

Department of Public Safety & Corrections
State of Louisiana

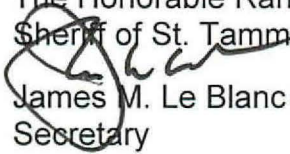
JOHN BEL EDWARDS
GOVERNOR



JAMES M. LE BLANC
SECRETARY

MEMORANDUM

TO: The Honorable Randy Smith
Sheriff of St. Tammany Parish

FROM: 
James M. Le Blanc
Secretary

DATE: April 28, 2022


RE: St. Tammany Parish Jail

Please see the attached monitoring report regarding the Basic Jail Guidelines (BJG) annual inspection. I am recertifying this facility in compliance with the "Basic Jail Guidelines" with annual monitoring. We'd also like to encourage full compliance with BJJ II-A-018 "Offender Drug Testing".

Thank you for your support of the BJJ process.

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association
Bret Ibert, Warden, St. Tammany Parish Jail
Seth Smith, Chief of Operations
Travis Day, Warden
Josh Miley, BJJ Team Leader

State of  Louisiana

Office of the Secretary

Department of Public Safety and Corrections

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

St. Tammany Parish Jail
in acknowledgement of

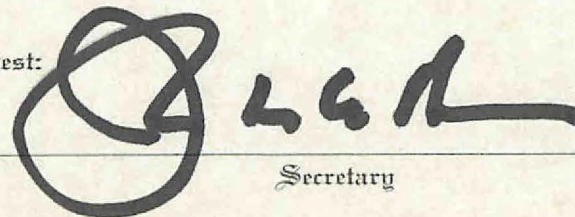
Continued Compliance with the Basic Jail Guidelines Process

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

this 28th day of April
in the year of our Lord 2022



Attest:



Secretary



BJG RECERTIFICATION REPORT

FACILITY NAME: St. Tammany Parish Jail
BJG MONITORS: Josh Miley, BJJ Team Leader
 Beverly T. Kelly, BJJ Team Member
 Tylan Self, BJJ Team Member
 Lesley Wheat, BJJ Team Member
FACILITY STAFF: Karla Wheat, BJJ Team Member
 Bret D. Ibert, Warden
 Scotty Payne, Captain
 William Frosch, Lieutenant
 Jessica Chatelain, Lieutenant
 Shaniqueka Weary, Captain
 Kimya Babers, Captain
 Dr. Jose Ham, Health Services Administrator
BJG INSPECTION DATE: January 6, 2021
PREVIOUS BJJ INSPECTION DATE: September 18, 2020 and September 23, 2020
OPERATIONAL CAPACITY: 1180
COUNT ON DAY OF VISIT: 956

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

CONCERNS OR ISSUES FROM THE PREVIOUS BJJ MONITORING INSPECTION:

II-D-001 Key, Tool and Utensil Control – During the previous inspection on 9/18/2020, this standard was found to be non-compliant. As noted during the walk through of the facility, “pass on” keys were observed laying on the desk tops in two different housing areas of the facility. There was no documentation in one of the officer’s logbook reflecting receipt of the pass on keys at the beginning of his shift as per the practice expressed by the officer.

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	308	39	347
Number of Local Offenders	45	67	519
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	87	3	90
Number of ICE Detainees	0	0	0
TOTAL	847	109	956

Number of DOC Offenders that are:

Single Bunked 10
 Double Bunked 335
 Triple Bunked 0
 Total 345

Number of DOC Offenders that are in restricted housing:

Single Bunked	<u>2</u>
Double Bunked	<u>0</u>
Triple Bunked	<u>0</u>
Total	<u>2</u>

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

Month/Year	Off/Off	Off/Off w/sig inj	Offender/Staff	Off/Staff w/sig inj
12/19	34	0	0	0
01/20	32	0	0	0
02/20	35	0	3	1
03/20	33	0	0	0
04/20	20	0	0	0
05/20	21	0	0	0
06/20	25	0	0	0
07/20	24	0	0	0
08/20	32	0	0	0
09/20	34	0	0	0
10/20	36	0	2	0
11/20	30	0	0	0

- 02/20 Offender-on-Staff with significant injury assault occurred on February 13, 2020, after Offender Kendall Cloud, DOC #454104, slammed the head of Deputy Ott into the cell bars. Deputy Ott was treated at the St. Tammany Parish Hospital and was diagnosed as having a concussion. Offender Cloud was criminally charged with Felony Battery of a Police Officer; Injury Medical, RS 14:34.2B(3). Offender Cloud was being held as a probation hold.

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
12/19	0	0	1	0	6
01/20	0	0	0	0	9
02/20	0	0	1	0	98
03/20	0	0	0	0	138
04/20	0	2	0	0	20
05/20	0	0	6	0	18
06/20	4	1	5	0	67
07/20	3	2	0	0	39
08/20	1	3	1	0	38
09/20	1	0	3	0	123
10/20	0	1	2	0	43
11/20	0	1	2	0	105

- Illicit substances - Suboxone strips, Marijuana, Synthetic Marijuana, suspected Heroin, and Methamphetamine.
- Alcohol – Hooch made from fresh fruit.
- Weapons – pieces of metal approximately 4-6 inches long.
- Other – Miscellaneous jail issued medications, altered batteries, broken metal clip, broken water pitcher, broom stick, tobacco, cigarettes, rolling paper, chunks of concrete, tattoo ink, tattoo

needles, tattoo stencils, pieces of metal, broken mirror, pieces of broken light fixture, staples, screws, and sharpened battery casing.

GENERAL APPEARANCE/CLEANLINESS/COMMENTS OF THE FACILITY:

Living Area:

The living areas were clean and well maintained.

- **Dorms -**
The dorms were clean and found to be appropriate providing for the basic quality of life.
- **Cell Block –**
The cell block was observed to be well maintained. During the Covid-19 pandemic, some areas of the cell block was utilized as a quarantine for new intakes.

Culinary/Dining:

The kitchen area was observed to be well organized and clean. The inventories were checked with no discrepancies being discovered. The key control and tool cabinet was observed to be maintained to ensure accountability. The food storage area was observed to be neat and clean with appropriate spacing to avoid food spoilage.

Bathrooms:

The bathrooms were observed to be adequate providing for the basic quality of life.

Yard Areas:

The yard areas were observed to be well maintained.

Maintenance:

The tool inventories were checked with no deficiencies noted. Tools assigned to maintenance groups are kept in tool bags. Each bag is numbered and contain an inventory of the tools assigned to the bag. All chemicals are stored in a secure area of the warehouse.

COUNTS:

- How many formal counts are conducted each shift? A total of six formal counts are conducted each day. Four formal counts are conducted during on each of the days shift and two formal counts are conducted on each of the night shifts.
- How many counts are conducted each day? Nine

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? When "stick outs" are conducted, the supervising employee contacts main control advising as to the name, DOC number of the offender(s), time of departure, and location. The supervising employee is required to visually observe the offender(s) before reporting the count.
- Does this process insure accountability and safe/secure operation of the facility? Yes

CLASSIFICATION SYSTEM:

Does the facility have any trustees that work outside the secure perimeter? (Yes or No) Yes

If yes,

- What is their classification process to determine who is eligible for trustee status?
A review board consisting of representatives from security and treatment is held to determine whether the offender is eligible for trustee status. The offender's arrest and conviction history is

reviewed to determine whether he/she is eligible for minimum custody status. Trustee recommendations are reviewed by medical to ensure there are no medical conditions that would render the trustee recommendations ineligible.

