Department of Public Safety & Corrections State of Louisiana

JOHN BEL EDWARDS



JAMES M. LE BLANG SECRETARY



July 27, 2022

MEMORANDUM

TO:

The Honorable Becket Breaux

Speriff of St. Martin Parish

FROM:

James M. Le Blanc

Seeretary

RE:

"Basic Jail Guidelines" Monitoring Report

This is to advise that pursuant to the attached monitoring report concerning St. Martin Parish Correctional Center, BJG 1-C-006 "Operational Capacity" was found non-compliant. However, at this time DPS&C is recertifying this facility in compliance with the "Basic Jail Guidelines" with annual monitoring. We would like to encourage full compliance with all BJG guidelines.

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

JML/mwk

Attachment

c: Mil

Mike Ranatza, Executive Director, Louisiana Sheriffs' Association E.J. Melancon, Warden, St. Martin Parish Correctional Center Seth Smith, Chief of Operations Kirt Guerin, Warden, EHCC Aaron Hooper, BJG Team Leader

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Department of Public Safety and Corrections

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

> St. Martin Parish Correctional Center 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 ______ 11th _____ day of ____ August in the year of our Lord ____**2022**





BJG RECERTIFICATION REPORT

Rev. 03/22/2022 mw

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St. Martin Parish Correctional Center

BJG Team Leader & Monitors:

Aaron Hooper, BJG Team Leader, Billy Verret, Team

member

Facility Warden & Email Address:

E.J Melancon , emelancon@stmartinsheriff.org

Facility Staff:

EJ. Melancon, Warden, Robley Picard Assistant Warden,

Camellia Rossyion. Lt.

BJG Inspection Date:

6/16/2022

Previous BJG Inspection Date:

4/07/2021 186

Operational Capacity: Count on Day of Visit:

214

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

Concerns or Issues from the previous BJG Monitoring Inspection:

I-C-006: Operational Capacity

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	10	1	11
Number of Local Offenders	151	14	165
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	36	2	38
Number of ICE Detainees	0	0	0
TOTAL	197	17	214

Number of DOC Offenders that are:

Single Bunked		
Double Bunked	6	
Triple Bunked	0	
Total	11	

Number of DOC Offenders that are in Restricted Housing:

Single Bunked	0	_,
Double Bunked	0	_
Triple Bunked	0	_
Total	0	_

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

Month/Year	Off/Off	Off/Off w/sig inj	Offender/Staff	Off/Staff w/sig inj
May 2021	4	0	0	0
June 2021	2	0	0	0
July 2021	4	0	1	0
August 2021	0	0 /	0	0
September 2021	0	0	0	0
October 2021	2	0	0	0
November 2021	3	0	0	0
December 2021	2	0	0	0
January 2022	2	0	0	0
February2022	2	0	0	0
March 2022	0	0	0	0
April 2022	0	0	0	0
May2022	8	0	0	0

SEIZURE FINDINGS: (Please list monthly since the previous BJG monitoring visit.)

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
May 2021	1	0	1	0	11
June 2021	1 1	0	1	0	12
July 2021	1	0	0	1	8
August 2021	0	0	0	0	8
September 2021	0	0	1	0	10
October 2021	0	0	0	0	8
November 2021	0	0	0	2	8
December 2021	0	0	0	2	8
January 2022	0	0	0	2	6
February2022	1	0	1	1	9
March 2022	0	0	1	1	10
April 2022	0	0	2	2	10
May2022	2	0	2	0	14

GENERAL APPERANCE, CLEANLINESS, AND COMMENTS OF THE FACILITY:

Living Area:

Overall the living areas were found to be clean, organized and odor free.

Dorms:

Dorm areas were in order and found to be clean. Offenders' property was stored in living area.

Cell Block:

Cell block areas were clean and odor free.

Culinary/Dining:

The tools and sharp objects were controlled on an inventoried locked shadow board in a locked room. Cabling is used when knives are checked out. Dry storage had all items labeled and stored 6" off the ground. Sample trays are labeled and kept for five days. Cooler and freezer areas were found in good order with temperature log checks documented.

Bathrooms:

Bathrooms are clean and in order and contained soap and paper towels.

Yard Areas:

Yard and recreation areas were adequate. Documentation provided reflects that recreation was occurring on a regular three times per week basis, weather permitting.

Maintenance:

Facility has on staff maintenance personnel daily. Maintenance department is across the street from the Jail. Tool inventory kept up daily. MSDS forms are well maintained and correct.

COUNTS:

- How many formal counts are conducted each shift? Three
- How many counts are conducted each day? Six
- <u>Stick outs counts</u> are counts that are conducted in areas other than housing units, such as food services and other areas of normally authorized locations. When conducting and submitting the counts, employees are to actually see the offender before turning in theses counts.
 - How does the facility accomplish this? Stick out counts are called into the facility.
 - Does this process insure accountability and safe/secure operation of the facility? Yes

CLASSIFICATION SYSTEM:

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

If yes,

- What is their classification process to determine who is eligible for trustee status? Offender criminal
 history and NCIC are pulled and reviewed prior to the final sign off approval by the administration under
 set policies and guidelines.
- Does their classification process meet DPS&C, Corrections Services' criteria? Yes

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

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
May 2021	7	29	24%	1
June 2021	13	25	52%	0
July 2021	6	19	32%	0
August 2021	5	17	29%	0
September 2021	8	19	42%	1
October 2021	8	19	42%	0
November 2021	6	19	32%	0
December 2021	8	18	44%	0
January 2022	6	15	46%	0
February2022	8	11	73%	0
March 2022	10	15	67%	2
April 2022	8	17	47%	0
May2022	6	24	25%	1

RULES AND DISCIPLINE:

Does the facility's offender orientation include the application process for applying for restoration of good time? Yes

If yes,

- What is their restoration of good time application process for the offender population? Offenders are
 provided applications upon request. Once the application has been completed, it is forwarded to
 Headquarters for further handling.
- Does their restoration of good time application process meet DPS&C, Corrections Services' criteria?
 Yes

BJG AUTOMATED MONTHLY REPORTING REVIEW:

Has the facility been inputting the correct info timely? Yes

Does the reported info suggest any issues of concern or improvement? Operational Capacity is over every month.

OFFENDER PROGRAMS:

GED Program

Number of GED Slots	5
Number of Participants	2
YTD Number of Completions	

LIST ALL CERTIFIED TREATMENT PROGRAMS: (Attach Form IS-B-8-b)

GED

LIST ALL OTHER OFFENDER PROGRAMS:

AA/NA

Religious Services

GRIEVANCE PROCESS:

- Does grievance process include two levels of review? Yes , they have three.
- Who are the designees at each level? Deputy, Captain, Warden
- What is the specified time period for response at each level? 30 days 1st level, 10 days 2nd level, 5 days 3rd level

REA COMPLIANCE:

- Is this facility required to be PREA compliant due to contract language? No
- Is this facility PREA compliant? No
 - > If yes, date compliance received:
- If this facility is required to be PREA compliant due to contract language, and has not done so, what is their plan of action for compliance? N/A

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Staff overall morale was good and they seem to be working together towards common goals. All employees conducted themselves professionally and respectfully

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

No complaints made by any offender during the walk through.

