

Department of Public Safety & Corrections  
State of Louisiana

JOHN BEL EDWARDS  
GOVERNOR



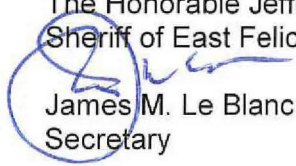
JAMES M. LE BLANC  
SECRETARY

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August 15, 2022

**MEMORANDUM**

**TO:** The Honorable Jeffery E. Travis  
Sheriff of East Feliciana Parish

**FROM:**  James M. Le Blanc  
Secretary

**RE:** East Feliciana Parish Prison

Please see the attached monitoring report regarding the Basic Jail Guidelines (BJG) Recertification inspection that was conducted on March 25, 2022. The following guidelines were found to be not in full compliance.

I-A-004	Housekeeping
II-A-018	Offender Drug Testing
IV-C-006	Health Screens
IV-C-009	Chronic Care Program
IV-D-001	Health Care Quarterly Meetings
IV-D-007	Internal Review/Quality Assurance
VII-B-006	Organization

At this time, the East Feliciana Parish Prison will be placed on semi-annual monitoring visits until compliance is achieved. Thank you for your support of the BJG process.

JML/mwk

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association  
Kenny Sanders, Warden, East Feliciana Parish Prison  
Seth Smith, Chief of Operations  
Timothy Hooper, Warden, LSP  
Elisabeth Roblin, BJG Team Leader



# BJG RECERTIFICATION REPORT

Rev. 03/22/2022 mw

**Facility Name:** E. Feliciana Parish Prison  
**BJG Team Leader & Monitors:** Libby Roblin, BJB Team Leader  
 Justin Coley, BJB Team Monitor  
 Brittany Allen, BJB Team Monitor  
 Amber Vittorio, BJB Team Monitor  
 Britt Rosso, BJB Team Monitor  
**Facility Warden & Email Address:** Kenny Sanders, Warden  
[KSanders@efpso.org](mailto:KSanders@efpso.org)  
**Facility Staff:** Rana Holliday, Administrative Assistant  
 David Brecheen, Captain  
**BJG Inspection Date:** March 25, 2022  
**Previous BJB Inspection Date:** September 10, 2021 (Monitoring)  
**Operational Capacity:** 167  
**Count on Day of Visit:** 167

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

**Concerns or Issues from the previous BJB Monitoring Inspection:**

I-A-004 Housekeeping  
 I-C-006 Operational Capacity  
 IV-C-009 Chronic Care Program  
 IV-C-010 Pharmaceuticals  
 V-C-002 Reentry Programs

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	116	0	116
Number of Local Offenders	51	0	51
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
<b>TOTAL</b>	<b>167</b>	<b>0</b>	<b>167</b>

**Number of DOC Offenders that are:**

Single Bunked 4  
 Double Bunked 112  
 Triple Bunked 0  
**Total** 116

**Number of DOC Offenders that are in Restricted Housing:**

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

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

Month/Year	Off/Off	Off/Off w/sig inj	Offender/Staff	Off/Staff w/sig inj
September 2019	1	0	0	0
October 2019	0	0	0	0
November 2019	0	0	0	0
December 2019	0	0	0	0
January 2020	2	0	0	0
February 2020	0	0	0	0
March 2020	0	0	0	0
April 2020	1	0	0	0
May 2020	1	0	0	0
June 2020	0	0	0	0
July 2020	0	0	0	0
August 2020	0	0	0	0
September 2020	1	0	0	0
October 2020	1	0	0	0
November 2020	0	0	0	0
December 2020	1	0	0	0
January 2021	0	0	0	0
February 2021	0	0	0	0
March 2021	0	0	0	0
April 2021	0	0	0	0
May 2021	0	0	0	0
June 2021	1	0	0	0
July 2021	1	0	0	0
August 2021	0	0	0	0
September 2021	1	0	0	0
October 2021	1	0	0	0
November 2021	1	0	0	0
December 2021	0	0	0	0
January 2022	0	0	0	0
February 2022	0	0	0	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
September 2019	0	0	1	13	0
October 2019	0	0	0	12	0
November 2019	0	0	0	4	0
December 2019	0	0	0	13	6
January 2020	0	0	0	22	10
February 2020	1	0	0	5	1
March 2020	2	1	0	2	2

