

Department of Public Safety & Corrections
State of Louisiana

JOHN BEL EDWARDS
GOVERNOR

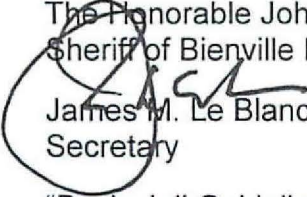


JAMES M. LE BLANC
SECRETARY

May 20, 2022

MEMORANDUM

TO: The Honorable John E. Ballance
Sheriff of Bienville Parish

FROM: 
James M. Le Blanc
Secretary

RE: "Basic Jail Guidelines" Monitoring Report

Please see the attached monitoring report regarding the Basic Jail Guidelines (BJG) monitoring visit that was conducted on June 22, 2021. I am recertifying this facility in compliance with the "Basic Jail Guidelines" with annual monitoring.


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

Thank you for your continued commitment to the BJG process.

JML/mw

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association
LaTricia Green, Warden, Bienville Parish Jail
Seth Smith, Chief of Operations
Jerry Goodwin, Warden
Scott Cottrell, BJG 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

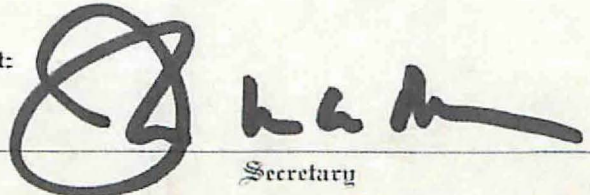
Bienville Parish Jail
in acknowledgement of

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 8th day of June
in the year of our Lord 2022



Attest: 
Secretary



03/24/2021

BJG RECERTIFICATION REPORT

FACILITY NAME: Bienville Parish Jail
BJG MONITORS: Colonel Scott Cottrell, BJB Team Leader (NW Region)
Mr. Tommy Garrett, BJB Team Member
FACILITY STAFF: LaTricia Green, Warden
BJG INSPECTION DATE: 22 June 2021
PREVIOUS BJB INSPECTION DATE: 24 July 2019
OPERATIONAL CAPACITY: 55
COUNT ON DAY OF VISIT: 22

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

CONCERNS OR ISSUES FROM THE PREVIOUS BJB MONITORING INSPECTION:

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	9	0	9
Number of Local Offenders	13	0	13
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	22	0	22

Number of DOC Offenders that are:

Single Bunked _____ 9
Double Bunked _____ 0
Triple Bunked _____ 0
Total _____ 9

Number of DOC Offenders that are in restricted housing:

Single Bunked _____ 0
Double Bunked _____ 0
Triple Bunked _____ 0
Total _____ 0

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

Month/Year	Off/Off	Off/Off w/sig inj	Offender/Staff	Off/Staff w/sig inj
June 2020	2	0	0	0
July 2020	0	0	0	0
August 2020	0	0	0	0
September 2020	0	0	0	0
October 2020	0	0	0	0
November 2020	0	0	0	0
December 2020	0	0	0	0
January 2021	1	1	0	0
February 2021	0	0	0	0
March 2021	0	0	0	0
April 2021	0	0	0	0
May 2021	0	0	0	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
June 2020	0	0	0	0	0
July 2020	0	0	0	0	0
August 2020	0	0	0	0	0
September 2020	0	0	0	0	0
October 2020	0	0	0	0	0
November 2020	0	0	0	0	0
December 2020	0	0	0	0	0
January 2021	0	0	0	0	0
February 2021	0	0	0	0	0
March 2021	0	0	0	0	0
April 2021	0	0	0	0	0
May 2021	0	0	0	0	0

GENERAL APPEARANCE/CLEANLINESS/COMMENTS OF THE FACILITY:**Living Area:**

The living areas were found to be clean and orderly.

Dorms:

The dorms were in good condition, clean, and odor free. Personal property was neatly stored.

Cell Block:

The cells were clean, odor free and minimal property was noted.

Culinary/Dining:

The culinary/dining areas were clean. The inventories were correct and all utensils accounted for. A licensed dietician (Hollisanne Lyles) approved the cycle menu in use. The offenders are served in the common areas of the dorms or in their individual cell.

Bathrooms:

The dormitory and cellblock bathrooms were clean, operational, and free of odor. Lavatory/showers have temperature controlled hot/cold water and the temperatures are checked.

Yard Areas:

The yard area is well kept and free of debris. Logbook documentation reflects that offenders are afforded the opportunity exercise. Staff continually monitors offenders outside on the yard.

Maintenance:

Overall maintenance of the facility is good. Maintenance request and repair records are kept in a facility file. A worker from the police jury performs all facility maintenance within the facility. The facility has a good preventative maintenance program in place.

COUNTS:

- How many formal counts are conducted each shift? **Two (2) formal counts are conducted each shift.**
 - Day Shift – **Two (2)**
 - Night Shift - **Two (2)**
- How many counts are conducted each day? **There are a total of four (4) counts conducted each day.**

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

- *How does the facility accomplish this?* **Staff conducts a visual head 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.

If yes,

- *What is their classification process to determine who is eligible for trustee status?* **Same criteria as DPS&C.**
- *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
June 2020	2	11	18%	0
July 2020	3	14	21%	0
August 2020	3	12	25%	0
September 2020	3	14	21%	0
October 2020	3	14	21%	0
November 2020	3	11	27%	0
December 2020	3	11	27%	1, Meth
January 2021	3	7	43%	0
February 2021	2	7	29%	0
March 2021	2	8	25%	0
April 2021	3	11	27%	1, Meth
May 2021	2	11	18%	0

Rules and Discipline—Compliant

- *Does the facility's offender orientation include the application process for applying for restoration of good time? Yes*
- *What is their restoration of good time application process for the offender population? After completing the two (2) year prior write-up free, the offender can submit a request to the local*

Warden for the restoration of good time. Once the Warden has reviewed the request, it is forwarded to the Regional Warden for approval.