- Does their classification process meet DPS&C, Corrections Services' criteria? Yes

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

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
12/19	25	388	6.44%	0
01/20	25	373	6.70%	0
02/20	24	360	6.66%	2
03/20	16	360	4.44%	0
04/20	0	327	0.00%	0
05/20	0	308	0.00%	0
06/20	31	310	10.00%	0
07/20	26	335	7.77%	0
08/20	25	326	7.66%	0
09/20	25	339	7.37%	6
10/20	23	346	6.64%	0
11/20	25	358	6.98%	0

- One offender tested positive for THC and the other seven tested positive for Buprenorphine (BUP)

Rules and Discipline

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

If yes,

- What is their restoration of good time application process for the offender population? Offenders are provided applications upon request. Once the application has been completed, it is forwarded to Headquarters for further handling.
- 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	<u>50</u>
Number of Participants	<u>5</u>
YTD Number of Completions	<u>0</u>

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

- Culinary ServSafe Certification
 - *IC3
 - Standardized Pre-Release Curriculum – 2010
 - Cage Your Rage
 - HiSet

Inside/Out Dad Program
*Living in Balance
*Louisiana Risk Management Model: Phase I & II
Moral Recognition Therapy
*Partners in Parenting
*Thinking for a Change

*As a result of COVID-19 restrictions, the denoted programs are not currently being offered.

Celebrate Recovery and Understanding and Reducing Angry Feelings are no longer offered as they have been replaced by Cage Your Rage. UCCI CBI Employment is no longer offered at the St. Tammany Parish Jail.

LIST ALL OTHER OFFENDER PROGRAMS:

AA/NA
Bible Study
Live Recovery

The above referenced programs are still active but are not being offered at this time because of COVID-19.

PREA COMPLIANCE:

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

If yes, date compliance received:

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

OTHER:

IV-C-001 – Compliant - The facility transitioned to a new contract with Correct Health on July 1, 2020. Health Care services were previously provided through CCS Well Path.

IV-C-004 – Compliant - This guideline was initially found to be non-compliant. The policy did not include the Nursing Protocols and who approved the orders. Appropriate changes were made and the policy is currently compliant.

IV-C-009 – Compliant - This guideline was initially found to be non-compliant. The policy did not include guidelines for treating offenders with chronic conditions. Appropriate changes were made and the policy is currently compliant.

IV-C-014 – Compliant - This guideline was initially found to be non-compliant. The policy has not been approved by a psychiatrist. Appropriate changes were made and the policy is currently compliant.

IV-D-003 – Compliant - This guideline was initially found to be non-compliant. The policy did not state that the research on offenders is prohibited. Appropriate changes were made and the policy is currently compliant.

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Staff morale was observed to be good.

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

Offender moral was observed to be good. The quality of life was deemed to be appropriate.

RECOMMENDATION:

The following guideline was found to be non-compliant:

II-A-018 – This guideline was found to be non-compliant. The 5% monthly quota was not met for the month of March 2020 (4.44%); April 2020 (0.00%); and May 2020 (0.00%). This was due to the facility suspended offender drug testing due to the Covid-19 pandemic. The facility was instructed to continue with offender drug testing and they were able to meet the standard with the exception of the above listed monts.

Based upon the team's review and inspection of the St. Tammany Parish Jail, I recommend them for recertification with annual monitoring.



STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Detention or Incarceration
Notice of Violations

Routine/Renewal



Permit Number 52-04-224	Permit Name St. Tammany Parish Jail-224		
Name of Establishment St. Tammany Parish Jail-224		Owner Name	
Address 1200 Champagne ST Covington, LA 70433		Date 06/28/2021	Time 11:20 AM

LAC TITLE 51 PART XVIII

Comments:

VENTS THROUGHOUT FACILITY ARE DUSTY AND UNCLEAN.

VERBAL ACKNOWLEDGMENT OF REPORT PROVIDED BY CAPTAIN SCOTTY PAYNE - MAINTENANCE DIRECTOR
REPORT SENT TO SCOTTPAYNE@STPSO.COM

Number Licensed For 1180		Number in Attendance		License Anniversary 02/28/2021	
Sanitarian Name/Print Danielle Hernandez	Phone # 985-893-6296	Sanitarian Signature 		R.S. # 3085	
The above mentioned violations were called to my attention and were explained to me in detail. I hereby agree to Correct Critical Violations by		Correct Non-Critical Violations by			
Name/Title CAPTAIN SCOTTY PAYNE - MAINTENANCE DIRECTOR		Signature of Recipient 			



STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Retail Food
Notice of Violations

Routine/Renewal

Permit Number 52-0002668-1	Permit Name ST TAMMANY PARISH JAIL Kitchen	
Name of Establishment ST TAMMANY PARISH JAIL	Owner Name ST TAMMANY PARISH JAIL	
Address 1200 CHAMPAGNE ST COVINGTON, LA 70433	Date 06/28/2021	Time 10:45 AM

LAC TITLE 51 PART XXIII

NON-CRITICAL ITEMS: These items should be corrected by the next regular inspection or according to the compliance schedule (see below) established by this office.



Category	Code Reference	Description of Violations
UTENSILS/EQUIPMENT/SINGLE SERVICE	2101	67 - 2101.1 - Non-food contact equipment is not maintained in good repair. DISHWASHER IS NOT IN WORKING ORDER. THREE COMPARTMENT SINK IS BEING UTILIZED AT THIS TIME.
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3101	102 - 3101 - Plumbing is not maintained. STANDING WATER IN DISH WASHING AREA D/T CLOGGED DRAIN. PER CAPT. PAYNE DRAIN IS SCHEDULED TO BE CLEANED OUT NEXT WEEK.
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3701	105 - 3701.6 - Floor is not maintained in good repair. WALK IN COOLER/FREEZER FLOOR PANELS
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3703	106 - 3703.3 - Walls/ceilings or attached equipment are not clean. VENTS AND FANS THROUGHOUT KITCHEN

Comments:

VERBAL ACKNOWLEDGMENT OF REPORT PROVIDED BY CAPTAIN SCOTTY PAYNE.
REPORT SENT TO SCOTTPAYNE@STPSO.COM

NOTICE RS 40:31.38 (ACT 66)

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

Sanitarian Name/Print Danielle Hernandez	Phone # 985-893-6296	Sanitarian Signature 	R.S. # 3085
The above mentioned violations were called to my attention and were explained to me in detail. I hereby agree to Correct Critical Violations by		Correct Non-Critical Violations by	
Name/Title CAPTAIN SCOTTY PAYNE		Signature of Recipient 	



Office of State Fire Marshal

8181 Independence Blvd. Baton Rouge, LA 70806



A REINSPECTION IS BEING SCHEDULED WITH THE FACILITY FOR A BETTER TIME TO COMPLETE THE REPORT. THE INSPECTION.

(225) 925-4911 (800) 256-5452 Fax (225) 925-4241

Inspection Report

Report # CB-21-022147-1

Deficient/Cautionary Codes cited.

John Bel Edwards
GOVERNOR

H. "Butch" Browning
FIRE MARSHAL

Location Information			
Inspection Type	Compliance Building Inspection		Inspection Date * 11/23/2021 9:19:19 AM
Structure ID	J000270	No. of Buildings	4
Capacity	1300	Year Built	1984
Building/Trade Name		Address	
ST TAMMANY PARISH JAIL		1200 CHAMPAGNE ST, COVINGTON, LA 70433	
Owner Information			
Owner Type	Name	Contact Phone	Contact Email
Municipal Project	ST. TAMMANY PARISH JAIL	(985) 276-1080	ANDREWSHARP@STPSO.COM
Address			
1200 CHAMPAGNE ST, COVINGTON, LA 70433			
Tenant Information			
Name	Suite Number	Floor Number	Square Footage
ST. TAMMANY PARISH JAIL			30000
Occupancy Details			
Occupancy Type	Details		
Institutional	INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 4		
Deficient and Cautionary Items			
Description	Code Status	Correction Date	
LAC55:V.3037 — Fixed systems including pre-engineered and engineered shall be installed, inspected, serviced, and maintained in compliance with the manufacturer's installation manuals, specification, and the applicable NFPA standards adopted in §3053. (CURRENTLY (1) THE KITCHEN SUPPRESSION SYSTEM HAS A APPLIANCE (STEAMER) AT THE END THAT IS OUT FROM UNDER THE HOOD AND IS ALSO NOT ALIGNED WITH THE SUPPRESSION NOZZELS. (2) THE SPRINKLER SYSTEM IN MULTPLE BUILDINGS IS MISSING THE SPRINKLER WRENCH. ALSO IT WAS NOTED IN THE LAUNDRY AREA THAT THE HEADS HAD A LARGE BUILD UP OF DIRT THAT COVERED THE ENTIRE SPRINKLER HEADS. (NFPA 25:5.2.1.1.2 Any Sprinkler shall be replaced that has signs of leakage; is painted, other than by the sprinkler manufacturer, corroded, damaged, or loaded; or in the improper orientation). (3) WAS UNABLE TO ACCESS FIRE ALARM MAIN PANEL TO VERIFY WHEN THE LAST ANNUAL INSPECTION WAS PERFORMED FOR THE FIRE ALARM SYSTEM.)	DEFICIENT	12/22/2021 *	
Inspector Information			