April 2020	0	0	0	15	0
May 2020	0	0	0	0	0
June 2020	0	0	0	9	8
July 2020	1	0	0	8	5
August 2020	0	0	0	4	4
September 2020	0	0	0	7	2
October 2020	0	0	0	2	11
November 2020	0	0	0	2	2
December 2020	0	0	0	4	0
January 2021	0	0	0	4	2
February 2021	0	0	0	16	14
March 2021	0	0	0	6	8
April 2021	1	0	1	6	1
May 2021	0	0	0	6	28
June 2021	0	0	0	9	7
July 2021	6	0	4	19	33
August 2021	2	0	4	16	39
September 2021	8	0	0	11	19
October 2021	0	0	0	13	5
November 2021	2	0	1	9	5
December 2021	0	0	0	3	2
January 2022	0	0	0	2	0
February 2022	4	1	10	12	43

**GENERAL APPERANCE, CLEANLINESS, AND COMMENTS OF THE FACILITY:**

Evacuation routes were posted. Red lighted exit sign was out in visiting shed. Fire Extinguisher inspections were not current. Flex cuffs were located in the Captains Office not easily accessible or locked. Suggestion was made to place in a central location and secured.

Uniform room had a padlock placed as extra security per last inspection but still suggest the window be tinted where offender cannot see equipment.

**Living Area:**

- **Dorms/Cell Block** - Sheets hanging in cell block area with yet paper covering light fixtures. Several areas had ash trays and burnt wicks. Good cleaning was definitely suggested. Ice chest hold consumable ice were dirty.

**Culinary/Dining:** Menu were placed on bulletins, but not being followed. Kitchen workers picked what they wanted to cook for each meal. Information was provided and all meals for 3 previous meals were on hand. Utensils being used for the day had been signed out but were signed back in while still out. Temperature logs were being utilized. Dates need to be placed on open items. Officer was informed not store any consumables under the ventilation fans. Facility was using broken dishwasher that did not heat. Soap and hand towels were provided at hand washing station. All meals for pervious day were provided.

**Bathrooms:** Tile in showers were broken and need replacing

**Yard Areas:** There was no inventory on weights located in the yard. Weights were scattered all around and could be better organized and cleaned.

**Maintenance:** There were no key control logs. Keys were not tagged. Took officers several minutes to open exit door in C-Block.

**COUNTS:**

- How many formal counts are conducted each shift?  
3 (5:00am, 11:00am, & 5:00pm), and 4 (8:00pm, 10:00pm, 12:00am & 3:00am)
- How many counts are conducted each day?  
7 (5 major counts and 2 minor counts), in addition to these scheduled counts the shift supervisor is responsible for frequent unannounced counts during their shift.
- **Stick outs counts** 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?  
All offenders are counted at designated times which includes those out of the facility on court order, work or any authorized scheduled trip. All offender movement will cease prior to the count beginning and remain suspended until the total count is clear (with the exception of life threatening emergencies). Counts are conducted by a minimum of 2 officers. Each officer counts and then compares their counts, and if count does not match, then a recount immediately begins. If the count still does not match, then the shift supervisor will be notified and appropriate action begins. The CC1 operator is responsible for maintaining a record of all offenders leaving the facility for count purposes. The shift supervisor is responsible for overseeing the count procedure.
  - Does this process insure accountability and safe/secure operation of the facility?  
Yes

**CLASSIFICATION SYSTEM:**

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

If yes,

- What is their classification process to determine who is eligible for trustee status?  
Facility looks at initial classification form, and takes offenders charge, medical status, and conduct into consideration before giving an offender trustee status.
- Does their classification process meet DPS&C, Corrections Services' criteria?  
Yes

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

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
September 2019	6	110	6.60	0
October 2019	5	115	4.35	0
November 2019	13	114	11.40	0
December 2019	12	111	10.81	0
January 2020	9	104	8.65	0
February 2020	15	98	15.31	0
March 2020	5	129	3.88	0

