Department of Public Safety & Corrections State of Louisiana

JOHN BEL EDWARDS
GOVERNOR



JAMES M. LE BLANC SECRETARY

TO:

The Honorable Scott Franklin

Speniff of Lasalle Parish

FROM:

James M. Le Blanc

Secretary

DATE:

April 28, 2022

RF:

"Basic Jail Guidelines" Monitoring Report

I am happy to advise that pursuant to the attached monitoring report concerning the Lasalle Correctional Center, I am granting a recertification waiver, in compliance with the "Basic Jail Guidelines" along with annual monitoring.

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

JML/mls

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association Alan Graham, Warden, Lasalle Correctional Center Seth Smith, Chief of Operations Marcus Myers, Warden Chad Firmin, BJG Team Leader



Department of Public Safety and Corrections

By the authority vested in me, under Chapter 9, Title 36 of the Louisiana Revised Statutes, J, James M. Le Blanc, Secretary, do hereby recognize

LaSalle Correctional Center in acknowledgement of

Participation with the Basic Jail Guidelines Process

Therefore, I have hereunto set my hand and caused to be affixed the seal of the Department of Public Safety and Corrections, at the City of Baton Rouge,



this	28th	day of _	April	
			J	
in the year	r of our Lord	2.02.2		





03/24/2021

BJG RECERTIFICATION REPORT

FACILITY NAME: BJG MONITORS: Lasalle Correctional Center

Major Chad Firmin Team Leader Major Paige Juneau Team Member

FACILITY STAFF:

Warden Alan Graham

BJG INSPECTION DATE:

July 15, 2021

PREVIOUS BJG INSPECTION DATE:

March 11, 2020

OPERATIONAL CAPACITY:

757

COUNT ON DAY OF VISIT:

464

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	173	0	173
Number of Local Offenders	291	0	291
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	464	0	464

Number of DOC Offenders that are:

Single Bunked

Total

Double Bunked	102
Triple Bunked	59
Total	161
Number of DOC Offenders that are	in restricted housing:
Single Bunked	0
Double Bunked	12
Triple Bunked	0

12

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
April 2020	2	0	0	0
May 2020	2	0	0	0
June 2020	1	0	0	0
July 2020	5	0	0	0
August 2020	6	0	0	0
September 2020	8	0	0	0
October 2020	13	0	1	0
November 2020	9	0	0	0
December 2020	25	0	7	0
January 2021	14	0	0	0
February 2021	14	0	0	0
March 2021	22	0	2	1
April 2021	31	0	0	0
May 2021	16	0	0	0
June 2021	19	0	0	0

^{*}On 3/7/21 offender Jeremy Attle (Evangeline Parish offender) was ordered to exit the chow hall but refused to leave. When officers came in to remove offender Attle from the chow hall he became combative with staff. During the altercation Deputy Wiley suffered a broken leg and was taken to the hospital for treatment.

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
April 2020	0	0	0	0	4 razor blades, 1 tattoo para., 1 porn, 1 tobacco
May 2020	1 green leafy substance	0	0	1	1 phone charger, 1 battery pack, 1 lighter, 2 tobacco, 9 razor blades
June 2020	0	0	0	2	5 razor blades, 1 phone charger, 2 battery packs, 1 tobacco
July 2020	1 green leafy substance	0	0	0	7 razor blades, 1 tattoo para., 5 tobacco
August 2020	0	0	0	0	1 battery pack
September 2020	1 green leafy substance, 3 mojo	0	2 shanks	0	7 razor blades, 1 tattoo needle, 1 tobacco
October 2020	0	0	21 metal shanks, 2 plastic shanks	0	2 lighters, 4 tattoo guns, 1 lock in sock, 1 piece of rope
November 2020	83 sheets of paper suspected to be contaminated with	0	0	1	0

,	K2 liquid compound				
December 2020	0	0	9 shanks	2	5 tobacco, 2 tattoo para.
January 2021	0	0	5 shanks	0	3 tattoo guns, 4 razor blades, 1 tobacco
February 2021	0	0	0	0	1 lock in sock, 1 tattoo gun
March 2021	8 mojo	0	18 shanks	0	1 tattoo gun, 1 tobacco
April 2021	19 mojo	0	11 shanks	2	4 tattoo guns
May 2021	0	0	0	0	0
June 2021	0	0	0	0	2 tattoo guns

GENERAL APPEARANCE/CLEANLINESS/COMMENTS OF THE FACILITY:

Living Area:

Dorms –

Dormitory areas are clean. Offender property is stored in locker boxes. Offender beds have a mattress, pillow and blanket. All offenders are assigned a bed to sleep in and no offenders sleeping on the floor. Adequate hot water available for offender use.

Cell Block –

One cell had 3 offenders and only a bunk bed for 2 offenders. This was brought to staff's attention and the third offender was removed and placed in another cell. A couple of cells had Styrofoam trays left from the breakfast meal that had not been removed. Staff was advised and the trays and or any trash was removed from the cells.

Culinary/Dining:

The kitchen and dining area is clean. Cooler/freezer and dry storage area temperatures are kept and recorded daily. The dishwasher hot water temperature is checked for proper cleaning of dishes. Utensils are kept in a locked cabinet and are on inventory and being signed in and out. Sample trays are kept for each meal served. Menus are posted. Food being stored properly.

Bathrooms:

There is a bathroom in the kitchen for staff and offender use with soap and paper towels. Bathrooms and shower areas are clean in dormitory areas. Adequate hot water available in showers and hot water temperatures are checked and logged.

Yard Areas:

The yards are cut and maintained. There are 2 separate fenced in yard areas available for offenders to be placed on the yard for recreation purposes.

Maintenance:

The maintenance shop has a shadow board located inside a locked building with the tools. An inventory of tools is located in the building and tools are signed in and out. There are a few shadows on the board where tools were removed from the inventory and the shadows were still on the board but marked over with an X. Advised staff in the maintenance department to paint over any shadows where there are no tools on the board.

COUNTS:

- How many formal counts are conducted each shift? 2 major counts per shift
- How many counts are conducted each day? 4 counts total

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? Staff that have offenders with them during count will call in their count to control to make sure the offenders are counted.
- 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) No. Trustees only work on the compound and do not work off the grounds.