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

BJG AUTOMATED MONTHLY REPORTING REVIEW:

Has the facility been inputting the correct info timely? Yes.

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

OFFENDER PROGRAMS:

GED Program

Number of GED Slots _____ **0**

Number of Participants _____ **0**

YTD Number of Completions _____ **0**

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

None—Offenders that want to participate in CTRP programs are transferred to a facility which offers them.

LIST ALL OTHER OFFENDER PROGRAMS:

None—Due to Covid-19, this facility has not offered any offender programs.

GRIEVANCE PROCESS: —Compliant

- *Does grievance process include at least two levels of review? (Yes)*
- *Who is the designee at each level of review? First level of review is brought to the attention of the Warden. The second level of review is addressed to the Chief Deputy. The third level of review is addressed the Sheriff.*
- *What is the specified time period for response at each level? The response time period for the first level of review is three (3) days, the second level is five (5) days, and the third level of review is five (5) days.*

PREA COMPLIANCE:

- *Is this facility required to be PREA compliant due to contract language? No*
- *Is this facility PREA compliant? (Yes or No) No. The facility has a PREA policy in place that mirrors the DOC policy. The Sheriff's Department investigates all PREA allegations.
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? Not applicable*

OTHER:

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

The morale at this jail was excellent. Staff members are well versed in their duties and those of their peers. Moreover, staff members readily assist each other so that the operation runs smoothly. All staff members questioned was knowledgeable of policy and procedures. There were no negative comments voiced by any staff members and they seemed to enjoy their job as well as working with one another.

This facility consistently operates smoothly and efficiently while remaining in compliance with the BJJ. The level of dedication and professionalism of the staff members is exceptional.

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

I spoke with several offenders during my walkthrough inspection and they were quiet and well mannered. All of the offenders stated that Warden Green and her deputies are always respectful and professional when interacting with them. All offender comments were positive in nature. They all stated that they especially liked the food at this facility.

RECOMMENDATION:

Warden Green and staff are committed to maintaining compliance with BJJ guidelines and providing a safe, secure, and stable environment for the offenders in their custody. Based on the walkthrough of the facility and the review of the Basic Jail Guidelines, it is recommended that Bienville Parish Jail receive full recertification with continued annual monitoring.



Facility: Bienville Parish Jail		Date Conducted: 22 June 2021	12/22/2020
Monitors: Colonel Scott Cottrell, BJB Team Leader (NW Region); Mr. Tommy Garrett, BJB 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. Visual Inspection: completed inspection checklists and reports, documentation of corrective action. Inspection reports</p>		Compliant. Logbook documentation reflects that daily, weekly, and monthly inspections are conducted at this jail. Most current DHH (01/22/2020), Retail Food (01/22/2020), and FM (11/25/2019) inspections are in file. See reports for noted deficiencies.	
<p>I-A-002 Disposal of Materials Disposal of liquid, solid, and hazardous material complies with applicable government regulations. Visual Inspection: trash disposal contract, completed inspection reports, include documentation that deficiencies were corrected</p>		Compliant. Disposal contracts on file with Allied Wastes Services	
<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. Visual Inspection: pest control contracts, trash disposal contracts, inspection reports</p>		Compliant. Contract with Sikes Pest Company is on file.	
<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. Visual Inspection: inspection reports, completed forms, documentation of correction of identified deficiencies</p>		Compliant. Very good housekeeping policy in place. The facility was clean and functional.	
<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. Visual Inspection: documentation of approval by DHH or local authority, plan for addressing deficiencies</p>		Compliant. Facility has passed all water inspections by the DHH, including independent test conducted on the Arcadia Water System.	
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." Visual Inspection: documentation of staff training, documentation of medical, funeral, etc. (outside trips)</p>		Compliant. All requested escorted absences are reviewed and approved/denied by Warden LaTricia Green	
C. EMERGENCY PREPAREDNESS/RESPONSE			
References: ACA CJS 1-1C-01, 1-1C-02, 1-1C-03, 1-1C-04, 1-1C-06, 1-1C-07, 1-7E-01, Dept. Regs. A-04-002/PS-D-3, C-02-001/OP-A-5, C-02-010/OP-B-3, C-05-001/AM-1-4		Findings	Response
<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 EHC, 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-1-4, "Activity Reports, UORS," Category A, B and C. Visual Inspection: training records, facility logs, documentation of approval of plan, documentation of annual review, documentation of staff receipt, training on the plan</p>		Compliant. Facility has a well-devised systematic emergency plan in place and it has been submitted to HQ. Documentation reflects that all staff has been trained on the emergency procedures for the jail. Employees knew the evacuation procedures and notification process.	



	Findings	Response
I-C-002 Immediate Release of Offenders There is a means for the immediate release of inmates from locked areas in case of emergency and there are provisions for a backup system. The facility has exits that are properly positioned, are clear from obstruction, and are distinctly and permanently marked to ensure the timely evacuation of offenders and staff in the event of fire or other emergencies. Visual Inspection: facility records/logs	Compliant. Staff has been properly trained regarding the immediate release of offenders during emergency situations. Exits are properly marked and unobstructed.	
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 modifications. Visual Inspection: documentation of fire alarm and detection system maintenance and testing plans for addressing deficiencies	Compliant. Due to Covid-19, no Fire Marshal inspection since 25 Nov 2019. This report had no discrepancies on it.	
I-C-004 Facility Furnishings Facility furnishings meet fire-safety-performance requirements. Visual Inspection: Specifications for all furnishings.	Compliant. Furnishings are compliant with life safety codes set by the State Fire Marshal's Office.	
I-C-005 Flammable, Caustic and Toxic Materials Written policy, procedure and practice govern the control and use of all flammable, toxic and caustic materials. Visual Inspection: Staff training records, offender training records, internal inspection reports. Documentation of incidents that involved FTC materials. Inventories.	Compliant. Files reflects all staff has been trained in the use and control of flammable, caustic, and toxic materials. Verification of inventory forms indicate excellent accountability of materials.	
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 lesser of the two. Visual Inspection: facility count sheets	Compliant. The facility operates within the capacity authorized by the DHH and FM. On the day of the inspection, 22 offenders were assigned to the facility. The operational capacity is 55.	