RECOMMENDATION:

The following guideline was found to be non-compliant:

I-C-006 Operational Capacity

Continued annual monitoring visits are recommended

Monitors: Aaron Hooper, BJG Team Leader





BASIC JAIL GUIDELINES (B	JG)	
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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-	Findings	Response
1A-04, 1-1A-05, 1-1C-05, 1-4A-03, 1-4A-04	Findings	Response
I-A-001 Safety/Sanitation/Inspections	Compliant - Weekly sanitation	
The facility complies with all applicable laws and regulations	inspections are conducted. Fire	
of the State Sanitation Officer and the State Fire Marshal.	Marshal inspection done annual.	
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		
I-A-002 Disposal of Materials	Compliant	
Disposal of liquid, solid, and hazardous material complies	Compliant	
with applicable government regulations.		
Visual Inspection: trash disposal contract, completed		
inspection reports, include documentation that		
deficiencies were corrected		
I-A-003 Vermin and Pests	Compliant - The facility has pest	
Vermin and pests are controlled. There is a written and	control contracts and trash disposal	
implemented plan for the control of vermin and pests.	contracts in place.	
	contracts in place.	
Visual Inspection: pest control contracts, trash		
disposal contracts, inspection reports		
I-A-004 Housekeeping	Compliant -Good policy in place to	
The facility is clean and in good repair. There is a written housekeeping plan that provides for the ongoing cleanliness and	ensure daily housekeeping duties	
sanitation of the facility.	are maintained.	
Visual Inspection: inspection reports, completed		
forms, documentation of correction of identified		
I-A-005 Water Supply	Compliant	
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		
laddressing 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		
B. VEHICLE SAFETY		
References: Dept. Reg. C-03-003/OP-A-3	Findings	Response
I-B-001 Offender Transport	Compliant	

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)

TriD\$)		
C. EMERGENCY PREPAREDNESS/RESPONSE		
References: ACA CJS 1-1C-01, 1-1C-02, 1-1C-03, 1-1C-04, 1-1C-06, 1-1C-07, 1-7E-01, Dept. Regs. A-04-002/PS-D-3, C-02-001/OP-A-5, C-02-010/OP-B-3, C-05-001/AM-I-4		Response
I-C-001 Emergency Plan There is a written plan, submitted to the Secretary of DPS&C, that specify the procedures to be followed in situations that threaten facility security. Such situations include but are not limited to riots, hunger strikes, disturbances, taking of hostages, and natural or man-made disasters. These plans are made available to all applicable personnel and are reviewed annually and updated as needed. All facility personnel are trained annually in the implementation of the emergency plan. An evacuation plan is used in the event of fire or major emergency. The plan is approved by the state fire marshal, reviewed annually, and updated, if necessary. There are written procedures for significant unusual occurrences or facility emergencies including but not limited to natural or man-made disasters; major disturbances such as riots, hostage situations, escapes, fires, deaths, serious illness or injury and assaults or other acts of violence. Such procedures include the reporting of these incidents to the DPS&C, OAS, telephone 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-842-4399 after hours, when they involve DPS&C offenders. In addition, the facility shall follow the incident reporting procedures as outlined in Dept. Reg. C-05-001/AM-I-4, "Activity Reports, Visual Inspection: training records, facility logs, documentation of approval of plan, documentation of annual review, documentation of staff receipt, training on the plan		
	Findings	Response
I-C-002 Immediate Release of Offenders There is a means for the immediate release of inmates from locked areas in case of emergency and there are provisions for a backup system. The facility has exits that are properly positioned, are clear from obstruction, and are distinctly and permanently marked to ensure the timely evacuation of offenders and staff in the event of fire or other emergency. Visual Inspection: facility records/logs	Compliant -All exits are clearly marked and free from obstruction. Evacuation routes are clearly posted and easily understood throughout the facility. Policy is in place for the immediate release of offenders from all areas.	
I-C-003 Fire Safety/Code Conformance The facility complies with the requirements of the state fire marshal. There is a specific plan for addressing deficiencies, if any, that is approved by the State Fire Marshal. The State Fire Marshal approves any variances, exceptions, or equivalencies. Visual Inspection: documentation of fire alarm and detection system maintenance and testing, plans for addressing deficiencies	Marshall and provides corrective action for deficiencies noted.	
I-C-004 Facility Furnishings Facility furnishings meet fire-safety-performance requirements. Visual Inspection: Specifications for all furnishings.	Compliant	
I-C-005 Flammable, Caustic and Toxic Materials Written policy, procedure and practice govern the control	Compliant	



I-C-006 Operational Capacity

The number of offenders present does not exceed the operational capacity as determined by the state fire marshal and state health officer.

The state fire marshal will determine a capacity primarily based upon exiting capabilities. The state health officer will determine a capacity based upon the ratio of plumbing fixtures to offenders and square footage. The operational capacity will be the lower of these two figures.

Visual Inspection: facility count sheets

Non-Compliant Monthly reports show the Facility were over the Operational Capacity each month .	

PART II - SECURITY		
A. PROTECTION FROM HARM		
References: ACA CJS 1-2A-01, 1-2A-04, 1-2A-05, 1-2A-06, 1-2A-08, 1-2A-11, 1-2A-13, 1-2A-14, 1-2A-16, 1-2A-17, 1-2A-19, 1-2A-20, Dept. Regs. A-02-008/AM-F-47, B-02-001/IS-B-1, C-02-007/OP-C-3	Findings	Response
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	and monitoring of the fire safety system.	
II-A-002 Secure Perimeter The facility's perimeter is controlled by appropriate means to ensure that offenders are secured remain within the perimeter and that access by the general public is denied without proper authorization. Visual Inspection: documentation of receipt of job description by staff, documentation of annual review and updating, photos of perimeter controls	Compliant	
II-A-003 Sufficient Staff There is a written document describing the facility's organization and staffing plan. This should include an organizational chart that groups similar functions, services and activities. Each facility meets minimum security staffing requirements which reflect good correctional practice. Sufficient staff, including a designated supervisor, are provided at all times to perform functions relating to the security, custody, and supervision of offenders and, as needed to operate the facility in conformance with the BJG. Visual Inspection: records of staff deployment, facility logs, documentation of annual review of staffing analysis and plan	Compliant -documentaion of staffing and facility logs kept up.	
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 II-A-005 No Offender Control Over Others	Compliant -Female staff work in female offender dorms. When male staff make rounds in the female dorms, they must have a female staff member with them. Compliant	
No offender or group of offenders is given control, or allowed to exert authority over other offenders. Visual Inspection: written policy and procedure		



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 BJG I-

Visual Inspection: copies of log book, records of staff deployment

in	Compliant -Logs are placed in all areas of the facility and contain required information. Facility forms are completed for notification of incidents to the administration.	
but , or		

	Findings	Response
II-A-007 Counts The facility has a system for physically counting offenders. At least one formal count is conducted for each shift, with no less than 3 counts daily. The system includes strict accountability for offenders assigned to work and other approved temporary absences. Visual Inspection: completed forms, facility records/logs.	Compliant -Offenders are counted five times daily and logged when offenders are out on a trip or work detail. Counts are performed at the beginning and end of each shift and during the noon meal.	
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 envelops shall be transferred with the offender at such time the offender is transferred to another local or DPS&C facility. 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;	Compliant -All required documentation is maintained on offenders. Upon sentencing, information is submitted to the appropriate Pre-Class officer for time computation. Upon transfer, the offender's record follows him and a "Receipt of Record" is completed as documentation.	
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. 1. Master prison form; 2. Fingerprints: one FBI print card from AFIS; 3. One photograph; 4. Bill of Information and Court Minutes or Uniform Commitment Order for each conviction (for probation violators both the original sentencing minutes and the revocation minutes are required); 5. Jail credit letter; 6. One Inventory Acknowledgment Form (cash and property receipts).		
Visual Inspection: completed forms, reports, offender record		