If yes,

- What is their classification process to determine who is eligible for trustee status?
 N/A
- Does their classification process meet DPS&C, Corrections Services' criteria?
 N/A

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

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
April 2020	20	74	27	2 suboxone
May 2020	15	71	21	0
June 2020	10	78	13	0
July 2020	15	77	19	0
August 2020	8	78	10	0
September 2020	20	159	13	1 bup
October2020	20	203	10	0
November 2020	11	233	5	0
December 2020	10	227	5	0
January 2021	16	224	7	0
February 2021	20	208	10	0
March 2021	16	184	9	0
April 2021	15	195	8	0
May 2021	9	183	5	0
June 2021	9	195	5	0

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 can request the form to apply for the application process for the restoration of good time and send it to classification department. Once reviewed by classification then it is sent to the Warden for approval and once approved then forwarded to Headquarters.
- 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

^{*}Facility staff advised there is no GED at this time

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

None at this time

LIST ALL OTHER OFFENDER PROGRAMS:

• Church Services - There are no church services or volunteers at this time at the facility.

GRIEVANCE PROCESS:

- Does grievance process include two levels of review? Yes
- Who are the designees at each level? Grievance officer is 1st level, Major is 2nd level
- What is the specified time period for response at each level? 30 days at 1st level. 7 days 2nd level

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) 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? N/A

OTHER:

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Spoke to staff during the walk through. Staff was knowledgeable of job duties, courteous and willing to assist the audit team. Staff morale appeared to be good and enjoy working at the facility. The overall appearance of the facility is clean and in good order.

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

Spoke to some offenders and no offender voiced problems or concerns about the facility. Offender morale and quality of life appeared good at the time of the audit.

RECOMMENDATION:

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



Facility: Lasalle Correctional Center	Date Conducted: July 15, 2021	12/22/2020
	<u> </u>	
Monitors: Major Chad Firmin Team Leader, Major Paige Juneau Team	Member	
	BASIC JAIL GUIDELINES (BJG)	
PART I - SAFETY		
A. PROTECTION FROM INJURY AND ILLNESS References: ACA CJS 1-1A-01, 1-1A-02, 1-1A-03, 1-1A-04, 1-1A-05, 1-1C-05, 1-		
4A-03, 1-4A-04	Findings	Response
I-A-001 Safety/Sanitation/Inspections The facility 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.	Compliant- Weekly inspections being done at the facility. Fm inspection and DHH inspections were done 2021.	
Visual Inspection: completed inspection checklists and reports, documentation of corrective action. inspection reports		
I-A-002 Disposal of Materials Disposal of liquid, solid, and hazardous material complies with applicable government regulations. Visual Inspection: trash disposal contract, completed inspection reports, include documentation that deficiencies were corrected	Compliant- Facility has a contract with a waste company for disposal of materials.	
I-A-003 Vermin and Pests Vermin and pests are controlled. There is a written and implemented plan for the control of vermin and pests. Visual Inspection: pest control contracts, trash disposal contracts, inspection reports	Compliant- Facility has a contract for pest control. Inspection reports on file.	
I-A-004 Housekeeping	Compliant- Daily housekeeping plan with a cleaning	
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.	schedule in place and inspections are done.	
Visual Inspection: inspection reports, completed forms, documentation of correction of identified deficiencies		
I-A-005 Water Supply The facility's potable water source and supply is certified at least annually by an independent, outside source to be in compliance with the State Sanitary Code. The facility complies with the requirements of the state health officer. There is a specific plan for addressing deficiencies, if any, that is approved by the state health officer. Visual Inspection: documentation of approval by DHH or local authority, plan for	Compliant- Water supply is provided to the facility and maintained.	
addressing deficiencies		
B. VEHICLE SAFETY		
References: Dept. Reg. C-03-003/OP-A-3 I-B-001 Offender Transport	Findings Compliant- Facility has logs of offenders being	Response
Escorted and unescorted absences of state offenders are governed by R.S. 15:811 and 833 and DPS&C Department Regulation No. C-03-003 "Escorted Absences."	transported for outside trips. Staff are trained in transporting offenders.	
Visual Inspection: documentation of staff training, documentation of medical, funeral, letc. (outside trips)		
C. EMERGENCY PREPAREDNESS/RESPONSE		
References: ACA CJS 1-1C-01, 1-1C-02, 1-1C-03, 1-1C-04, 1-1C-06, 1-1C-07, 1-7E-01, Dept. Regs. A-04-002/PS-D-3, C-02-001/OP-A-5, C-02-010/OP-B-3, C-05-001/AM-1-4	Findings	Response
I-C-001 Emergency Plan There is a written plan, submitted to the Secretary of DPS&C, that specify the procedures to be followed in situations that threaten facility security. Such situations include but are not limited to riots, hunger strikes, disturbances, taking of hostages, and natural or man-made disasters. These plans are made available to all applicable personnel and are reviewed annually and updated as needed. All facility personnel are trained annually in the implementation of the emergency plan. An execuation 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 800-803-812-4399 after hours, when they involve DPS&C offenders. In addition, the facility shall follow the incident reporting procedures as outlined in Dept. Reg. C-05-001/AM-1-4, "Activity Reports, UORs," Category A, B and C. Visual Inspection: training records, facility logs, documentation of approval of plan,	Compliant-Facility has an emergency plan in place. Plan has been submitted to FM for approval. A copy of emergency plans will be sent to Headquarters.	
documentation of annual review, documentation of staff receipt, training on the plan		

BJG Compliance

(3)

LA Department of Public Safety and Corrections

BJG Monitoring Report

	Findings	Response
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. All exits are clear from obstructions. Emergency procedures in place.	
Visual Inspection: facility records/logs 1-C-003 Fire Safety/Code Conformance The facility complies with the requirements of the state fire marshal. There is a specific plan for addressing deficiencies, if any, that is approved by the State Fire Marshal. The State Fire Marshal approves any variances, exceptions, or controlled the State Fire Marshal approves and variances, exceptions, or visual Inspection: documentation of fire alarm and detection system maintenance and testing, plans for addressing deficiencies	Compliant-Facility complies with FM requirements. FM inspection was done in 2021.	
I-C-004 Facility Furnishings Facility furnishings meet fire-safety-performance requirements. Visual Inspection: Specifications for all furnishings.	Compliant-Furnishings meet requirement.	
I-C-005 Flammable, Caustic and Toxic Materials	Compliant-All 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 twn figures.	Compliant- Facility operates within operational capacity.	

