may be required to file a claim with his/her private medical or health care insurer, or any public medical assistance program, under which he/she is covered and from which the offender may make a claim for payment or reimbursement of the cost of any such medical treatment. Visual Inspection: Documentation that offenders are informed about health care and		
the grievance 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	Compliant	

acility - Date BJG Compliance



	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 illness. Written policy, procedure and practice provide that anyone who provides health care services to offenders be licensed, registered or certified as appropriate to their respective professional disciplines. Such personnel shall only practice as authorized by their license, registration or certification. Standing orders are used in the treatment of offenders only when authorized in writing by a physician or dentiti. (Standing orders are used in the treatment of identified conditions and for the onsight emergency treatment of an offender.) Visual Inspection: documentation of health authority designation, contract, billing records, sick call request form, a health record, clinical provider schedules, current	Compliant	
Irredontials / 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. Visual Inspection: health records, completed medication administration form,	Compliant	
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-dury qualified health care personnel. Decisions regarding access to emergency medical services shall not be the sole province of correctional or other non-health personnel except in accordance with IV-C-004.		
Visual Inspection: designated facility, provider lists, transportation logs	Compliant	
IV-C-006 Health Screens 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 (IV-C-006-A) provided by DPS&C. The purpose of the health screening is to protect newly admitted offenders who pose a health safety threat to themselves or others from not receiving adequate medical attention. This should include inquiry into:		
Current medical, dental or behavioral health problems and communicable diseases; Current treatment plan; Current medications, including psychotropic; History of hospitalization; Suicidal risk assessment; Use of alcohol or other drugs including need for possible detoxification; Possibility of pregnancy; Chiservation of the following: Appearance and behavior;		
Body deformities and other physical abnormalities; Ease of movement; 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; 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 DO) and LA DPS&C.] Current health insurance.		
Visual Inspection: health records, completed screening form, transfer logs		
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 jall 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	
Visual Inspection: written policy and procedure, health record where pregnant offender neceived obstetrical services by a qualified provider, notification to DPS&C when DPS&C offender is pregnant, transfer logs		

Facility - Date



	Flading.	-
IV-C-007 Communicable Disease and Infection Control Program	Findings Compliant- Correct health has excellent	Response
Communicable diseases are managed in accordance with a written plan approved by the health authority in consultation with local public health officials. The plan includes for the screening, surveillance, treatment, containment, and reporting of infectious diseases. The plan shall comprise of testing to detect communicable diseases, including TB testing within 14 days of arrival at the facility. If there is documented evidence of TB testing within the last 12 months, new testing is not required. Qualified health care staff will evaluate for signs and symptoms of TB. Infection control measures include the availability of personal protective equipment for staff and hand hygiene promotion throughout the facility. Procedures for handling biohazardous waste and decontainiating medical and dental equipment must comply with applicable local, state and federal regulations.	companies contest lead in as excellent, policy/procedures in place for screening, surveillance, treatment and reporting of communicable/infectious diseases.	
Visual Inspection: health records, clinic visit logs, documentation of waste pic up		
and/or cleaning logs IV-C-008 Annual TB Testing Written policy, procedure and practice require annual testing or medical evaluation for signs and/or symptoms of tuberculoss 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 DPS8C Medical Director, telephone number 225-342- 1320, when an offender's test for medical signs and/or symptoms of tuberculosis is reported positive. The DPS8C Medical Director will determine if the offender requires physician or mid-level evaluation, based on the reported positive signs or symptoms.	Compliant -TB testing are given to offenders in booking and annually	
Visual Inspection: health records IV-C-009 Chronic Care Program	Compliant	
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 pail 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	Compliant	
Written policy, procedure, and practice approved by the health authority provide for the proper management of pharmaceuticals. Offenders are provided medication as prescribed.	Compilant	
Visual Inspection: health records, completed medication administration forms, inventories		
TV-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. Visual Inspection: location of first aid kits within the facility	Compliant	
IV-C-012 Access to Sick Call	Compliant -Sick call forms are available in all dorm	
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 fewer than 100 offenders - 1 time per week; •Facilities with 100 to 300 offenders - 4 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	areas. Once completed they are placed in the sick call box and health care staff is the only ones who retrieve them. The requests are triaged and scheduled for visits.	
IV-C-013 Infirmary Care	Compliant	
If infirmary 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 of 5-004-8		
IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment	Compliant	
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		
IV-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 from continual observation to intervals no greater than fifteen		
(15) minutes. All staff with responsibility for offender supervision are trained samually in the implementation of the account.		