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/DP-C-3	
	Findings
II-A-001 Control There is 24-hour monitoring and coordinating of the facility's security, life safety, and communications systems. Visual Inspection: facility records/logs, maintenance records, records of staff deployment	Compliant. Facility has a state of the art system that is monitored 24/7.
II-A-002 Secure Perimeter The facility's perimeter is controlled by appropriate means to ensure that offenders are secured remain within the perimeter and that access by the general public is denied without proper authorization. Visual Inspection: documentation of receipt of job description by staff, documentation of annual review and updating, photos of perimeter controls	Compliant. The facility perimeter is secure. Adequate security practices are in place to prevent access by unauthorized persons.
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 accordance with the facility's security plan. Visual Inspection: records of staff deployment, facility logs, documentation of annual review of staffing analysis and plan	Compliant. Adequate security is provided on a 24 hour basis. During this Recertification audit there were 4 deputies plus the Warden working the Jail.
II-A-004 Female Offenders and Female Staff When a female offender is housed in a facility, at least one female staff member is on duty at all times. Visual Inspection: records of staff deployment, facility logs	Compliant. There are no female offenders housed at this facility.
II-A-005 No Offender Control Over Others No offender or group of offenders is given control, or allowed to exert authority over other offenders. Visual Inspection: written policy and procedure	Compliant. Policy and practice prohibits any offender having authority over other offenders at this facility.
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 B/G I-C-001 Visual Inspection: copies of log book, records of staff deployment	Compliant. Staff logs of pertinent information (i.e., shift activity, daily events, security staff/supervisor rounds, etc.) were reviewed and found in good order. Logs are maintained in the file, in accordance with this guideline.



	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 activities.</p> <p>Visual Inspection: completed forms, facility records/logs.</p>	<p>Compliant. Facility conducts two (2) formal counts per shift for a total of four (4) major counts a day. Additional counts are conducted during inclement weather & as necessary.</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 BJC 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; <p>Visual Inspection: completed forms, reports, offender record</p>	<p>Compliant. If an offender is transferred to another local or DPS&C facility, all records are transferred with the offender.</p> <p>Documentation in the files reviewed reflected compliance with this guideline by having all required forms and information in each file.</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. Offender reception procedures are in place that cover all required information. Documentation is completed properly and located in the files. Policy regarding acceptance of any out of state offenders is in accordance with this guidelines.</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, copay requirements and submitting grievances. <p>Visual Inspection: intake and admission forms, screening forms, inventory form, receipt form</p>	<p>Compliant. Current policy and procedures are in place. Admission forms are thorough and completed properly.</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.</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>Compliant. Current policy and procedures in place that satisfy requirements with regards to housing and/or release of out of state offenders. Staff are aware of the proper procedures in the event of this occurrence.</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. This classification system in place meets all requirements. Any potential issues are addressed upon initial classification, to aid in ensuring proper custody level, and placement within the facility; as well as eligibility for available programs.</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 facility.</p> <p>Visual Inspection: admission and housing, offender records, classification records</p>	<p>Compliant. Facility does not house youthful offenders.</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. This facility does not house female offenders.</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. All offenders receive a photo identification card upon intake.</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. Employee's are tested in accordance with policy. Meets DOC guidelines.</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>Compliant. This facility has consistently drug tested 5% or more of the DOC population.</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. Proper notification is made when offenders are transferred to another facility within guideline. Proper documentation is maintained.</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. Per policy, staff checks all cells at least every thirty (30) minutes. Documentation is maintained.</p>	
<p>B. USE OF PHYSICAL FORCE References: ACA CJS 1-2B-01, 1-2B-02, 1-2B-03, 1-2B-05, 1-2B-06, 1-4D-12, 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>		
<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 Elwyn 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. Good use of force policy is in place. There are no indications of unnecessary/excessive force, or force being use as a means of punishment.</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; <p>Visual Inspection: facility records, logs</p>	<p>Compliant. Written policy and procedures are in place. Staff has been trained in the use of force/restraints.</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 LCJW 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 reasonably contained by other means. •If restraints are utilized during transportation, the offender shall not be cuffed behind the back or restrained using waist restraints. Visual Inspection: facility records, logs</p>	<p>Compliant. This facility does not house female offenders.</p>	
<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. Visual Inspection: training records, safety regulation and inspection reports, photos of equipment used for unloading and reloading</p>	<p>Compliant. Deputies are POST certified and training has been provided in the use of firearms. Firearms training records are located in files.</p>	
<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 Visual Inspection: completed reports, facility records and logs</p>	<p>Compliant. Written reports are on file at the facility. Deputies must complete all reports prior to leaving the facility upon conclusion of the shift.</p>	
<p>C. CONTRABAND/SEARCHES 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. Visual Inspection: observation, facility records and logs, offender and staff interviews</p>	<p>Compliant. Procedures in place and logs maintained on searches and detection of contraband. Visual body cavity searches are conducted upon intake and anytime an offender returns to the facility from outside travel/trip. Detailed shakedown and daily search logs are on file.</p>	
<p>D. ACCESS TO KEYS, TOOLS, UTENSILS 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. Visual Inspection: documentation of perpetual inventories</p>	<p>Compliant. This facility does not maintain tools within the jail outside of the culinary area. Inventories for utensils were correct and all were accounted. This facility maintains excellent key control and emergency keys are secured in the dispatch office down stairs.</p>	
<p>PART III - ORDER</p>		
<p>A. OFFENDER DISCIPLINE References: ACA CJS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. B-05-001/DP-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 orientation. Visual Inspection: offender records, disciplinary records, receipt of disciplinary rules, documentation of orientation</p>	<p>Compliant. All offenders receive a facility and DOC rulebook. Signatures in file.</p>	