April 2020	22	124	17.74	8
May 2020	11	96	11.46	1
June 2020	6	82	7.32	0
July 2020	16	93	17.20	0
August 2020	5	100	5.00	0
September 2020	8	90	8.89	0
October 2020	5	94	5.32	1
November 2020	2	98	2.04	3
December 2020	8	89	8.99	0
January 2021	7	88	7.95	2
February 2021	9	74	12.16	0
March 2021	6	95	6.32	0
April 2021	5	100	5.00	1
May 2021	5	96	7.25	0
June 2021	8	93	8.60	0
July 2021	5	96	5.21	0
August 2021	11	94	11.70	1
September 2021	14	75	18.67	0
October 2021	12	85	14.12	2
November 2021	11	91	12.09	2
December 2021	11	83	13.25	3
January 2022	8	73	10.96	1
February 2022	11	85	12.94	0

**RULES AND DISCIPLINE:**

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

If yes,

- What is their restoration of good time application process for the offender population?  
Each offender is explained the process during orientation. They are given an application to fill out, once it is reviewed to ensure eligibility, the Warden signs it and it is mailed in to DPS&C headquarters for processing.
- 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:** *At time of the visit, Facility stated that no classes were being held.*

**GED Program**

Number of GED Slots	<u>22</u>
Number of Participants	<u>10</u>
YTD Number of Completions	<u>0</u>

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

GED/Hi-Set  
FDIC Money Smart for Young Adults  
Louisiana Risk Management Model: Phase I & II  
Partners in Parenting  
Thinking for a Change  
UCCI CBI Employment  
Understanding and Reducing Angry Feelings

**LIST ALL OTHER OFFENDER PROGRAMS:**

Church Services/Bible Study

**GRIEVANCE PROCESS:**

- Does grievance process include two levels of review? Yes
- Who are the designees at each level?  
First Level – Administrative Assistant  
Second Level - Warden
- What is the specified time period for response at each level?  
First Level – 30 days from date of receipt  
Second Level – 15 days from date of receipt

**PREA COMPLIANCE:**

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

**OTHER:**

This facility is always a pleasure to visit. Everyone is always in good spirits and positive.

**STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:**

Staff morale perceived well during the visits. Staff was professional and very helpful with the team. Employees stated they felt that their request and suggestions fall on deaf ears.

**OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:**

Offenders complained of out dated living areas and not enough yard time. Offenders further stated that the meals were good and served on time and all laundry was handled with no issues for them.

**RECOMMENDATION:**

While there were positive findings on this visit, the following guidelines were found to be non-compliant:

**I-A-004 Housekeeping:** The BJJ file documentation was incomplete.

**II-A-018 Offender Drug Testing:** The BJG file documentation showed compliance; however, the monthly reports showed that the facility was not in compliance during the months of October 2019, March 2020, and November 2020. Since November 2020, the facility has maintained compliance. Suggest they watch this closely to ensure continued compliance.

**IV-C-006 Health Screens:** The BJG file documentation shows current practices are in compliance; however, the facility practices during 2020 were not in compliance. Suggest the facility keep with the current compliant practices and monitor closely to ensure continued compliance.

**IV-C-009 Chronic Care Program:** The BJG file documentation shows current practices are in compliance; however, the facility practices for previous years were not in compliance. Suggest the facility keep with the current compliant practices and monitor closely to ensure continued compliance.

**IV-D-001 Health Care Quarterly Meetings:** Backup does not demonstrate where the facility is conducting quarterly meeting between the Warden, Admin and Health Authority for any year. Nor does the file have backup of any meeting minutes and/or meeting agenda. Note this was discussed with the facility during visit in June 2021. Team suggested that meetings can be held via zoom and attendance paperwork along with agenda provides proper documentation to show compliance with guideline.

**IV-D-007 Internal Review/Quality Assurance:** Facility is not obtaining the Health Authority's signature of approval on the facility's policies and procedures pertaining to identifying and evaluating major risk management events related to offenders health care, including offender deaths, preventable adverse outcomes and serious medication errors.

**VII-B-006 Organization:** Facility is not completing annual policy reviews per the guideline.

At this time, the monitoring team recommends to continue with semi-annual monitoring visits.