Office of State Fire Marshal
8181 Independence Blvd. Baton Rouge, LA 70806



Comments
MALE HOLDING 1: CAPACITY 20 CURRENTLY 4 MALE HOLDING 2: CAPACITY 20 CURRENTLY 6 MALE HOLDING 3: CAPACITY 20 CURRENTLY 16 MALE HOLDING 4: CAPACITY 20 CURRENTLY 0 FEMALE HOLDING 1: CAPACITY 13 CURRENTLY 1 FEMALE HOLDING 2: CAPACITY 13 CURRENTLY 2 TOTAL INMATES PRESENT AT TIME OF INSPECTION 930



Office of State Fire Marshal
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Inspection Report
Report # CB-21-022147-1

John Bel Edwards
GOVERNOR

H. "Butch" Browning
FIRE MARSHAL

Deficient/Cautiory Codes cited.

Name: Jerry Dillon	Badge Number: 556	Inspector Signature: <i>Jerry Dillon</i>
Person to whom requirements were explained		
Name: Darrell Boudreaux	Title: maint.	Signature: <i>Darrell Boudreaux</i>

For questions regarding the contents of this report, please call: (504) 568 8506

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.



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



H. "Butch" Browning
FIRE MARSHAL

Inspection Report

Report # CB-21-022147-1

Deficient/Cautionary Codes cited.

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

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

RULES FOR APPEALING TO THE FIRE MARSHAL BOARD OF REVIEW

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



12/22/2020

Facility: St. Tammany Parish Jail	Date Conducted: January 7, 2021
Monitors: Josh Miley, BJG Team Leader; Beverly T. Kelly, BJG Team Member; Tylan Self, BJG Team Member; Lesley Wheat, BJG Team Member; and Karla Wheat, BJG Team Member	

BASIC JAIL GUIDELINES (BJG)

PART I - SAFETY		
A. PROTECTION FROM INJURY AND ILLNESS		
References: ACA CJS 1-1A-01, 1-1A-02, 1-1A-03, 1-1A-04, 1-1A-05, 1-1C-05, 1-4A-03, 1-4A-04	Findings	Response
<p>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.</p> <p>Visual Inspection: completed inspection checklists and reports, documentation of corrective action, inspection reports</p>	Compliant - The facility was inspected by the Fire Marshal on December 2, 2020, with several deficiencies being noted. A subsequent inspection was completed on December 17, 2020, with all previous deficiencies noted being corrected. The last LDH inspection was completed on September 17, 2019. There were no deficiencies noted. The facility received e-mail notification from staff at Louisiana Department of Health stating their office is not conducting inspections on jails/prisons at this time due to COVID-19.	
<p>I-A-002 Disposal of Materials Disposal of liquid, solid, and hazardous material complies with applicable government regulations.</p> <p>Visual Inspection: trash disposal contract, completed inspection reports, include documentation that deficiencies were corrected</p>	Compliant	
<p>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.</p> <p>Visual Inspection: pest control contracts, trash disposal contracts, inspection reports</p>	Compliant	
<p>I-A-004 Housekeeping The facility is clean and in good repair. There is a written housekeeping plan that provides for the ongoing cleanliness and sanitation of the facility.</p> <p>Visual Inspection: inspection reports, completed forms, documentation of correction of identified deficiencies</p>	Compliant - Walk thru of the facility was not conducted as a result of units being on quarantine. Upon arrival to the facility, the grounds were found to be clean.	
<p>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.</p> <p>Visual Inspection: documentation of approval by DHH or local authority, plan for addressing deficiencies</p>	Compliant - Due to COVID-19, LDH, is not completing inspections of jails/prisons.	
B. VEHICLE SAFETY		
References: Dept. Reg. C-03-003/OP-A-3	Findings	Response
<p>I-B-001 Offender Transport Escorted and unescorted absences of state offenders are governed by R.S. 15:811 and 833 and DPS&C Department Regulation No. C-03-003 "Escorted Absences."</p> <p>Visual Inspection: documentation of staff training, documentation of medical, funeral, etc. (outside trips)</p>	Compliant - Due to COVID-19, the facility has not had any employee transfers to the "Transportation" division.	
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-I-4	Findings	Response
<p>I-C-001 Emergency Plan There is a written plan, submitted to the Secretary of DPS&C, that specify the procedures to be followed in situations that threaten facility security. Such situations include but are not limited to riots, hunger strikes, disturbances, taking of hostages, and natural or man-made disasters. These plans are made available to all applicable personnel and are reviewed annually and updated as needed. All facility personnel are trained annually in the implementation of the emergency plan. An evacuation plan is used in the event of fire or major emergency. The plan is approved by the state fire marshal, reviewed annually, and updated, if necessary. There are written procedures for significant unusual occurrences or facility emergencies including but not limited to natural or man-made disasters; major disturbances such as riots, hostage situations, escapes, fires, deaths, serious illness or injury and assaults or other acts of violence. Such procedures include the reporting of these incidents to the DPS&C, OAS, telephone 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-842-4399 after hours, when they involve DPS&C offenders. In addition, the facility shall follow the incident reporting procedures as outlined in Dept. Reg. C-05-001/AM-I-4, "Activity Reports, UORs," Category A, B and C.</p> <p>Visual Inspection: training records, facility logs, documentation of approval of plan, documentation of annual review, documentation of staff receipt, training on the plan</p>	Compliant	



	Findings	Response
<p>I-C-002 Immediate Release of Offenders There is a means for the immediate release of inmates from locked areas in case of emergency and there are provisions for a backup system. The facility has exits that are properly positioned, are clear from obstruction, and are distinctly and permanently marked to ensure the timely evacuation of offenders and staff in the event of fire or other emergency.</p> <p>Visual Inspection: facility records/logs</p>	<p>Based upon review of documentation contained in the file, the guideline was found to be compliant. A walk thru of the facility was not conducted as a result of housing units being on quarantine.</p>	
<p>I-C-003 Fire Safety/Code Conformance The facility complies with the requirements of the state fire marshal. There is a specific plan for addressing deficiencies, if any, that is approved by the State Fire Marshal. The State Fire Marshal approves any variances, exceptions, or equivalencies.</p> <p>Visual Inspection: documentation of fire alarm and detection system maintenance and testing, plans for addressing deficiencies</p>	<p>Compliant</p>	
<p>I-C-004 Facility Furnishings Facility furnishings meet fire-safety-performance requirements.</p> <p>Visual Inspection: Specifications for all furnishings.</p>	<p>Compliant</p>	
<p>I-C-005 Flammable, Caustic and Toxic Materials Written policy, procedure and practice govern the control and use of all flammable, toxic and caustic materials.</p> <p>Visual Inspection: Staff training records, offender training records, internal inspection reports. Documentation of incidents that involved FTC materials. Inventories.</p>	<p>Compliant</p>	
<p>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 existing capabilities. The state health officer will determine a capacity based upon the ratio of plumbing fixtures to offenders and square footage. The operational capacity will be the lower of these two figures.</p> <p>Visual Inspection: facility count sheets</p>	<p>Compliant - The Fire Marshal's Inspection Report indicates a capacity of 1,349. The Department Health Institution Report indicates a capacity of 1,180. According to the requirements of this guideline, the facility's capacity is 1,180.</p>	

PART II - SECURITY

A. PROTECTION FROM HARM

References: ACA CJS 1-2A-01, 1-2A-04, 1-2A-05, 1-2A-06, 1-2A-08, 1-2A-11, 1-2A-13, 1-2A-14, 1-2A-16, 1-2A-17, 1-2A-19, 1-2A-20, Dept. Regs. A-02-008/AM-F-47, B-02-001/IS-B-1, C-02-007/OP-C-3