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. All food was being properly stored and temperatures were properly documented.	
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	Compliant. Adequate facilities are available to the offenders workers.	
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 utensils for each hot meal. Visual Inspection: annual reviews, nutritionist or dietician qualifications, documentation of at least annual review and quarterly menu evaluations	Compliant. Cycle menus are utilized by this facility. All cycle menus are reviewed and approved by Registered Dietitian Hollisanne Lyles Lic #926630 Expiration date 08/31/21. A tray/plate and utensil is provided for each hot meal.	
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	Compliant. Accurate records are maintained. The quality of food is good and the quantity is sufficient.	
IV-A-005 Denial of Food as Discipline Prohibited Written policy, procedure, and practice preclude the denial of food as a disciplinary measure. Visual Inspection: facility logs	Compliant. Food is never withheld as a form of discipline.	
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 amount of food for each meal. Visual Inspection: records of meals served and times served, facility logs	Compliant. Offenders are provided two hot meals per day. Ample time is permitted for meal consumption and time lapsed between meals is in compliance with this guideline.	
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. Facility records indicate therapeutic diets are prescribed by the physician. The Warden has not approved any religious diets this monitoring period.	
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. Visual Inspection: inspection reports, completed forms, documentation of daily monitoring for health and cleanliness	Compliant. Proper safety precautions are taken. All food service workers are prescreened and monitored regularly for proper grooming and good health. Good file documentation.	
B. HYGIENE		
References: ACA CJS 1-4B-01, 1-4B-02, 1-4B-03, 1-4B-04, Dept. Reg. B-06-001/HC-34/15-C-3	Findings	Response
IV-B-001 Plumbing Fixtures - Toilets and Washbasins Offenders have access to toilets and washbasins with temperature-controlled hot and cold running water 24 hours per day. Offenders are able to use toilet facilities without staff assistance when they are confined in their cells/sleeping areas. Visual Inspection: maintenance records or reports, inspections, documentation of periodic measurement of water temperature, offender grievances	Compliant. All offenders have access to toilets and washbasins with temperature controlled hot/cold water at all times.	
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. Visual Inspection: maintenance records or reports, inspections	Compliant. All offenders are able to shower everyday. Water temperature logs indicate full compliance with guideline.	
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 provide adequate clothing. Visual Inspection: documentation of clothing issue, documentation of cleaning and storage	Compliant. Adequate clothing is supplied to all offenders by the facility.	
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. Visual Inspection: documentation of issue and exchange	Compliant. Appropriate bedding and linens are provided to all offenders. The facility launders all linens as required.	
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. Visual Inspection: documentation that items are provided, list of items available	Compliant. Indigent offenders are provided with personal hygiene items if they're not able to purchase them.	



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-05, Dept. Regs. B-06-003/IS-D-2, HC-01/IS-D-HCP13, HC-02/IS-D-HCP14, HC-05/IS-D-HCP20, HC-06A/IS-D-HCP41, HC-08B/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-1-4	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> <p>•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 facility staff using the software provided by DPS&C.</p> <p>•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-05-001 HC-02/IS-D-HCP14, unless prior approval has been granted by the Secretary of the DPS&C.</p> <p>•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> <p>Visual Inspection: Documentation that offenders are informed about health care and the grievance system, a health record, medical copayment fee schedule.</p>	<p>Compliant. Health care is provided at this facility with no medical co-pay. Offenders are advised of all clinical services provided and how to obtain these service.</p>	
<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>	<p>Compliant. Adequate equipment and supplies for medical services are maintained and have been approved for use by HCA.</p>	
<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-site 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>	<p>Compliant. Nurse Practitioner Ashley Thomas (Lic # AP04826 and Exp. Date 1/31/23) sees all offenders for sick call at the jail and service are provided or referred as needed. Dr. Don Smith sees offenders for any mental health concern and Dr. Jarrel Norton, Sr. (Lic# 6530, Exp. Date 12/31/22)sees offenders for all their dental needs. Dr. Patrick Grayson 13301R. AP04826 01/31/23</p>	
<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>	<p>Compliant. All deputies are properly trained by health care staff in dispensing medication. All dispensing medication is tracked on a MARS system. All deputies have received CPR and first aid training/certification. Standing Orders have been approved by the Health Care Authority. Signed copy is in the file.</p>	
<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>	<p>Compliant. If further medical attention is needed offenders are transferred to Bienville Medical Center or Bienville Family Clinic (Dr. Grayson). Ambulatory services are provided by Pafford Ambulance.</p>	



	Findings	Response
<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 <p>Visual Inspection: health records, completed screening form, transfer logs</p>	<p>Compliant. Proper screenings are completed upon intake. All required information is solicited from the offender as stated in this guideline.</p>	
<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>	<p>Compliant. This facility does not house female offenders.</p>	
<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>	<p>Compliant. Written plans are in place to address communicable diseases. This plan has been approved by HCA. Signed copy on file.</p>	
<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</p> <p>Visual Inspection: health records</p>	<p>Compliant. TB testing is conducted on all offenders annually free of charge. Documentation in files shows compliance with this policy.</p>	
<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>	<p>Compliant. Only offenders who are stable through use of maintenance medications are housed at this facility. All others are transferred to a DOC facility upon approval from DOC.</p>	
<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>	<p>Compliant. MARS sheets are completed as required.</p>	
<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>	<p>Compliant. First Aid kits are strategically located throughout the facility. The location plan has been approved by HCA. 2 AED's with NARCAN are also available.</p>	
<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:</p> <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. <p>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>	<p>Compliant. Sick call is accessible to all offenders daily. Offender needs are assessed by Nurse Practitioner Ashley Thomas and Nurse Jennifer Ellis.</p>	