<b>Facility:</b> East Feliciana Parish Prison	<b>Date Conducted:</b> March 25, 2022
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<b>Monitors:</b> Libby Roblin, Justin Coley, Brittany Allen, Britt Rosso, Amber Vittorio
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<b>BASIC JAIL GUIDELINES (BJG)</b>
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<b>PART I - SAFETY</b>
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<b>A. PROTECTION FROM INJURY AND ILLNESS</b>
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<b>References:</b> 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	<b>Findings</b>	<b>Response</b>
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<p><b>I-A-001 Safety/Sanitation/Inspections</b> The facility complies with all applicable laws and regulations of the State Sanitation Officer and the State Fire Marshal. The following inspections are implemented:</p> <ul style="list-style-type: none"> <li>•Weekly sanitation inspections of all facility areas by a qualified departmental staff member.</li> <li>•Weekly inspections of all food service areas, including dining and food preparation areas and equipment.</li> <li>•Water temperature in housing areas is checked and recorded daily.</li> <li>•Comprehensive and thorough monthly inspections by a safety/sanitation specialist for compliance with sanitation, safety and fire prevention standards.</li> <li>•At least annual inspections by the State Sanitation Officer and the State Fire Marshal.</li> </ul> <p><b>Visual Inspection: completed inspection checklists and reports, documentation of corrective action, inspection reports</b></p>	<p><b>Compliant - Some documentation was missing; however, when addressed facility easily provided and fixed on site.</b></p>	
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<p><b>I-A-002 Disposal of Materials</b> Disposal of liquid, solid, and hazardous material complies with applicable government regulations. <b>Visual Inspection: trash disposal contract, completed inspection reports, include documentation that deficiencies were corrected</b></p>	<p><b>Compliant</b></p>	
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<p><b>I-A-003 Vermin and Pests</b> Vermin and pests are controlled. There is a written and implemented plan for the control of vermin and pests. <b>Visual Inspection: pest control contracts, trash disposal contracts, inspection reports</b></p>	<p><b>Compliant</b></p>	
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<p><b>I-A-004 Housekeeping</b> 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. <b>Visual Inspection: inspection reports, completed forms, documentation of correction of identified deficiencies</b></p>	<p><b>Non-compliant - backup in file was not completed and/or signed</b></p>	
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<p><b>I-A-005 Water Supply</b> 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. <b>Visual Inspection: documentation of approval by DHH or local authority, plan for addressing deficiencies</b></p>	<p><b>Compliant - Some documentation was missing; however, when addressed facility easily provided and fixed on site.</b></p>	
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<b>B. VEHICLE SAFETY</b>
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<b>References:</b> Dept. Reg. C-03-003/OP-A-3	<b>Findings</b>	<b>Response</b>
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<p><b>I-B-001 Offender Transport</b> Escorted and unescorted absences of state offenders are governed by R.S. 15:811 and 833 and DPS&amp;C Department Regulation No. C-03-003 "Escorted Absences."</p> <p><b>Visual Inspection: documentation of staff training, documentation of medical, funeral, etc. (outside trips)</b></p>	<p><b>Compliant - team suggested removing old documents from previous re-certifications from file.</b></p>	
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<p><b>C. EMERGENCY PREPAREDNESS/RESPONSE</b></p>		
<p><b>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</b></p>		
	<p><b>Findings</b></p>	<p><b>Response</b></p>
<p><b>I-C-001 Emergency Plan</b> There is a written plan, submitted to the Secretary of DPS&amp;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&amp;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&amp;C offenders. In addition, the facility shall follow the incident reporting procedures as outlined in Dept. Reg. C-05-001/AM-I-4, "Activity Reports, UORs," Category A, B and C.</p> <p><b>Visual Inspection: training records, facility logs, documentation of approval of plan, documentation of annual review, documentation of staff receipt, training on the plan</b></p>	<p><b>Compliant - all documentation was clear and accurate showing compliance with guideline</b></p>	