	Findings	Response
<p>II-A-001 Control There is 24-hour monitoring and coordinating of the facility's security, life safety, and communications systems.</p> <p>Visual Inspection: facility records/logs, maintenance records, records of staff deployment</p>	<p>Compliant - The file contained good documentation.</p>	
<p>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.</p> <p>Visual Inspection: documentation of receipt of job description by staff, documentation of annual review and updating, photos of perimeter controls</p>	<p>Compliant</p>	
<p>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 BJC.</p> <p>Visual Inspection: records of staff deployment, facility logs, documentation of annual review of staffing analysis and plan</p>	<p>Compliant</p>	
<p>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.</p> <p>Visual Inspection: records of staff deployment, facility logs</p>	<p>Compliant</p>	
<p>II-A-005 No Offender Control Over Others No offender or group of offenders is given control, or allowed to exert authority over other offenders.</p> <p>Visual Inspection: written policy and procedure</p>	<p>Compliant</p>	
<p>II-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 BJC I-C-001 for reporting requirements to DPSS&C.</p> <p>Visual Inspection: copies of log book, records of staff deployment</p>	<p>Compliant</p>	



	Findings	Response
<p>II-A-007 Counts The facility has a system for physically counting offenders. At least one formal count is conducted for each shift, with no less than 3 counts daily. The system includes strict accountability for offenders assigned to work and other approved temporary absences.</p> <p>Visual Inspection: completed forms, facility records/logs.</p>	<p>Compliant - A total of six formal counts are conducted daily with three informal counts conducted daily at irregular intervals.</p>	
<p>II-A-008 Offender Population Management System There is an offender population management process that includes records on the admission, processing, and release of offenders. Written policy, procedure, and practice provide for offender case record management that includes at a minimum, maintenance of the following documents and information. This offender record and any reentry transition envelopes shall be transferred with the offender at such time the offender is transferred to another local or DPS&C facility.</p> <ol style="list-style-type: none"> 1. Master prison form; 2. Bill of Information and Court Minutes OR Uniform Commitment Order; 3. One photograph; 4. Reports of disciplinary actions, grievances, incidents, or crimes committed while in custody; 5. Records of program participation, work assignments, classification actions; 6. 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 BJJ IV-D-004). <p>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.</p> <ol style="list-style-type: none"> 1. 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 revocation minutes are required); 5. Jail credit letter; 6. One Inventory Acknowledgment Form (cash and property receipts). <p>Visual Inspection: completed forms, reports, offender record</p>	<p>Compliant - File was well documented to show compliance with the requirements of this guideline.</p>	
<p>II-A-009 Reception - Legal Commitment and Medical Service Prior to accepting custody of an offender, staff determine that the offender is legally committed to the facility, and that the offender is not in need of immediate medical attention.</p> <p>Visual Inspection: Completed Admission forms, facility logs.</p>	<p>Compliant - It is the policy of St. Tammany Parish Jail not to accept custody of an offender until all pertinent documentation has been reviewed. Upon the acceptance of an offender, the information is logged in the main control log book.</p>	
<p>II-A-010 Admissions Admission processes for a newly admitted offender include, but are not limited to:</p> <ul style="list-style-type: none"> •Searching of the offender and personal property; •Inventorying and providing secure storage of personal property; •Providing an itemized receipt for personal property; •Recording of basic personal data; •Performing a criminal history check; •Photographing and fingerprinting; •Separating from the general public; •Providing a health screening to assess and identify any health and safety needs; •Providing information about access to health services, copy requirements and submitting grievances. <p>Visual Inspection: intake and admission forms, screening forms, inventory form, receipt form</p>	<p>Compliant - Documentation was found to be appropriate.</p>	
<p>II-A-011 Out of State Offenders The names of any out of state offender (federal or state) to be housed at a local jail or privately managed facility shall be submitted to the Chief of Operations prior to the offender(s) entering the State of LA. No such offender shall be housed if the offender would be classified as maximum custody under the LA DPS&C classification procedures.</p> <p>Any offender convicted and sentenced to incarceration by a court in another state (federal or state) shall not be released in the State of LA. Any out of state offender (federal or state) housed in a local jail or privately managed facility shall be returned to an appropriate correctional facility located within the state where the offender was convicted and sentenced for release in that state, prior to the offender's release date.</p> <p>Visual Inspection: offender record, submittal to chief of operations of out-of-state offenders to be housed at the facility, release/transfer documentation</p>	<p>Not Applicable - The facility does not accept out-of-state offenders.</p>	



	Findings	Response
<p>II-A-012 Classification System 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:</p> <ul style="list-style-type: none"> • 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 <p>Visual Inspection: offender housing records, offender classification records</p>	<p>Compliant - The "booking" officer is responsible for completing the initial custody assignment for newly arrived offenders by utilizing a point system instrument tool. Offenders scoring 21-30 points are classified as maximum custody; offenders scoring 8-20 points are classified as medium custody; and offenders scoring 7 points or lower are classified as minimum custody. A Classification Board composed of a three person board is responsible for the assignment of medium and minimum custody job assignments.</p>	
<p>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:</p> <ul style="list-style-type: none"> • Supervision and programming needs of the juveniles to ensure their safety, security, and education; • Classification and housing plans; • Appropriately trained staff. <p>OAS shall be notified of offenders who are under the age of 18 that are sentenced to the DPS&C as an adult for transfer to the appropriate institution.</p> <p>Visual Inspection: admission and housing, offender records, classification records</p>	<p>Compliant - The facility has not housed youthful offenders under the age of 17 during the past three years.</p>	
<p>II-A-014 Separation in Classification Male and female offenders must be housed in separate rooms/cells with reasonable sight and sound separation.</p> <p>Visual Inspection: offender housing records, offender classification records, diagram of facility showing male/female housing areas</p>	<p>Compliant - Male and female offenders are housed separately with reasonable sight and sound separation.</p>	
<p>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.</p> <p>Visual Inspection: Offender identification card/wristband.</p>	<p>Compliant - The facility charges a \$5.00 replacement fee if the identification card is reported as lost, stolen, or is defaced.</p>	
<p>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.</p> <p>Visual Inspection: drug testing lab fee bills for drug testing of facility employees (including pre-employment, post accident, reasonable suspicion/probable cause, random).</p>	<p>Compliant - Pre-employment drug screen is included in Chapter 03, Section 03 of the St. Tammany Parish Sheriff's Specific Condition of Employment. A recommendation was made to also include this requirement in their Drug-Free Workplace Policy.</p>	
<p>II-A-018 Offender Drug Testing Written policy, procedure, and practice provide for alcohol/drug testing, both randomly and for probable cause. Facility policy will require that a minimum of 5% of the DPS&C offender population shall be drug tested on a monthly basis.</p> <p>Visual Inspection: Facility log, documentation of alcohol/drug testing of offenders.</p>	<p>Non-Compliant - The quota for the months of March 2020, April 2020, and May 2020 were not met.</p>	
<p>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 DOC offender transfer form shall be submitted by the transferring facility to OAS at least one day prior to the transfer occurring by fax to 225-342-2439 or by email to LocalJailTransfers@la.gov. Offenders should not be transferred to other than DPS&C facilities within 60 days of release, unless for disciplinary reasons.</p> <p>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.</p> <p>Visual Inspection: facility logs, documentation of transfers of DPS&C offenders to other than DPS&C facilities</p>	<p>Compliant</p>	
<p>II-A-020 Frequency of Cell Checks Written policy, procedure, and practice provide secure, safe housing by establishing the frequency of cell checks in all cellblock areas not to exceed four (4) hours. Staff will document these checks in their staff logs.</p> <p>Visual Inspection: Facility logs, documentation of frequency of cell checks.</p>	<p>Compliant - Although a walk-thru of the cellblock area was not conducted, documentation in the file was found to be appropriate.</p>	
<p>B. USE OF PHYSICAL FORCE References: ACA CS 1-2B-01, 1-2B-02, 1-2B-03, 1-2B-05, 1-2B-06, 1-4D-12, Dept. Regs. B-06-001 HC-08/IS-D-HCP33, HC-29/IS-D-HCP40, C-01-008/OP-A-19, C-02-006/OP-A-16, C-03-003/OP-A-3</p>		
	Findings	Response
<p>II-B-001 Use of Force The use of force is restricted to instances of justifiable self-defense, protection of others, protection of property, and prevention of escapes, and then only as a last resort and in accordance with appropriate statutory authority. Written policy, procedure, and practice govern the use of force and provide that force shall never be used as punishment. When an incident involving use of force with a DPS&C offender results in the termination and/or arrest of an employee, the facility shall immediately report the incident to the DPS&C, Office of Adult Services, telephone number 800-803-8748 during normal business hours or the control center at Elayn Hunt Correctional Center, telephone number 800-842-4399 after hours. In addition, the facility shall provide a written report of the incident to the DPS&C, Chief of Operations within three business days.</p> <p>Visual Inspection: facility records, logs, incident reports, training records</p>	<p>Compliant</p>	
<p>II-B-002 Use of Restraints Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including:</p> <ul style="list-style-type: none"> • 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. <p>Visual Inspection: facility records, logs</p>	<p>Compliant</p>	