Facility - Date BJG Compliance



	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 IG-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	
Visual Inspection: notification, reporting requirements, report to DPSEC 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 ill offender for the duration of the offenders's admission to the ICU or trauma center to any immediate family member seeking visitation why such visitation cannot be granted, pursuant to La. R.S. 15:833(A) and Dept. Reg. C-02-008; If the offender's admission to the ICU or trauma center occurs between 8:00 pm and 4:00 am, the Warden or designee shall provide the required written notification within 24 hours of the time the serious bodily injury occurred. *Pursuant to La. R.S. 15:83(A), the Warden or designee shall attempt to notify the offender's immediate family within 8 hours of the medical decision to transport the offender to the ICU or trauma center. *Based on extenuating circumstances the Warden or designee may extend the definition of an offender's immediate family member. Visual Inspection: notification records D. HEALTH SERVICES STAFF	Compliant	
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. 8-06-001/HC-24/ISD-HCP44, HC-25/IS-D-HCP9, HC-26/IS-D-HCP10, HC-33/IAM-D-5	Findings	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	
ITVD-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. Visual Inspection: written policy and procedure	Compliant	
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	
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	
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	
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	
Visual Inspection: evaluation of major risk management events	,	



IV-E-001 Alleged and Substantiated Sexual Assaults Written policy, procedure and practice provide for the prevention, detection, response, reporting and investigation of alleged and substantiated sexual assaults. (PREA) Information provided to offenders about sexual abuse/assault includes: -Prevention/intervention; -Self-protection;	
•Reporting sexual abuse/assault; •Treatment and counseling. When the occurrence/allegation of sexual assault or threat involves a DPS&C offender, the facility shall report the incident to DPS&C immediately, as outlined in BIG T-C-001. An investigation is conducted and documented whenever a sexual assault or threat is reported. Investigative reports, that include DPS&C offenders, shall be submitted to appropriate DPS&C Regional Team Leader on Form C-01-022-E. Victims of sexual assault are referred under appropriate security provisions to a community facility for treatment and gathering of evidence.	

PART V - OFFENDER PROGRAMS AND ACTIVITY		
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	Compliant	NG POTING
There is an official registration and identification system for volunteers.	Compilation	
	*	
Visual Inspection: activity schedules, facility logs	Secretary Characters and	
V-A-002 Volunteer Services	Compliant	
A current schedule of volunteer services is available to all offenders and is posted in	- 4/1	
appropriate areas of the facility.		
Visual Inspection: activity schedules, facility logs		
V-A-003 Programs and Services	Compliant	
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:		
 Screening of offender(s) for program placement; 		
Offender application to program;		
Program sign-in sheets and/or attendance rosters;		
Signed copy of CTRP credit forms;		
Documentation for staff oversight if program is not administered and/or overseen		
by DPS&C staff.		
Visual Inspection: activity schedules, facility logs		
V-A-003-1 Educational Programming	Compliant	
The DPS&C and the facility encourage educational programming which includes:	19.	
Adult Basic Education and/or Literacy		
Industry Based Certification Training		
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.		
Visual Inspection: activity schedules, facility logs		
visual Inspection: activity schedules, facility logs	I .	