	Findings	Response
<b>I-C-002 Immediate Release of Offenders</b> 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. <b>Visual Inspection: facility records/logs</b>	Compliant - backup demonstrated adequate photos of exit signs and proper documentation.	
<b>I-C-003 Fire Safety/Code Conformance</b> 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. <b>Visual Inspection: documentation of fire alarm and detection system maintenance and testing, plans for addressing deficiencies</b>	Compliant - backup was in file with all appropriate corrective action reports for each year.	
<b>I-C-004 Facility Furnishings</b> Facility furnishings meet fire-safety-performance requirements. <b>Visual Inspection: Specifications for all furnishings.</b>	Compliant - suggested placing pictures for PI2 to help make the file stronger.	
<b>I-C-005 Flammable, Caustic and Toxic Materials</b> Written policy, procedure and practice govern the control and use of all flammable, toxic and caustic materials. <b>Visual Inspection: Staff training records, offender training records, internal inspection reports. Documentation of incidents that involved FTC materials. Inventories.</b>	Compliant - backup demonstrated thorough compliance with guideline.	
<b>I-C-006 Operational Capacity</b> 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. <b>Visual Inspection: facility count sheets</b>	Compliant - backup showed facility follows proper protocols according to guideline when over operational capacity.	

**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
<b>II-A-001 Control</b> There is 24-hour monitoring and coordinating of the facility's security, life safety, and communications systems. <b>Visual Inspection: facility records/logs, maintenance records, records of staff deployment</b>	Compliant	
<b>II-A-002 Secure Perimeter</b> 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. <b>Visual Inspection: documentation of receipt of job description by staff, documentation of annual review and updating, photos of perimeter controls</b>	Compliant	

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<p><b>II-A-003 Sufficient Staff</b> There is a written document describing the facility's organization and staffing plan. This should include an organizational chart that groups similar functions, services and activities. Each facility meets minimum security staffing requirements which reflect good correctional practice. Sufficient staff, including a designated supervisor, are provided at all times to perform functions relating to the security, custody, and supervision of offenders and, as needed to operate the facility in conformance with the BJC. <b>Visual Inspection: records of staff deployment, facility logs, documentation of annual review of staffing analysis and plan</b></p>	<p><b>Compliant - all backup for plans, charts etc provided in file.</b></p>	
<p><b>II-A-004 Female Offenders and Female Staff</b> When a female offender is housed in a facility, at least one female staff member is on duty at all times. <b>Visual Inspection: records of staff deployment, facility logs</b></p>	<p><b>Non-Applicable</b></p>	
<p><b>II-A-005 No Offender Control Over Others</b> No offender or group of offenders is given control, or allowed to exert authority over other offenders. <b>Visual Inspection: written policy and procedure</b></p>	<p><b>Compliant - policy is clear on this matter</b></p>	
<p><b>II-A-006 Staff Log</b> Correctional staff maintain a permanent log and prepares shift reports that record routine information, emergency situations and unusual incidents. The facility shall maintain written records or logs which continuously document the following information: 1. Personnel on duty; 2. Offender population; 3. Admission and release of offenders; 4. Shift activities; 5. Entry/exit of all visitors including legal/medical; 6. Unusual occurrences or facility emergencies (including but not limited to major and minor disturbances such as riots, hostage situations, fires, escapes, deaths, serious illness or injury and assaults or other acts of violence.) Refer to BJC I-C-001 for reporting requirements to DPS&amp;C <b>Visual Inspection: copies of log book, records of staff deployment</b></p>	<p><b>Compliant - all documentation provided was accurate and well organized.</b></p>	



	Findings	Response
<p><b>II-A-007 Counts</b> 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. <b>Visual Inspection: completed forms, facility records/logs.</b></p>	<p><b>Compliant - Documentation shows facility is conducting 3 counts daily, one formal count is conducted for each shift.</b></p>	
<p><b>II-A-008 Offender Population Management System</b> 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&amp;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; 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 RIG IV-D-004) In addition to the maintenance of the above information, the following shall be collected and forwarded to the DPS&amp;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). <b>Visual Inspection: completed forms, reports, offender record</b></p>	<p><b>Compliant</b></p>	
<p><b>II-A-009 Reception - Legal Commitment and Medical Service</b> 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. <b>Visual Inspection: Completed Admission forms, facility logs.</b></p>	<p><b>Compliant - all backup was complete in file</b></p>	
<p><b>II-A-010 Admissions</b> Admission processes for a newly admitted offender include, 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; ●Providing information about access to health services, copay requirements and submitting grievances.</p>	<p><b>Compliant - all backup was very thorough, accurate and easy to read and understand. Some documentation was missing; however, when addressed facility easily provided and fixed on site.</b></p>	



