

Department of Public Safety & Corrections State of Louisiana

JOHN BEL EDWARDS
GOVERNOR



JAMES M. LE BLANC SECRETARY

February 18, 2022

TO:

The Honorable David Hedrick

Sherting Concordia Parish

FROM:

ames M. Le Blanc

Secretar

RE:

"Basic Jail Guidelines" Monitoring Report

Please see the attached monitoring report regarding the Basic Jail Guidelines (BJG) annual inspection.

Thank you for your support of the BJG process.

JML/mw

c:

Mike Ranatza, Executive Director, Louisiana Sheriffs' Association Janice Little, Warden, Concordia Correctional Facility for Women Seth Smith, Chief of Operations Marcus Myers, Warden Chad Firmin, BJG Team Leader



03/24/2021

BJG RECERTIFICATION REPORT

FACILITY NAME:

Concordia Correctional Facility for Women

BJG MONITORS:

Major Chad Firmin Team Leader

FACILITY STAFF:

Warden Janice Little

BJG INSPECTION DATE:

December 15, 2021

PREVIOUS BJG INSPECTION DATE: OPERATIONAL CAPACITY:

Preliminary Inspection – June 19, 2019

224

COUNT ON DAY OF VISIT:

216

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

CONCERNS OR ISSUES FROM THE PREVIOUS BJG MONITORING INSPECTION: None

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	0	109	109
Number of Local Offenders	0	107	107
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	0	216	216

Number of DOC Offenders that are:

Single Bunked	0
Double Bunked	109
Triple Bunked	0
Total	109

Number of DOC Offenders that are in restricted housing:

Single Bunked	0
Double Bunked	0
Triple Bunked	0
Total	0

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

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

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
December 2020	0	0	0	0	3 pills, 3 pieces e-cig, 1 bottle Clorox
January 2021	0	0	0	0	0
February 2021	0	0	0	0	0
March 2021	0	0	0	0	0
April 2021	0	0	0	0	0
May 2021	0	0	0	0	0
June 2021	0	0	0	0	0
July 2021	0	0	0	0	0
August 2021	0	0	0	0	2 lighters, 1 vape
September2021	1 green tobacco sub.	0	0	0	0
October 2021	0	0	0	0	0
November 2021	0	0	0	0	0

GENERAL APPEARANCE/CLEANLINESS/COMMENTS OF THE FACILITY:

Living Area:

Dorms -

The dorm areas are clean and offender belongings stored properly. All offenders have mattresses, sheets and blankets. All offender beds are made up neat. Cleaning supplies available for clean up in dorms.

Cell Block -

There is no cellblock area at the facility.

Culinary/Dining:

The kitchen area is neat and clean. Food stored properly and dated. Cooler, freezer and hot water temperatures being checked and logged. Samples trays fixed and kept in cooler. Kitchen utensils are in a locked box on shadow board and on inventory. Utensils are being signed in and out. Made recommendation to Warden and kitchen staff to paint over unused shadows where a utensil is no longer on the board and update the utensil inventory located in the cabinet.



Bathrooms:

Shower and bathroom areas are clean. Some shower faucets are leaking. Hot water available in showers. Toilets and sinks in working condition on the day of the audit.

Yard Areas:

Yard area was clean. Offenders were observed out on the yard for recreation during the inspection.

Maintenance:

There is no maintenance shop at the facility.

COUNTS:

- How many formal counts are conducted each shift? 3 counts per shift
- How many counts are conducted each day? 6 counts conducted each day

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? Offenders are physically counted when outside the housing units and called into control.
- 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 or No) Yes

If yes,

- What is their classification process to determine who is eligible for trustee status?
 Criminal history, DOC information, disciplinary, medical are all reviewed when determining an offender for trustee status. Applicants are approved by the Warden.
- 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 2020	11	71	6.5	0
January 2021	11	95	8.6	4 mamp
February 2021	7	95	14	0
March 2021	5	120	24	3 mamp
April 2021	13	126	9.7	4 (2bzo, 2 mamp)
May 2021	9	135	15	5 (4 mamp, 1 thc)
June 2021	11	121	11	0
July 2021	11	130	12	0
August 2021	21	121	5.8	4 (3 mamp, 1 mtd)
September 2021	8	110	14	3 mamp
October 2021	37	105	2.9	2(1 mdp, 1 bzo)
November 2021	23	106	4.6	2 (1 amp, 1
		1		(mamp)

Rules and Discipline

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

If yes,

What is their restoration of good time application process for the offender population?

An offender will request the paperwork to restore good time. Once the paperwork is filled out, it will be sent to be reviewed and verify the correct amount of time and get with the warden to sign the paper. Once it has been verified then it is sent to DOC.

 Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? Yes

BJG AUTOMATED MONTHLY REPORTING REVIEW:

Has the facility been inputting the correct info timely? Yes

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

OFFENDER PROGRAMS:

GED Program

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

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

Partners in Parenting

LIST ALL OTHER OFFENDER PROGRAMS:

• Church Services

GRIEVANCE PROCESS:

- Does grievance process include two levels of review? Yes
- Who are the designees at each level? Captain 1st level, Chief of Security 2nd level
- What is the specified time period for response at each level? 15 days 1st, 30 days 2nd

PREA COMPLIANCE:

- Is this facility required to be PREA compliant due to contract language? (Yes or No) No
- Is this facility PREA compliant? (Yes or 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?

OTHER:

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Staff was very courteous and knowledgeable of job duties. Staff was open to suggestions and any recommendations made by the monitoring team. Staff morale appeared to be good.

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

During the walk through several offenders several offenders were spoken with. There were no concerns or complaints voiced by offenders. Offender morale and quality of life are good. All offenders have mattresses, sheets and blankets.

RECOMMENDATION:

At this time, the monitoring team recommends certification with continued annual monitoring visits.