D DOCDAMC	1	
B. PROGRAMS References: ACA CJS 1-4C-02, 1-5B-01, 1-5B-01-1, 1-5B-01-2, 1-5B-01-3, 1-5B-	CONTRACTOR OF THE PARTY OF THE	
02, 1-58-02-1, 1-58-02-2, 1-58-04, 1-5C-01, 1-5C-04, 1-5C-05, Dept. Reps. A-04-002/PS-D-3, 8-02-003/IS-B-1, B-06-001/HC-17/IS-D-HCP7, B-08-005/PS-E-1, B-08-013/PS-C-1, B-09-003/AM-C-2, C-01-012/PS-I-1, C-02-008/OP-C-9, C-02-009/OP-C-7	Findings	Response
V-B-001 Releasing Offenders	Compliant- Documentation reviewed that includes all	
Procedures for releasing offenders from the facility include, but are not limited to,	of the required items. Facility provides a seven day	
the following:	supply of prescription medication.	
Return of personal property, to include any govt. issued ID (i.e., driver's license)	The state of the s	
that may have been collected from the offender during the intake process. •Provide offender with/and have him/her sign for any reentry transition document		
envelopes and all its contents.		
Provision of a listing of available community resources.		
•Consideration by the prescribing health care practitioner for a provision of a 5-day		
supply of current maintenance medication (medication prescribed to stabilize a		
chronic medical or behavioral health illness), along with a prescription for a thirty		
(30) day of medication upon transfer or discharge.		
 Prior to release, offenders with serious medical and behavioral health conditions are referred to available community services. Appropriate health information is 	*	
shared with the new providers in accordance with consent requirements.		
. Provision of adequate street clothing for indigent offenders. Offender shall not		
release in any prison issued attire, including but not limited to jumpsuits, striped		
scrubs, or stenciled clothing.		
Visual Inspection: completed release forms and documents, facility records and logs,		
offender records V-B-002 Visiting	Compliant	
Written policy, procedure and practice govern visiting. The number of visitors an	Compliant	
offender may receive and the length of the visits may be limited only by the facility's		
schedule, space and personnel constraints or when the facility administrator can		
present clear and convincing evidence that such visitation jeopardizes the safety	a a	
and security of the facility. Conditions under which visits may be denied and visitors		
may be searched are defined in writing. Provisions are made for special visits in accordance with Dept. Reg. C-02-008.		
accordance with Dept. Reg. C-02-000.		
Visual Inspection: activity schedule, facility logs		
V-B-003 Library Services	Compliant	
Written Reading materials shall be available to offenders on a reasonable basis.		
Visual Inspection: activity schedule, facility logs		
V-B-004 Religious Programs	Compliant	
Written policy, procedure and practice define and provide reasonable offender		
opportunity for religious practice.		
Visual Inspection: documentation of offender religious activities, activity schedule		
V-B-005 Exercise and Recreation Access	Compliant	
Offenders have access to exercise and recreation opportunities. Written policy, procedure, and practice provide for exercise opportunities adequate to ensure		
major muscle activity. Outdoor exercise shall be available on a regular basis (at		
least three times per week-weather permitting) for state inmates. If a state		
offender requires special management or has security supervision needs which		
preclude the opportunity for outdoor exercise at a facility, then he shall be		
transferred to the DPS&C. If a facility based on location, or other legitimate concern, does not make provision for outdoor exercise, then compensating,		
dedicated exercise facilities of adequate size to provide three exercise opportunities		
per week shall be available.	*	
Visual Inspection: activity schedule, facility logs		
V-B-006 Transitional Work Program/Standard Operating Procedures	N/A	
Transitional Work programs shall be operated in accordance with the Standard		
Operating Procedures for Offender Work Release Programs established by the		
DPS&C.		
Visual Inspection: DPS&C monitoring report	5.35	
V-B-007 Participation in Transitional Work Programs	N/A	
Participation in transitional work programs by state offenders shall comply with R.S. 15:711 and DPS&C 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	N/A	
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		
request, facility logs		