<p><b>Visual Inspection: intake and admission forms, screening forms, inventory form, receipt form</b></p> <p><b>II-A-011 Out of State Offenders</b> 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&amp;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</p> <p><b>Visual Inspection: offender record, submittal to chief of operations of out-of-state offenders to be housed at the facility, release/transfer documentation</b></p>	<p><b>Non-Applicable - facility does not house out of state offenders</b></p>	
<p><b>II-A-012 Classification System</b> 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"> <li>• Identifies the appropriate level of custody for each offender</li> <li>• Identifies appropriate housing assignment</li> <li>• Identifies the offender's interest and eligibility to participate in available programs</li> </ul> <p><b>Visual Inspection: offender housing records, offender classification records</b></p>	<p><b>Compliant - all backup was very thorough, accurate and easy to read and understand. Some documentation was missing; however, when addressed facility easily provided and fixed on site.</b></p>	



	Findings	Response
<p><b>II-A-013 Prohibition on Youthful Offenders</b> 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"> <li>• Supervision and programming needs of the juveniles to ensure their safety, security, and education;</li> <li>• Classification and housing plans;</li> <li>• Appropriately trained staff.</li> </ul> <p>OAS shall be notified of offenders who are under the age of 18 that are sentenced to the DOC's Correctional Center for transfer to the appropriate institution.</p> <p><b>Visual Inspection: admission and housing, offender records, classification records</b></p>	<p><b>Non-Applicable - facility does not house youthful offenders</b></p>	
<p><b>II-A-014 Separation in Classification</b> Male and female offenders must be housed in separate rooms/cells with reasonable sight and sound separation.</p> <p><b>Visual Inspection: offender housing records, offender classification records, diagram of facility showing male/female housing areas</b></p>	<p><b>Compliant - facility only houses male offenders</b></p>	
<p><b>II-A-016 Photo Identification</b> The facility shall provide each DPS&amp;C offender with photo identification, which the offender shall carry/wear on their person at all times.</p> <p><b>Visual Inspection: Offender identification card/wristband.</b></p>	<p><b>Compliant - all backup was provided in file and showed facility is in compliance with guideline.</b></p>	
<p><b>II-A-017 Drug Free Workplace</b> 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><b>Visual Inspection: drug testing lab fee bills for drug testing of facility employees (including pre-employment, post accident, reasonable suspicion/probable cause, random).</b></p>	<p><b>Compliant</b></p>	
<p><b>II-A-018 Offender Drug Testing</b> 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&amp;C offender population shall be drug tested on a monthly basis.</p> <p><b>Visual Inspection: Facility log, documentation of alcohol/drug testing of offenders.</b></p>	<p><b>Non-Compliant - backup in file showed compliance; however, monthly reports show non compliance with 5% guideline</b></p>	
<p><b>II-A-019 Offender Transfers</b> All transfers of DPS&amp;C offenders to other than DPS&amp;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&amp;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&amp;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><b>Visual Inspection: facility logs, documentation of transfers of DPS&amp;C offenders to other than DPS&amp;C facilities</b></p>	<p><b>Compliant</b></p>	
<p><b>II-A-020 Frequency of Cell Checks - New as of 7/28/2020</b> 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><b>Compliant - team suggest adding name of area the rounds are being made to reports.</b></p>	



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

**II-B-001 Use of Force - Revised as of 12/22/2020**

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

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;

Visual Inspection: facility records, logs

Findings	Response
<p><b>Compliant - all backup demonstrated facility is restricting any necessary force to instances of justifiable self-defense, protection of other, property, prevention of escape, etc.</b></p>	
<p><b>Compliant - all backup demonstrates that staff is properly following policy and procedures in accordance to the guideline.</b></p>	