	Findings	Response
<p>II-B-002-1 Use of Restraints for Pregnant Offenders Written policy, procedure, and practice complies with the following requirements: Restraints During Pregnancy-Related Transportation •Restraints shall not be used on a pregnant offender (1) during any pregnancy related medical distress, (2) while she is being transported to a medical facility or LCIW unless there are compelling grounds to believe that the offender presents either of the following: a) An immediate and serious threat of physical harm to herself, staff, or others; b) A substantial flight risk and the offender cannot be reasonable contained by other means. •If restraints are utilized during transportation, the offender shall not be cuffed behind the back or restrained using waist restraints.</p> <p>Visual Inspection: facility records, logs</p>	Compliant	
<p>II-B-003 Use of Firearms The use of firearms complies with the following requirements. •Weapons are subject to stringent safety regulations and inspections. •A secure weapons locker is located outside the secure perimeter of the facility. •Except in emergency situations, firearms and authorized weapons are permitted only in designated areas to which offenders have no access. •Employees supervising offenders outside the facility perimeter follow procedures for the security of weapons. •Employees are instructed to use deadly force only after other actions have been tried and found ineffective, unless the employee believes that a person's life is immediately threatened. •Employees on duty use only firearms or other security equipment that have been approved by the facility administrator. •Appropriate equipment is provided to facilitate safe unloading and loading of firearms.</p> <p>Visual Inspection: training records, safety regulation and inspection reports, photos of equipment used for unloading and reloading</p>	Compliant - Copies of P.O.S.T firearms certificates for August 12, 2020, were viewed. Deputies required to carry a firearm must qualify with weapons as directed by the training department. Requirements and scores are derived from P.O.S.T Guidelines.	
<p>II-B-004 Written Reports Written reports are submitted to the facility administrator or designee no later than the conclusion of the tour of duty when any of the following occur: •Discharge of a firearm or other weapon •Use of less lethal devices to control offenders •Use of force to control offenders •Offender(s) remaining in restraints at the end of the shift •Emergency distribution of security equipment</p> <p>Visual Inspection: completed reports, facility records and logs</p>	Compliant	
C. CONTRABAND/SEARCHES		
<p>References: ACA CJS 1-2C-01, 1-2C-04, Dept. Reg. C-02-003/OP-A-8</p> <p>II-C-001 Procedures for Searches Written policy, procedure and practice guide searches of facilities and offenders to control contraband. Manual or instrument inspection of body cavities is conducted only when there is reasonable belief that the offender is concealing contraband and when authorized by the facility administrator or designee. Health care personnel will conduct manual or instrument inspections in private.</p> <p>Visual Inspection: observation, facility records and logs, offender and staff interviews</p>	Compliant	
D. ACCESS TO KEYS, TOOLS, UTENSILS		
<p>References: ACA CJS 1-2D-01</p> <p>II-D-001 Key, Tool, and Utensil Control Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies.</p> <p>Visual Inspection: documentation of perpetual inventories</p>	Compliant - During the previous walk through on 9/18/2020, this standard was found to be non-compliant. Appropriate action was taken to bring this into compliance.	
PART III - ORDER		
A. OFFENDER DISCIPLINE		
<p>References: ACA CJS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. B-05-001/OP-C-1</p> <p>III-A-001 Rules and Discipline Prior to being placed in the general population, each offender is provided with an orientation that includes facility rules and regulations, including access to medical care. The facility shall follow and provide the DPS&C "Disciplinary Rules and Procedures for Adult Offenders", to the offender population. •If the Sheriff or local jail administrator believes that a loss of good time is appropriate, then the incident shall be fully documented and the offender transferred to the DPS&C for a disciplinary hearing to ensure due process in accordance with La. R.S. 15:571.4. The offender must sign and date a statement acknowledging receipt of this information.</p> <p>Visual Inspection: offender records, disciplinary records, receipt of disciplinary rules, documentation of orientation</p>	Compliant - The offender rulebook is available on the facility's kiosk system. Offenders acknowledge receipt of their review of the rulebook via the kiosk.	



PART IV - CARE		
A. FOOD SERVICES		
References: ACA CJA 1-4A-01, 1-4A-02, 1-4A-04,1-4A-06, Dept. Reg. C-06-001/15-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 - Due to COVID-19 DHH is not conducting inspections of jails/prisons.	
IV-A-002 Food Service Facilities Toilet and hand basin facilities are available to food service personnel in the food preparation area. Visual Inspection: DHH inspection reports, photos	Based upon review of documentation contained in the file, this guideline was found to be compliant. A walk thru of the facility was not conducted as a result of units being on quarantine.	
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. Visual Inspection: annual reviews, nutritionist or dietician qualifications, documentation of at least annual review and quarterly menu evaluations	Compliant	
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 logs	Complaint - It is the facility's policy to maintain copies of all meals served.	
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	Complaint	
IV-A-006 Food Service Management Written policy, procedure, and practice require that three meals (including two hot meals) are provided under staff supervision at regular meal times during each 24-hour period, with no more than 14 hours between the evening meal and breakfast. Variations may be allowed based on weekend and holiday food service demands provided basic nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal. Visual Inspection: records of meals served and times served, facility logs	Compliant	
IV-A-007 Therapeutic/Special Diets Therapeutic and/or special diets are provided as prescribed by appropriate clinicians or when religious beliefs require adherence to religious dietary laws. Written policy, procedure, and practice provide for special diets as prescribed by appropriate medical or dental personnel. Visual Inspection: health records, diet records or forms, documentation of warden's approval of religious diet	Compliant	
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	Complaint	