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

C. REENTRY		
References: Dept. Regs. B-01-001/IS-B-6, B-01-002/BOP3, B-01-004/IS-B-7, B- 05-001/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	
Visual Inspection: facility log, activity schedule		
V-C-02 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	
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 B-01-004-C, Pre-Parole LARNA II Questionnaire for Local Jail Facilities, and submit via e-mail to DPS&C HQ at LOCALlarna@corrections.state.la.us or by fax to 225-342-0929 within the first two weeks of the month proceeding the scheduled hearing.	Compliant	
Visual Inspection: offender record, completed questionnaire		
V-C-004 Parole Board Procedures The facility Warden or his/her designee, of the local level facility in which the offender is housed, shall be present to provide information to members of the Parole Board regarding the offender's progress and disciplinary infractions during incarceration.	Compliant	
Visual Inspection: offender record, trip log, documentation showing facility Warden or designee presence at parole board		

PART VI - JUSTICE		
A. OFFENDER'S RIGHTS References: ACA CJS 1-6A-01, 1-6A-02, 1-6A-03, 1-6A-06, Dept. Reg. C-01-	Pladian.	B
004/OP-C-10	Findings	Response
VI-A-001 Access to Courts/Access to Legal Materials Written policy, procedure, and practice ensure the right of offenders to have access to courts. This includes reasonable access to legal reference materials or access to legal or paralegal assistance. Illiterate offenders shall be provided the assistance of a fellow offender or be furnished adequate assistance from the facility staff or other persons who have a legitimate connection with the legal issues being pursued. If an offender's requirements in this area are significant and complex, exceeding the capability of the local facility to meaningfully provide assistance, then the inmate shall be transferred to the DPS&C.		
Visual Inspection: facility log		
VI-A-002 Access to Counsel Written policy, procedure, and practice ensure offenders' confidential access to counsel. Such contact includes, but is not limited to telephone communications, uncensored correspondence and visits.	Compliant- Policy requires offenders to request special visits with counsel.	
Visual Inspection: facility log, record of attorney interviews		
VI-A-003 Protection from Abuse Written policy, procedure, and practice protect offenders from personal abuse, corporal punishment, personal injury, disease, property damage, or harassment.	Compliant	
Visual Inspection: facility log, incident reports, staff training records		



B. FAIR TREATMENT OF OFFENDERS		
References: ACA CJS 1-2A-16, 1-4C-01, 1-6B-01, 1-6B-02, Dept. Reg. B-05- 005/OP-C-13	Findings	Response
VI-B-001 Discrimination Written policy, procedure, and practice provide that program access and administrative decisions are made without regard to offenders' race, religion, national origin, gender, sexual orientation, or disability.	Compliant	
Visual Inspection: facility records, grievances, activity logs		
VI-B-002 Grievance Process Offenders have reasonable access to a grievance remedy procedure that includes at least two levels of review if necessary. The grievance remedy procedure shall be an administrative means through which an offender may seek formal review of a complaint which relates to any aspect of his imprisonment if less formal procedures have not resolved the matter. Such complaints and grievances include, but are not limited to, actions pertaining to conditions of confinement, personal injuries, medical complaints, time computations, the classification process, or challenges to rules, regulations, or policies. Through this procedure, offenders shall receive reasonable responses within a specified time period and where appropriate, meaningful remedies.	*	
Visual Inspection: grievances		

	1	
PART VII - ADMINISTRATION AND MANAGEMENT	y.	
A. RECRUITMENT, RETENTION AND PROMOTION		
References: ACA-CIS 1-1A-01, 1-1B-01, 1-1C-01, 1-1C-07, 1-4C-13, 1-4D-05, 1-4D-14, 1-7B-02, 1-7B-04, 1-7B-06, Dept. Regs. A-02-028/AM-F-22, C-01-008/OP-A-19	Findings	Response
VIII-A-00.1 Training and Staff Development The facility conducts or participates in a training program which includes orientation for all new employees (appropriate to their job) prior to assuming a position or post. Such training must include: 1. Security procedures; 2. Hostage procedures – including staff roles and safety; 3. Fire and emergency plan/ procedures; 4. Suicide precaution and signs of suicide risks; 5. Use of force policies; 6. Immate rules and regulations; 7. CPR and first aid; 8. Requirements of the Prison Rape Elimination Act (PREA); 9. Employees whose duties are the care, custody and control of offenders must complete the Peace Officers Standards and Training (POST) Level 3 certification training program, which consists of the ACA core curriculum, within one year of employment.	Compliant- Policy in place regarding training. Employees must successfully complete training prior to employment and annually thereafter. Documentation in file	
Visual Inspection: lesson plans, staff training records		
VII.4-002 Weapons Training All personnel authorized to use firearms and less-than-lethal weapons must demonstrate competency at least annually. Training includes decontamination procedures for individuals exposed to chemical agents.	Compliant	
Visual Inspection: personnel records, training records		