	Findings	Response
<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>	<p>Compliant. This jail does not house offenders that require infirmary care. Emergency care is provided by Bienville Medical Center. Pafford Ambulance Service provides ambulatory transport. Offenders requiring infirmary housing are transferred to a DOC facility.</p>	
<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>	<p>Compliant. This facility does not have an in-house infirmary, therefore, any offenders to which this guideline applies, are transferred to a DOC facility.</p>	
<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>	<p>Compliant. The facility has a functional suicide prevention and intervention policy in place that has been signed by Dr. Don Smith.</p>	
<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 BJJ 1-C-001. In addition, a written report of all offender deaths shall be submitted to DPS&C on Form C-05-001-X (via email to catanotry@corrections.state.la.us or via fax to 225-342-3349).</p> <p>Visual Inspection: notification, reporting requirements, report to DPS&C</p>	<p>Compliant. Current policy is in place that fulfills the requirements of this guideline. Staff are aware of reporting requirements. There were no offender deaths this past year.</p>	
<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>	<p>Compliant. Policies and procedures are in place related to notification of family and visitation with an offender admitted to an ICU or trauma center according to DPS&C guidelines. Documentation of any such occurrence is maintained. This facility has no incidents to date.</p>	
<p>D. HEALTH SERVICES STAFF References: ACA CTS 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-24/15D-HCP44, HC-25/15-D HCP9, HC-26/15-D HCP10, HC-31/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>	<p>Compliant. Quarterly meetings are conducted and documentation is in file.</p>	
<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>	<p>Compliant. Current policy prohibits offenders from participation in clinical trials or experiments.</p>	
<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>	<p>Compliant. Job descriptions have been approved by a Health Care Authority. Copies are in file.</p>	
<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>	<p>Compliant. Completed and signed consent forms are placed in all offenders' files. Copies on file.</p>	



	Findings	Response
<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>	<p>Compliant. Completed consent and/or refusal forms are on file.</p>	
<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>	<p>Compliant. All staff have been trained in first aid and CPR. Certificates are in file. Emergency Medical Plans has been approved by a Health Care Authority. Documentation is in file.</p>	
<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>	<p>Compliant. Facility has a policy in place that has been signed and approved by a Health Care Authority.</p>	

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/OP-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: •Prevention/intervention; •Self-protection; •Reporting sexual abuse/assault; •Treatment and counseling. When the occurrence/allegation of sexual assault or threat involves a DPS&C offender, the facility shall report the incident to DPS&C immediately, as outlined in B/G I-C-001. An investigation is conducted and documented whenever a sexual assault or threat is reported. Investigative reports, that include DPS&C offenders, shall be submitted to appropriate DPS&C Regional Team Leader on Form C-01-022-E. Victims of sexual assault are referred under appropriate security provisions to a community facility for treatment and gathering of evidence.</p> <p>Visual Inspection: documentation of reports to DPS&C, investigative reports</p>	<p>Compliant. Facility has a written PREA policy in place that mirrors the DOC policy. The Sheriff's Department investigates all PREA allegations. During this reporting period, there have been no PREA allegations.</p>	

PART V - OFFENDER PROGRAMS AND ACTIVITY		
A. OFFENDER OPPORTUNITIES FOR IMPROVEMENT		
References: ACA CJS 1-5A-01, Dept. Reg. B-06-004/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. Backgrounds are conducted on all volunteers and are identified by their drivers license and facility badge. Due to Covid-19 there has been no volunteers to come into the facility during this audit period.</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. Schedules are posted in appropriate areas of the facility. None have taken place this audit period due to 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. The local jail facility shall maintain class files on all DPS&C approved programming, whether the program is administered by DPS&C or other staff. The class files should include at a minimum: 1. Screening of offender(s) for program placement; 2. Offender application to program; 3. Program sign-in sheets and/or attendance rosters; 4. Signed copy of CTRP credit forms; 5. Documentation for staff oversight if program is not administered and/or overseen by DPS&C staff.</p> <p>Visual Inspection: activity schedules, facility logs</p>	<p>Compliant. None. Offenders that want to participate in CTRP are transferred to a facility that offers the programs.</p>	
<p>V-A-003-1 Educational Programming The DPS&C and the facility encourage educational programming which includes: 1. Adult Basic Education and/or Literacy 2. Industry Based Certification Training 3. Pell-eligible Post-Secondary Training Any planned or proposed programs for education in local jail facilities that house DPS&C offenders shall be submitted to the DPS&C Education Director.</p> <p>Visual Inspection: activity schedules, facility logs</p>	<p>Compliant. None. Offenders that want to participate in HiSet program are transferred to a facility which offers such.</p>	



<p>B. PROGRAMS References: ACA 135 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/P6-D-3, B-03-001/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-T-1, C-02-008/OP-C-9, C-02-005/DP-C-7</p>	Findings	Response
<p>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</p>	<p>Compliant. A discharge packet was reviewed and found to be compliant with this guideline. Offenders receive all needed medications, community resource information, and property upon release.</p>	
<p>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 Visual Inspection: activity schedule, facility logs</p>	<p>Compliant. Due to Covid-19, this facility has suspended all visitation.</p>	
<p>V-B-003 Library Services Written Reading materials shall be available to offenders on a reasonable basis. Visual Inspection: activity schedule, facility logs</p>	<p>Compliant. Library services are available to all offenders.</p>	
<p>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</p>	<p>Compliant. Due to Covid-19, this facility has suspended all religious programs.</p>	
<p>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 Visual Inspection: activity schedule, facility logs</p>	<p>Compliant. Offenders have access to suitable exercise and recreation opportunities as scheduled, offenders are allowed exercise three (3) a week (weather permitting). Logbooks indicate compliance with this BJG.</p>	
<p>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</p>	<p>Compliant. No TWP program.</p>	
<p>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</p>	<p>Compliant. No TWP program.</p>	
<p>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 work) or R.S. 15:832 (police maintenance). Visual Inspection: offender voluntary participation, sheriff's approval of work program request, facility logs</p>	<p>Compliant. No TWP program.</p>	
<p>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</p>	<p>Compliant. No TWP program.</p>	
<p>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:</p>	<p>Compliant. There are no current plans for expansion.</p>	
<p>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</p>	<p>Compliant. At this facility, the Sheriff's Secretary inspects all mail for contraband except identifiable legal mail.</p>	
<p>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</p>	<p>Compliant. Packages are not allowed without prior approval. Publications are permitted if sent from identifiable sources.</p>	