Visual Targection: trash disposal contract, completed impaction reports, include disconstitution that difficients were converted. Compliant	Facility: Concordia Parish Correctional Facility for Women	Date Conducted: December 15, 2021	12/22/2020	
BASIC JAIL GUIDELINES (BJG) PART 1 - SAFETY A ROTIGETOR FROM INJURY AND ILLNESS References ACA CS 1-14-09, 1				
ARR TISETOR FROM INJURY AND ILLNESS References ACC ST-14-04, 1-14-04, 1-14-04, 1-14-05, 1-14-05, 1-12-04, 1-14-05, 1-12-04, 1-14-05, 1-14	Monitors: Major Chad Firmin Team Leader			
A PROTECTION FROM HUNRY AND TUNNES Members and ACQ STAGE 1, 12-102, 12-104, 12-104, 12-105, 1		BASIC JAIL GUIDELINES (BJG)		
Sementary (ACC) 51-14-01, 124-02, 124-03, 124-03, 124-05, 124-				
Act 20. Safety-Shailation/Taspections and regulations of the State Senator Compliant Daily inspections being done at the facility. Act 20. Safety-Shailation/Taspections are independent on the State Fee Naphala. Compliant Daily inspections being done at the facility. Water temperatures are being checked for Possing or Compliant Daily inspections being done at the facility. Water temperatures are being checked for Possing or Compliant Daily inspections being done at the facility. Water temperatures are being checked for Possing or Compliant Daily inspections being done at the facility. Water temperatures are being checked for Possing or Compliant Daily inspections being done at the facility. Water temperatures are being checked for Possing or Compliant Daily inspections being done at the facility. Act 20. Special daily and facility or the State Feet Daily and the Complex of the State Feet Daily and the Complex of the State Feet Daily or Compliant Daily inspection being done and the State Feet Daily or Compliant Daily inspection property for disposal of materials and reports, include documentation that dislikeness were content. There is a written and implemented plan for the Compliant Daily inspection reports. However, and plant and an inspection reports. However, and plant and an inspection reports. However, and plant and implemented plan for the Compliant Daily inspection are properties. The Compliant Daily inspection are done and maintained by Compliant Daily inspection are done and maintained by Compliant Daily inspection are done and maintained by Compliant Daily inspection are governed by East Daily in the Compliant Daily inspection are done and maintained by Compliant Daily inspection are governed by East Daily in the Compliant Daily inspection are governed by East Daily in the Compliant Daily inspection are done and maintained by Compliant Daily inspection of the Compliant Daily inspection are governed by East Daily in the Compliant Daily inspection are properties of the State Compliant Daily inspection of				
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Li-A-002 Disposal of Materials Disposal of Indust, old, and hazardous motivati complies with applicable provement regulations. Disposal of Indust, old, and hazardous motivat, completed inspection reports, include discussitation that difficulties were control. There is a written and prests are controlled. There is a written and implemented plan for the control of vermin and peats. The Old Phase Control of There is a written and implemented plan for the control of vermin and peats. The Old Phase Control controls, trash disposal contracts, impection reports The Old Phase Control of the copying Celebrations and Santation of the Incitiv. The facility is placed and in good region. There is a written housekeeping plan that provides for the copying Celebrations and Santation of the Incitiv. The facility speaked used on good require. There is a written housekeeping plan that provides for the copying Celebrations and Santation of the Incitiv. The facility speaked users once and supply a certified at least annually by an independent, custode source to be a compliance with the State Santany Code. The facility speaked between your control of the Code of the	The facility complies with all applicable laws and regulations of the State Sanitation Officer and the State Fire Marshal. The following inspections are implemented: *Weekly 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 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	Water temperatures are being checked for housing units and recorded. DHH and FM inspections are		
government regulations. Visual Inspection regulation that definition that def	I-A-002 Disposal of Materials	Compliant- Facility has a contract with a company for		
Compliant- Facility has a contract for pest control.	government regulations. Visual Inspection: trash disposal contract, completed inspection reports, include			
The Folia's Keam and in good repair. There is a written housekeeping plan that provides for the ongoing ceanliness and sanatation of the facility. The facility is chair in the provides for the ongoing ceanliness and sanatation of the facility. What Inspection inspection reports, completed forms, documentation of correction of least intelligent provides for the ongoing ceanliness and supply is certified at least annually by an independent, outside source to be in compliance with the State Sanatry Octor. The facility provides water source and supply is certified at least annually by an indiceptoding outside source to be in compliance with the State Sanatry Octor. The facility complete water source and supply is certified at least annually by an indiceptoding outside source to be in compliance with the State Sanatry Octor. The facility complete water source and supply is certified at least annually by an indiceptoding outside source to be in compliance with the State Sanatry Octor. The facility of the State Sanatry Octor. The facility of the State Sanatry Octor. The facility of the State State of State offenders are governed by R.S. 15:811 and 833 and DPSSC Department Regulation No. C-03-003 "Escorted Absences." **New HICLE SAFETY** **Enterior State S	I-A-003 Vermin and Pests Vermin and pests are controlled. There is a written and implemented plan for the control of vermin and pests.	Compliant- Facility has a contract for pest control.		
The facility is clean and in good repair. There is a written housekeeping plan that provides for the noglogic celaniess and sanatation of the facility. Visual Inspection inspection reports, completed forms, documentation of correction of lateral transports. The facility provides 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's provides water source and supply is certified at least annually by an independent, outside source by the state health officer. There is a spring deficiencies. 8. VEHICLE SAFETY 9. VEHICLE SAFETY 8. VEHICLE SAFETY 9. VEHICLE SAFETY 9. VEHI		Compliant Dally become and in both a day and		
identified deficiencies 1-4-0-09 Water Supply The facility speake water source and supply is certified at least annually by an independent, outside source to be in compliance with the State Saintary Code. The facility complex with the requirements of the state health officer. There is a specific plan for addressing deficiency. If any, that is approved by the state health officer. In part of addressing deficiency is any, that is approved by the state health officer. It is a specific plan for addressing deficiency is any, that is approved by the state health officer. It is a specific plan for addressing deficiency is a specific plan for addr	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 inspections are done each morning by the		
Th-00S Water Supply The facility's posted 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 complex with the requirements of the state health officer. There is a specific plan for addressing deficiences, if any, that is approved by the state health officer. Wisual Transcution: documentation of approval by DiH or local authority, plan for addressing deficiences. B. VEHICLE SAFETY References: Day, Beg. C-03-003/OP-A-3 Te-001 Offender Transport Exorted and unecorted absences of state offenders are governed by R.S. 15:811 and 833 and DPSSC Department Regulation No. C-03-003 "Escorted Absences." Visual Impection: documentation of staff training, documentation of medical, funeral, staff (statistical strial) C. EMERGENCY PREPAREDNESS/RESPONSE References: ACA CS 1-12-C03, 1-12-C03, 1-12-C04, 1-12-C04, 1-12-C04, 1-12-C05, 1-12-C07, 1-12-C01, 1-12-C03, 1-12-C				
References: Dept. Reg. C-03-003/0P-A-3 I-9-010. Offender Transport Excorted and uncorted absences of state effenders are governed by R.S. 15:811 and 833 and DPS&C Department Regulation No. C-03-003 "Escorted Absences." Visual Inspection: documentation of staff training, documentation of medical, funeral, etc. (outside trips) C. EMERGENCY PREPAREDNESS/RESPONSE References: ACA CS 1-10-01, 1-1C-02, 1-1C-03, 1-1C-04, 1-1C-06, 1-1C-07, 1-1C-01, 1-1C-03, 1-1C-03, 1-1C-03, 1-1C-04, 1-1C-03, 1-1C-04, 1-1C-03, 1-1C-04, 1-1C-03, 1-1C-04, 1-1C-03, 1-1C-04, 1-1C-03, 1-1C-04, 1-1C	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.			
References: Dept. Reg. C-03-003/DP-A-3 T-B-00.1 Offender Transport Excorted and unescorted absences of state offenders are governed by R.S. 15:811 and 833 and DPS&C Department Regulation No. C-03-003 "Escorted Absences." Visual Trapection: documentation of staff training, documentation of medical, funeral, etc. (outside tries) C. EMERGENCY PREPAREDNESS/ RESPONSE References: ACA CIS 1-1.C-01, 1-1.C-02, 1-1.C-03, 1-1.C-04, 1-1.C-06, 1-1.C-07, 1-7.C-01, per. Reg. A-04-02/PS-1-3, C-02-001/OP-B-3, C-02-001/OP-B-3, C-03-001/AM-1-4 T-C-00.1 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 secunds and rate or man-imade 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 exocution 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 include the emergency based southers to the DPS&C, CoAS, telephone 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-803-8748 during normal business bous or the control center at EHCC, telephone 800-803-8748 during normal business outlined in Dept. Reg. C-05-001/AM-1-4, "Activity Reports, UORs," Category A, B and C.	addressing deficiencies			
Compliant-Staff is trained upon hire and annually on transporting offenders are governed by R.S. 15:811 and 833 and DPS&C Department Regulation No. C-03-003 "Escorted Absences." Visual Inspection: documentation of staff training, documentation of medical, funeral, etc. (outside trias) C. EMERGENCY PREPAREDNESS/RESPONSE References: ACA CIS 1-10-01, 1-10-02, 1-10-04, 1-10-06, 1-10-07, 1-72-01, Dept. Regs. A-04-002/PS-D-3, C-02-001/OP-A-5, C-02-010/OP-B-3, C-05-001/AM-1-72-01, Dept. Regs. A-04-002/PS-D-3, C-02-001/OP-A-5, C-02-010/OP-B-3, C-02-				
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References: ACA CIS 1-1C-01, 1-1C-02, 1-1C-03, 1-1C-04, 1-1C-06, 1-1C-07, 1-7E-01, Depth. Rega. A-04-002/PS-D-3, C-02-001/OP-A-5, C-02-001/OP-A-5, C-02-001/OP-B-3, C-05-001/AM-1-4 1-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 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-803-8748 during normal pushes and the procedures include the reporting procedures as outlined in Dept. Reg. C-05-001/AM-I-4, "Activity Reports, UORs," Category A, B and C.				
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Visual Inspection: training records, facility logs, documentation of approval of plan, documentation of annual review, documentation of staff receipt, training on the 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 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-803-8748. Applying the 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.	address emergency situations. Plan is sent to FM and		

Facility - Date

BJG Compliance



	Findings	Response
I-C-002 Immediate Release of Offenders There is a means for the immediate release of immates from locked areas in case of emergency and there are provisions for a backup system. The facility has exits 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- All exits are clearly marked. The exit doors to the housing units are magnetic locks that is operated from the front office control room. Doors can also be opened by key.	
Visual Insection: 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 approves any variances, exceptions, or emiscalencies. Visual Inspection: documentation of fire alarm and detection system maintenance and testing. Plans for addressing deficiencies.	Compliant-Facility complies with fire safety codes and FM.	
I-C-004 Facility Furnishings Facility furnishings meet fire-safety-performance requirements. Visual Insection: Sectifications for all furnishings.	Compliant-Furnishings meet requirement.	
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-FTC materials are properly stored and on inventory.	
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.	Compliant- Facility operates within operational capacity.	