B. FACILITY ADMINISTRATION		
References: ACA CIS 1-4D-02, 1-7D-01, 1-7D-03, Dept. Reg. C-05-001/AM-I-4	Findings	Response
VII-B-001 Authority	Compliant	DMM:
There is a statue or constitutional provision authorizing the establishment of the	Secretaria.	
local jail facility or its parent agency.		
Visual Inspection:		
VII-B-002 Legal Assistance for Staff	Compliant -Legal Assistance for staff are provided.	
Written policy, procedure and practice specify the circumstances and methods for		į
the facility administrator and other staff to obtain legal assistance as needed in the	1]
performance of their duties.].
Visual Inspection: personnel or training records		
VII-B-003 Independent Financial Audit	Compliant	
Written policy, procedure and practice provide for an independent financial audit of	Compilant	
the facility. This audit is conducted annually or as stipulated by statute or		· ·
regulation.		
Visual Inspection: annual audit	A	1
VII-B-004 Facility Insurance	Compliant	
Written policy, procedure and practice provide for comprehensive facility insurance		
coverage.		
Visual Inspection: insurance policy	*	
VII-B-005 Offender Funds	Compliant	
Offenders' personal funds held by the facility are controlled by generally accepted	1	:
accounting principals (GAAP). Any interest earned, other than operating funds,		
accrues to the benefit of the offenders.		
Visual Inspection: offender records		<u> </u>
VII-B-006 Organization	Compliant- Policy and procedures are in place for all	
Written policies and procedures describe all facets of facility operation, maintenance	areas of the facility. Administration reviews and	
and administration are reviewed annually and updated as riended. New or revised	updates annually.	
policies and procedures are disseminated to staff. A file for each guideline shall be	abrances animents	
maintained with documentation (primarily written) to support compliance.		
About the second of the second	1	
Visual Inspection: annual reviews, dissemination to staff		
VII-8-007 Annual Compliance Statement	Compliant	
Written policy, procedure and practice demonstrate that the facility shall submit an	Comprise	
annual statement confirming continued compliance with the BJG to the appropriate		<u> </u>
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;		1
2. A copy of the current Health Inspection Report;		
Any proposed or projected expansions:		
Any rehabilitative programs that are available;		
5. Summary of any re-entry initiatives/programs implemented by the facility.		:
		li .
Visual Inspection: annual statement		
VII-8-008 Monthly Reporting	Compliant	
Written policy, procedure and practice ensure that any facility with DPS&C offender	5	<u>}</u>
report activities to the Chief of Operations on a monthly basis in accordance with	1	
Dept. Reg. C-05-001/AM-1-4. These reports shall be submitted on automated		
reporting forms provided by the DPS&C, no later than the 15th day of the month fo		
the previous month's activities. Automated reporting shall be completed, by the	1	
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	1	
VII-8-009 Staff Meetings	Compliant	
Written policy, procedure and practice provide for regular meetings between the	Market a pro-to-to-to-	
Sheriff, facility administrator, or designee and all department heads. There is		
formal documentation that such meetings are conducted at least monthly.		!
which professional time about incoming me residuarizer to least training		+
Visual Inspection: staff meeting minutes/notes	Ť[:	
	and .	