	In	
II-A-009 Reception - Legal Commitment and Medical	Compliant	
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.		
Visual Inspection: Completed Admission forms,		
facility logs.		
II-A-010 Admissions	Compliant -forms were documented	
Admission processes for a newly admitted offender include,	and kept up with.	
but are not limited to:		
 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;		4
 Providing information about access to health services, 		
Visual Inspection: intake and admission forms,		,
screening forms, inventory form, receipt form		9
	Consuliant Familia didula have anno	
II-A-011 Out of State Offenders	Compliant -Facilty didn't have any	
The names of any out of state offender (federal or state) to	out of state offenders on the date	
be housed at a local jail or privately managed facility shall	or visit	
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		1
custody under the LA DPS&C classification procedures. Any offender convicted and sentenced to incarceration by a		
court in another state (federal or state) shall not be released		
in the State of LA. Any out of state offender (federal or		
state) housed in a local jail or privately managed facility		
shall be returned to an appropriate correctional facility		
located within the state where the offender was convicted		
and sentenced for release in that state, prior to the		
offender's release date.		
THE MAN TO LEGEBER MANNEY		
Visual Inspection: offender record, submittal to chief of operations of out-of-state offenders to be housed at the		
facility, release/transfer documentation	1	

	Findings	Response
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: • Identifies the appropriate level of custody for each offender • Identifies appropriate housing assignment • Identifies the offender's interest and eligibility to	Compliant	Respuise
Participate in available programs Visual Inspection: offender housing records, offender classification records		



II-A-013 Prohibition on Youthful Offenders	Compliant	
Offenders subject to juvenile jurisdiction are housed in adult	· ·	
facilities only under the conditions established by law. If		
· · · · · · · · · · · · · · · · · · ·		
juveniles are committed to the facility, a plan is in place to		
provide for the following:		
Supervision and programming needs of the juveniles to		
ensure their safety, security, and education;		
Classification and housing plans;		
Appropriately trained staff.		
OAS shall be notified of offenders who are under the age of	l i	
18 that are sentenced to the DPS&C as an adult for transfer		
to the appropriate institution. Visual Inspection: admission and housing, offender	1	
· · · · · · · · · · · · · · · · · · ·		
records, classification records		
II-A-014 Separation in Classification	Compliant -Male and Female	
Male and female offenders must be housed in separate	offenders are housed separate and	
rooms/cells with reasonable sight and sound separation.	do not have movement between the	
Visual Inspection: offender housing records, offender	two.	
classification records, diagram of facility showing	LWO.	
male/female housing areas		
II-A-016 Photo Identification	Compliant -Upon admission, all	
The facility shall provide each DPS&C offender with photo	offenders receive an institutional	ļ
, ,	ID.	
identification, which the offender shall carry/wear on their	·] 1
person at all times.		l l
Visual Inspection: Offender identification		
card/wristband.		
	Compliant -Facility has an excellent	
II-A-017 Drug Free Workplace		
Written policy, procedure, and practice provide for a drug-	policy/procedure in place for	
free workplace, which includes at a minimum pre-	ensuring a drug-free workplace.	
employment testing, post-accident testing, reasonable		
suspicion/probable cause testing, and quarterly random		
testing of all employees.		
	·•	
Vieual Thenaction: drug tacting lab foo bills for drug		
Visual Inspection: drug testing lab fee bills for drug		
testing of facility employees (including pre-		
testing of facility employees (including pre- employment, post accident, reasonable		
testing of facility employees (including pre-		
testing of facility employees (including pre- employment, post accident, reasonable	Compliant-Facility has an exellent	
testing of facility employees (including pre- employment, post accident, reasonable suspicion/probable cause, random). II-A-018 Offender Drug Testing		
testing of facility employees (including pre- employment, post accident, reasonable suspicion/probable cause, random). II-A-018 Offender Drug Testing Written policy, procedure, and practice provide for	policy/procedure in place to ensure	
testing of facility employees (including pre- employment, post accident, reasonable suspicion/probable cause, random). II-A-018 Offender Drug Testing Written policy, procedure, and practice provide for alcohol/drug testing, both randomly and for probable cause.	policy/procedure in place to ensure routine testing of the offenders.	
testing of facility employees (including pre- employment, post accident, reasonable suspicion/probable cause, random). II-A-018 Offender Drug Testing Written policy, procedure, and practice provide for alcohol/drug testing, both randomly and for probable cause. Facility policy will require that a minimum of 5% of the	policy/procedure in place to ensure routine testing of the offenders. They also have been compliant with	
testing of facility employees (including pre- employment, post accident, reasonable suspicion/probable cause, random). II-A-018 Offender Drug Testing Written policy, procedure, and practice provide for alcohol/drug testing, both randomly and for probable cause. Facility policy will require that a minimum of 5% of the DPS&C offender population shall be drug tested on a	policy/procedure in place to ensure routine testing of the offenders. They also have been compliant with the 5% requirement of this	
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Visual Inspection: facility logs, documentation of transfers of DPS&C offenders to other than DPS&C facilities		
II-A-020 Frequency of Cell Checks Written policy, procedure, and practice provide secure, safe housing by establishing the frequency of cell checks in all cellblock areas not to exceed four (4) hours. Staff will document these checks in their staff logs.	Compliant	
Visual Inspection: Facility logs, documentation of frequency of cell checks.		

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	Findings	Response
II-B-001 Use of Force The use of force is restricted to instances of justifiable self-defense, protection of others, protection of property, and prevention of escapes, and then only as a last resort and in accordance with appropriate statutory authority. Written policy, procedure, and practice govern the use of force and provide that force shall never be used as punishment. When an incident involving use of force with a DPS&C offender results in the termination and/or arrest of an employee, the facility shall immediately report the incident to the DPS&C, Office of Adult Services, telephone number 800-803-8748 during normal business hours or the control center at Elayn Hunt Correctional Center, telephone number 800-842-4399 after hours. In addition, the facility shall provide a written report of the incident to the DPS&C, Chief of Operations within three business days.	Compliant -Facility maintains a strict policy on Use of Force. Training is conducted on an annual basis and reports are clear and concise.	
Visual Inspection: facility records, logs, incident reports, training records		
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: 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;	Compliant -Policy and procedures are in place to indicate when and where restraints are to be utilzed. Documentation of this practice was demonstrated in the file.	
Visual Inspection: facility records, logs		

Findings	Response



	BJG Monitoring Report
Compliant	
	Compliant -Policy and procedures are in place for the use of Firearms. No firearms are carried within the secure perimeter of the facility. All officers are POST certified prior to assignment.

C. CONTRABAND/SEARCHES		
References: ACA CJS 1-2C-01, 1-2C-04, Dept. Reg. C- 02-003/OP-A-8	Findings	Response
II-C-001 Procedures for Searches Written policy, procedure and practice guide searches of facilities and offenders to control contraband. Manual or	Compliant -Clear and concise policy! All offenders are searched upon return to the facility from work detail, trip, etc.	