PART II - SECURITY	1	
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-B-1, C-02-007/OP-C-3	Findings	Response
III-A-001 Control There is 24-hour monitoring and coordinating of the facility's security, life safety, and communications systems. Visual Inspection: facility records/logs, maintenance records, records of staff deployment	Compliant-Facility has a 24 hour camera monitoring system and daily inspections are done throughout the facility.	
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- Facility has a fence, gates and razor wire which seperates offenders from general public.	
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-Facility maintains adequate staffing at all times which reflects good correctional practice.	
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 works on all shifts.	
II-A-005 No Offender Control Over Others No offender or group of offenders is given control, or allowed to exert authority over other offenders. Visual Inspection: written policy and procedure	Compliant-Policy in place for no offenders to have control over other offenders.	
In-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 BJG 1-C-001 for recording requirements to DPSRC Visual Inspection: copies of log book, records of staff deployment	Compliant-Adequate staffing on shifts. Employees receive training annually.	



	Findings	Response
II-A-007 Counts	Compliant- At least 3 counts done on day shift.	
The facility has a system for physically counting offenders. At least one formal		
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		
femograpy absences Visual Inspection: completed forms, facility records/logs.		
II-A-008 Offender Population Management System	Compliant- Complete records kept on all offenders	
There is an offender population management process that includes records on the	housed at the facility.	
admission, processing, and release of offenders. Written policy, procedure, and	noused at the facility.	
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;		
 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).		
7. Orienda nedial record (see bus tv-0-004).		
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-		
342-3759 or email to DOC-HQ_Supplemental@la.gov.		
Master prison form;		
Fingerprints: one FBI print card from AFIS;		
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);		
S. 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-Paperwork done during the admission	
Prior to accepting custody of an offender, staff determine that the offender is legally	process that the offender is housed at the facility.	
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	Compliant-Offenders and property are searched and	
Admission processes for a newly admitted offender include, but are not limited to: •Searching of the offender and personal property;	inventoried during the admission/intake process.	
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- No out of state offenders housed at the	
The names of any out of state offender (federal or state) to be housed at a local jai	facility on day of inspection.	
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) shall not be released in the state of EA. Any out or state offender		
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		
	1	
offender's release date.		



	Findings	Response
II-A-012 Classification System	Compliant-Policy in place for the classification of	The Paris of the P
Vritten policy, procedure, and practice provide for a written offender classification lan that includes custody required and assignment to appropriate housing. Offender management and housing assignment considers age, gender, legal status, ustody needs, special problems and needs, and behavior. All offenders are lassified using an objective classification process that at a minimum: Identifies the appropriate level of custody for each offender Identifies appropriate housing assignment	offenders to the facility during the intake process.	
Identifies the offender's interest and eligibility to participate in available programs Visual Inspection: offender housing records, offender classification records		
I-A-013 Prohibition on Youthful Offenders Offenders subject to juvenile jurisdiction are housed in adult facilities only under the onditions established by law. If juveniles are committed to the facility, a plan is in lace to provide for the following: Supervision and programming needs of the juveniles to ensure their safety, ecurity, and education; Classification and housing plans; Appropriately trained staff. DAS shall be notified of offenders who are under the age of 18 that are sentenced on the DPS&C as an adult for transfer to the appropriate institution. Issual Inspection: admission and housing, offender records, classification records	Compliant- There was no youthful offenders housed on the day of inspection.	
	Compliant Only formal offendam bound of the	
II-A-014 Separation in Classification Male and female offenders must be housed in separate rooms/cells with reasonable sight and sound separation. //swal Inspection: offender housing records, offender classification records, diagram of acility showing male/female housing areas	Compliant- Only female offenders housed at the facility.	
II-A-016 Photo Identification The facility shall provide each DPS&C offender with photo identification, which the offender shall carry/wear on their person at all times. Visual Inspection: Offender identification card/wristband.	Compliant- Offenders are given ID's.	
II-A-017 Drug Free Workplace written policy, procedure, and practice provide for a drug-free workplace, which includes at a minimum pre-employment testing, post-accident testing, reasonable suspicion/probable cause testing, and quarterly random testing of all employees. Visual Inspection: drug testing lab fee bills for drug testing of facility employees (including pre-employment, post accident, reasonable suspicion/probable cause, random).	Compliant-Drug testing policy being done for employee	
II-A-018 Offender Drug Testing Written policy, procedure, and practice provide for alcohol/drug testing, both randomly and for probable cause. Facility policy will require that a minimum of 5% of the DPS&C offender population shall be drug tested on a monthly basis. Visual Inspection: Facility log, documentation of alcohol/drug testing of offenders.	Compliant- Offender drug testing done and the 5% min	
II-A-019 Offender Transfers All transfers of DPS&C offenders to other than DPS&C facilities shall be reported to the DAS, 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 transfering facility to DAS at least one day prior to the transfer occurring by fax to 225-342-2439 or by email to LocalitaTranfers@ha.gov. Offenders should not be transferred to other than DPS&C facilities within 60 days of release, unless for disciplinary reasons. An offender scheduled for an appearance before the Committee on Parole shall not be transferred prior to the scheduled hearing date. However, if the transfer is deemed unavoidable by the Warden due to security concerns, the Warden shall obtain prior approval for an exception from the DPS&C Chief of Operations or designee. Staff from the sending facility shall notify the Committee on Parole as soon as it is known that the offender must be transferred. Visual Inspection: facility logs, documentation of transfers of DPS&C offenders to other than DPS&C facilities		
II-A-020 Frequency of Cell Checks 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.		
B. USE OF PHYSICAL FORCE	1	
References: ACA CJS 1-28-01, 1-28-02, 1-28-03, 1-28-05, 1-28-06, 1-4D-12,		
Dept. Regs. B-06-001 HC-08/IS-D-HCP33, HC-29/IS-D-HCP40, C-01-008/OP-A-	Findings	Response

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B. USE OF PHYSICAL FORCE	1	
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-08/15-D-HC93, HC-29/IS-D-HCP40, C-01-008/0P-A-19, C-02-008/0P-A-16, C-03-003/0P-A-3	Findings	Response
II-B-001 Use of Force The use of force is restricted to instances of justifiable self-defense, protection of others, protection of property, and prevention of escapes, and then only as a last resort and in accordance with appropriate statutory authority. Written policy, procedure, and practice govern the use of force and provide that force shall never be used as punishment. When an incident involving use of force with a DPS&C offender results in the termination and/or arrest of an employee, the facility shall immediately report the incident to the DPS&C, Office of Adult Services, telephone number 800-803-8748 during normal business hours or the control center at Elayn Hunt Correctional Center, telephone number 800-842-4399 after hours. In addition, the facility shall provide a written report of the incident to the DPS&C, Chief of Departations within those business dues.	Compliant-Staff receive training annually on use of force.	
II-B-002 Use of Restraints 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 sychiatric 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; • Documentation of efforts for less restrictive treatment alternatives; • An after incident review.	Compliant-Staff are trained on the use of restraints. Restraints are kept in a locked cabinet.	