C. REENTRY	Findings	Response
<p>References: Dept. Regs. B-01-001/IS-9-5, B-01-002/SOP3, B-01-004/IS-8-7, B-06-001/HC-40/IS-D-HCP31</p> <p>V-C-001 Substance Abuse Programs The facility encourages offender participation in substance abuse programs when available.</p> <p>Visual Inspection: facility log, activity schedule</p>	<p>Compliant. This facility does not offer a substance abuse program. Offenders requiring substance abuse treatment are transferred to a facility that does offer this program.</p>	
<p>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</p> <p>Visual Inspection: documentation of employment opportunity, documentation of two forms of identification, residential plan</p>	<p>Compliant. Yes, the process of acquiring two (2) forms of identification begins upon the intake of offenders.</p>	
<p>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 preceding the scheduled hearing.</p> <p>Visual Inspection: offender record, completed questionnaire</p>	<p>Compliant. Tiger Questionnaires are completed in a timely manner.</p>	
<p>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.</p> <p>Visual Inspection: offender record, trip log, documentation showing facility Warden or designee presence at parole board</p>	<p>Compliant. The Warden or designee is present at all Parole Board Hearings.</p>	

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
<p>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.</p> <p>Visual Inspection: facility log</p>	<p>Compliant. Offenders have access to legal materials/documents by completing a request form.</p>
<p>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.</p> <p>Visual Inspection: facility log, record of attorney interviews</p>	<p>Compliant. All offenders have access to attorneys by way of confidential legal mail, confidential attorney telephone calls, and visits.</p>
<p>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.</p> <p>Visual Inspection: facility log, incident reports, staff training records</p>	<p>Compliant. Policy is in place. There were not any signs of abuse observed visually, or upon reading documentation in files. Training and facility logs indicate compliance.</p>

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
<p>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.</p> <p>Visual Inspection: facility records, grievances, activity logs</p>	<p>Compliant. Policy in place and documentation reflects compliance. There were no obvious signs of discrimination observed during this inspection. Review of related documents indicated equal treatment and opportunities for all offenders.</p>
<p>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.</p> <p>Visual Inspection: grievances</p>	<p>Compliant. All offenders have access to a grievance process, which includes three (3) levels of review: 1) Warden 2) Chief Deputy; and, 3) Sheriff.</p>



PART VII - ADMINISTRATION AND MANAGEMENT		
A. RECRUITMENT, RETENTION AND PROMOTION		
References: ACA CS 1-1A-01, 1-1B-01, 1-1C-01, 1-1C-07, 1-4C-11, 1-4D-05, 1-4D-1A, 1-7B-01, 1-7B-04, 1-7B-06, Dept. Regs. A-02-028/AM-F-22, C-01-008/OP-A-19		
	Findings	Response
<p>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:</p> <ol style="list-style-type: none"> 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 program, which consists of the ACA core curriculum, within one year of Visual Inspection; lesson plans, staff training records 	<p>Compliant. Excellent training and staff development program is in place. All deputies receive appropriate initial and annual training as required. Deputies are POST certified. Training documentation reflects full compliance.</p>	
<p>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</p>	<p>Compliant. All deputies authorized to use firearms are POST certified and receive appropriate training regarding the use, handling, and retention of weapons. Qualifications are required annually and documentation is maintained in file.</p>	
B. FACILITY ADMINISTRATION		
References: ACA CS 1-4D-02, 1-7D-01, 1-7D-03, Dept. Reg. C-05-001/AM-I-4		
	Findings	Response
<p>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:</p>	<p>Compliant. A copy of the Louisiana Revised Statute is on file.</p>	
<p>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</p>	<p>Compliant. Legal assistance for staff provided by Cook, Yancy, King, Galloway Attorneys at Law. Contract letter in file.</p>	
<p>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</p>	<p>Compliant. Audits performed by Mary Jo Finley, CPA. Results of Dec 31, 2019 were in the file.</p>	
<p>VII-B-004 Facility Insurance Written policy, procedure and practice provide for comprehensive facility insurance coverage. Visual Inspection: insurance policy</p>	<p>Compliant. Insured with Travelers (Wimberly) Insurance Company.</p>	
<p>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</p>	<p>Compliant. All offender funds are managed by trained department personnel. There are excellent accounting procedures in place. Documentation in file.</p>	
<p>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</p>	<p>Compliant. Basic Jail Guidelines are in order with appropriate policy and procedures.</p>	
<p>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:</p> <ol style="list-style-type: none"> 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. A copy of the current ACA CS 1-1A-01, 1-1B-01, 1-1C-01, 1-1C-07, 1-4C-11, 1-4D-05, 1-4D-1A, 1-7B-01, 1-7B-04, 1-7B-06, Dept. Regs. A-02-028/AM-F-22, C-01-008/OP-A-19 <p>Visual Inspection: annual statement</p>	<p>Compliant. This facility submitted their annual compliance statement on time.</p>	
<p>VII-B-008 Monthly Reporting Written policy, procedure and practice ensure that any facility with DPS&C offenders report activities to the Chief of Operations on a monthly basis in accordance with Dept. Reg. C-05-001/AM-I-4. These reports shall be submitted on automated reporting forms provided by the DPS&C, no later than the 15th day of the month for the previous month's activities. Automated reporting shall be completed, by the appropriate DPS&C Regional Team Leader, no later than the 20th day of the month for the previous month's activities. Visual Inspection: monthly report</p>	<p>Compliant. Monthly reporting is completed and submitted in a timely manner.</p>	
<p>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</p>	<p>Compliant. Policy in place. File documentation reflects excellent practice.</p>	
C. REASONABLE ACCOMMODATION		
References: ACA CS 1-7E-01		
	Findings	Response
<p>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:</p>	<p>Compliant. All ADA requirements are met at this facility for employees, visitors and offenders.</p>	