PART II - SECURITY		
A. PROTECTION FROM HARM	1	
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-15, 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		Response
II-A-001 Control There is 24-hour monitoring and coordinating of the facility's security, life safety, and communications systems. Visual Inspection: facility records/logs, maintenance records, records of staff deployment	Compliant-Facility has a 24 hour monitoring system and employees working day and night shifts 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 with perimeter lights around the facility.	
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 has organizational chart and shift assignments for each shift. Facility has adequate staff at the time of the audit.	
II-A-004 Female Offenders and Female Staff When a female offender is housed in a facility, at least one female staff member is on duty at all times.	Compliant- Female staff work on all shifts. There are no females housed at the facility.	
Visual Inspection: records of staff deployment, facility logs III-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-No offenders have control over other offenders.	
III-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 BIG 1-C-001 for reportion requirements to DPSAC Visual Inspection: copies of log book, records of staff deployment	Compliant- Shift rosters showing personnel on duty, logs of offender population and shift activities are all on file along with any admissions or release of offenders.	



	Findings	Response
II-A-007 Counts	Compliant- 2 major counts done on each shift and 4	
The facility has a system for physically counting offenders. At least one formal	major counts done on everyday.	
count is conducted for each shift, with no less than 3 counts daily. The system		
includes strict accountability for offenders assigned to work and other approved temporary absences		
Visual Inspection: completed forms, facility records/logs.		
II-A-008 Offender Population Management System	Compliant- Records kept on all offenders housed at	
There is an offender population management process that includes records on the	the facility to include booking, fingerprints, master	
admission, processing, and release of offenders. Written policy, procedure, and	prison record, photo and any other identification.	
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;		
2. Bill of Information and Court Minutes OR Uniform Commitment Order;		
3. One photograph;		
 Reports of disciplinary actions, grievances, incidents, or crimes committed while i 		
custody;		
 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).		
The Control of the Co		
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;		
2. 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	1	
revocation minutes are required); 5. 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-Transfer and booking sheets are done along	
Prior to accepting custody of an offender, staff determine that the offender is legal	with medical upon intake. Forms in file.	
committed to the facility, and that the offender is not in need of immediate medica 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:	inventoried during the admission/intake process.	
 Searching of the offender and personal property; 	Screening of offenders upon intake being done to	
 Inventorying and providing secure storage of personal property; 	include medical assessments. Copy of paperwork on	
Providing an itemized receipt for personal property;	file.	
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 ja		
or privately managed facility shall be submitted to the Chief of Operations prior to	mancy on day or mapection.	
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 offende (federal or state) housed in a local jail or privately managed facility shall be		
returned to an appropriate correctional facility located within the state where the		
offender was convicted and sentenced for release in that state, prior to the		
offender's release date.		
Visual Inspection: offender record, submittal to chief of operations of out-of-state		
offenders to be housed at the facility, release/transfer documentation		



II-A-012 Classification System	Findings Compliant-Policy in place for the classification of	Response
Written policy, procedure, and practice provide for a written offender classification plan that includes custody required and assignment to appropriate housing. Offender management and housing assignment considers age, gender, legal status, custody needs, special problems and needs, and behavior. All offenders are classified using an objective classification process that at a minimum: • Identifies the appropriate level of custody for each offender • Identifies appropriate housing assignment • Identifies the offender's interest and eligibility to participate in available programs	Compilant-Policy in place for the classification of offenders to the facility during the intake process that includes level of custody and housing assignments and any eligibility to participate in programs.	
Visual Inspection: offender housing records, offender classification records II-A-013 Prohibition on Youthful Offenders Offenders subject to juvenile jurisdiction are housed in adult facilities only under the conditions established by law. If juveniles are committed to the facility, a plan is in place to provide for the following: Supervision and programming needs of the juveniles to ensure their safety, security, and education; Classification and housing plans; Appropriately trained staff. OSS shall be notified of offenders who are under the age of 18 that are sentenced to the DPS&C as an adult for transfer to the appropriate institution.	Compliant- There was no youthful offenders housed on the day of inspection.	
Visual Inspection: admission and housing, offender records, classification records II-A-014 Separation in Classification Male and female offenders must be housed in separate rooms/cells with reasonable sight and sound separation. Visual Inspection: Offender housing records, offender classification records, diagram of facility showing male/female housing areas	Compliant- No female offenders are 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 during intake.	
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	Compliant- The facility maintains a drug free workplace	
(including pre-employment, post accident, reasonable suspicion/probable cause, random).		
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 DPSSC 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 OAS, at least one day prior to all scheduled transfers and within one business day for all non-scheduled transfers. The DCC offender transfer form shall be submitted by the transfering facility to OAS at least one day prior to the transfer occurring by fax to 225-342-2439 or by email to LocalbailTranfers@la.gov. Offenders should not be transferred to other than DPS&C facilities within 60 days of release, unless for disciplinary reasons. An offender scheduled for an appearance before the Committee on Parole shall not be transferred prior to the scheduled hearing date. However, if the transfer is deemed unavoidable by the Warden due to security concerns, the Warden shall obtain prior approval for an exception from the DPS&C Chief of Operations or designee. Staff from the sending facility shall notify the Committee on Parole as soon as it is known that the offender must be transferred.		
Visual Inspection: facility logs, documentation of transfers of DPS&C offenders to 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 celliblock 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 CIS 1-28-01, 1-28-02, 1-28-03, 1-28-05, 1-28-06, 1-40-12, Dept. Regs. 8-06-001 HC-08/IS-0-HCP33, HC-29/IS-0-HCP40, C-01-008/OP-A- 19, C-02-006/OP-A-16, C-03-003/OP-A-3 III-8-001 Use of Force	Findings	Response
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 Constitution, within those humans of the incident to the DPS&C, Chief of Visual Inspection: facility records, logs, incident reports, training records	Compliant-Staff receive training annually on use of force. UOR's done such incidents.	
Visual Inspection: Tacility records, logs, incloent reports, Taining records IT-8-002 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 psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including: - Conditions under which restraints may be applied; - Types of restraints to be applied; - Identification of a qualified medical or behavioral health professional who may authorize the use of restraints after reaching the conclusion that less intrusive measures are not a viable alternative; - Monitoring procedures; - Length of time restraints are to be applied; - Documentation of efforts for less restrictive treatment alternatives; - An after incident review. Visual Inspection: facility records, logs	Compliant-Staff are trained in the use of restraints for offenders. Staff is trained how to properly use restraints. Restraints are not used for punishment.	_