Visual Inspection: observation, facility records and logs, offender and staff interviews

D. ACCESS TO KEYS, TOOLS, UTENSILS		
References: ACA CJS 1-2D-01	Findings	Response
II-D-001 Key, Tool, and Utensil Control 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.	Compliant -Facility has policy in place for keys, tools and utensil control. Procedures in place for checking out utensils in the kitchen.	
Visual Inspection: documentation of perpetual inventories		

PART III - ORDER	
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/OP-C-1	Findings	Response
III-A-001 Rules and Discipline Prior to being placed in the general population, each offender is provided with an orientation that includes facility rules and regulations, including access to medical care and the process for applying for restoration of good time. The facility shall follow and provide the DPS&C "Disciplinary Rules and Procedures for Adult Offenders", to the offender population. ●If the Sheriff or local 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 Visual Inspection: offender records, disciplinary records, receipt of disciplinary rules, documentation	Compliant -Facility follows proper procedures to notify DPS&C of rule violators who need to be transferred in for a disciplinary hearing	
of orientation		

PART IV - CARE		
A. FOOD SERVICES		
References: ACA CJA 1-4A-01, 1-4A-02, 1-4A-04,1-4A-06, Dept. Reg. C-06-001/IS-C-1	Findings	Response
IV-A-001 Food Storage Facilities There are sanitary facilities for the storage of all foods that comply with applicable state and/or federal guidelines.	Compliant -Daily inspections are conducted in the Food Service are to ensure storage areas are maintanied in safe manner.	
Visual Inspection: DHH inspection reports, internal inspection reports		
IV-A-002 Food Service Facilities Toilet and hand basin facilities are available to food service personnel in the food preparation area.	Compliant -Facilities are available to offenders and employees with hand soap and paper towels.	
Visual Inspection: DHH inspection reports, photos		



IV-A-003 Food/Dietary Allowances The facility's dietary allowances are reviewed at least annually by a qualified nutritionist or dietician to ensure they meet the national recommended dietary allowances for basic nutrition for appropriate age groups. Menu evaluations are conducted at least quarterly by food service supervisory staff to verify adherence to the established basic daily servings. Written policy, procedure, and practice require that food service staff plan menus and substantially follow the plan. The planning and preparation of all meals shall take into consideration nutritional characteristics and caloric adequacy. The facility shall provide a tray/plate and utensil(s) for each hot meal.		
Visual Inspection: annual reviews, nutritionist or dietician qualifications, documentation of at least annual review and quarterly menu evaluations IV-A-004 Records of Meals Served	Compliant -Sample trays kept and	
	labled for at least 5 days.	
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	
IV-A-006 Food Service Management Written policy, procedure, and practice require that three meals (including two hot meals) are provided under staff supervision at regular meal times during each 24-hour period, with no more than 14 hours between the evening meal and breakfast. Variations may be allowed based on weekend and holiday food service demands provided basic nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal Visual Inspection: records of meals served and times served, facility logs	Compliant -menus are made with at least 2 hot meals daily.	
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	9
IV-A-008 Health Protection for Food Service There is adequate protection for all offenders and staff in the facility and for offenders and other persons working in food service. All persons involved in the preparation of the food receive a pre-assignment inspection by appropriate kitchen staff, to ensure freedom from diarrhea, skin infections, and other illnesses transmissible by food or utensils. Offenders working in food services are monitored each day for health and cleanliness by appropriate kitchen staff. All food handlers are instructed to wash their hands upon reporting to duty and after using toilet facilities.	Compliant -All offenders are screen prior to being assigned as a kitchen worker. Food Service Staff conduct inspections on every shift to ensure proper hygiene. Signs are posted in the restroom facilities about proper handwashing techniques prior to returning to work.	
Visual Inspection: inspection reports, completed forms, documentation of daily monitoring for health and cleanliness		



References: ACA CJS 1-4B-01, 1-4B-02, 1-4B-03, 1-4B-04, Dept. Reg. B-06-001/HC-34/IS-C-3	Findings	Response
IV-B-001 Plumbing Fixtures - Toilets and Washbasins Offenders have access to toilets and washbasins with temperature-controlled hot and cold running water 24 hours per day. Offenders are able to use toilet facilities without staff assistance when they are confined in their cells/sleeping areas	Compliant -Each pod/dorm and cells have access to hot/cold water at washbasins and toilet facilities. DHH performs annual inspections.	
Visual Inspection: maintenance records or reports, inspections, documentation of periodic measurement of water temperature, offender grievances		
IV-B-002 Plumbing Fixtures - Showers Offenders, including those in medical housing units or infirmaries, have access to operable showers with temperature-controlled hot and cold running water 24 hours per day, on a reasonable schedule, (a minimum of three times per week). Water for showers is thermostatically controlled to temperatures ranging from 100 degrees to 120 degrees Fahrenheit. Visual Inspection: maintenance records or reports, increasing.	Compliant -There are operable showers in all areas of the facility.	
INSPECTIONS IV-B-003 Clothing The facility has an obligation to provide adequate institutional clothing appropriate to the season and the offender's work status, including adequate changes of clothing to allow for regular laundering. The facility may fulfill this obligation by furnishing clothing or permitting the offender to secure and wear his own clothing, except that when the offender does not provide adequate clothing for himself, the facility shall furnish same.	Compliant -documentation showed the issueing of clothing to offenders	
Visual Inspection: documentation of clothing issue, documentation of cleaning and storage		
IV-B-004 Hygiene/Bedding Issue The facility shall provide adequate bedding and linen, including a clean mattress, sheets, pillow and blanket, not to exclude a mattress with integrated pillow. There are provisions for linen and towel exchange at least weekly. There are provisions for blanket exchange at least monthly. Visual Inspection: documentation of issue and	Compliant -Hygiene and bedding issued to all offenders.	
exchange IV-B-005 Personal Hygiene Articles and services necessary for maintaining personal hygiene shall be available to all offenders including items specifically needed for females. Such items shall be provided to any offender (male or female) who is indigent. Each offender shall be provided soap, toilet paper, toothbrush, toothbraste and shaving equipment. Visual Inspection: documentation that items are provided, list of items available	Compliant -Personal Hygiene issued also offender can buy other name brands in the canteen.	
C. CONTINUUM OF HEALTH CARE SERVICES		
References: ACA CJS 1-2A-14, 1-4C-01, 1-4C-03, 1-4C-04, 1-4C-06, 1-4C-07, 1-4C-08, 1-4C-09, 1-4C-10, 1-4C-13, 1-4C-15, 1-4D-01, 1-4D-03, 1-4D-04, 1-4D-06, Dept. Regs. B-06-001/IS-D-2, HC-01/IS-D-HP13, HC-02/IS-D-HCP14, HC-05/IS-D-HCP20, HC-06A/IS-D-HCP41, HC-06B/IS-D-HCP42, HC-06C/IS-D-HCP46, HC-08/IS-D-HCP33, HC-09A/IS-D-HCP22, HC-11/IS-D-HCP34, HC-13/IS-D-HCP16, HC-17/IS-D-HCP7, HC-38/IS-D-HCP30, B-06-003/AM-C-4, C-02-008/OP-C-9, C-05-001/AM-I-4	Findings	Response



IV-C-001 Access to Care/Clinical Services Compliant -Offenders recive all At the time of admission/intake, all offenders are informed about necessary information on accessing procedures to access health services, including any copay health care services. Contracted out requirements, as well as procedures for submitting grievances. to the local hospital. There are no Medical care is not denied based on an offender's ability to pay. co-pays now for offenders. There is The facility has a designated health authority with responsibility for a 24/7 medical staff at the facility health care services. When the health authority is other than a and also a 24/7 Doctor on call. physician, final clinical judgments rest with a single, designated, 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 •In accordance with R.S. 15:831, DPS&C offenders may be assessed a co-payment for receiving medical or dental treatment, including prescription or nonprescription drugs. The co-payment fee schedule shall be approved by the DPS&C. Such fee schedule for DPS&C offenders housed in local jail facilities shall not exceed the DPS&C approved rate in accordance with Dept. Reg. B-06-001 HC-02/IS-D-HCP14, unless prior approval has been granted by the Secretary of the DPS&C •DPS&C offenders may be required to file a claim with his/her private medical or health care insurer, or any public medical assistance program, under which he/she is covered and from which the offender may make a claim for payment or reimbursement of the cost of any such medical treatment. Visual Inspection: Documentation that offenders are informed about health care and the grievance system, a health record, medical copayment fee schedule. IV-C-002 Adequate Equipment and Supplies Compliant