Facility - Date

BJG Compliance



	Findings	Dorrana
II-B-002-1 Use of Restraints for Pregnant Offenders	Findings Compliant-Policy in place . Facility does not house	Response
Written policy, procedure, and practice complies with the following requirements:	pregnant females. If a female is pregnant they are	
Restraints During Pregnancy-Related Transportation	transferred to another facility.	
 Restraints shall not be used on a pregnant offender (1) during any pregnancy 	dunsierrea to another facility.	
related medical distress, (2) while she is being transported to a medical facility or		
LCTW 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- Firearms training is done annually. Staff	
The use of firearms complies with the following requirements.	training rosters on file.	
 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		
firearms		
Visual Inspection: training records, safety regulation and inspection reports, photos o	'	
equipment used for unloading and reloading II-B-004 Written Reports	Compliant-Reports are done on incidents that occur	
Written reports are submitted to the facility administrator or designee no later than	and reviewed by supervisors.	
the conclusion of the tour of duty when any of the following occur:	7, 50, 50, 50, 50, 50, 50, 50, 50, 50, 50	
Discharge of a firearm or other weapon		
Use of less lethal devices to control offenders Use of force to control offenders	1	
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		
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- Searches being done on offenders and	
Written policy, procedure and practice guide searches of facilities and offenders to control contraband. Manual or instrument inspection of body cavities is conducted	their belongings.	
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		
	1	
D. ACCESS TO KEYS, TOOLS, UTENSILS		
References: ACA CJS 1-2D-01	Findings	Response
References: ACA CJS 1-2D-01 II-D-001 Key, Tool, and Utensil Control	Compliant- Kitchen utensils are on inventory and	Response
References: ACA CJS 1-2D-01 II-D-001 Key, Tool, and Utensil Control Keys, tools, culinary equipment and medical/dental instruments and supplies	Compliant- Kitchen utensils are on inventory and accounted for and being signed in and out. Advised	Response
References: ACA CJS 1-2D-01 II-D-001 Key, Tool, and Utensil Control Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written	Compliant- Kitchen utensils are on inventory and accounted for and being signed in and out. Advised staff to number the utensils and have all utensils	Response
References: ACA CJS 1-2D-01 II-D-001 Key, Tool, and Utensil Control Keys, tools, culinary equipment and medical/dental instruments and supplies	Compliant- Kitchen utensils are on inventory and accounted for and being signed in and out. Advised	Response
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References: ACA C1S 1-2D-01 II-D-001 Key, Tool, and Utensil Control Keys, tools, cullinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies. Visual Inspection: documentation of perpetual inventories PART III - ORDER	Compliant- Kitchen utensils are on inventory and accounted for and being signed in and out. Advised staff to number the utensils and have all utensils	Response
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References: ACA C1S 1-2D-01 II-D-001 Key, Tool, and Utensil Control Keys, tools, cullinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies. Visual Inspection: documentation of perpetual inventories PART III - ORDER	Compliant- Kitchen utensils are on inventory and accounted for and being signed in and out. Advised staff to number the utensils and have all utensils labeled in cabinet also. Keys are signed in and out.	Response Response
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Indeferences: ACA CIS 1-20-01 II-D-001 Key, Tool, and Utensil Control Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies. Visual Inspection: documentation of perpetual inventories PART III - ORDER A. OFFENDER DISCIPLINE References: ACA CIS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. £ 05-001/DP-C-1 III-A-001 Rules and Discipline Prior to being placed in the general population, each offender is provided with an orientation that includes facility rules and regulations, including access to medical care and the process for applying for restoration of good time. The facility shall follow and provide the DPSSC "Disciplinary Rules and Procedures for Adult Offenders', to the offender population. ■If the Sheriff or local jall administrator believes that a loss of good time is appropriate, then the incident shall be fully documented and the offender transferred to the DPSSC for a disciplinary hearing to ensure due process in	Compliant- Kitchen utensils are on inventory and accounted for and being signed in and out. Advised staff to number the utensils and have all utensils labeled in cabinet also. Keys are signed in and out. Findings Compliant- Offender rule book and orientation given to	
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Indeferences: ACA CIS 1-20-01 II-D-001 Key, Tool, and Utensil Control Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies. Visual Inspection: documentation of perpetual inventories PART III - ORDER A. OFFENDER DISCIPLINE References: ACA CIS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. £ 05-001/DP-C-1 III-A-001 Rules and Discipline Prior to being placed in the general population, each offender is provided with an orientation that includes facility rules and regulations, including access to medical care and the process for applying for restoration of good time. The facility shall follow and provide the DPSSC "Disciplinary Rules and Procedures for Adult Offenders', to the offender population. ■If the Sheriff or local jall administrator believes that a loss of good time is appropriate, then the incident shall be fully documented and the offender transferred to the DPSSC for a disciplinary hearing to ensure due process in	Compliant- Kitchen utensils are on inventory and accounted for and being signed in and out. Advised staff to number the utensils and have all utensils labeled in cabinet also. Keys are signed in and out. Findings Compliant- Offender rule book and orientation given to offenders and signed for upon intake.	
References: ACA CIS 1-2D-01 II-D-001 Key, Tool, and Utensil Control Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies. Visual Inspection: documentation of perpetual inventories PART III - ORDER A. OFFENDER DISCIPLINE References: ACA CIS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. E 05.001/DPc-01 III-A-001 Rules and Discipline Prior to being placed in the general population, each offender is provided with an orientation that includes facility rules and regulations, including access to medical care and the process for applying for restoration of good time. The facility shall follow and provide the DPS&C "Disciplinary Rules and Procedures for Adult Offenders", to the offender population. If the Sheriff or local jall administrator believes that a loss of good time is appropriate, then the PS&C for a disciplinary hearing to ensure due process in accordance with La. R.S. 15:571.4.	Compliant- Kitchen utensils are on inventory and accounted for and being signed in and out. Advised staff to number the utensils and have all utensils labeled in cabinet also. Keys are signed in and out. Findings Compliant- Offender rule book and orientation given to offenders and signed for upon intake.	



PART IV - CARE	Î	
A. FOOD SERVICES		
References: ACA CJA 1-4A-01, 1-4A-02, 1-4A-04,1-4A-06, Dept. Reg. C-06- 001/IS-C-1	Findings	Response
IV-A-001 Food Storage Facilities There are sanitary facilities for the storage of all foods that comply with applicable state and/or federal guidelines. Visual Inspection: DHH inspection reports, internal inspection reports	Compliant-Storage facilities are clean and food stored properly and dated. A delivery of food items was delivered and was in the process of dating the items	
IV-A-002 Food Service Facilities Tollet and hand basin facilities are available to food service personnel in the food preparation area. Visual Inspection: DHH inspection reports, photos	Compliant- Bathroom facilities are available for food service personnel with soap and papertowels.	
IV-A-003 Food/Dietary Allowances The facility's dietary allowances are reviewed at least annually by a qualified nutritionist or dietical 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,	Compliant-Menus are signed and approved by dietician. Menus are posted.	
documentation of at least annual review and quarterly menu evaluations 11V-A-004. Records of Meals Served Written policy, procedure, and practice require that accurate records are maintained of all meals served. Visual Inspection: facility logs	Compliant-Records kept of serving time and meals served and number of offenders that was fed for each meal.	
Visual Inspection: facility logs	Compliant-Denial of food is not used as discipline.	
ITVA-005 Food Service Management Written policy, procedure, and practice require that three meals (including two hot meals) are provided under staff supervision at regular meal times during each 24- hour period, with no more than 14 hours between the evening meal and breakfast. Variations may be allowed based on weekend and holiday food service demands provided basic nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal. Visual Inspection: records of meals served and times served, facility logs	Compliant- At least 2 hot meals served daily. Serving time of meals are within time frame.	
IV-A-007 Therapeutic/Special Diets Therapeutic and/or special diets are provided as prescribed by appropriate clinicians or when religious beliefs require adherence to religious dietary laws. Written policy, procedure, and practice provide for special diets as prescribed by appropriate medical or dental personnel. Visual Inspection: health records, diet records or forms, documentation of warden's approval of religious diet.	Compliant- Diets are available for religious and medical reasons. There are no offenders on religious diets as of the day of the audit.	
TV-A-008 Health Protection for Food Service There is adequate protection for all offenders and staff in the facility and for offenders and other persons working in food service. All persons involved in the preparation of the food receive a pre-assignment inspection by appropriate kitchen staff, to ensure freedom from diarrhea, skin infections, and other illnesses transmissible by food or 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.	Compliant-Offenders are checked and cleared by medical before working in the kitchen. There is a checklist conducted by staff on offenders working in the kitchen.	