BJG Compliance



W 0 000 4 W 4 0 0 1 1 4 0 0 1 1 1 1 1 1 1 1 1 1 1 1	Findings	Response
II-B-002-1 Use of Restraints for Pregnant Offenders	Compliant-Facility does not house females.	
Written policy, procedure, and practice complies with the following requirements: Restraints During Pregnancy-Related Transportation		
Restraints shall not be used on a pregnant offender (1) during any pregnancy		
related medical distress, (2) while she is being transported to a medical facility or	1	
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	1	
behind the back or restrained using waist restraints.		
Missel Lauration forlibusered law		
Visual Inspection: facility records, logs II-B-003 Use of Firearms	Compliant-Staff is trained in use of firearms. Weapons	
The use of firearms complies with the following requirements.	are kept in the armory.	
 Weapons are subject to stringent safety regulations and inspections. 	are rept in the armorp.	
 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.	1	
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		
firearme		
Visual Inspection: training records, safety regulation and inspection reports, photos of		
equipment used for unloading and reloading II-B-004 Written Reports	Compliant Departs are done on incidents that excur to	
Written reports are submitted to the facility administrator or designee no later than	Compliant-Reports are done on incidents that occur to also include use of force.	
the conclusion of the tour of duty when any of the following occur:	also include use of force.	
Discharge of a firearm or other weapon		
 Use of less lethal devices to control offenders 		
Use of force to control offenders		
Offender(s) remaining in restraints at the end of the shift Figure 2015 of security continues.		
Emergency distribution of security equipment Visual Inspection: completed reports, facility records and logs		
Visual Inspection: Completes 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- Shakedowns are done of the facility and on	
Written policy, procedure and practice guide searches of facilities and offenders to		
	offenders and their property.	
control contraband. Manual or instrument inspection of body cavities is conducted		
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BJG Compliance



PART IV - CARE		
A. FOOD SERVICES		
References: ACA CJA 1-4A-01, 1-4A-02, 1-4A-04,1-4A-06, Dept. Reg. C-06- 001/IS-C-1	Findings	Response
IV-A-001 Food Storage Facilities 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. Inspections being done of storage areas.	*
IV-A-002 Food Service Facilities	Compliant- Bathroom facilities are available for food	
Toilet and hand basin facilities are available to food service personnel in the food preparation area.	papertowels available.	
Visual Inspection: DHH inspection reports, photos		
IV-A-003 Food/Dietary Allowances The facility's dietary allowances are reviewed at least annually by a qualified nutritionist or dietician to ensure they meet the national recommended dietary allowances for basic nutrition for appropriate age groups. Menu evaluations are conducted at least quarterly by food service supervisory staff to verify adherence to the established basic daily servings. Written policy, procedure, and practice require that food service staff plan menus and substantially follow the plan. The planning and preparation of all meals shall take into consideration nutritional characteristics and caloric adequacy. The facility shall provide a tray/plate and utensil(s) for each hot meal.	Compliant-Menus are signed and approved by dietician. Meals are a cycle menu. Menus are posted and reviewed.	
Visual Inspection: annual reviews, nutritionist or dietician qualifications, documentation of at least annual review and quarterly menu evaluations		
IV-A-004 Records of Meals Served Written policy, procedure, and practice require that accurate records are maintained of all meals served. Visual Inspection: facility loss	Compliant-Meals served are recorded along with what the meal consist of and serving times.	
IV-A-005 Denial of Food as Discipline Prohibited Written policy, procedure, and practice preclude the denial of food as a disciplinary measure. Visual Inspection: facility logs	Compliant-Denial of food is not used as discipline.	
Visual Inspection: records of meals served and times served, facility logs Visual Inspection: records of meals served and times served.	Compliant- At least 2 hot meals served daily. Sometimes all 3 meals are hot meals. Serving time of meals are within time frame. Offenders are provided ample time to eat.	
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		
IV-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. Daily checks of kitchen workers being done.	

LA Department of Public Safety and Corrections



BJG Monitoring Report

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B. HYGIENE References: ACA CJS 1-48-01, 1-48-02, 1-48-03, 1-48-04, Dept. Reg. B-06-	Eindings	Barnaga
001/HC-34/IS-C-3	Findings	Response
IV-B-001 Plumbing Fixtures - Toilets and Washbasins Offenders have access to toilets and washbasins with temperature-controlled hot and cold running water 24 hours per day. Offenders are able to use toilet facilities without staff assistance when they are confined in their cells/sleeping areas.	Compliant-Toilets and wash basins available in the housing units. Adequate hot water available and hot water temperatures are checked.	
Visual Inspection: maintenance records or reports, inspections, documentation of periodic measurement of water temperature, offender grievances		
IV-B-002 Plumbing Fixtures - Showers Offenders, including those in medical housing units or infirmaries, have access to operable showers with temperature-controlled hot and cold running water 24 hours per day, on a reasonable schedule, (a minimum of three times per week). Water for showers is thermostatically controlled to temperatures ranging from 100 degrees to 120 degrees Fahrenheit.	Compliant- Showers available in the housing units and in working order. Hot water temperatures are checked. Offenders have access to running water 24 hours a day.	
Visual Inspection: maintenance records or reports, inspections IIV-8-003 Clothing The facility has an obligation to provide adequate institutional clothing appropriate to the season and the offender's work status, including adequate changes of clothing to allow for regular laundering. The facility may fulfill this obligation by furnishing clothing or permitting the offender to secure and wear his own clothing, except that when the offender does not provide adequate clothing for himself, the facility shall furnish same.	Compliant-Facility provides clothing upon intake and as needed. Facility has a laundry schedule for the washing of offender clothing. Laundry operates 7 days a week.	
Visual Inspection: documentation of clothing issue, documentation of cleaning and storage		
IV-B-004 Hygiene/Bedding Issue The facility shall provide adequate bedding and linen, including a clean mattress, sheets, pillow and blanket, not to exclude a mattress with integrated pillow. There are provisions for linen and towel exchange at least weekly. There are provisions for blanket exchange at least monthly.	Compliant-Offenders are provided with mattresses sheets blankets and pillow. Schedule in place for the washing of towels and linens.	
Visual Inspection: documentation of issue and exchange IV-B-005 Personal Hygiene Articles and services necessary for maintaining personal hygiene shall be available to all offenders including items specifically needed for females. Such items shall be provided to any offender (male or female) who is indigent. Each offender shall be provided soap, toilet paper, toothbrush, toothpaste and shaving equipment.	Compliant-Necessary hygiene items are provided to offenders upon intake. Facility provides soap, toilet paper, toothbrush and toothpaste to offenders.	
Visual Inspection: documentation that items are provided, list of items available		
C. CONTINUUM OF HEALTH CARE SERVICES		
References: ACA CJS 1-2A-14, 1-4C-01, 1-4C-03, 1-4C-04, 1-4C-06, 1-4C-07, 1-4C-08, 1-4C-09, 1-4C-10, 1-4C-13, 1-4C-15, 1-4D-01, 1-4D-03, 1-4D-04, 1-4D-06, Dept. Regs. B-06-001/IS-D-2, HC-01/IS-D-HP13, HC-02/IS-D-HCP14, HC-05/IS-D-HCP20, HC-06A/IS-D-HCP41, HC-06B/IS-D-HCP42, HC-06C/IS-D-HCP46, HC-08/IS-D-HCP33, HC-09A/IS-D-HCP22, HC-11/IS-D-HCP34, HC-13/IS-D-HCP34, HC-13	Findings	Response
IV-C-001. Access to Care/Clinical Services. At the time of admission/intake, all offenders are informed about procedures to access health services, including any copay requirements, as well as procedures for submitting grievances. Medical care is not denied based on an offender's ability to pay. The facility has a designated health authority with responsibility for health care services. When the health authority is other than a physician, final clinical judgments rest with a single, designated, responsible physician, final clinical judgments rest with a single, designated, responsible physician, final clinical judgments rest with a single, designated, responsible physician, or all censes of a designated health care authority who shall be a physician or a licensed or registered health care authority who shall be a physician or a licensed or registered health care 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 sharizal causices and cousend by the DS&C. The requester shall be authoritied but this in accordance with R.S. 15331, DS&C 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 DS&C. Such fee schedule for DS&C offenders housed in local jail facilities shall not exceed the DPS&C approved rate in accordance with Dept. Reg. B-06-001 HC-02/IS-D-HCP14, unless prior approval has been granted by the Secretary of the DPS&C. Such fee schedule for DFS&C offenders may be required to file a claim with his/her private medical or health care insurer, or any public medical a	Compliant-Nurses on staff at facility to provide care to offenders. Co-pays are charged to offenders that are approved by DPS&C.	
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 some equipment and supplies for the medical services provided to offenders by nurses.	