	Findings	Response
IV-C-003 Provision of Treatment	Compliant -documentation kept up	
The facility has a designated health authority responsible for	daily	
health care services. Requests for health services are		
triaged by health trained persons to ensure that needs are		
addressed in a timely manner in accordance with the		
severity of the illness. Written policy, procedure and		
practice provide that anyone who provides health care		
services to offenders be licensed, registered or certified as		
appropriate to their respective professional disciplines. Such		
personnel shall only practice as authorized by their license,		
registration or certification. Standing orders are used in the		
treatment of offenders only when authorized in writing by a		
physician or dentist. (Standing orders are used in the		
treatment of identified conditions and for the on-sight		

in working order.

Visual Inspection: Photos

Adequate equipment and supplies for medical services are provided as determined by the health care authority and are



Visual Inspection: documentation of health		
authority designation, contract, billing records, sick		
call request form, a health record, clinical provider		į
schedules, current credentials/licensure		İ
IV-C-004 Personnel Qualifications/Credentials	Compliant	
Correctional or other personnel who do not have health care		1
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		i i
involve the administration of medication, the following of]
standing orders as authorized by the responsible health care		l l
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.		
	ļ	j
Visual Inspection: health records, completed		
medication administration form, personnel records,	ł	
copies of current credentials or licensure,		
documentation of compliance with standing orders,]
health record entries, staff training records		}
IV-C-005 24 Hour Care	Compliant -staff training records	
Written policy, procedure, and practice ensure that	are kept up and done yearly.	
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		l.
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		i
	1	
of correctional or other non-health personnel except in		
Visual Inspection: designated facility, provider lists,		
transportation logs		
	Compliant	
IV-C-006 Health Screens	Compliant	
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	j	ļ
documentation of a health screening within the previous 90 days.		ļ
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		
Health Care Screening form (IV-C-006-A) provided by DPS&C. The purpose of the health screening is to protect newly admitted		
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		
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		
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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: 1. Current medical, dental or behavioral health problems and communicable diseases;		
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: 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;		
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: 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;		
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: 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;		
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: 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;		

Response



- a. Appearance and behavior;
- b. Body deformities and other physical abnormalities;
- c. Ease of movement;
- d. Current physical traumas or characteristics and a determination of whether or not the offender should be recommended for immediate transfer to the DS&C for appropriate care;
- e. Any physical impairment (hearing, vision, mobility) or other disability which would impede the offender's access to programs or services. Offenders identified with such an impairment or disability shall be transferred to the DPS&C for further evaluation and determination of appropriate housing placement. [Reference 2008 Resolution Agreement: US DOJ and LA DPS&C.]
 9. Current health insurance.

Visual Inspection: health records, completed screening form, transfer logs

IV-C-006-1 Pregnancy Management

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

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

Compliant

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.

Compliant -has excellent policy/procedure in place for screening, surveillance, treatment and reporting of communicable/infectious diseases. Biohazardous waste is disposed of in accordance with state regulations.

Findings

Visual Inspection: health records, clinic visit logs, documentation of waste pic up and/or cleaning logs

IV-C-008 Annual TB Testing

Written policy, procedure and practice require annual testing or medical evaluation for signs and/or symptoms of tuberculosis on all offenders. Annual TB testing will be provided at no cost to the offender. The facility's designated health care authority shall contact the DPS&C Medical Director, telephone number 225-342-1320, when an offender's test for medical signs and/or symptoms of tuberculosis is reported positive. The DPS&C Medical Director will determine if the offender requires physician or mid-level evaluation, based on the reported positive signs or symptoms.

Compliant -Policy for TB testing is good. Forms are utilized to track testing or evaluations.



Compliant	
•	
Compliant -First Aid Kits are avaliable throughout the Facility	
Compliant -Sick call forms are avaliable in all dorms and sent straight to medical when completed.	
Compliant	
	Compliant -Sick call forms are avaliable in all dorms and sent straight to medical when completed.



LA Department of Public Safety and Corrections		BJG Monitoring Report
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-Visual Inspection: health records, documentation of approval of DPS&C's Chief Nursing Officer	Compliant	
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 Visual Inspection: health records, documentation of	Compliant	
staff training, documentation of observation of suicide watches.		
	Findings	Response
IV-C-015 Offender Deaths Written policy, procedure and practice specify and govern the actions to be taken in the event of an offender's death, which includes notification of the coroner of all offender deaths. All attempts to contact the coroner regarding any death shall be thoroughly documented. Such procedures	Compliant -Facility has a policy in place for actions to be taken in the event of an offender's death	

	rillulitys	Response
IV-C-015 Offender Deaths	Compliant -Facility has a policy in	
Written policy, procedure and practice specify and govern	place for actions to be taken in the	
the actions to be taken in the event of an offender's death,	event of an offender's death	
which includes notification of the coroner of all offender		
deaths. All attempts to contact the coroner regarding any		6
death shall be thoroughly documented. Such procedures		
shall also include the reporting requirements as outlined in		
BJG I-C-001. In addition, a written report of all offender		
deaths shall be submitted to DPS&C on Form C-05-001-X		
(via email to catanotify@corrections.state.la.us or via fax to		
225-342-3349).		
223 3 12 33 13).		
Visual Inspection: notification, reporting		
requirements, report to DPS&C		
IV-C-016 Notification	Compliant	
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.	J.	l .



Visual Inspection: notification records

D. HEALTH SERVICES STAFF		
References: ACA CJS 1-4D-02, 1-4D-04, 1-4D-05, 1-4D-07, 1-4D-08, 1-4D-09, 1-4D-10, 1-4D-17, 1-4D-18, Dept. Regs. B-06-001/HC-24/ISD-HCP44, HC-25/IS-D-HCP9, HC-26/IS-D-HCP10, HC-33/AM-D-5	Findings	Response
IV-D-001 Health Care Quarterly Meetings The health authority meets with the facility administrator at least quarterly Visual Inspection: documentation of meetings	Compliant	
IV-D-002 Research Written policy, procedure, and practice prohibit offender participation in pharmaceutical, medical, or cosmetic experiments. This policy does not preclude individual treatment of an offender based on his/her needs using a specific medical procedure that is not generally available.	Compliant	
Visual Inspection: written policy and procedure		
IV-D-003 Health Care Personnel/Job Descriptions Health care staff work in accordance with professional specific job descriptions approved by the health authority.	Compliant -All staff have specific job descriptions on file.	
Visual Inspection: job descriptions		
IV-D-004 Confidentiality of Health Information Information about an offender's health status is confidential. Nonmedical staff only have access to specific medical information on a "need to know" basis in order to preserve the health and safety of the specific offender, other offenders, volunteers, visitors, or correctional staff. An individual health record is maintained for all offenders in accordance with policies and procedures established by the health authority. The health record is made available to, and is used for documentation for all health care personnel. The active health record is maintained separately from the confinement case record and access is controlled. When an offender is transferred to DPS&C or another local facility, the offender's medical record is transferred	Compliant -Only health care staff have access to an offender's medical record which is maintained in the health care office.	
Visual Inspection: health records, completed consent forms, completed refusal forms		
IV-D-005 Informed Consent Informed consent standards of the jurisdiction are observed and documented for offender care in a language understood by the offender. In the case of minors, the information consent of a parent, guardian or legal guardian applies when required by law. Offenders routinely have the right to refuse medical interventions. When health care is rendered against an offender's will, it is in accordance with state laws and regulations. Involuntary administration of psychotropic medications to offenders may only be accomplished by Visual Inspection: health records, completed consent forms, completed refusal forms	procedures and is then required to sign an informed consent or refusal form. This documentation is maintained in the offenders medical record.	
IV-D-006 Emergency Response Emergency medical care, including first aid and basic life support, is provided by all health care professionals and those health-trained correctional staff specifically designated by the facility administrator. All staff responding to health emergencies are trained in CPR. The health authority approves policies and procedures that ensure that emergency supplies and equipment, including automatic external defibrillators (AEDs) are readily available and in working order.	Compliant	