INSPECTION REPORTS		
DEPARTMENT	Deficiencies	Corrective Action Taken
Fire Marshall Date of Current Report: 11/25/2019 Maximum Capacity: 55	No discrepancies noted.	
DHH - Health Date of Current Report: 01/22/2020 Maximum Capacity: 55	See attached report for Non-Critical deficiencies.	
DHH - Retail Food Date of Current Report: 01/22/2020	See attached report for Non-Critical deficiencies.	



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

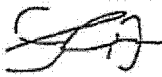


H. "Butch" Browning
FIRE MARSHAL

Inspection Report

Report # CB-19-020638-1

No Deficient/Cautiory Codes cited.

Location Information					
Inspection Type	Compliance Building Inspection		Inspection Date	11/25/2019 9:36:05 AM	
Structure ID	18818	No. of Buildings	1	Facility Code	J159
Capacity	55	Year Built	1960	Construction Type	Type IIB / (000)
Building/Trade Name		Address			
BIENVILLE PARISH JAIL		328 SOUTH BEECH STREET, ALCADIA, LA 71001			
Owner Information					
Owner Type	Name	Contact Phone	Contact Email		
Municipal Project	BIENVILLE PARISH POLICE JURY	(318) 377-1540	LGREEN@BIENVILLESHERIFF.ORG		
Address					
PO BOX 328, ALCADIA, LA 71001					
Tenant Information					
Name	Suite Number	Floor Number	Square Footage		
Occupancy Details					
Occupancy Type	Details				
Institutional	INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 5				
Comments					
NO APPARENT DEFICIENCIES FOUND AT TIME OF INSPECTION. ACCEPTABLE FOR OCCUPANCY.					
NO SIGNATURE DUE TO THE SYSTEM BEING DOWN					
NO SIGNATURE DUE TO THE SYSTEM BEING DOWN					
Inspector Information					
Name: Mark Franks	Badge Number: 654	Inspector Signature: 			
Person to whom requirements were explained					
Name:	Title:	Signature:			

For questions regarding the contents of this report, please call: (225) 587 5656

R. S. 40: 1621 Whoever fails to comply with any order issued by the Fire Marshal or his authorized representative under any provision of Part III, Chapter 7, Title 40 of the Louisiana Revised Statutes of 1950, R.S. 40:1569 excepted, shall be fined not more than five hundred dollars or imprisoned, for more than six months or both. Each day's violation of an order constitutes a separate offense and may be punished as such at the discretion of court.



STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Detention or Incarceration
Notice of Violations

Resting/Renewal

Permit Number 07-01-224	Permit Name Bienville Parish Jail-224
Name of Establishment Bienville Parish Jail-224	Owner Name BIENVILLE PARISH JAIL
Address 100 Courthouse DR Arcadia, LA 71001	Date 01/22/2020
	Time 12:30 PM

LAC TITLE 51 PART XVIII

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

Category	Code Reference	Description of Violations
Building Requirement	101	6 - The ceilings are not in good repair.
Building Requirement	101	7 - There is peeling paint on the walls in the shower.
Approved Bathing Facilities	101	24 - There is chipped tile in the shower area. IN CELL 9
Mattresses and Pillows	103	49 - The mattresses are cracked and in poor condition. NEW MATTRESSES HAVE BEEN ORDERED.

Comments:

Number Licensed For 55	Number in Attendance 34	License Anniversary 01/31/2020
Sanitarian Name/Print Tisha Semler	Phone # 318-263-2125	Sanitarian Signature <i>Tisha Semler</i>
		R.S. # 2057
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 WARDEN- LATRICIA GREEN	Signature of Recipient <i>Warden Latricia Green</i>	



STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Retail Food
Notice of Violations

Routine/Renewal

Permit Number 07-0001015-1	Permit Name BIENVILLE PARISH JAIL
Name of Establishment BIENVILLE PARISH JAIL	Owner Name BIENVILLE PARISH JAIL
Address 100 COURTHOUSE DR ARCADIA, LA 71001	Date 01/22/2020
	Time 12:30 PM

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
FOOD PROTECTION	1315	53 - 1315 - Potentially hazardous foods are not properly thawed.(COLD RUNNING WATER TURNED ON TURKEY THAT WAS THAWING IN SINK) [COS]
FOOD PROTECTION	1903	59 - 1903 - Bulk food is not protected from contamination.(SALT)

Comments:

NOTICE RS 40:31.38 (ACT 66)

RS 40:31.38 (ACT 66) authorizes the Louisiana Department of Health to charge a fee of \$150 to any permitted food establishment that fails to correct the necessary sanitary code violations to be in compliance at the time of its follow up inspection (1st 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 Tisha Scamier	Phone # 318-263-2125	Sanitarian Signature <i>Tisha Scamier</i>	R.S. # 2057
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 WARDEN- LATRICIA GREEN		Signature of Recipient <i>Warden Patricia Green</i>	



STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Retail Food
Notice of Violations