	Findings	Response
<p><b>II-B-002-1 Use of Restraints for Pregnant Offenders</b> Written policy, procedure, and practice complies with the following requirements: Restraints During Pregnancy-Related Transportation</p> <ul style="list-style-type: none"> <li>•Restraints shall not be used on a pregnant offender (1) during any pregnancy related medical distress, (2) while she is being transported to a medical facility or LCIW unless there are compelling grounds to believe that the offender presents either of the following:                             <ul style="list-style-type: none"> <li>a) An immediate and serious threat of physical harm to herself, staff, or others;</li> <li>b) A substantial flight risk and the offender cannot be reasonable contained by other means.</li> </ul> </li> <li>•If restraints are utilized during transportation, the offender shall not be cuffed</li> </ul> <p><b>Visual Inspection: facility records, logs</b></p>	<p><b>Non-Applicable, facility only houses male offenders</b></p>	
<p><b>II-B-003 Use of Firearms</b> The use of firearms complies with the following requirements.</p> <ul style="list-style-type: none"> <li>•Weapons are subject to stringent safety regulations and inspections.</li> <li>•A secure weapons locker is located outside the secure perimeter of the facility.</li> <li>•Except in emergency situations, firearms and authorized weapons are permitted only in designated areas to which offenders have no access.</li> <li>•Employees supervising offenders outside the facility perimeter follow procedures for the security of weapons.</li> <li>•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.</li> <li>•Employees on duty use only firearms or other security equipment that have been approved by the facility administrator.</li> <li>•Appropriate equipment is provided to facilitate safe unloading and loading of firearms</li> </ul> <p><b>Visual Inspection: training records, safety regulation and inspection reports, photos of equipment used for unloading and reloading</b></p>	<p><b>Compliant - documentation in file shows facility is in compliance with all requirements set in the guideline.</b></p>	
<p><b>II-B-004 Written Reports</b> 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:</p> <ul style="list-style-type: none"> <li>•Discharge of a firearm or other weapon</li> <li>•Use of less lethal devices to control offenders</li> <li>•Use of force to control offenders</li> <li>•Offender(s) remaining in restraints at the end of the shift</li> <li>•Emergency distribution of security equipment</li> </ul> <p><b>Visual Inspection: completed reports, facility records and logs</b></p>	<p><b>Compliant - backup demonstrated all policies and procedures are being followed in accordance to the guideline.</b></p>	

**C. CONTRABAND/SEARCHES**

References: ACA CJS 1-2C-01, 1-2C-04, Dept. Reg. C-02-003/OP-A-8

	Findings	Response
<p><b>II-C-001 Procedures for Searches</b> Written policy, procedure and practice guide searches of facilities and offenders to control contraband. Manual or instrument inspection of body cavities is conducted only when there is reasonable belief that the offender is concealing contraband and when authorized by the facility administrator or designee. Health care personnel will conduct manual or instrument inspections in private.</p> <p><b>Visual Inspection: observation, facility records and logs, offender and staff interviews</b></p>	<p><b>Compliant</b></p>	

**D. ACCESS TO KEYS, TOOLS, UTENSILS**



References: ACA CJS 1-2D-01	Findings	Response
<p><b>II-D-001 Key, Tool, and Utensil Control</b> Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies.</p> <p><b>Visual Inspection: documentation of perpetual inventories</b></p>	<p><b>Compliant - all documentation in file is compliant</b></p>	

**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

<b>III-A-001 Rules and Discipline - Revised as of 12/22/2020</b>	Findings	Response
<p>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&amp;C "Disciplinary Rules and Procedures for Adult Offenders", to the offender population.</p> <p>•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&amp;C for a disciplinary hearing to ensure due process in accordance with La. R.S. 15:571.4. The</p> <p><b>Visual Inspection: offender records, disciplinary records, receipt of disciplinary rules, documentation of orientation</b></p>	<p><b>Compliant - all backup was very thorough, accurate and easy to read and understand. Some documentation was missing; however, when addressed facility easily provided and fixed on site.</b></p>	