	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 on- sight emergency treatment of an offender.) Visual Inspection: documentation of health authority designation, contract, billing	Compliant-Facility has a health authority and follow standing orders in treating offenders. Nurses are licensed. Offenders can fill out sick call request daily.	- No. portino
records, sick call request form, a health record, clinical provider schedules, current credentials/licensure		
IV-C-004 Personnel Qualifications/Credentials Correctional or other personnel who do not have health care licenses may only provide limited health care services as authorized by the responsible health care authority and in accordance with appropriate training. This would typically involve the administration of medication, the following of standing orders as authorized by the responsible health care authority and the administration of first aid/CPR in accordance with POST training. Written policy, procedure and practice approved by the health authority require dispensing and administering prescribed medications by qualified personnel.	Compliant- Nurses license are current. Staff also trained in CPR/First Aid.	
Visual Inspection: health records, completed medication administration form, personnel records, copies of current credentials or licensure, documentation of compliance with standing orders, health record entries, staff training records		St. 174-12
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- Offenders have access to 24 hour care. Offenders are taken to local hospital if more advanced care is needed.	
Visual Inspection: designated facility, provider lists, transportation logs IV-C-006 Health Screens	Compliant- Offenders are screened by nurses upon intake	
Written policy, procedure and practice require that all DPS&C offenders receive a health screening by health trained or qualified health care personnel upon intake into the facility unless there is documentation of a health screening within the previous 90 days. Screening is conducted in accordance with protocols established by the health authority. If completed by health trained personnel, all intake health screens are to be reviewed by health care personnel as soon as possible. If a facility uses a different screening form, it shall be required to have at a minimum the questions in the Intake Health Care Screening form (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:	and arrival at the facility and address any medical and mental health needs at that time.	
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. Ohservation of the following: 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 DOJ and LA DPS&C.] 9. Current health insurance. Visual Inspection: health records, completed screening form, transfer logs		
IV-C-006-1 Pregnancy Management	Compliant- Facility does not house females.	
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 offender received obstetrical services by a qualified provider, notification to DPS&C when DPS&C offender is pregnant, transfer logs		



IV-C-007 Communicable Disease and Infection Control Program	Findings Compliant-Policies in place for infection control	Response
Communicable diseases are managed in accordance with a written plan approved by the health authority in consultation with local public health officials. The plan includes for the screening, surveillance, treatment, containment, and reporting of infectious diseases. The plan shall comprise of testing to detect communicable diseases, including TB testing within 14 days of arrival at the facility. If there is documented evidence of TB testing within the last 12 months, new testing is not required. Qualified health care staff will evaluate for signs and symptoms of TB. Infection control measures include the availability of personal protective equipment for staff and hand hygiene promotion throughout the facility. Procedures for handling biohazardous waste and decontainiating medical and dental equipment must comply with applicable local, state and federal regulations.	program. Contract for medical waste pickup. Clinic visits on file.	
Visual Inspection: health records, clinic visit logs, documentation of waste pic up and/or cleaning logs		
IV-C-008 Annual TB Testing Written policy, procedure and practice require annual testing or medical evaluation for signs and/or symptoms of 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 upon intake and annually. Records are kept in offender medical record.	
Visual Inspection: health records IV-C-009 Chronic Care Program	Compliant-If an offender requires chronic care and the	
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.	facility can not provide the services, then they are transferred to a facility that has the capability to provide that care. At the time of inspection there are no offenders needing chronic care.	
Visual Inspection: health records IV-C-010 Pharmaceuticals	Compliant- Medication is dispensed at prescribed by	
Written policy, procedure, and practice approved by the health authority provide for the proper management of pharmaceuticals. Offenders are provided medication as prescribed.	ourses. MARS are done on medications dispensed to offenders.	,
Visual Inspection: health records, completed medication administration forms, inventories		
IV-C-011 First Aid Kits First aid kits are available in areas of the facility as designated by the responsible health care authority and shall be immediately accessible to housing units.	Compliant- First aid kits and AED are located in the facility.	
Visual Inspection: location of first aid kits within the facility		
IV-C-0.12 Access to Sick Call There is a process for all offenders to initiate requests for health services on a daily basis. Written policy, procedure and practice require that sick call is conducted by a physician and/or other qualified health care personnel who are licensed, registered or certified as appropriate to their respective professional discipline and who practice only as authorized by their license, registration or certification. Sick call shall be available to all offenders as follows: -Facilities with fewer than 100 offenders - 1 time per week; -Facilities with 100 to 300 offenders - 3 times per week; -Facilities with more than 300 offenders - 4 times per week. If an offender's custody status precludes attendance at sick call, then arrangements shall be made to provide such services in the place of the offender's detention. Visual Inspection: written policy and procedure		
IV-C-013 Infirmary Care 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.	Compliant-There is no infirmary at the facility. The medical department is a room where nurses will check offenders who sign for sick call. Offenders are brought to local medical facility if needed.	
Visual Inspection: admission or inpatient records, staffing schedule, completed form C		
0s-004-B IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, Compassionate Release) Any offender sentenced to DPS&C custody that meets the medical criteria to be released on Medical Parole, Medical Treatment Furlough or Compassionate Release may be considered after submission of the required documentation in accordance with the corresponding Dept. Reg. to the DPS&C's Chief Nursing Officer via email to Medical Director@corrections.state.la.us or by fax to 225-342-7240.	Compliant- A policy in place for medical releases. There have been no medical furlough or compassionate releases as of date of the audit.	
Visual Inspection: health records, documentation of approval of DPS&C's Chief Nursing Officer		
Unicer 17-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 same under the intervention of the normal visual Inspection: health records, documentation of staff training, documentation of beservation of suicide watches.	Compliant-Staff receive training on suicide prevention. Watch logs are kept on offenders who may be placed on watches.	