Visual Inspection: verification of training, records and certificates		
IV-D-007 Internal Review/Quality Assurance The health authority approves policies and procedures for identifying and evaluating major risk management events related to offender health care, including offender deaths, preventable adverse outcomes and serious medication errors. Visual Inspection: evaluation of major risk management events	Compliant -Policy is in place for internal reviews upon conclusion of a serious event.	

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

PART V - OFFENDER PROGRAMS AND ACTIVITY

A. OFFENDER OPPORTUNITIES FOR IMPROVEMENT

References: ACA CJS 1-5A-01, Dept. Reg. B-08- 004/PS-F-1	Findings	Response
V-A-001 Volunteers/Registration There is an official registration and identification system for volunteers. Visual Inspection: activity schedules, facility logs	Compliant -A schedule and log of volunteers entering the facility is on file.	
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. Visual Inspection: activity schedules, facility logs	Compliant	



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	Compliant -GED/HiSet programming and CTRP classes are available to the offender population.	
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		
Visual Inspection: activity schedules, facility logs		
V-A-003-1 Educational Programming The DPS&C and the facility encourage educational programming which includes: 1. Adult Basic Education and/or Literacy 2. Industry Based Certification Training 3. Pell-eligible Post-Secondary Training Any planned or proposed programs for education in local jail facilities that house DPS&C offenders shall be submitted to the DPS&C Education Director.	Compliant	
Visual Inspection: activity schedules, facility logs		

B. PROGRAMS		
References: ACA CJS 1-4C-02, 1-5B-01, 1-5B-01-1, 1-5B-01-2, 1-5B-01-3, 1-5B-02, 1-5B-02-1, 1-5B-02-2, 1-5B-04, 1-5C-01, 1-5C-04, 1-5C-06, Dept. Regs A-04-002/PS-D-3, B-02-001/IS-B-1, B-06-001/HC-17/IS-D-HCP7, B-08-005/PS-E-1, B-08-013/PS-C-1, B-09-003/AM-C-2, C-01-012/PS-I-1, C-02-008/OP-C-9, C-02-009/OP-C-7	Findings	Response
V-B-001 Releasing Offenders Procedures for releasing offenders from the facility include, but are not limited to, the following: •Return of personal property, to include any govt. issued ID (i.e., driver's license) that may have been collected from the offender during the intake process. •Provide offender with/and have him/her sign for any reentry transition document envelopes and all its contents. •Provision of a listing of available community resources. •Consideration by the prescribing health care practioner for a provision of a 5-day supply of current maintenance medication (medication prescribed to stabilize a chronic medical or behavioral health illness), along with a prescription for a thirty (30) day of medication upon transfer or discharge. •Prior to release, offenders with serious medical and behavioral health conditions are referred to available community services. Appropriate health information is shared with the new providers in accordance with consent requirements. •Provision of adequate street clothing for indigent offenders. Visual Inspection: completed release forms and documents, facility records and logs, offender records	Compliant -Documentation reviewed that includes all of the required items. Facility provides a seven day supply of prescription medication.	



V-B-002 Visiting Written policy, procedure and practice govern visiting. The number of visitors an offender may receive and the length of the visits may be limited only by the facility's schedule, space and personnel constraints or when the facility administrator can present clear and convincing evidence that such visitation jeopardizes the safety and security of the facility. Conditions under which visits may be denied and visitors may be searched are defined in writing. Provisions are made for special visits in accordance with Dept. Reg. C-02-008. Visual Inspection: activity schedule, facility logs V-B-003 Library Services Written Reading materials shall be available to offenders on a reasonable basis.	
number of visitors an offender may receive and the length of the visits may be limited only by the facility's schedule, space and personnel constraints or when the facility administrator can present clear and convincing evidence that such visitation jeopardizes the safety and security of the facility. Conditions under which visits may be denied and visitors may be searched are defined in writing. Provisions are made for special visits in accordance with Dept. Reg. C-02-008 Visual Inspection: activity schedule, facility logs V-B-003 Library Services Written Reading materials shall be available to offenders on	
of the visits may be limited only by the facility's schedule, space and personnel constraints or when the facility administrator can present clear and convincing evidence that such visitation jeopardizes the safety and security of the facility. Conditions under which visits may be denied and visitors may be searched are defined in writing. Provisions are made for special visits in accordance with Dept. Reg. C-02-008 Visual Inspection: activity schedule, facility logs V-B-003 Library Services Written Reading materials shall be available to offenders on	
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facility. Conditions under which visits may be denied and visitors may be searched are defined in writing. Provisions are made for special visits in accordance with Dept. Reg. C- 02-008 Visual Inspection: activity schedule, facility logs V-B-003 Library Services Written Reading materials shall be available to offenders on	
visitors may be searched are defined in writing. Provisions are made for special visits in accordance with Dept. Reg. C- 102-1018 Visual Inspection: activity schedule, facility logs V-B-003 Library Services Written Reading materials shall be available to offenders on	
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Written Reading materials shall be available to offenders on	-
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Visual Inspection: activity schedule, facility logs	
V-B-004 Religious Programs Compliant -Religious services are	
Written policy, procedure and practice define and provide provided to the offenders.	
reasonable offender opportunity for religious practice.	
Visual Inspection: documentation of offender	
religious activities, activity schedule	
V-B-005 Exercise and Recreation Access Compliant	
Offenders have access to exercise and recreation	
opportunities. Written policy, procedure, and practice	٠
provide for exercise opportunities adequate to ensure major	
muscle activity. Outdoor exercise shall be available on a	
regular basis (at least three times per week-weather permitting) for state inmates. If a state offender requires	
special management or has security supervision needs which	
preclude the opportunity for outdoor exercise at a facility,	
then he shall be transferred to the DPS&C. If a facility	
based on location, or other legitimate concern, does not	
make provision for outdoor exercise, then compensating,	
dedicated exercise facilities of adequate size to provide	
three exercise opportunities per week shall be available.	
Visual Inspection: activity schedule, facility logs	
V-B-006 Transitional Work Program/Standard Compliant	
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	
V-B-007 Participation in Transitional Work Programs Compliant	
Participation in transitional work programs by state	
offenders shall comply with R.S. 15:711 and DPS&C	
Department Regulation No. B-02-001 "Assignment and	
Transfer of Offenders." Specific approval by the Secretary	
of DPS&C is required prior to program assignment of state	
offenders. Refer to Standard Operating Procedures for Offender Transitional Work Programs.	
Visual Inspection: approval for participation by the	
Secretary of DPS&C	
V-B-008 Offender Work Program Compliant	
Participation in offender work programs by state offenders	
shall comply with the provision of R.S. 15:708 (parish jails)	
or R.S. 15:832 (police maintenance).	