B. HYGIENE	1	
Dr. Holling References: ACA CJS 1-4B-01, 1-4B-02, 1-4B-03, 1-4B-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. Visual Inspection: maintenance records or reports, inspections, documentation of periodic measurement of water temperature, offender grievances	Compliant-Toilets and wash basins available in housing units and in working order. Hot water temperatures are checked daily.	
IV-B-002 Plumbing Fixtures - Showers Offenders, including those in medical housing units or infirmaries, have access to operable showers with temperature-controlled hot and cold running water 24 hours per day, on a reasonable schedule, (a minimum of three times per week). Water for showers is thermostatically controlled to temperatures ranging from 100 degrees to 120 degrees Fahrenheit.	Compliant- Showers available in housing units and in working order with adequate hot water.	
Visual Inspection: maintenance records or reports, inspections IV-B-003 Clothing	Compliant-Facility provides clothing upon intake and	
The facility has an obligation to provide adequate institutional clothing appropriate to the season and the offender's work status, including adequate changes of cothing to allow for regular laundering. The facility may fuffill this obligation by furnishing clothing or permitting the offender to secure and wear his own clothing, except that when the offender does not provide adequate clothing for himself, the facility shall furnish same. Visual Inspection: documentation of clothing issue, documentation of cleaning and	compliance and as needed. Facility has a laundry schedule for the washing of offender clothing. Laundry is done everyday.	
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-Offenders are provided with mattresses sheets, blankets and pillow. Offender beds were all made up.	
Visual Inspection: documentation of issue and exchange IV-B-005 Personal Hygiene	Compliant-Necessary hygiene items are provided to	
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, tollet paper, toothbrush, toothpaste and shaving equipment.	offenders. Other items are available for purchase through commissary.	
Visual Inspection: documentation that items are provided, list of items available		
C. CONTINUUM OF HEALTH CARE SERVICES		
References: ACA CIS 1-2A-14, 1-4C-01, 1-4C-03, 1-4C-04, 1-4C-06, 1-4C-07, 1-4C-08, 1-4C-09, 1-4C-10, 1-4C-13, 1-4C-15, 1-4D-01, 1-4D-03, 1-4D-04, 1-4D-04, 1-4D-05, 1-4D-08, 1	Findings	Response
ITV-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. Wiritten policy, procedure, and practice provide for the delivery of health care services, including medical, dental and behavioral health services under the control of a designated health care authority who shall be a physician or a licensed or registered health care provider or health agency. Access to these services shall be unimpeded in the sense that correctional staff should not approve or disapprove offender requests for services in accordance with the facility's health care plan. Oral health services include access to diagnostic x-rays, treatment of dental pain, development of individual treatment plans, extractions of non-restorable teeth, and referral to a dental specialist, including an oral surgeon. Specialty non primary reliarial convices are propagated to DRSEC. The remarket chall his evolunitard has the in accordance with R.S. 15831, DPSEC offenders may be assessed a co-payment for receiving medical or dental treatment, including prescription or nonprescription drugs. The co-payment fee schedule shall be approved by the DPSEC. Such fee schedule for DPSEC offenders housed in local jail facilities shall not exceed the DPSEC 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 DPSEC. *DPSEC approved rate in accordance with Dept. Reg. B-06-001 HC-02/IS-D-HCP14, unless prior approval has been granted by the DPSEC. Such fee scovered and from which the offender may make a claim for payment or reimbursement of t	Compliant-Nurse on staff at facility to provide care to offenders 5 days a week. If needed offenders are taken to the correctional facility for a doctor callout once a week.	
IV-C-002 Adequate Equipment and Supplies Adequate equipment and supplies for medical services are provided as determined by the health care authority and are in working order. Visual Inspection: Photos	Compliant- Facility maintains equipment and supplies for the medical services provided at the facility.	



	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 dentist. (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 credentials/licensure.	Compliant-If medical care is required beyond the care the nurse can provide then offenders are seen by a doctor once a week at the correctional facility or transported to a medical facility.	
Correctional or other personnel Qualifications/Creedentials 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 administrating prescribed medications by qualified personnel. Visual Inspection: health records, completed medication administration form, personnel records, copies of current credentials or licensure, documentation of	Compliant- Nurses license is current. Nurse administer medication to offenders.	
compliance with standing orders, health record entries, staff training records IV-C-005 24 Hour Care Written policy, procedure, and practice ensure that offenders have access to 24- hour emergency medical, dental, and mental health services, including on-site first aid, basic life support, and transfer to community based services. This requirement may be met by agreement with a local state hospital, a local private hospital, on-call qualified health care personnel (see IV-C-003), or on-duty qualified health care personnel. Decisions regarding access to emergency medical services shall not be the sole province of correctional or other non-health personnel except in accordance with IV-C-004.	Compliant-Nurse work Monday through Friday. A nurse is on call at night and weekends if needed.	
Visual Inspection: designated facility, provider lists, transportation logs 17-C-006 Health Screens Written policy, procedure and practice require that all DPS&C offenders receive a heath 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 (IVC-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:	Compliant- Health screens are done upon arrival at the facility by the nurse. Dr. Moak is the health authority for the facility.	
1. Current medical, dental or behavioral health problems and communicable diseases; 2. Current treatment plan; 3. Current medications, including psychotropic; 4. History of hospitalization; 5. Suicidal risk assessment; 6. Use of alcohol or other drugs including need for possible detoxification; 7. Possibility of pregnancy; 8. Observation of the followina: a. Appearance and behavior; b. Body deformities and other physical abnormalities; c. Ease of movement; d. Current physical traumas or characteristics and a determination of whether or not the offender should be recommended for immediate transfer to the DS&C for appropriate care; e. Any physical impairment (hearing, vision, mobility) or other disability which would impede the offender's access to programs or services. Offenders identified with such an impairment or disability shall be transferred to the DPS&C for further evaluation and determination of appropriate housing placement. [Reference 2008 Resolution Agreement: US DO) and LA DPS&C.] 9. 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 jail facility shall notify the Department's Medical Director, when a DPS&C offender is pregnant to ensure proper placement or if transfer to a DPS&C facility is necessary. Visual Inspection: written policy and procedure, health record where pregnant	Compliant- No pregnant females housed at the facility. If an offender is pregnant she is transferred to another facility.	
offender received obstotrical services by a qualified provider, notification to DPS&C when DPS&C offender is pregnant, transfer logs		

LA Department of Public Safety and Corrections



BJG Monitoring Report

		- C-20//WWW
TV.C. 007 Communicable Disease and T-fa-tile Control Beauty	Findings	Response
IV-C-007 Communicable Disease and Infection Control Program Communicable diseases are managed in accordance with a written plan approved by the health authority in consultation with local public health officials. The plan includes for the screening, surveillance, treatment, containment, and reporting of infectious diseases. The plan shall comprise of testing to detect communicable diseases, including TB testing within 14 days of arrival at the facility. If there is documented evidence of TB testing within the last 12 months, new testing is not required. Qualified health care staff will evaluate for signs and symptoms of TB. Infection control measures include the availability of personal protective equipment for staff and hand hygiene promotion throughout the facility. Procedures for handling biohazardous waste and decontaminating medical and dental equipment	Compliant-Policies in place for infection control program.	
must comply with applicable local, state and federal regulations.		
Visual Inspection: health records, clinic visit logs, documentation of waste pic up		
and/or cleaning logs IV-C-008 Annual TB Testing	Compliant TD testing is done annually	
Written policy, procedure and practice require annual testing or medical evaluation for signs and/or symptoms of tuberculosis on all offenders. Annual TB testing will be provided at no cost to the offender. The facility's designated health care authority shall contact the DPS&C Medical Director, telephone number 225-342-1320, when an offender's test for medical signs and/or symptoms of tuberculosis is reported positive. The DPS&C Medical Director will determine if the offender requires physician or mid-level evaluation, based on the reported positive signs or symptoms.	Compliant- TB testing is done annually.	
Visual Inspection: health records IV-C-009 Chronic Care Program	Compliant-If an offender requires chronic care then	
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.	they are transferred to a facility that has the capability to provide that care.	
Visual Inspection: health records IV-C-010 Pharmaceuticals	Compliant- Medication is dispensed at prescribed and	
Written policy, procedure, and practice approved by the health authority provide for the proper management of pharmaceuticals. Offenders are provided medication as prescribed. Visual Inspection: health records, completed medication administration forms,		
inventories		
IV-C-011 First Ald 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- First aid kits are located in the facility.	
IV-C-012 Access to Sick Call	Compliant- Offenders can access sick call 5 days a	
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	week day through the kiosk or a sick call request form and send to the nurse.	
IV-C-013 Infirmary Care	Compliant-There is no infirmary at the facility. The	
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 0.05-004-8		
IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment	Compliant- There has been no medical furlough or	
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 annually in the involvementation of the process. Visual Inspection: health records, documentation of staff training, documentation of	Compliant-Staff receive training annually on suicide prevention. There was no offender on any suicide watch on the day of the audit.	
observation of suicide watches.		