C. REASONABLE ACCOMMODATION		
References: ACA CJS 1-7E-01	Findinas	Response
VII-C-001 Facility Equipment/Reasonable Accommodation	Compliant	
Reasonable accommodations is made to ensure that all parts of the facility are accessible		
to the public are accessible and usable by staff and visitors with disabilities.		
Water State of the Control of the Co		
Visual Inspection:	<u> </u>	<u> </u>



INSPECTION REPORTS				
DEPARTMENT	Deficiencies	Corrective Action Taken		
Fire Marshall	No Apparent Deficiencies observed			
Date of Current Report: 11/24/2020 266				
DHH - Health	The toilets are in disrepair	Replace leaking toilets		
Date of Current Report: 12/6/2019 Maximum Capacity: 266				
	Chloring and itings are extended for any acceptable in	Channel to the correct levels		
DHH - Retail Food	Chlorine sanitizer concentration for warewashing is not between 50-100p.p.m at 75 degrees	Changed to the correct levels		
Date of Current Report: 03/06/2020				



Office of State Fire Marshal

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

Inspection Report

Report # CB-20-002484-1





H. "Butch" Browning FIRE MARSHAL

		Lo	catio	n Inform	ation			
Inspection Type	Compliance	Building Inspection				Inspection Dat	9	11/24/2020 1:43:56 PM
Structure ID	52851	No. of Build	ilngs	1		Facility Code		J331
Capacity	266	Year Built		1992		Construction 1	Гуре	Type IIIA / (211)
Building/Trade Na	me			Addres	5			
SAINT BERNARD	PARISH PRIS	ON		1900 PA	RIS F	ROAD, CHALME	ETTE, LA	70043
		0	wner	Informa	tion			
Owner Type		Name			Cont	act Phone	Contac	Email
Municipal Project		SAINT BERNARD PA SHERIFF'S OFFICE	RISH		(504)	274-7643	LBURK	E@SBSO.ORG
Address								
POST OFFICE BOX	K 168, CHALM	ETTE, LA 70043						
		To	enant	Informa	ition			
Name	ne Suite Number			Floor Number	er	Square Footage		
		0	ccup	ancy De	tails			
Occupancy Type		Details						
Institutional		INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 3						
			Co	mments				
A COMPLIANCE R EGRESS PLAN & F OFFENDERS PRE CAPACITY: 266.	PROCEDURES	E SAFETY SYSTEM S, AND EXIT CAPACI	FUNC [*] TY TO	TIONALIT OCCUPA	Y, EG	RESS DOOR F DAD RATIO WA	UNCTIONS CONF	ONALITY, EMERGENCY DUCTED.
NO APPARENT DE	FICIENCIES	OBSERVED.						
IN COMPLIANCE.								
		Ins	pecto	r Inform	natio	1		
Name: Joshua Co	lame: Joshua Correa Badge Number: 602 Inspector Signature:			Shew Mean				
		Person to who	m req	uiremer	ts w	ere explained	1	
Name: ADRIAN C	HALONA	Title: CAPTAIN			Signa	ature:	4 /	2 Carlina

R. S. 40: 1621

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



Office of State Fire Marshal

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

Inspection Report

Report # CB-20-002484-1

No Deficient/Cautionary Codes cited.



L.R.S. 40:1577 APPEAL FROM ORDER

When an order is made by one of the deputies or representatives of the Fire Marshal, the owner or occupant of the building or premises may, within three days, appeal to the Fire Marshal. The Fire Marshal shall, within five days, review the order and advise the owner or occupant of his decision thereon. The owner or occupant may, within five days after the making of affirming of any such order of the Fire Marshal, file an application with the Board of Review.