Public Safety and Corrections	v.	BJG Monitoring Repo
Visual Inspection: offender voluntary participation, sheriff's approval of work program request, facility logs		
	Findings	Response
V-B-009 Approval for Transitional Work Programs Any Sheriff interested in operation of a TWP facility shall obtain prior approval from the Chief of Operations. Refer to Standard Operating Procedures for Offender Transitional Work Programs.	Compliant	
Visual Inspection: approval of Chief of Operations		
V-B-010 Proposed Expansions Any planned or proposed expansions for transitional work program or jail facilities that house DPS&C offenders shall be submitted to the Secretary of the DPS&C and the Executive Director of the LSA for consideration and approval. Visual Inspection:	Compliant -No Proposed Expansions at this time	
V-B-011 Mail and Correspondence	Compliant -Good policy in place for	
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.	offender mail and correspondence. Mail is inspected for contraband and legal mail is opened in the presence of the offender.	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail		
V-B-012 Packages and Publications Written policy, procedure and practice govern offender access to publications and packages from outside sources.	Compliant -Publications must be ordered and received directly from the publisher. Items are inspected	
Visual Inspection:	for content and if rejected a notice	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail	is sent to the offender in writing.	
C. REENTRY		
References: Dept. Regs. B-01-001/IS-B-6, B-01- 002/BOP3, B-01-004/IS-B-7, B-06-001/HC-40/IS-D- HCP31	Findings	Response
V-C-001 Substance Abuse Programs The facility encourages offender participation in substance abuse programs when available.	Compliant	
Visual Inspection: facility log, activity schedule		
	1	



Compliant -Facility currently

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;
- Where feasible, recommend DPS&C offenders receive 100 hours of pre-release training at a regional reentry center prior to transfer to a TWP, or release from custody.

The local jail facility shall maintain reentry transition document envelops for all DPS&C offenders, which include at a minimum, if applicable:

- 1. Any valid forms of identification;
- 2. Prescriptions and Medicaid card;
- 3. Community service referrals.

Visual Inspection: documentation of employment opportunity, documentation of two forms of identification, residential plan

V-C-003 Pre-Parole Preparation

The facility shall complete Form B-01-004-C, Pre-Parole LARNA II Questionnaire for Local Jail Facilities, and submit via e-mail to DPS&C HQ at LOCALlarna@corrections.state.la.us or by fax to 225-342-0929 within the first two weeks of the month proceeding the scheduled hearing.

Visual Inspection: offender record, completed questionnaire

V-C-004 Parole Board Procedures

The facility Warden or his/her designee, of the local level facility in which the offender is housed, shall be present to provide information to members of the Parole Board regarding the offender's progress and disciplinary infractions during incarceration.

Visual Inspection: offender record, trip log, documentation showing facility Warden or designee presence at parole board

participates in the Standardized Pre-Release Curriculum. Offenders are provided two forms of identification and referral to community services.

Compliant -LARNAs are completed in a timely manner. Completed questionaires on file

Compliant

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
VT-A-001 Access to Courts/Access to Legal Materials Written policy, procedure, and practice ensure the right of offenders to have access to courts. This includes reasonable access to legal reference materials or access to legal or paralegal assistance. Illiterate offenders shall be provided the assistance of a fellow offender or be furnished adequate assistance from the facility staff or other persons who have a legitimate connection with the legal issues being pursued. If an offender's requirements in this area are significant and complex, exceeding the capability of the local facility to meaningfully provide assistance, then the inmate shall be transferred to the DPS&C. Visual Inspection: facility log	offenders have access to legal materials as needed. Logs on file to reflect us of law library.	
VI-A-002 Access to Counsel Written policy, procedure, and practice ensure offenders' confidential access to counsel. Such contact includes, but is not limited to telephone communications, uncensored correspondence and visits.	Compliant	



Visual Inspection: facility log, record of attorney interviews		
VI-A-003 Protection from Abuse Written policy, procedure, and practice protect offenders from personal abuse, corporal punishment, personal injury, disease, property damage, or harassment.	Compliant-Written policy and procedures are in place to ensure offenders are free from protection from abuse.	
Visual Inspection: facility log, incident reports, staff training records		

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

PART VII - ADMINISTRATION AND MANAGEMENT		
A. RECRUITMENT, RETENTION AND PROMOTION		
References: ACA-CJS 1-1A-01, 1-1B-01, 1-1C-01, 1-1C-07, 1-4C-13, 1-4D-05, 1-4D-14, 1-7B-02, 1-7B-04, 1-7B-06, Dorth Borra, A-02, 028, AM 5-22, C-01	Findings	Response
04, 1-7B-06, Dept. Regs. A-02-028/AM-F-22, C-01- 008/OP-A-19		
VII-A-001 Training and Staff Development The facility conducts or participates in a training program which includes orientation for all new employees (appropriate to their job) prior to assuming a position or post. Such training must include: 1. Security procedures; 2. Hostage procedures – including staff roles and safety; 3. Fire and emergency plan/ procedures; 4. Suicide precaution and signs of suicide risks; 5. Use of force policies; 6. Inmate rules and regulations; 7. CPR and first aid; 8. Requirements of the Prison Rape Elimination Act (PREA); 9. Employees whose duties are the care, custody and control of offenders must complete the Peace Officers Standards and Training (POST) Level 3 certification training program, which consists of the ACA core curriculum, within one year of employment.	Compliant -Policy in place regarding training. Employees must successfully complete training prior to employment and annually thereafter. Good documentation in file.	
Visual Inspection: lesson plans, staff training records		



VII-A-002 Weapons Training	Compliant	_	
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			

B. FACILITY ADMINISTRATION		
References: ACA CJS 1-4D-02, 1-7D-01, 1-7D-03, Dept. Reg. C-05-001/AM-I-4	Findings	Response
VII-B-001 Authority There is a statue or constitutional provision authorizing the establishment of the local jail facility or its parent agency.	Compliant	
Visual Inspection:		
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.	Compliant	
Visual Inspection: personnel or training records		
VII-B-003 Independent Financial Audit Written policy, procedure and practice provide for an independent financial audit of the facility. This audit is conducted annually or as stipulated by statute or regulation. Visual Inspection: annual audit	Compliant	
VII-B-004 Facility Insurance Written policy, procedure and practice provide for comprehensive facility insurance coverage.	Compliant	
Visual Inspection: insurance policy		
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.	Compliant -Offender funds are controlled by approved accounting procedure. A print out of offender account on file	
Visual Inspection: offender records		
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.	Compliant -Policy and procedures are in place for all areas of the facility. Administration reviews and updates annually.	
Visual Inspection: annual reviews, dissemination to staff		