	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	Compliant-Offender deaths are reported to appropriate authority. There have been no deaths of offenders at the facility.	порине
thoroughly documented. Such procedures shall also include the reporting requirements as outlined in BJG F-C-001. In addition, a written report of all offender deaths shall be submitted to DPS&C on Form C-05-001-X (via email to catanotify@corrections.state.la.us or via fax to 225-342-3349).		
Visual Inspection: notification, reporting requirements, report to DPS&C IV-C-016 Notification	Compliant-The facility will notify family members in	
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 offender's admission to the ICU or trauma center, unless the Warden or designee provides written notice within 6 hours of the offender's admission to the ICU or trauma center to any immediate family member seeking visitation why such visitation cannot be granted, pursuant to La. R.S. 15:833(A) and Dept. Reg. C-02-008; "If the offender's admission to the ICU or trauma center occurs between 8:00 pm and 4:00 am, the Warden or designee shall provide the required written notification within 24 hours of the time the serious bodily injury occurred. "Pursuant to La. R.S. 15:833(A), the Warden or designee shall attempt to notify the offender's immediate family within 8 hours of the medical decision to transport the offender to the ICU or trauma center. "Based on extenuating circumstances the Warden or designee may extend the definition of an offender's immediate family member.	the event the offender is admitted to a medical facility. There has been no offender admitted to ICU or trauma center for any family to be notified.	
Visual Inspection: notification records		
D. HEALTH SERVICES STAFF References: ACA C15 1-4D-02, 1-4D-04, 1-4D-05, 1-4D-07, 1-4D-08, 1-4D-09, 1-4D-10, 1-4D-17, 1-4D-18, Dept. Regs. B-06-001/HC-24/ISD-HCP44, HC-25/IS-DHCP9, HC-26/IS-D-HCP10, HC-33/AM-D-5	Findings	Response
IV-D-001 Health Care Quarterly Meetings The health authority meets with the facility administrator at least quarterly.	Compliant- Meetings held with health care personnel.	
Visual Inspection: documentation of meetings IV-D-002 Research Written policy, procedure, and practice prohibit offender participation in pharmaceutical, medical, or cosmetic experiments. This policy does not preclude individual treatment of an offender based on his/her needs using a specific medical procedure that is not generally available.	Compliant- No offenders participate in research.	
Visual Inspection: written policy and procedure IV-D-003 Health Care Personnel/Job Descriptions	Compliant Health care ish descriptions are an file and	
Health care staff work in accordance with professional specific job descriptions approved by the health authority.	Compliant- Health care job descriptions are on file and approved by health authority.	
Visual Inspection: job descriptions IV-D-004 Confidentiality of Health Information Information about an offender's health status is confidential. Nonmedical staff only have access to specific medical information on a "need to know" basis in order to preserve the health and safety of the specific offender, other offenders, volunteers, visitors, or correctional staff. An individual health record is maintained for all offenders in accordance with policies and procedures established by the health authority. The health record is made available to, and is used for documentation for all health care personnel. The active health record is maintained separately from the confinement case record and access is controlled. When an offender is transferred to DPS&C or another local facility, the offender's medical record is transferred as well.		
Visual Inspection: health records, completed consent forms, completed refusal forms IV-D-005 Informed Consent	Compliant-Offenders can refuse medical treatment	
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 naccordance with state laws and regulations. Involuntary administration of psychotropic medications to offenders may only be accomplished by DPS&C.	and sign a refusal.	
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	Compliant- All staff receive training on first aid and CPR.	
ensure that emergency supplies and equipment, including automatic external defibrillators (AEDs) are readily available and in working order.		
Visual Inspection: verification of training, records and certificates IV-D-007 Internal Review/Quality Assurance	Compliant-No major risk at time of inspection.	
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.	The state of the s	
Visual Inspection: evaluation of major risk management events		



E. SEXUAL ASSAULT References: ACA CIS 1-4D-13, 1-4D-15, 1-4D-16, Dept. Regs. A-04-002/PS-D-3,	Findings	Response
C-01-022/OP-A-15 Writen 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 BBG I-C-001. An investigation is conducted and documented whenever a sexual assault or threat is reported. Investigative reports, that include DPS&C offenders, shall be submitted to appropriate DPS&C Regional Team Leader on Form C-01-022-E. Victims of sexual assault are referred under appropriate security provisions to a community facility for treatment and gathering of evidence.	Compliant- PREA information given to offenders upon intake. Alleged assaults are investigated. There was no alleged or substantiated sexual assaults as of the day of the audit.	
Visual Inspection: documentation of reports to DPS&C, investigative reports		

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 There is an official registration and identification system for volunteers. Visual Inspection: activity schedules, facility logs	Compliant- Volunteers are screened and go through orientation process. Applications are filled out and approved prior to being allowed in the facility.	
V-A-002 Volunteer Services	Contract to the first section of the contract	
Y-A-roug volunteer services A current schedule of volunteer services is available to all offenders and is posted in appropriate areas of the facility.	Compliant- A schedule of volunteer services are posted.	
Visual Inspection: activity schedules, facility logs		
V-A-03 Programs and Services Written policy, procedure and practice provide for the availability of offender programs, services and counseling. Such programming may be obtained from acceptable internal or external sources which should include, at a minimum, assistance in obtaining individualized educational program instruction at a variety of levels. The local jail facility shall maintain class files on all DPS&C approved programming, whether the program is administered by DPS&C or other staff. The class files should include at a minimum: 1. Screening of offender(s) for program placement; 2. Offender application to program; 3. Program sign-in sheets and/or attendance rosters; 4. Signed copy of CTRP credit forms; 5. Documentation for staff oversight if program is not administered and/or overseen by DPS&C staff.	Compliant- Offenders are offered educational, self help and religious programs. There is only partners in parenting program offered at this time. Other programs are offered but have been shut down since COVID but will resume in the near future.	
Visual Inspection: activity schedules, facility logs V-A-003-1 Educational Programming The DPS&C and the facility encourage educational programming which includes: 1. Adult Basic Education and/or Literacy 2. Industry Based Certification Training 3. Pell-eligible Post-Secondary Training Any planned or proposed programs for education in local jail facilities that house DPS&C offenders shall be submitted to the DPS&C Education Director.	Compliant-Education programs are available for offenders and will resume in the near future.	
Visual Inspection: activity schedules, facility logs		



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-		TOTAL STREET,
02,1-58-02-1,1-58-02-2,1-58-04,1-5C-01,1-5C-04,1-5C-06, Dept. Regs. A-04-002/PS-D-3, B-02-001/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-02-008/0P-C-9,C-02-012/PS-I-1,C-02-012/PS-I	Findings	Response
V-B-001 Releasing Offenders	Compliant Offenders are released with ID's and	
Procedures for releasing offenders from the facility include, but are not limited to, the following:	Compliant-Offenders are released with ID's and community resource information.	
 Return of personal property, to include any govt. issued ID (i.e., driver's license) 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 practioner for a provision of a 5-day supply of current maintenance medication (medication prescribed to stabilize a chronic medical or behavioral health illness), along with a prescription for a thirty (30) day of medication upon transfer or discharge. Prior to release, offenders with serious medical and behavioral health conditions are referred to available community services. Appropriate health information is 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		
WrB-002 Visiting Written policy, procedure and practice govern visiting. The number of visitors an offender may receive and the length of the visits may be limited only by the facility's schedule, space and personnel constraints or when the facility administrator can present clear and convincing evidence that such visitation jeopardizes the safety and security of the facility. Conditions under which visits may be denied and visitors may be searched are defined in writing. Provisions are made for special visits in accordance with Dept. Reg. C-02-008.	Compliant- Visitation is on Saturday and Sundays . Only video visitation at this time due to COVID. Visitation logs are kept.	
Visual Inspection: activity schedule, facility logs		
V-B-003 Library Services Written Reading materials shall be available to offenders on a reasonable basis.	Compliant-There is no library room. Library books are available on a shelf in the common area where offenders can read.	
Visual Inspection: activity schedule, facility logs		
V-B-004 Religious Programs Written policy, procedure and practice define and provide reasonable offender opportunity for religious practice.	Compliant- Religious services are held at the facility and list of services are posted.	
Visual Inspection: documentation of offender religious activities, activity schedule V-B-005 Exercise and Recreation Access 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 DFS&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	Compliant- Recreation time is offered weather permitting. Offenders were out on the yard for recreation during the audit.	
per week shall be available.		
Visual Inspection: activity schedule, facility logs V-B-006 Transitional Work Program/Standard Operating Procedures	Compliant- TWP operates in accordance with SOP.	
Transitional Work programs shall be operated in accordance with the Standard Operating Procedures for Offender Work Release Programs established by the DPS&C.	compliance TWP operates in accordance with SOP.	
Visual Inspection: DPSAC monitoring report V-B-007 Participation in Transitional Work Programs Participation in transitional work programs by state offenders shall comply with R.S. 15:711 and DPSAC Department Regulation No. B-02-001 "Assignment and Transfer of Offenders." Specific approval by the Secretary of DPSAC is required prior to program assignment of state offenders. Refer to Standard Operating Procedures for Offender Transitional Work Programs.	Compliant- Offenders are approved by Hdqtrs for participation in TWP.	
Visual Inspection: approval for participation by the Secretary of DPS&C		
V-8-008 Offender Work Program Participation in offender work programs by state offenders shall comply with the provision of R.S. 15:708 (parish jails) or R.S. 15:832 (police maintenance).	Compliant-Offenders are screened before being approved for work.	
Visual Inspection: offender voluntary participation, sheriff's approval of work program request. facility logs		