B. HYGIENE		
References: ACA CJS 1-4B-01, 1-4B-02, 1-4B-03, 1-4B-04, Dept. Reg. B-06-001/HC-34/IS-C-3	Findings	Response
<p>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.</p> <p>Visual Inspection: maintenance records or reports, inspections, documentation of periodic measurement of water temperature, offender grievances</p>	Based upon review of the file documentation, the guideline was found to be compliant. A walk thru of the facility was not conducted due to units being on quarantine.	
<p>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.</p> <p>Visual Inspection: maintenance records or reports, inspections</p>	Based upon review of the file documentation, the guideline was found to be compliant. A walk thru of the facility was not conducted due to units being on quarantine.	
<p>IV-B-003 Clothing The facility has an obligation to provide adequate institutional clothing appropriate to the season and the offender's work status, including adequate changes of clothing to allow for regular laundering. The facility may fulfill this obligation by furnishing clothing or permitting the offender to secure and wear his own clothing, except that when the offender does not provide adequate clothing for himself, the facility shall furnish same.</p> <p>Visual Inspection: documentation of clothing issue, documentation of cleaning and storage</p>	Compliant	
<p>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.</p> <p>Visual Inspection: documentation of issue and exchange</p>	Compliant	
<p>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.</p> <p>Visual Inspection: documentation that items are provided, list of items available</p>	Compliant	
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-HCP16, HC-17/IS-D-HCP7, HC-38/IS-D-HCP30, B-06-003/AM-C-4, C-02-008/OP-C-9, C-05-001/AM-I-4	Findings	Response
<p>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.</p> <ul style="list-style-type: none"> Written policy, procedure, and practice provide for the delivery of health care services, including medical, dental and behavioral health services under the control of a designated health care authority who shall be a physician or a licensed or registered health care provider or health agency. Access to these services shall be unimpeded in the sense that correctional staff should not approve or disapprove offender requests for services in accordance with the facility's health care plan. Oral health services include access to diagnostic x-rays, treatment of dental pain, development of individual treatment plans, extractions of non-restorable teeth, and referral to a dental specialist, including an oral surgeon. Specialty non primary clinical services are covered by DPS&C. The requests shall be submitted by the In accordance with R.S. 15:831, DPS&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 DPS&C. Such fee schedule for DPS&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. DPS&C offenders may be required to file a claim with his/her private medical or health care insurer, or any public medical assistance program, under which he/she is covered and from which the offender may make a claim for payment or reimbursement of the cost of any such medical treatment. <p>Visual Inspection: Documentation that offenders are informed about health care and the grievance system, a health record, medical copayment fee schedule.</p>	Compliant - Health Care Services is provided via contract with Correct Health.	
<p>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.</p> <p>Visual Inspection: Photos</p>	Compliant	



	Findings	Response
<p>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.)</p> <p>Visual Inspection: documentation of health authority designation, contract, billing records, sick call request form, a health record, clinical provider schedules, current credentials/licensure</p>	Compliant	
<p>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.</p> <p>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</p>	Compliant	
<p>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.</p> <p>Visual Inspection: designated facility, provider lists, transportation logs</p>	Compliant	
<p>IV-C-006 Health Screens Written policy, procedure and practice require that all DPS&C offenders receive a health screening by health trained or qualified health care personnel upon intake into the facility unless there is documentation of a health screening within the previous 90 days. Screening is conducted in accordance with protocols established by the health authority. If completed by health trained personnel, all intake health screens are to be reviewed by health care personnel as soon as possible. If a facility uses a different screening form, it shall be required to have at a minimum the questions in the Intake Health Care Screening form (IV-C-006-A) provided by DPS&C. The purpose of the health screening is to protect newly admitted offenders who pose a health safety threat to themselves or others from not receiving adequate medical attention. This should include inquiry into:</p> <ol style="list-style-type: none"> 1. Current medical, dental or behavioral health problems and communicable diseases; 2. Current treatment plan; 3. Current medications, including psychotropic; 4. History of hospitalization; 5. Suicidal risk assessment; 6. Use of alcohol or other drugs including need for possible detoxification; 7. Possibility of pregnancy; 8. Observation of the following: <ol style="list-style-type: none"> 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. <p>Visual Inspection: health records, completed screening form, transfer logs</p>	Compliant	
<p>IV-C-006-1 Pregnancy Management Written policy, procedure and practice require that all pregnant offenders have access to obstetrical services by a qualified provider. The local jail facility shall notify the Department's Medical Director, when a DPS&C offender is pregnant to ensure proper placement or if transfer to a DPS&C facility is necessary.</p> <p>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</p>	Compliant	



	Findings	Response
<p>IV-C-007 Communicable Disease and Infection Control Program Communicable diseases are managed in accordance with a written plan approved by the health authority in consultation with local public health officials. The plan includes for the screening, surveillance, treatment, containment, and reporting of infectious diseases. The plan shall comprise of testing to detect communicable diseases, including TB testing within 14 days of arrival at the facility. If there is documented evidence of TB testing within the last 12 months, new testing is not required. Qualified health care staff will evaluate for signs and symptoms of TB. Infection control measures include the availability of personal protective equipment for staff and hand hygiene promotion throughout the facility. Procedures for handling biohazardous waste and decontaminating medical and dental equipment must comply with applicable local, state and federal regulations.</p> <p>Visual Inspection: health records, clinic visit logs, documentation of waste pick up and/or cleaning logs</p>	Compliant	
<p>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.</p> <p>Visual Inspection: health records</p>	Compliant - PPD testing for DOC offenders is completed upon arrival to the facility. Annual PPD testing is completed as required. Offenders with positive reactions are given chest x-rays. Offenders with signs and symptoms are placed in a negative air flow cell.	
<p>IV-C-009 Chronic Care Program Offenders with chronic conditions, such as diabetes, hypertension and mental illness receive periodic care by a qualified health care provider in accordance with individual treatment plans, inclusive as deemed appropriate by the respective health care provider. For offenders whose chronic disease cannot be reasonably managed by the local jail facility, a Medical Transfer Request for DOC Offenders at Local Facilities Form C-05-004-B may be submitted to the ARDC.</p> <p>Visual Inspection: health records</p>	Compliant	
<p>IV-C-010 Pharmaceuticals Written policy, procedure, and practice approved by the health authority provide for the proper management of pharmaceuticals. Offenders are provided medication as prescribed.</p> <p>Visual Inspection: health records, completed medication administration forms, inventories</p>	Compliant	
<p>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.</p> <p>Visual Inspection: location of first aid kits within the facility</p>	Compliant	
<p>IV-C-012 Access to Sick Call There is a process for all offenders to initiate requests for health services on a daily basis. Written policy, procedure and practice require that sick call is conducted by a physician and/or other qualified health care personnel who are licensed, registered or certified as appropriate to their respective professional discipline and who practice only as authorized by their license, registration or certification. Sick call shall be available to all offenders as follows: <ul style="list-style-type: none"> 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.</p> <p>Visual Inspection: written policy and procedure</p>	Compliant	
<p>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.</p> <p>Visual Inspection: admission or inpatient records, staffing schedule, completed form C-05-004-B</p>	Compliant	
<p>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 MedicalDirector@corrections.state.la.us or by fax to 225-342-7240.</p> <p>Visual Inspection: health records, documentation of approval of DPS&C's Chief Nursing Officer</p>	Compliant	
<p>IV-C-014 Suicide Prevention and Intervention There is a written suicide prevention and intervention program that is approved by a behavioral health professional who meets the educational and license/certification criteria specified by his/her respective professional discipline. The program must include specific procedures for handling intake, screening, identifying and continually supervising the suicide-prone offender. Observation of the suicide-prone offender will vary from continual observation to intervals no greater than fifteen (15) minutes. All staff with responsibility for offender supervision are trained annually in the implementation of the program.</p> <p>Visual Inspection: health records, documentation of staff training, documentation of observation of suicide watches.</p>	Compliant	