	Plading	
Vi-C-015 Offender Deaths Written policy, procedure and practice specify and govern the actions to be taken in the event of an offender's death, which includes notification of the coroner of all offender deaths. All attempts to contact the coroner regarding any death shall be thoroughly documented. Such procedures shall also include the reporting requirements as outlined in BJG 1-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.	Findings Compliant-Offender deaths are reported to appropriate authority. There is no deaths in the last 6 months.	Response
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. 15:832(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 occurredPursuant 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 centerBased on extenuating circumstances the Warden or designee may extend the definition of an offender's immediate family member.	Compliant-The facility will notify family members in the event the offender is admitted to a medical facility in ICU or trauma center. There has been no offender admitted.	
D. HEALTH SERVICES STAFF References: ACA CJS 1-4D-02, 1-4D-04, 1-4D-05, 1-4D-07, 1-4D-08, 1-4D-09, 1-		
4D-10, 1-4D-17, 1-4D-18, Dept. Regs. B-06-001/HC-24/ISD-HCP44, HC-25/IS-D HCP9. HC-26/IS-D-HCP10. HC-33/AM-D-5		Response
IV-D-001 Health Care Quarterly Meetings The health authority meets with the facility administrator at least quarterly.	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 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.	
Visual Inspection: job descriptions Information Information about an offender's 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.	Compliant- All offender health information is kept confidential . When an offender is transferred to another facility all medical information goes with the offender.	
Visual Inspection: health records, completed consent forms, completed refusal forms IV-D-005 Informed Consent	Compliant- Consent forms filled out and on file.	
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 heath care is rendered against an offender's will, it is in accordance with state laws and regulations. Involuntary administration of psychotropic medications to offenders may only be accomplished by DPS&C. Visual Inspection: health records, completed consent forms, completed refusal forms	Offenders can refuse medical treatment and sign a refusal form.	N.
IV-D-006 Emergency Response Emergency medical care, including first aid and basic life support, is provided by all health care professionals and those health-trained correctional staff specifically designated by the facility administrator. All staff responding to health emergencies are trained in CPR. The health authority approves policies and procedures that ensure that emergency supplies and equipment, including automatic external defibrillators (AEDs) are readily available and in working order.	Compliant- Staff receive training on first aid and CPR. First aid kits and AED available at the facility.	
Visual Inspection: verification of training, records and certificates IV-D-007 Internal Review/Quality Assurance The health authority approves policies and procedures for identifying and evaluating major risk management events related to offender health care, including offender deaths, preventable adverse outcomes and serious medication errors.	Compliant-No major risk at time of inspection. Quality assurance meeting conducted.	
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, C-01-022/DP-A-15	Findings	Response
IV-E-001 Alleged and Substantiated Sexual Assaults Written policy, procedure and practice provide for the prevention, detection, response, reporting and investigation of alleged and substantiated sexual assaults. (PREA) Information provided to offenders about sexual abuse/assault includes: •Prevention/intervention; •Self-protection; •Reporting sexual abuse/assault; •Treatment and counseling. When the occurrence/allegation of sexual assault or threat involves a DPS&C offender, the facility shall report the incident to DPS&C immediately, as outlined in BIG 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. All assaults are reported and investigated. Staff is trained on PREA. Copies of reports on file.	
Visual Inspection: documentation of reports to DPS&C, investigative reports		

PART V - OFFENDER PROGRAMS AND ACTIVITY		
A. OFFENDER OPPORTUNITIES FOR IMPROVEMENT		
Raferences: ACA CJS 1-5A-01, Dept. Reg. B-08-004/P5-F-1	Findings	Response
V-A-001 Volunteers/Registration There is an official registration and identification system for volunteers.	Compliant- Volunteers are screened and go through orientation. There have been no volunteers at this time.	
Visual Inspection: activity schedules, facility logs		
V-A-002 Volunteer Services A current schedule of volunteer services is available to all offenders and is posted in appropriate areas of the facility.	Compliant-Volunteers are not at the facility since COVID.	
Visual Inspection: activity schedules, facility logs		
V-A-003 Programs and Services Written policy, procedure and practice provide for the availability of offender programs, services and counseling. Such programming may be obtained from acceptable internal or external sources which should include, at a minimum, assistance in obtaining individualized educational program instruction at a variety of levels. The local 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 CTIP credit forms; 5. Documentation for staff oversight if program is not administered and/or overseen by DPS&C staff.		
Visual Inspection: activity schedules, facility logs		
V-A-003-1 Educational Programming 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-There is no educational programs at this time.	
Visual Inspection: activity schedules, facility logs		