LA Department of Public Safety and Corrections



BJG Monitoring Report

	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.	Compliant- Facility is approved to operate TWP.	
Visual Inspection: approval of Chief of Operations		
V-B-010 Proposed Expansions Any planned or proposed expansions for transitional work program or jail facilities that house DPS&C offenders shall be submitted to the Secretary of the DPS&C and the Executive Director of the LSA for consideration and approval.	Compliant- No proposed expansions at this time.	
Visual Inspection:		
V-B-011 Mail and Correspondence Any Offenders may send and receive mail. Indigent offenders receive a specified postage allowance. Offenders are notified in writing when incoming or outgoing letters are withheld in part or in full. Written policy, procedure, and practice govern offender correspondence.	Compliant-Mail is issued and collected daily. Legal mail log is kept and signed for by offenders.	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail		
V-B-012 Packages and Publications Written policy, procedure and practice govern offender access to publications and packages from outside sources.	Compliant-Packages must be requested and approved prior to delivery. Offenders can subscribe to publications that don't affect the security of the	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail	facility.	

C. REENTRY		
References: Dept. Regs. B-01-001/IS-B-6, B-01-002/BOP3, B-01-004/IS-B-7, B-06-001/HC-40/IS-D-HCP31	Findings	Response
V-C-001 Substance Abuse Programs The facility encourages offender participation in substance abuse programs when available.	Compliant-Substance abuse programs are offered to offenders but have shut down due to COVID and will resume in the near future.	
Visual Inspection: facility log, activity schedule		
V-C-002 Reentry Programs The DPS&C and the facility encourages reentry programming which includes: 1. Employment opportunities through work release; 2. At least two forms of valid identification upon release; 3. The development of a residential plan prior to release; 4. Referral to community based service providers upon release; 5. Where feasible, recommend DPS&C offenders receive 100 hours of pre-release training at a regional reentry center prior to transfer to a TWP, or release from custody. The local jail facility shall maintain reentry transition document envelops for all DPS&C offenders, which include at a minimum, if applicable: 1. Any valid forms of identification; 2. Prescriptions and Medicald card; 3. Community service referrals.	Compliant- Offenders are released with at least 2 forms of ID, community resource information available and offenders must have approved residence plan.	
Visual Inspection: documentation of employment opportunity, documentation of two forms of identification, residential plan		
V-C-003 Pre-Parole Preparation The facility shall complete Form 8-01-004-C, Pre-Parole LARNA II Questionnaire for Local Jaii Facilities, and submit via e-mail to DPS&C HQ at LOCALlama@corrections.state.la.us or by fax to 225-342-0929 within the first two weeks of the month proceeding the scheduled hearing.	Compliant-Larna II completed prior to release.	
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-Records and paperwork are available to parole board and warden or designee is present during the hearing to provide information. Hearing are done via zoom.	
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- 004/OP-C-10	Findings	Response
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.	Compliant-Offenders sign for incoming legal mail. Attorneys are allowed to visit with offenders. Law library materials are available to offenders.	
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, uncersored correspondence and visits.	Compliant-Attorneys are allowed to visit with offenders.	
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- Officers receive training annually. Any abuse is reported and investigated.	
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-No offenders are discriminated against to participate in programs.	
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.	level 2 Chief of Security.	
Visual Inspection: grievances		

PART VII - ADMINISTRATION AND MANAGEMENT		
A. RECRUITMENT, RETENTION AND PROMOTION References: ACA-CIS 1-1A-01, 1-18-01, 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
VII-A-001 Training and Staff Development The facility conducts or participates in a training program which includes orientation for all new employees (appropriate to their jub) 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. Sucide 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-New hire officers participate in a 92 hour training course.	
Visual Inspection: lesson plans, staff training records		
VIII-A-002 Weapons Training All personnel authorized to use firearms and less-than-lethal weapons must demonstrate competency at least annually. Training includes decontamination procedures for individuals exposed to chemical agents.	Compliant-Officers are trained annually.	
Visual Inspection: personnel records, training records		



B. FACILITY ADMINISTRATION		
References: ACA CJS 1-40-02, 1-70-01, 1-70-03, Dept. Reg. C-05-001/AM-1-4	Findings	Response
VII-8-001 Authority	Compliant- Statue authorizing the establisment of the	
There is a statue or constitutional provision authorizing the establishment of the local jail facility or its parent agency.	correctional facility.	
social fall facility of its parent agency.		
Visual Inspection:		
VII-B-002 Legal Assistance for Staff	Compliant- Letter of retainer of staff on file at	6 .
Written policy, procedure and practice specify the circumstances and methods for	courthouse.	
the facility administrator and other staff to obtain legal assistance as needed in the		
performance of their duties.		
Visual Inspection: personnel or training records		
VII-B-003 Independent Financial Audit	Compliant-Audit is done annually.	
Written policy, procedure and practice provide for an independent financial audit of		
the facility. This audit is conducted annually or as stipulated by statute or		
regulation.		
Visual Inspection: annual audit		
VII-B-004 Facility Insurance	Compliant-Facility has insurance coverage.	
Written policy, procedure and practice provide for comprehensive facility insurance		
coverage.		
	1	
Visual Inspection: Insurance policy		
VII-B-005 Offender Funds	Compliant- Offender funds are accounted for with	
Offenders' personal funds held by the facility are controlled by generally accepted	electronic records.	
accounting principals (GAAP). Any interest earned, other than operating funds,	1	
accrues to the benefit of the offenders.		
Visual Inspection: offender records	1	
VII-B-006 Organization	Compliant-Policies are reviewed annually and changes	
Written policies and procedures describe all facets of facility operation, maintenance	made as needed.	
and administration are reviewed annually and updated as needed. New or revised	and the second control of the second control	
policies and procedures are disseminated to staff. A file for each guideline shall be		
maintained with documentation (primarily written) to support compliance.		
10.11 aanaanaanaanaanaanaanaanaanaanaanaanaan		
Visual Inspection: annual reviews, dissemination to staff		
VII-B-007 Annual Compliance Statement	Compliant- Annual compliance statement turned in	
Written policy, procedure and practice demonstrate that the facility shall submit an	annually.	
annual statement confirming continued compliance with the BIG to the appropriate		
DPS&C Regional Team Leader. This statement, submitted by January 31st each		
year, is in writing and shall include:	1	
A copy of the current Fire Marshal Report; A copy of the current Health Inspection Report;		
3. Any proposed or projected expansions;	· .	
4. Any rehabilitative programs that are available;		
5. Summary of any re-entry initiatives/programs implemented by the facility.		
Visual Inspection: annual statement	Carnelle at Market and also are asked to the terms	
VII-B-008 Monthly Reporting Written policy, procedure and practice ensure that any facility with DPS&C offender	Compliant- Monthly reports are submitted in timely	
rwinten policy, procedure and practice ensure that any racinty with OFSoil offencer freport activities to the Chief of Operations on a monthly basis in accordance with	manner.	1
Dept. Reg. C-05-001/AM-I-4. These reports shall be submitted on automated		
reporting forms provided by the DPS&C, no later than the 15th day of the month for	r	
the previous month's activities. Automated reporting shall be completed, by the		
appropriate DPS&C Regional Team Leader, no later than the 20th day of the month		
for the previous month's activities.		
Visual Inspection: monthly report	<u> </u>	
VII-B-009 Staff Meetings	Compliant-Staff meetings are held monthly.	
Written policy, procedure and practice provide for regular meetings between the		
Sheriff, facility administrator, or designee and all department heads. There is formal documentation that such meetings are conducted at least monthly.		
numer volumences that such meetings are conducted at least monthly.		
Visual Inspection: staff meeting minutes/notes	1	
The same and the same		1
C. REASONABLE ACCOMMODATION		
C. REASUNABLE ACCOMMODATION References: ACA CIS 1-7E-01	Findings	
Releight ACA W.S. LYE'UL	Findings	Response