RULES FOR APPEALING TO THE FIRE MARSHAL BOARD OF REVIEW

- Any application to the Board of Review shall contain the following basic information set off in organized fashion
 with captions indicating that the paragraph in question contains the following basic information.
 - 1. The name of the applicant.
 - A brief description of the facts.
 - 3. A copy of the order of the Fire Marshal which is being appealed.
 - 4. A reference to the section of the law or code being reviewed.
 - A brief description of why the applicant feels the requirements of the Fire Marshal is not within the Fire Marshal's authority, or brief description of why the interpretation of the Fire Marshal is incorrect or what specific relief is required by the applicant.
 - A list of the individuals who will be appearing before the Board, and a brief description of the testimony or information they will be providing the Board.
 - A list of all the documents which will be introduced or provided to the Board along with a brief description of the documents, and if possible, a copy of said documents.
 - 8. A list of each exhibit except for documents, and a brief description of the exhibit.
- II. Whenever possible, a notice of the meeting, date and place, and the agenda will be recorded in the Louisiana Register, however, whenever that is not possible, a copy of the meeting notice including the date, time and place, and agenda of the meeting of the Board will be published in the official notices of the official state journal; furthermore, a press release containing the same information will be mailed to the official journals of the cities of Shreveport, Monroe, Lafayette, Lake Charles, Alexandria, New Orleans, and Baton Rouge and any city or town in which the meeting of the Board is to be held if it is not one of the aforementioned major cities; and the same information shall be mailed to each individual who has notified the Fire Marshal of his desire to receive a notice of such appeal.
- III. A copy of the determination of the Board as prepared by the Chairman will be mailed to each individual who requests a copy of that specific determination as well as to the applicant.
- IV. The time delays for filing an appeal shall be those specified in R.S.40:1577 and 40:1578 1 D.

	LOUISIANA
	NT OF HEALTH
OFFICE OF F	PUBLIC HEALTH
INSTITUTI	ON REPORT
Agency License No.	Anniversary Month
15555	JUNE
Name of Establishment	Mailing Address
ST. BERNARD PARISH JUVENILE DETENTION CENTER-224	12
Address	
1900 PARIS RD	l
City, state, Zip Code	
CHALMETTE LA 70043	1
Type of Facility	
JUVENILE DETENTION CENTER 36 200	
Parish	Date Inspected
St. Bernard	06/09/2021
The above establishment has been inspected by a representative of	this section, and:
✓ License is Recommended;	
License is Not Recommended;	
License is Pending Reinspection;	
from the standpoint of sanitation	ASHEBA PORTER 1 2 9 6
LHS 48 (R 7/99)	D 101



avoid this fee if the violation fee is assessed, the \$150 fee	ns noted on the routine inspectis payable within 30 days' no	ction report are corrected by, or dur otice, and failure to pay shall result	ing, the follow up inspection. If a in revocation of the permit.	
Sanitarian Name/Print Asheba Porter	Phone # 504-838-5140	Sanitarian Signature	R.S. # 1296	
The above mentioned viol Correct Critical Violation	•	ttention and were explained to n Correct Non-Critical Vic		
Name/Title DEPUTY DARLENE RIC	CKS	Signature of Recipient		_



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Detention or Incarceration Notice of Violations

Routine/Renewal

Permit Number	Permit Name		
44-03-224	St. Bernard Parish Juvenile Detention Center-224		
Name of Establishment St. Bernard Parish Juvenile Detention Center-224	Owner Name		
Address	Date	Time	
1900 Paris RD Chalmette, LA 70043	06/09/2021	11:55 AM	

LAC TITLE 51 PART XVIII

Comments:

VERBAL ACKNOWLEDGEMENT OF THIS REPORT PROVIDED BY MAJOR CHAD SILCIO. EMAIL:CSILCIO@SBSO.ORG LBURKE@SBSO.ORG DEPUTY AUSTIN SAVOIE, ASSISTED WITH INSPECTION WALK THRU

THE FOLLOWING AREASS WAS NOTED AT THE TIME OF VISIT-MEDICAL, VISITATION, TEIRS 1, 2, AND 3, STORAGE, CLASSROOM, RESTROOMS

ALL WERE OKAY

Number Licensed 36	Number Licensed For Numb 36		License Anniversary 06/30/2021	
Sanitarian Name/Print Asheba Porter	Phone # 504-838-5140	Sanitarian Signature	R.S. # 1296	
The above mentioned vio Correct Critical Violation		o my attention and were explained to Correct Non-Critical Vi		
Name/Title MAJOR CHAD SILCIO/	DEPUTY AUSTIN S	Signature of Recipient SAVOIE		





STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Retail Food Notice of Violations