	Findings	Response
<p>IV-C-015 Offender Deaths Written policy, procedure and practice specify and govern the actions to be taken in the event of an offender's death, which includes notification of the coroner of all offender deaths. All attempts to contact the coroner regarding any death shall be thoroughly documented. Such procedures shall also include the reporting requirements as outlined in BJJG I-C-001. In addition, a written report of all offender deaths shall be submitted to DPS&C on Form C-05-001-X (via email to catanotify@corrections.state.la.us or via fax to 225-342-3349).</p> <p>Visual Inspection: notification, reporting requirements, report to DPS&C</p>	Compliant	
<p>IV-C-016 Notification A visit with an immediate family member when the offender is admitted to an ICU or trauma center due to a serious bodily injury or due to being a terminally ill offender for the duration of the offender's admission to the ICU or trauma center, unless the Warden or designee provides written notice within 6 hours of the offender's admission to the ICU or trauma center to any immediate family member seeking visitation why such visitation cannot be granted, pursuant to La. R.S. 15:833(A) and Dept. Reg. C-02-008; •If the offender's admission to the ICU or trauma center occurs between 8:00 pm and 4:00 am, the Warden or designee shall provide the required written notification within 24 hours of the time the serious bodily injury occurred. •Pursuant to La. R.S. 15:833(A), the Warden or designee shall attempt to notify the offender's immediate family within 8 hours of the medical decision to transport the offender to the ICU or trauma center. •Based on extenuating circumstances the Warden or designee may extend the definition of an offender's immediate family member.</p> <p>Visual Inspection: notification records</p>	Compliant	
<p>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</p>	Findings	Response
<p>IV-D-001 Health Care Quarterly Meetings The health authority meets with the facility administrator at least quarterly.</p> <p>Visual Inspection: documentation of meetings</p>	Compliant	
<p>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.</p> <p>Visual Inspection: written policy and procedure</p>	Compliant	
<p>IV-D-003 Health Care Personnel/Job Descriptions Health care staff work in accordance with professional specific job descriptions approved by the health authority.</p> <p>Visual Inspection: job descriptions</p>	Compliant	
<p>IV-D-004 Confidentiality of Health Information Information about an offender's health status is confidential. Nonmedical staff only have access to specific medical information on a "need to know" basis in order to preserve the health and safety of the specific offender, other offenders, volunteers, visitors, or correctional staff. An individual health record is maintained for all offenders in accordance with policies and procedures established by the health authority. The health record is made available to, and is used for documentation for all health care personnel. The active health record is maintained separately from the confinement case record and access is controlled. When an offender is transferred to DPS&C or another local facility, the offender's medical record is transferred as well.</p> <p>Visual Inspection: health records, completed consent forms, completed refusal forms</p>	Compliant	
<p>IV-D-005 Informed Consent Informed consent standards of the jurisdiction are observed and documented for offender care in a language understood by the offender. In the case of minors, the information consent of a parent, guardian or legal guardian applies when required by law. Offenders routinely have the right to refuse medical interventions. When health care is rendered against an offender's will, it is in accordance with state laws and regulations. Involuntary administration of psychotropic medications to offenders may only be accomplished by DPS&C.</p> <p>Visual Inspection: health records, completed consent forms, completed refusal forms</p>	Compliant	
<p>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.</p> <p>Visual Inspection: verification of training, records and certificates</p>	Compliant	
<p>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.</p> <p>Visual Inspection: evaluation of major risk management events</p>	Compliant	



E. SEXUAL ASSAULT		
References: ACA CJS 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
<p>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:</p> <ul style="list-style-type: none"> •Prevention/intervention; •Self-protection; •Reporting sexual abuse/assault; •Treatment and counseling. <p>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 BJD 1-C-001.</p> <p>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.</p> <p>Victims of sexual assault are referred under appropriate security provisions to a community facility for treatment and gathering of evidence.</p> <p>Visual Inspection: documentation of reports to DPS&C, investigative reports</p>	<p>Compliant - When allegations are reported, they are investigated and reported to the BJD Team Leader as required.</p>	

PART V - OFFENDER PROGRAMS AND ACTIVITY		
A. OFFENDER OPPORTUNITIES FOR IMPROVEMENT		
References: ACA CJS 1-5A-01, Dept. Reg. B-03-004/PS-F-1		
	Findings	Response
<p>V-A-001 Volunteers/Registration There is an official registration and identification system for volunteers.</p> <p>Visual Inspection: activity schedules, facility logs</p>	<p>Compliant</p>	
<p>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.</p> <p>Visual Inspection: activity schedules, facility logs</p>	<p>Compliant - Volunteer services have been placed on hold as a result of COVID-19.</p>	
<p>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.</p> <p>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:</p> <ol style="list-style-type: none"> 1. Screening of offender(s) for program placement; 2. Offender application to program; 3. Program sign-in sheets and/or attendance rosters; 4. Signed copy of CTRP credit forms; 5. Documentation for staff oversight if program is not administered and/or overseen by DPS&C staff. <p>Visual Inspection: activity schedules, facility logs</p>	<p>Compliant - As a result of COVID-19, pre-release programming is currently being completed by correspondence booklets.</p>	
<p>V-A-003-1 Educational Programming The DPS&C and the facility encourage educational programming which includes:</p> <ol style="list-style-type: none"> 1. Adult Basic Education and/or Literacy 2. Industry Based Certification Training 3. Pell-eligible Post-Secondary Training <p>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.</p> <p>Visual Inspection: activity schedules, facility logs</p>	<p>Compliant - The facility has been approved to offer three new programs: Culinary ServSafe Certification, Inside/Out Dad Program, and Moral Recognition Therapy.</p>	



B. PROGRAMS References: ACA CJS 1-4C-02, 1-5B-01, 1-5B-01-1, 1-5B-01-2, 1-5B-01-3, 1-5B-02, 1-5B-02-1, 1-5B-02-2, 1-5B-04, 1-5C-01, 1-5C-04, 1-5C-06, Dept. Regs A-04-002/PS-D-3, B-02-001/IS-B-1, B-06-001/HC-17/IS-D-HCP7, B-08-005/PS-E-1, B-08-013/PS-C-1, B-09-003/AM-C-2, C-01-012/PS-I-1, C-02-008/OP-C-9, C-02-009/OP-C-7	Findings	Response
V-B-001 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 process. •Provide offender with/and have him/her sign for any reentry transition document envelopes and all its contents. •Provision of a listing of available community resources. •Consideration by the prescribing health care practitioner for a provision of a 5-day supply of current maintenance medication (medication prescribed to stabilize a chronic medical or behavioral health illness), along with a prescription for a thirty (30) day of medication upon transfer or discharge. •Prior to release, offenders with serious medical and behavioral health conditions are referred to available community services. Appropriate health information is shared with the new providers in accordance with consent requirements. •Provision of adequate street clothing for indigent offenders. Offender shall not release in any prison issued attire, including but not limited to jumpsuits, striped scrubs, or stenciled clothing. Visual Inspection: completed release forms and documents, facility records and logs, offender records	Compliant	
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. Visual Inspection: activity schedule, facility logs	Compliant	
V-B-003 Library Services Written Reading materials shall be available to offenders on a reasonable basis. Visual Inspection: activity schedule, facility logs	Compliant	
V-B-004 Religious Programs Written policy, procedure and practice define and provide reasonable offender opportunity for religious practice. Visual Inspection: documentation of offender religious activities, activity schedule	Compliant - Due to COVID-19, religious programs and volunteer visits have been placed on hold.	
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. Visual Inspection: activity schedule, facility logs	Compliant	
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. Visual Inspection: DPS&C monitoring report	N/A	
V-B-007 Participation in Transitional Work Programs Participation in transitional work programs by state offenders shall comply with R.S. 15:711 and DPS&C Department Regulation No. B-02-001 "Assignment and Transfer of Offenders." Specific approval by the Secretary of DPS&C is required prior to program assignment of state offenders. Refer to Standard Operating Procedures for Offender Transitional Work Programs. Visual Inspection: approval for participation by the Secretary of DPS&C	N/A	
V-B-008 Offender Work Program Participation in offender work programs by state offenders shall comply with the provision of R.S. 15:708 (parish jails) or R.S. 15:832 (police maintenance). Visual Inspection: offender voluntary participation, sheriff's approval of work program request, facility logs	Compliant	



	Findings	Response
V-B-009 Approval for Transitional Work Programs Any Sheriff interested in operation of a TWP facility shall obtain prior approval from the Chief of Operations. Refer to Standard Operating Procedures for Offender Transitional Work Programs. Visual Inspection: approval of Chief of Operations	Compliant - There are no plans at this time of requesting approval for the operation of a TWP facility.	
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. Visual Inspection:	Compliant - There are no proposed expansions at this time.	
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. Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail	Compliant	
V-B-012 Packages and Publications Written policy, procedure and practice govern offender access to publications and packages from outside sources. Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail	Compliant	

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-NCP31	Findings	Response
V-C-001 Substance Abuse Programs The facility encourages offender participation in substance abuse programs when available. Visual Inspection: facility log, activity schedule	Compliant	
V-C-002 Reentry Programs The DPS&C and the facility encourages reentry programming which includes: 1. Employment opportunities through work release; 2. At least two forms of valid identification upon release; 3. The development of a residential plan prior to release; 4. Referral to community based service providers upon release; 5. Where feasible, recommend DPS&C offenders receive 100 hours of pre-release training at a regional reentry center prior to transfer to a TWP, or release from custody. The local jail facility shall maintain reentry transition document envelopes 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. Visual Inspection: documentation of employment opportunity, documentation of two forms of identification, residential plan	Compliant	
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 LOCALARNA@corrections.state.la.us or by fax to 225-342-0929 within the first two weeks of the month proceeding the scheduled hearing. Visual Inspection: offender record, completed questionnaire	Compliant	
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. Visual Inspection: offender record, trip log, documentation showing facility Warden or designee presence at parole board	Compliant - Parole Board Hearings are held on site via Zoom with the 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. Visual Inspection: facility log	Compliant	
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. Visual Inspection: facility log, record of attorney interviews	Compliant	
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. Visual Inspection: facility log, incident reports, staff training records	Compliant	