VII-B-007 Annual Compliance Statement Written policy, procedure and practice demonstrate that the facility shall submit an annual statement confirming continued compliance with the BJG to the appropriate DPS&C Regional Team Leader. This statement, submitted by January 31st each year, is in writing and shall include: 1. A copy of the current Fire Marshal Report; 2. A copy of the current Health Inspection Report; 3. Any proposed or projected expansions; 4. Any rehabilitative programs that are available; 5. Summary of any re-entry initiatives/programs implemented by the facility.	Compliant	
Visual Inspection: annual statement	- "	
VII-B-008 Monthly Reporting Written policy, procedure and practice ensure that any facility with DPS&C offenders report activities to the Chief of Operations on a monthly basis in accordance with Dept. Reg. C-05-001/AM-I-4. These reports shall be submitted on automated reporting forms provided by the DPS&C, no later than the 15th day of the month for the previous month's activities. Automated reporting shall be completed, by the appropriate DPS&C Regional Team Leader, no later than the 20th day of the month for the previous month's activities.	Compliant	
Visual Inspection: monthly report VII-B-009 Staff Meetings	Compliant -Monthly staff meeting	
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	minutes are on file to show compliance.	
C. REASONABLE ACCOMMODATION		
References: ACA CJS 1-7E-01	Findings	Response
VII-C-001 Facility Equipment/Reasonable Accommodation Reasonable accommodations is made to ensure that all parts of the facility are accessible to the public are accessible and usable by staff and visitors with disabilities.	Compliant -The facility is handicapped-accessible by all staff	,
Visual Inspection:		
INSPE	CTION REPORTS	
DEPARTMENT	Deficiencies	Corrective Action Taken
Fire Manufall	Company to the company of the compan	
Fire Marshall Date of Current Report: 3/24/2022	Capacity , Facility shall limit its population to 186	
Maximum Capacity: 186		
DHH - Health	None	
Date of Current Report: 12/29/21		
Maximum Capacity: 186		
DHH - Retail Food Date of Current Report: 12/29/21	Food not stored six inches off floor	New shelves put in place
	L	





John Bel Edwards GOVERNOR

Office of State Fire Marshal

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

Inspection Report

Report # CB-21-025446-1

Deficient/Cautionary Codes cited.



H. "Butch" Browning FIRE MARSHAL

		Loc	ation	Inform	ation	_			
Inspection Type	Compliance Building Inspection			1	Inspection Date 3/		3/24/20	8/24/2022 4:48:28 PM	
Structure ID	13174	No. of Buildi	ngs	1		Facility Code		J123	
Capacity	186	Year Built		1983		Construction	Туре	Type IE	3 / Type II (222)
Building/Trade Na SAINT MARTIN PA		FORCEMENT		Addres 400 SAI		ARTIN STREE	T, SAINT	MART	INVILLE, LA 70582
		Ov	vner	Informa	tion				
Owner Type		Name			Cont	act Phone	Contac	t Emai	
Municipal Project		SAINT MARTIN PARIS	SH LA	W	(337)	394-2565	RPICAF RG	RD@ST	MARTINSHERIFF.O
Address									
PO BOX 247, SAIN	T MARTINVIL	LE, LA 70582							
		Te	nant	Informa	ation				
Name			Suite	Numbe	r	Floor Numb	er	Squ	are Footage
		Oc	cup	ancy De	tails				
Occupancy Type		Details							
Institutional		INSTITUTIONAL BUIL	DING	TYPE:					
		Deficien	t and	Cautio	nary	Items			
Description						Code Stat	us		Correction Date
		re capacity set by DOC. shall limit its population		36		CAUTIONARY			
			Co	mments	:				
NO APPARENT DI CURRENT CAPAC		NOTED AT TIME OF IN							
		Inst	necto	r Inform	natio	1			
Name: John Che	nevert	Badge Number: 616	-5010		_	ctor Signature	:		er talillanne s
		Lauge Hambert Cro			mope	otor orginaturo			
		Person to whom	req	uiremer	its we	ere explaine	d		
Name:		Title:	•		Signa	- Marie			

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

(800) 554 0006

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

Routine/Renewal

Permit Number 50-03-224	Permit Name St. Martin Parish Corre	Permit Name St. Martin Parish Correctional Center-224			
Name of Establishment St. Martin Parish Correctional Center-224		Owner Name			
Address 400 St. Martin ST St. Mar	tinville, LA 70582	Date 12/29/2021	Time 09:55 AM		

LAC TITLE 51 PART XVIII

Comments:

Per on-site measures due to current COVID surge, full facility access was limited. Inspection report and institution report emailed to csenegal@stmartinsheriff.org.

Number Licensed For		Number in Attendance 187	License Anniversary 12/31/2021	
Sanitarian Name/Print Zachary Gravette	Phone # 337-394-6134	Sanitarian Signature	R.S. # 3175	
The above mentioned violations Correct Critical Violations by	were called to my attention and wer	e explained to me in detail. I hereby agree to Correct Non-Critical Violations	by	
Name/Title Camellia Senegal - Administrative Assistant		Signature of Recipient	ja ja	

DEPARTME	F LOUISIANA NT OF HEALTH PUBLIC HEALTH				
INSTITUT	ION REPORT				
Agency License No. N/A	Agency License No. Anniversary Month				
Name of Establishment ST. MARTIN PARISH CORRECTIONAL CENTER-224	Mailing Address				
Address 400 ST. MARTIN ST					
City, state, Zip Code ST. MARTINVILLE LA 70582					
Type of Facility JAILS 187					
Parish St. Martin	Date Inspected 12/29/2021				
The above establishment has been inspected by a representative of License is Recommended;	his section, and:				
License is Not Recommended; License is Pending Reinspection;					
from the standpoint of sanitation	ZACHARY GRAVETTE	3	1	7	5
LHS 48 (R 7/99)					D 1014



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Retail Food Notice of Violations

Routine Renewal

Permit Number 50-0001233-1	Permit Name SAINT MARTIN PARISH LA	Permit Name SAINT MARTIN PARISH LAW ENF CENTER cafeteria			
Name of Establishment		Owner Name			
SAINT MARTIN PARISH LAW ENF CENTER		SAINT MARTIN PARISH LAW ENF CENTER			
Address		Date	Time		
400 SAINT MARTIN ST SAINT MARTINVILLE, LA 70582		12.29.2021	09:55 AM		

LAC TITLE 51 PART XXIII

by this office.	rnese nems snoun	l be corrected by the next regular inspection or according to the compliance schedule (see below) established
Category	Code Reference	Description of Violations
FOOD PROTECTION	1501	54 - 1501.4 - Food is not stored six (6) inches off the floor. Onions removed from floor of walk-in cooler. [COS]

Comments:

Inspection report emailed to jroberts@stmartinsheriff.org.

NOTICE RS 40:31.38 (ACT 66)

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

Sanitarian Name Print Zachary Gravette	Phone # 337-394-6134	Sanitarian Signature	R.S. # 3175	
The above mentioned violations	were called to my attention and were exp	plained to me in detail. I hereby agree to		
Correct Critical Violations by		Correct Non-Critical Violations by	py	
Name Title Cameilia Senegai - Administrativ	e Assistant	Signature of Recipient	(F)	

Humphrey - LSA Emails 0003407.37

CERTIFIED TREATMENT AND REHABILITATION PROGRAM CERTIFICATION OF CONTINUED COMPLIANCE

Facility: 5+. Martin Parish Correctional Center.
Date: 6-16-2023
Name of Program:
Date of Program Implementation: (3-6-200)
Primary Area of Service Provided:
Education Job Skill Training Values Development and Faith Based Initiatives Treatment Programs Miscellaneous
Program has been certified by DPS&C?
Program application process is consistent with DPS&C existing assessment and classification system? Yes No
Has program curriculum changed during preceding 12 months? Yes No
Is there an objective method used to assess completion? Yes No
Detailed records are maintained on the following:
All offenders who apply. Number of offenders accepted. Number and type of services provided. Offender's completion/termination from program. Yes No Yes No
Is there a formal graduation ceremony for those who complete the program? Yes No
The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.
Monitoring Team Member or BJG Team Member/Leader Date 6/16/02
7. 100