Routine/Renewal

Permit Number 44-0001208-1	Permit Name SAINT BERNARD PAR JAIL JUV DET COMP Dietary		
Name of Establishment SAINT BERNARD PAR JAIL JUV DET COMP	Owner Name SAINT BERNARD PARISH SHERIFF OFFICE		
Address 1900 PARIS RD CHALMETTE, LA 70043	Date 06/09/2021	Time 12:55 PM	

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 container. 1501.3 - Food is stored where it is exposed to splash, dust, or other contamination 1501.4 - Food is not stored six (6) inches off the floor. BULK FOOD ITEMS in dry storage area
FOOD PROTECTION	1903	59 - 1903 - Bulk food is not protected from contamination. [COS]
UTENSILS/EQUIPMENT/SINGLE SERVICE	2101	67 - 2101.1 - Non-food contact equipment is not maintained in good repair BOTTOM OF FOOD PREP TABLE WITH MEAT SLICER
UTENSILS/EQUIPMENT/SINGLE SERVICE	2513	81 - 2513 - A sanitizer test kit is not provided to accurately measure the concentration in mg/L or parts per million of sanitizing solution provided.
PERSONNEL, CLOTHES, HAIR RESTRAINTS, PRIVATE WELL TESTING	3903	92 - 3903 - Employees' personal care items are stored where food equipment, utensils, linens, single service items or single use items may be contaminated. [COS]
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3703	106 - 3703.3 - Walls/ceilings or attached equipment are not clean. ABOVE THREE COMPARTMENT SINK [COS]
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3707	107 - 3707.1 - Light bulbs are not shielded or coated in areas where there is exposed food, clean equipment, utensils, or unwrapped single service or single use articles. DRY STORAGE AREA
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	4105	109 - 4105.2 - Lockers or suitable facilities are not provided / used for storage of employees personal items, clothing and other possessions. [COS]



VERBAL ACKNOWLEDGEMENT OF THIS REPORT PROVIDED BY DEPUTY DARLENE RICKS

DLANGSFORD@SBSO.ORG LBURKE@SBSO.ORG

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 re-inspection). 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



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Detention or Incarceration Notice of Violations

Routine/Renewal

Permit Number 44-01-224	Permit Name St. Bernard Parish Jail-224		
Name of Establishment St. Bernard Parish Jail-224	Owner Name		
Address 1900 Paris RD Chalmette, LA 70043	Date 06/09/2021	Time 12:20 PM	

LAC TITLE 51 PART XVIII

NON-CRITICAL ITEMS: These items should be corrected by the next regular inspection or according to the compliance schedule (see below) established by this office.		
Category	Code Reference	Description of Violations
Building Requirement	101	6 - The ceilings are not in good repair. STAINED CEILING TILE NOTED IN THE INTAKE AREA AND STAFF TOILET ROOM STAINED CEILING TILES NOTED IN CONTROL ROOM-C WING MISSING VENT COVER IN THE INTAKE AREA ABOVE TV

Comments:

VERBAL ACKNOWLEDGEMENT OF THIS REPORT

LBURKKE@SBSO.ORG

CSILCIO@SBSO.ORG LBURKE@SBSO.ORG

THE FOLLOWING AREAS WAS OBSERVED AT THE TIME OF INSPECTION:INTAKE/PROCESSING, AFIS, MEDICAL, LAUNDRY, A-WING, B-WING, C-WING, STAFF TOILETS, CONTROL AREAS

CEILING TILES NEAR VENT IN STAFF MEN RESTROOM-DUSTY
LAUNDRY AREA-LEAK NOTED AT THE BACKFLOW VALVE/MIXER FAUCETT AT THE UTILITY MOP SINK;
PIPES ABOVE THE LAUNDRY MACHINES-DUSTY

LIGHT SHIELD COVER IN MAIN HALLWAY WAS NOT CLEAN.

ALL OTHER AREAS WERE OKAY

Number Licensed For Number in Attendance License Anniversary 200 06/30/2021

Sanitarian Name/Print Phone # Sanitarian Signature R.S. # 1296

The above mentioned violations were called to my attention and were explained to me in detail. I hereby agree to