Routine/Renewal

Permit Number 07-0001015-1	Permit Name BIENVILLE PARISH JAIL	
Name of Establishment BIENVILLE PARISH JAIL	Owner Name BIENVILLE PARISH JAIL	
Address 100 COURTHOUSE DR ARCADIA, LA 71001	Date 05/05/2022	Time 11:30 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
FOOD PROTECTION	1501	54 - 1501.4 - Food is not stored six (6) inches off the floor. [COS]

Comments:

FSC: WALTER DRISKILL #58939 EX: MARCH 9, 2024

VERBAL ACKNOWLEDGEMENT OF REPORT PROVIDED BY: LATRICIA GREEN, WARDEN

COPY OF REPORT EMAILED TO: LGREEN@BIENVILLESHERIFF.ORG

NOTICE RS 40:31.38 (ACT 66)

RS 40:31.38 (ACT 66) authorizes the Louisiana Department of Health to charge a fee of \$150 to any permitted facility 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. Facilities 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	Phone #	Sanitarian Signature	R.S. #
Jarahji Wilson	318-676-5260	Jarahji W.	3237

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

Signature of Recipient

Name/Title
LATRICIA GREEN, WARDEN



STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Detention or Incarceration
Notice of Violations

Routine/Renewal

Permit Number 07-01-224	Permit Name Bienville Parish Jail-224	
Name of Establishment Bienville Parish Jail-224	Owner Name BIENVILLE PARISH JAIL	
Address 100 Courthouse DR Arcadia, LA 71001	Date 05/05/2022	Time 11:15 AM

LAC TITLE 51 PART XVIII

NON-CRITICAL ITEMS: These items should be corrected by the next regular inspection or according to the compliance schedule (see below) established by this office.		
Category	Code Reference	Description of Violations
Building Requirement	101	7 - There is peeling paint on the walls in the shower.
Toilet Facilities	101	19 - The toilets are not properly constructed. LOOSE TOILET SCREWS

Comments:

VERBAL ACKNOWLEDGEMENT OF REPORT PROVIDED BY: LATRICIA GREEN, WARDEN
COPY OF REPORT EMAILED TO: LGREEN@BIENVILLESHERIFF.ORG

Number Licensed For 55	Number in Attendance 28	License Anniversary 07/31/2021
Sanitarian Name/Print Jarahji Wilson	Phone # 318-676-5260	Sanitarian Signature Jarahji W.
		R.S. # 3237
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	
	Signature of Recipient	
Name/Title LATRICIA GREEN, WARDEN		



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-22-007905-1

No Deficient/Cautiory Codes cited.

Location Information			
Inspection Type	Compliance Building Inspection	Inspection Date	2/23/2022 8:49:40 AM
Structure ID	18818	No. of Buildings	1
Capacity	55	Facility Code	J159
		Year Built	1960
		Construction Type	Type IIB / (000)
Building/Trade Name		Address	
BIENVILLE PARISH JAIL		328 SOUTH BEECH STREET, ARCADIA, LA 71001	

Owner Information			
Owner Type	Name	Contact Phone	Contact Email
Municipal Project	BIENVILLE PARISH POLICE JURY	(318) 377-1540	LGREEN@BIENVILLESHERIFF.ORG
Address			
PO BOX 328, ARCADIA, LA 71001			

Tenant Information			
Name	Suite Number	Floor Number	Square Footage

Occupancy Details	
Occupancy Type	Details
Institutional	INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 5

Comments
INSPECTION COMPLETED ON 02/21/22 WITH CAPTAIN RUSTY EDWARDS. NO APPARENT DEFICIENCIES OBSERVED AT TIME OF INSPECTION. ACCEPTABLE FOR LICENSING AND CERTIFICATION.

Inspector Information		
Name: Brandon Lamkin	Badge Number: 726	Inspector Signature:

Person to whom requirements were explained		
Name:	Title:	Signature:

For questions regarding the contents of this report, please call: (225) 587 5656

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-21-014835-1

No Deficient/Cautionary Codes cited.

Location Information			
Inspection Type	Compliance Building Inspection	Inspection Date	2/21/2022 1:47:20 PM
Structure ID	18818	No. of Buildings	1
Capacity	55	Facility Code	J159
		Year Built	1960
		Construction Type	Type IIB / (000)
Building/Trade Name		Address	
BIENVILLE PARISH JAIL		328 SOUTH BEECH STREET, ARCADIA, LA 71001	
Owner Information			
Owner Type	Name	Contact Phone	Contact Email
Municipal Project	BIENVILLE PARISH POLICE JURY	(318) 377-1540	LGREEN@BIENVILLESHERIFF.ORG
Address			
PO BOX 328, ARCADIA, LA 71001			
Tenant Information			
Name	Suite Number	Floor Number	Square Footage
Occupancy Details			
Occupancy Type	Details		
Institutional	INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 5		
Comments			
BI-ANNUAL INSPECTION COMPLETED ON THIS DATE OF A DETENTION FACILITY CONDITION USE 5. FIRE ALARM SYSTEM CERTIFIED 06/08/2021 HOOD SUPPRESSION SYSTEM CERTIFIED ON 12/13/2021 - NEXT REQUIRED INSPECTION 06/13/2022 (EVERY 6 MONTHS). FIRE EXTINGUISHERS CERTIFIED 05/07/2021. ALL MANUAL LOCKS APPEAR TO BE IN NORMAL WORKING CONDITIONS. FIRE DRILL CONDUCTED EVERY 3 MONTHS. NO APPARENT DEFICIENCIES AT TIME OF INSPECTION. ACCEPTABLE FOR STATE LICENSE, OCCUPANCY AND USE. INMATE COUNT: 26			
Inspector Information			
Name: Brandon Lamkin	Badge Number: 726	Inspector Signature:	
Person to whom requirements were explained			
Name: Roy Cook	Title: Correctional Officer	Signature:	

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

(225) 587 5656