C. REASONABLE ACCOMMODATION		
References: ACA CJS 1+7E-01	Findings	Response
VII-C-003. Facility Equipment/ Reasonable Accemmodation Reasonable accommodations is made to ensure that all parts of the facility are accessible to the public are accessible and usable by staff and visitors with disabilities.	Compliant-Facility buildings are handicap accessible.	
Visual Inspection:		



	INSPECTION REPORTS	
DEPARTMENT	Deficiencies	Corrective Action Taken
Fire Marshall	None	
Date of current report: 11/01/21 Maximum Capacity: 224		
DHH - Health	Walls in disrepair, ceilings not in good repair.	Ceiling and walls have been repaired in the bathroom that was damaged.
Date of Current Report: 11/15/21 Maximum Capacity: 224		
DHH - Retail Food	None	
Date of Current Report: 11/15/21		

Form IS-B-8-b 05 November 2010

CERTIFIED TREATMENT AND REHABILITATION PROGRAM CERTIFICATION OF CONTINUED COMPLIANCE

Facility: Concordia Correctional Center for Women	
Date: 12/15/21	
Name of Program: Partners in Parenting	
Date of Program Implementation: Unknown	
Primary Area of Service Provided:	
 □ Education □ Job Skill Training □ Values Development and Faith Based Initiatives □ Treatment Programs □ Miscellaneous 	
Program has been certified by DPS&C? ⊠ Yes ☐ No	
Program application process is consistent with DPS&C existing assessment and system? ☐ Yes ☐ No	classification
Has program curriculum changed during preceding 12 months? ☐ Yes ☒ No	
Is there an objective method used to assess completion? Yes No	
Detailed records are maintained on the following:	
All offenders who apply. Number of offenders accepted. Number and type of services provided. Offender's completion/termination from program. Yes No Yes No Yes No	
Is there a formal graduation ceremony for those who complete the program?	⊠ No
The CTRP referenced above continues to meet necessary criteria to maintain its certification of Public Safety and Corrections.	fication by the
Majer Mad Tumm 12/15/	21
Monitoring Team Member or BJG Team Member/Leader Date	



John Bel Edwards GOVERNOR

Office of State Fire Marshal

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

Inspection Report

Report # CB-21-020756-1

No Deficient/Cautionary Codes cited.



H. "Butch" Browning FIRE MARSHAL

	***************************************	Locat	ion Inform	ation	mintrolli — ili maski me oramino (ipsa	enderson om melden proprinsisk knowned.	(
inspection Type	Compliance	Building Inspection		Ţ,	nspection Da	ito i	1/1/2021 2:24:01 PM
Structure ID	147736	No. of Building	s 3	I	Facility Code	·	535
Capacity	224	Year Built	2009	1	Construction	Туре	ype IIB / (000)
Building/Trade Na	ime	manuare	Addres	S			**************************************
CONCORDIA PAR	IISH WORK RI	ELEASE	5223 HI	GHWA	Y 84 WEST.	VIDALIA, I	A 71373
		Own	er Informa	ation	***************************************		
Owner Type		Name	E SHOWN CONTRACTOR	Conti	act Phone	Contact	Email
Municipal Project		LAWANDA LYLES		(318)	336-2865	LLYLES RG	@CONCORDIASHERIFF.C
Address		idanii ilka mara siiraa aleemaa da aa a	***************************************	ni namanaka ka			<u></u>
4001 CARTER ST	REET, VIDALI	A, LA 71373					
		Tena	int Inform	ation			
Name			iite Numbe	e Number Floor Numbe		ber	Square Footage
	<u> </u>	Occi	upancy D	stalls			
Occupancy Type	**************************************	Details	apanay o		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Institutional		INSTITUTIONAL BUILDI DETENTION/CORRECT					RECTION):
		1	Comment	5	**************************************	***************************************	
INMATE COUNT: NO APPARENT D		AT TIME OF INSPECTION	<u>V</u>				energy of process are secured to the following representation of the following secured to the first secured to the
	·	Inspe	ctor Infor	matio	n		
Name: Griffin Pi	rtle	Badge Number: 722		Inspe	actor Signatur	e:	
					nya qoyaniin ahiyee ee coolanda aayyyy ee ohaaliinii bareen oo	<u> </u>	How Portle
		Person to whom r	equireme	nts w	ere explain	əd	maramunini mingana ing ang malamunin munang manasin
Name: Elizabeth	Atkins	Tille: LI	ed a la servicio de la constitució de la constit	Sign	ature: EA	A-	шинишин жана чана на на селото на

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

(318) 767 6099

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-21-020756-1

No Deficient/Cautionary Codes cited.

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



H. "Butch" Browning FIRE MARSHAL

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.
 - The name of the applicant.
 - 2. A brief description of the facts.
 - A copy of the order of the Fire Marshal which is being appealed.
 - 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.
 - 6. 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.



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Detention or Incarceration Notice of Violations

Routine/Renewal

Permit Number 15-0000108	Permit Name CONCORDIA PARISH CORRECT	IONAL FACILITY FOR WOMEN		
Name of Establishment CONCORDIA PARISH CORRECTION	Owner Name ONAL FACILITY FOR WOMEN CONCORDIA PARISH SHERIFF'S OFFICE			
Address 5223 Highway 84 Vidalia, LA 71373		Date 11/15/2021	Time 11:10 AM	

LAC TITLE 51 PART XVIII

Category	Code Reference	Description of Violations
Building Requirement	101	3 - The walls are in disrepair.
Building Requirement	101	6 - The ceilings are not in good repair.

Number Licensed For		Number in Attendance 222	License Anniversary 12/31/2021	
Sanitarian Name Print	Phone #	Sanitarian Signature	R.S. #	
Caleb Smith	318-757-8632	الم	3033	
The above mentioned violations	were called to my attention and were	e explained to me in detail. I hereby agree to		
		Correct Non-Critical Violations)y	
Correct Critical Violations by		Correct Non-Critical Violations Signature of Recipient	эу — — — — — — — — — — — — — — — — — — —	
			эу	

DEPARTMEN	LOUISIANA IT OF HEALTH UBLIC HEALTH				
or rise or r	ODEIO HEREITI				
INSTITUTION	ON REPORT				
Agency License No.	Anniversary Month				
N/A	DECEMBER				
Name of Establishment	Mailing Address				
CONCORDIA PARISH CORRECTIONAL FACILITY FOR					
WOMEN					
Address					
5223 HIGHWAY 84					
City, state, Zip Code					
VIDALIA LA 71373					
Type of Facility					
JAILS 222					
Parish	Date Inspected				
Concordia	11/15/2021				
The above establishment has been inspected by a representative of the	is section, and:				
License is Recommended;					
License is Not Recommended;					
License is Pending Reinspection;					
from the standpoint of sanitation	CALEB SMITH	3	0	3	3
		1	<u> </u>	!	
LHS 48 (R 7/99)	,				D 101



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Retail Food Notice of Violations

Routine/Renewal

Permit Number 15-0000122	Permit Name CONCORDIA PARISH CORRECTIONAL FACILITY FOR WOMEN-KITCHEN				
Name of Establishment CONCORDIA PARISH CORRECTIONAL FACILITY FOR WOMEN		Owner Name CONCORDIA PARISH SHERIFF'S OFFICE			
Address 5223 Highway 84 Vidalia, LA 71373		Date 11/15/2021	Time 11:10 AM		

LAC TITLE 51 PART XXIII

Comments:

NOTICE RS 40:31.38 (ACT 66)

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

Sanitarian Name/Print Caleb Smith	Phone # 318-757-8632	Sanitarian Signature	R.S. # 3033	
The above mentioned violations v	were called to my attention and were ex	tplained to me in detail. I hereby agree to		
Correct Critical Violations by		Correct Non-Critical Violations by		
		Signature of Recipient		
Name/Title		10		
DIANNE HUTCHERSON, MAN	NAGER			