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. Visual Inspection: facility records, grievances, activity logs	Compliant	
VI-B-002 Grievance Process Offenders have reasonable access to a grievance remedy procedure that includes at least two levels of review if necessary. The grievance remedy procedure shall be an administrative means through which an offender may seek formal review of a complaint which relates to any aspect of his imprisonment if less formal procedures have not resolved the matter. Such complaints and grievances include, but are not limited to, actions pertaining to conditions of confinement, personal injuries, medical complaints, time computations, the classification process, or challenges to rules, regulations, or policies. Through this procedure, offenders shall receive reasonable responses within a specified time period and where appropriate, meaningful remedies. Visual Inspection: grievances	Compliant	

PART VII - ADMINISTRATION AND MANAGEMENT

A. RECRUITMENT, RETENTION AND PROMOTION		
References: ACA-CJS 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 – including staff roles and safety; 3. Fire and emergency plan/ procedures; 4. Suicide precaution and signs of suicide risks; 5. Use of force policies; 6. 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	Compliant	
VII-A-002 Weapons Training All personnel authorized to use firearms and less-than-lethal weapons must demonstrate competency at least annually. Training includes decontamination procedures for individuals exposed to chemical agents. Visual Inspection: personnel records, training records	Compliant	




B. FACILITY ADMINISTRATION		
References: ACA CJS 1-4D-02, 1-7D-01, 1-7D-03, Dept. Reg. C-05-001/AM-1-4	Findings	Response
VII-B-001 Authority There is a statute or constitutional provision authorizing the establishment of the local jail facility or its parent agency. Visual Inspection:	Compliant	
VII-B-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. Visual Inspection: personnel or training records	Compliant	
VII-B-003 Independent Financial Audit Written policy, procedure and practice provide for an independent financial audit of the facility. This audit is conducted annually or as stipulated by statute or regulation. Visual Inspection: annual audit	Compliant - Most recent financial audit was completed on June 30, 2020.	
VII-B-004 Facility Insurance Written policy, procedure and practice provide for comprehensive facility insurance coverage. Visual Inspection: insurance policy	Compliant	
VII-B-005 Offender Funds Offenders' personal funds held by the facility are controlled by generally accepted accounting principals (GAAP). Any interest earned, other than operating funds, accrues to the benefit of the offenders. Visual Inspection: offender records	Compliant	
VII-B-006 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. Visual Inspection: annual reviews, dissemination to staff	Compliant - E-mail notification is sent to all divisions within the St. Tammany Parish Jail advising of new/updates to policies. A BJG file is maintained for each guideline that includes documentation for the most recent three year period.	
VII-B-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 Fire 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. Visual Inspection: annual statement	Compliant - Annual Compliance Statements are forwarded to the BJG Team Leader as required.	
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-1-4. These reports shall be submitted on automated reporting forms provided by the DPS&C, no later than the 15th day of the month 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 - Monthly Reports are completed in a timely manner each month. When/If additional information is requested, the requested information is submitted promptly.	
VII-B-009 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. Visual Inspection: staff meeting minutes/notes	Compliant	
C. REASONABLE ACCOMMODATION		
References: ACA CJS 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. Visual Inspection:	Compliant	



INSPECTION REPORTS		
DEPARTMENT	Deficiencies	Corrective Action Taken
Fire Marshall Date of Current Report: 12-7-2020 Maximum Capacity: 1,349	The inspection conducted on December 7, 2020, indicated that all deficiencies noted during the inspection completed on December 2, 2020, have been corrected and found to be in compliance. During the inspection of December 2, 2020, the below was noted, "LAC55:V.3037 - Fixed systems including pre-engineered and engineered shall be installed, inspected, services, and maintained in compliance with the manufacture's installation manuals, specification, and the applicable NFPA standards adopted in §3053".	
DHH - Health Date of Current Report: 09-17-2019 Maximum Capacity: 1,180	There were no deficiencies noted.	
DHH - Retail Food Date of Current Report: 09-17-2019	Per facility staff and email correspondence, DHH did not visit the facility due to Covid-19.	

Markisha Stewart

From: Markisha Stewart
Sent: Tuesday, November 30, 2021 02:41 PM
To: Josh Miley
Subject: RE: Fire Marshal and DHH

 Please be sure those NON-Critical items from 2021 have been corrected when you conduct their 2022 annual monitoring visit.

Markisha L. Stewart

Administrative Program Director

LA Department of Public Safety & Corrections – Headquarters

Office of Adult Services

504 Mayflower Street, Baton Rouge, LA 70802

PO Box 94304, Baton Rouge, LA 70804

225.342.6004 (O) 225.342.0507 (F)

markisha.stewart@la.gov

From: Josh Miley <Josh.Miley@LA.GOV>
Sent: Friday, November 19, 2021 2:34 PM
To: Markisha Stewart <Markisha.Stewart@LA.GOV>
Subject: FW: Fire Marshal and DHH

From: Smith, Jan M. <JanSmith@stpso.com>
Sent: Friday, November 19, 2021 2:29 PM
To: Josh Miley <Josh.Miley@LA.GOV>
Subject: RE: Fire Marshal and DHH

EXTERNAL EMAIL: Please do not click on links or attachments unless you know the content is safe.

Lt. Col. Miley:

Here is the kitchen inspection. Captain Payne did not have a signed copy of either one. It looks like they were signed electronically. Please let me know if anything else is needed.

Have a great weekend.

Jan

From: Josh Miley <Josh.Miley@LA.GOV>
Sent: Friday, November 19, 2021 11:55 AM
To: Smith, Jan M. <JanSmith@stpso.com>
Subject: FW: Fire Marshal and DHH

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- IS Department

See below email. Thanks Lt. Col. Miley

From: Markisha Stewart <Markisha.Stewart@LA.GOV>
Sent: Friday, November 19, 2021 11:06 AM
To: Josh Miley <Josh.Miley@LA.GOV>
Subject: RE: Fire Marshal and DHH

Did they have a kitchen inspection as well? Also, the DHH copy sent doesn't have signatures. Probably because it's an electronic signature. See if they can fax me the signed version

Markisha L. Stewart
Executive Management Officer | BJS Administrator
LA Department of Public Safety & Corrections – Headquarters
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225.342.6794 (O) 225.342.3349 (F)
markisha.stewart@la.gov

From: Josh Miley <Josh.Miley@LA.GOV>
Sent: Tuesday, November 16, 2021 12:28 PM
To: Markisha Stewart <Markisha.Stewart@LA.GOV>
Subject: FW: Fire Marshal and DHH

Hello Markisha, here is the fire marshal and the DHH report from St. Tammany for 2021.

From: Smith, Jan M. <JanSmith@stpso.com>
Sent: Tuesday, November 16, 2021 9:45 AM
To: Josh Miley <Josh.Miley@LA.GOV>
Cc: Frosch, William <WilliamFrosch@stpso.com>
Subject: RE: Fire Marshal and DHH

EXTERNAL EMAIL: Please do not click on links or attachments unless you know the content is safe.

Good Morning Lt. Colonel Miley:

Please see attached.

Thank you.
Jan

From: Josh Miley <Josh.Miley@LA.GOV>
Sent: Monday, November 15, 2021 10:55 AM
To: Smith, Jan M. <JanSmith@stpso.com>
Cc: Frosch, William <WilliamFrosch@stpso.com>
Subject: Fire Marshal and DHH

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- IS Department

Good morning, has the fire marshal or Department of Health come out to conduct their inspections this year? If so, can you scan and send me a copy of their report? Thanks Lt. Col. Josh Miley.

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