B. PROGRAMS	1	
References: ACA CJS 1-4C-02, 1-5B-01, 1-5B-01-1, 1-5B-01-2, 1-5B-01-3, 1-5B-		
02, 1-58-02-1, 1-58-02-2, 1-58-04, 1-50-01, 1-50-04, 1-50-05, Dept. Reps. A-04 002/PS-D-3, 8-02-001/IS-8-1, 8-06-001/HC-17/IS-D-HCP7, 8-08-005/PS-E-1, 8-08-013/PS-C-1, 8-09-003/AM-C-2, 0-01-012/PS-I-1, 0-02-008/OP-C-9, 0-02-	Findings	Response
609 fDP-G-7 V-B-O01 Releasing Offenders Procedures for releasing offenders from the facility include, but are not limited to, the following: -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 processProvide offender with/and have him/her sign for any reentry transition document envelopes and all its contents.	Compliant-Offenders are released with at least 2 forms of ID and community resource information provided and personal property returned to the offender and signed for.	
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 stendled clothing.		
Visual Inspection: completed release forms and documents, facility records and logs, offender records		
V-B-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- There has been no contact visiting since COVID-19. Visiting is set up for none contact. Offenders can request a visit and will be 1 hour.	
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 a library cart for offenders to use to check out books to read. A library schedule is posted.	
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 have not been held due to COVID-19.	
Visual Inspection: documentation of offender religious activities, activity schedule	Countries A Bosses No. 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	
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 DPS&C. If a facility based on location, or other legitimate concern, does not make provision for outdoor exercise, then compensating, dedicated exercise facilities of adequate size to provide three exercise opportunities per week shall be available.	Compliant- Recreation time is offered weather permitting and staff available. Offenders have access to yard for recreation.	
Visual Inspection: activity schedule, facility logs		
V-B-006 Transitional Work Program/Standard Operating Procedures Transitional Work programs shall be operated in accordance with the Standard Operating Procedures for Offender Work Release Programs established by the DPS&C.	N/A- Facility does not operate a TWP.	
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 DPSSAC Department Regulation No. B-02-001 "Assignment and Transfer of Offenders." Specific approval by the Secretary of DPSSAC is required prior to program assignment of state offenders. Refer to Standard Operating Procedures for Offender Transitional Work Programs.	N/A- Facility does not operate a TWP.	
Visual Inspection: approval for participation by the Secretary of DPS&C		
V-B-008 Offender Work Program Participation in offender work programs by state offenders shall comply with the provision of R.S. 15:708 (parish jails) or R.S. 15:832 (police maintenance).	Compliant-Offenders voluntarily work other duties that may be approved by the Warden or Sheriff.	
Visual Inspection: offender voluntary participation, sheriff's approval of work program request, facility logs		



	Findings	Response
V-B-009 Approval for Transitional Work Programs Any Sheriff interested in operation of a TWP facility shall obtain prior approval from the Chief of Operations. Refer to Standard Operating Procedures for Offender Transitional Work Programs.	N/A-Facility does not operate a 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. Offender mail is searched. Offenders have access to incoming and outgoing mail.	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail		
V-B-012 Packages and Publications Written policy, procedure and practice govern offender access to publications and packages from outside sources.	Compliant- Offenders can subscribe to publications and receive packages that don't affect the security of the facility.	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail		

C. REENTRY		
References: Dept. Regs. B-01-001/IS-B-6, B-01-002/BOP3, B-01-004/IS-B-7, B- 06-001/HC-40/IS-D-HCP31	Findings	Response
V-C-001 Substance Abuse Programs The facility encourages offender participation in substance abuse programs when available.	Compliant-No programs at this time.	
Visual Inspection: facility log, activity schedule		
V-C-02 Reentry Programs The DPS&C and the facility encourages reentry programming which includes: 1. Employment opportunities through work release; 2. At least two forms of valid identification upon release; 3. The development of a residential plan prior to release; 4. Referral to community based service providers upon release; 5. Where feasible, recommend DPS&C offenders receive 100 hours of pre-release training at a regional reentry center prior to transfer to a TWP, or release from custody. The local jail facility shall maintain reentry transition document envelops for all DPS&C offenders, which include at a minimum, if applicable: 1. Any valid forms of identification; 2. Prescriptions and Medicaid card; 3. Community service referrals.	Compliant- 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 B-01-004-C, Pre-Parole LARNA II Questionnaire for Local Jail Facilities, and submit via e-mail to DPS&C HQ at LOCALIama@corrections.state.la.us or by fax to 225-342-0929 within the first two weeks of the month proceeding the scheduled hearing.	Compliant-Pre-parole packets are done.	
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. Record of parole granted in file.	
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
VI-A-001 Access to Courts/Access to Legal Materials Written policy, procedure, and practice ensure the right of offenders to have access to courts. This includes reasonable access to legal reference materials or access to legal or paralegal assistance. Illiterate offenders shall be provided the assistance of a fellow offender or be furnished adequate assistance from the facility staff or other persons who have a legitimate connection with the legal issues being pursued. If an offender's requirements in this area are significant and complex, exceeding the capability of the local facility to meaningfully provide assistance, then the inmate shall be transferred to the DPS&C.	form.	
Visual Inspection: facility log		
VI-A-002 Access to Counsel Written policy, procedure, and practice ensure offenders' confidential access to counsel. Such contact includes, but is not limited to telephone communications, uncensored correspondence and visits.	Compliant-Attorneys visits and phone calls are allowed with offenders. Offenders can also receive correspondence from attorneys.	
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 on incident report.	
Visual Inspection: facility log, incident reports, staff training records		

BJG Compliance

13



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-Offenders are not discriminated against for any programs that are offered.	
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 improsoment if less formal procedures have not resolved the matter. Such complaints and grievances include, but are not limited to, actions pertaining to conditions of confinement, personal injuries, medical complaints, time computations, the classification process, or challenges to rules, regulations, or policies. Through this procedure, offenders shall receive reasonable responses within a specified time period and where appropriate, meaningful remedies.		
Visual Inspection: grievances		

PART VII - ADMINISTRATION AND MANAGEMENT A. RECRUITMENT, RETENTION AND PROMOTION References: ACA-C15 1-1A-01, 1-1B-01, 1-1C-01, 1-1C-07, 1-4C-13, 1-4D-05, 1-4D-14, 1-7B-02, 1-7B-04, 1-7B-06, Dept. Regs. A-02-028/AM-F-22, C-01-008/OP-A-19	Findings	Response
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 job) prior to assuming a position or post. Such training must include: 1. Security procedures; 2. Hostage procedures; 3. Fire and emergency plan/ procedures; 4. Suicide precaution and signs of suicide risks; 5. Use of force policies; 6. Inmate 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.		
Visual Inspection: lesson plans, staff training records		
VII-A-002: Weapons Training All personnel authorized to use firearms and less-than-lethal weapons must demonstrate competency at least annually. Training includes decontamination procedures for individuals exposed to chemical agents.	Compliant-Staff is trained annually in use of weapons.	
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-I-4 VII-B-001 Authority	Findings	Response
There is a statue or constitutional provision authorizing the establishment of the local jail facility or its parent agency.	Compliant- Statue authorizing the establisment of the correctional facility.	
Visual Inspection: VII-8-002 Legal Assistance for Staff Written policy, procedure and practice specify the circumstances and methods for the facility administrator and other staff to obtain legal assistance as needed in the performance of their duties.	Compliant- Legal assistance for staff is available.	
Visual Inspection: personnel or training records VII-B-003 Independent Financial Audit	Compliant-Audits are done by Cochran, Clark,	
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.	Robinson& Thomason Company.	
Visual Inspection: annual audit		
VII-8-004 Facility Insurance Written policy, procedure and practice provide for comprehensive facility insurance coverage.	Compliant-Facility is covered through Affiliates FM insurance company.	
Visual Inspection: Insurance policy VII-B-00S. Offender Funds Offender's personal funds held by the facility are controlled by generally accepted accounting principals (GAAP). Any interest earned, other than operating funds, accrues to the benefit of the offenders.	Compliant- Offender funds are accounted for.	
Visual Inspection: offender records		
VITLB-065 Organization Written policies and procedures describe all facets of facility operation, maintenance and administration are reviewed annually and updated as needed. New or revised policies and procedures are disseminated to staff. A file for each guideline shall be maintained with documentation (primarily written) to support compliance.	Compliant-Policies are reviewed and changes made as needed. Advised staff to put the current Warden's name on the policy and remove the previous Warden's name.	
Visual Inspection: annual reviews, dissemination to staff		
WIT-6-007 Annual Compliance Statement Written policy, procedure and practice demonstrate that the facility shall submit an annual statement confirming continued compliance with the BJG to the appropriate. DPS&C Regional Team Leader. This statement, submitted by January 31st each year, is in writing and shall include: 1. A copy of the current Fie Marshal Report; 2. 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.	Compliant- Annual compliance statement turned in in a timely manner.	
Visual Inspection: annual statement		
VII-B-008 Monthly Reporting Written policy, procedure and practice ensure that any facility with DPS&C offenders report activities to the Chief of Operations on a monthly basis in accordance with Dept. Reg. C-05-001/AM-I-4. These reports shall be submitted on automated reporting forms provided by the DPS&C, no later than the 15th day of the month for the previous month's activities. Automated reporting shall be completed, by the appropriate DPS&C Regional Team Leader, no later than the 20th day of the month for the previous month's activities.		
Visual Inspection: monthly report	Compliant-Staff meetings are held monthly. Copies	
VII.=0-09 Staff Meetings 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.	with printed names of staff attending meeting on file. Advised staff to have a sheet where staff sign their name.	
Visual Inspection: staff meeting minutes/notes		

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

1.15



INSPECTION REPORTS								
DEPARTMENT Deficiencies Corrective Action Taken								
Fire Marshall	None							
6/10/2021 Maximum Capacity: 757								
DHH - Health	None							
Jim Health								
Date of Current Report: 6/03/2021 Maximum Capacity: 757								
DHH - Retail Food	None							
Date of Current Report: 6/03/2021								



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-21-020040-1

No Deficient/Cautionary Codes cited.



H. "Butch" Browning FIRE MARSHAL

	mand the blocking of the second		Loca	ition	Inform	atlor			
Inspection Type	Compliance	Building I	nspection				inspection Da	te (5/10/2021 2:04:50 PM
Structure ID	96204	No. of Buildings 16		Facility Code	*	J400			
Capacity	757	Year Bullt 1998			Construction	Туре	Type IIB / (000)		
Building/Trade Na	ime			7	Address)	······································	<u></u>	
LASALLE CORRE	CTIONAL CEN	ITER			15976 H	IGHV	VAY 165, URAN	NA, LA 71	480
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Owner Type		Name	, , , , , , , , , , , , , , , , , , , 	·		Cont	act Phone	Contact	Emall
Private Project		AMBER	COLEMAN			(318)	495-6200	ACOLEN	MAN@LASALLECORRECTI
Address		<i></i>	\$						
PO BOX 809, RAY	VILLE, LA 712	69							
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				Com	ments				William III and the state of th
NO APPARENT DI		AT TIME	OF INSPECTIO						
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Name: Griffin Pir	tle	Badge N	lumber: 722				ector Signature	:	
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		Pers	on to whom	requ	iremen	ts w	ere explained		
Name: Mike Doug	ghty	· · · · · · · · · · · · · · · · · · ·	Deputy			_	ature:		
For questions reg	jarding the co	ntents of	this report, pl	0250	call:	L	(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.



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Retail Food Notice of Violations

Routine/Renewal

Permit Number 30-0001109-1	Permit Name LASALLE CORRECTIONAL CENTER cafeteria			
Name of Establishment LASALLE CORRECTIONAL CEN	TER	Owner Name LASALLE CORRECTIONAL CENTER		
Address 15976 US 165 HWY URANIA, LA 71480		Date 06/03/2021	Time 07:50 AM	

LAC TITLE 51 PART XXIII

Comments:

Verbal acknowledgement of report provided by James Mcfarlen, Jr. Asst. Warden(name and title). Copy of report emailed to jmcfarlen@lasallecorrections.com(email address).

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.

Sanitarisa Name/Print Celeb Smith	Phone # 318-757-8632	Sanitarian Signature	R.S. # 3033	
The above mentioned violations w	ere called to my attention and were ex	plained to me in detail. I hereby agree to		
Correct Critical Violations by		Correct Non-Critical Violations by		
		Signature of Recipient		
Name/Title James McFarlon, Asst. Warden		\bigcirc i		
		MN-la		
		1/		

DEPART	OF LOUISIANA MENT OF HEALTH OF PUBLIC HEALTH				
INSTIT	UTION REPORT				
Agency License No. N/A	Anniversary Month JUNE				
Name of Establishment LASALLE CORRECTIONAL CENTER-224	Mailing Address				
Address 15976 HIGHWAY 165					
City, state, Zip Code OLLA LA 71465					
Type of Facility JAILS 757 391					
Parish La Salle	Date Inspected 06/03/2021				
The above establishment has been inspected by a representative	of this section, and:			_	
License is Recommended; License is Not Recommended; License is Pending Reinspection;					
from the standpoint of sanitation	CALEB SMITH	3	0	3	3
					<u> </u>
LHS 48 (R 7/99)					D 1014



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Detention or Incarceration Notice of Violations

Routine/Renewal

Permit Number 30-01-224	Permit Name Lasalle Correctional Center-224		
Name of Establishment Lasalle Correctional Center-22	4	Owner Name	
Address 15976 Highway 165 Olla, LA	71465	Date 06/03/2021	Time 07:50 AM

LAC TITLE 51 PART XVIII					
Comments: Verbal acknowledgement of Copy of report emailed to just	• •	es Mcfarlen, Jr. Asst. Warden(name and ti ions.com(email address).	itle).		
Number Licensed F 757	or	Number in Attendance 391	License Anniversary 06/30/2021		
Senitarian Name/Print Caleb Smith	Phone # 318-757-8632	Sanitarian Signature	R.S. # 3033		
The above mentioned violations wer	re called to my attention and v	were explained to me in detail. I hereby agree to			
Correct Critical Violations by		Correct Non-Critical Violations	by		
Name/Title James McFarlen, Asst. Warden		Signature of Recipient Amala			