<b>PART IV - CARE</b>		
<b>A. FOOD SERVICES</b>		
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
<b>IV-A-001 Food Storage Facilities</b> There are sanitary facilities for the storage of all foods that comply with applicable state and/or federal guidelines. <b>Visual Inspection: DHH inspection reports, internal inspection reports</b>	<b>Compliant - All violations that were found during the inspection were corrected on site.</b>	
<b>IV-A-002 Food Service Facilities</b> Toilet and hand basin facilities are available to food service personnel in the food preparation area. <b>Visual Inspection: DHH inspection reports, photos</b>	<b>Compliant - All violations that were found during the inspection were corrected on site.</b>	
<b>IV-A-003 Food/Dietary Allowances</b> 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. <b>Visual Inspection: annual reviews, nutritionist or dietician qualifications, documentation of at least annual review and quarterly menu evaluations</b>	<b>Compliant</b>	
<b>IV-A-004 Records of Meals Served</b> Written policy, procedure, and practice require that accurate records are maintained of all meals served. <b>Visual Inspection: facility logs</b>	<b>Compliant - backup demonstrates that there was less than 14 hours between evening and morning meals.</b>	
<b>IV-A-005 Denial of Food as Discipline Prohibited</b> Written policy, procedure, and practice preclude the denial of food as a disciplinary measure. <b>Visual Inspection: facility logs</b>	<b>Compliant</b>	
<b>IV-A-006 Food Service Management</b> 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. <b>Visual Inspection: records of meals served and times served, facility logs</b>	<b>Compliant - backup shows facility is in compliance with the guideline</b>	
<b>IV-A-007 Therapeutic/Special Diets</b> 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. <b>Visual Inspection: health records, diet records or forms, documentation of warden's approval of religious diet</b>	<b>Compliant</b>	

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<p><b>IV-A-008 Health Protection for Food Service</b> 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.</p> <p><b>Visual Inspection: inspection reports, completed forms, documentation of daily monitoring for health and cleanliness</b></p>	<p><b>Compliant - backup shows proper training and accommodations are provided to ensure compliance with guideline</b></p>	
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<b>B. HYGIENE</b>		
<b>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</b>		
	<b>Findings</b>	<b>Response</b>
<p><b>IV-B-001 Plumbing Fixtures - Toilets and Washbasins</b> Offenders have access to toilets and washbasins with temperature-controlled hot and cold running water 24 hours per day. Offenders are able to use toilet facilities without staff assistance when they are confined in their cells/sleeping areas.</p> <p><b>Visual Inspection: maintenance records or reports, inspections, documentation of periodic measurement of water temperature, offender grievances</b></p>	<b>Compliant - all backup was provided and complete</b>	
<p><b>IV-B-002 Plumbing Fixtures - Showers</b> Offenders, including those in medical housing units or infirmaries, have access to operable showers with temperature-controlled hot and cold running water 24 hours per day, on a reasonable schedule, (a minimum of three times per week). Water for showers is thermostatically controlled to temperatures ranging from 100 degrees to 120 degrees Fahrenheit.</p> <p><b>Visual Inspection: maintenance records or reports, inspections</b></p>	<b>Compliant</b>	
<p><b>IV-B-003 Clothing</b> The facility has an obligation to provide adequate institutional clothing appropriate to the season and the offender's work status, including adequate changes of clothing to allow for regular laundering. The facility may fulfill this obligation by furnishing clothing or permitting the offender to secure and wear his own clothing, except that when the offender does not provide adequate clothing for himself, the facility shall furnish same.</p> <p><b>Visual Inspection: documentation of clothing issue, documentation of cleaning and storage</b></p>	<b>Compliant - Some documentation was missing; however, when addressed facility easily provided and fixed on site.</b>	
<p><b>IV-B-004 Hygiene/Bedding Issue</b> The facility shall provide adequate bedding and linen, including a clean mattress, sheets, pillow and blanket, not to exclude a mattress with integrated pillow. There are provisions for linen and towel exchange at least weekly. There are provisions for blanket exchange at least monthly.</p> <p><b>Visual Inspection: documentation of issue and exchange</b></p>	<b>Compliant - backup provided was clear and demonstrated facility compliance</b>	
<p><b>IV-B-005 Personal Hygiene</b> Articles and services necessary for maintaining personal hygiene shall be available to all offenders including items specifically needed for females. Such items shall be provided to any offender (male or female) who is indigent. Each offender shall be provided soap, toilet paper, toothbrush, toothpaste and shaving equipment.</p> <p><b>Visual Inspection: documentation that items are provided, list of items available</b></p>	<b>Compliant</b>	

<b>C. CONTINUUM OF HEALTH CARE SERVICES</b>		
<b>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</b>		
	<b>Findings</b>	<b>Response</b>

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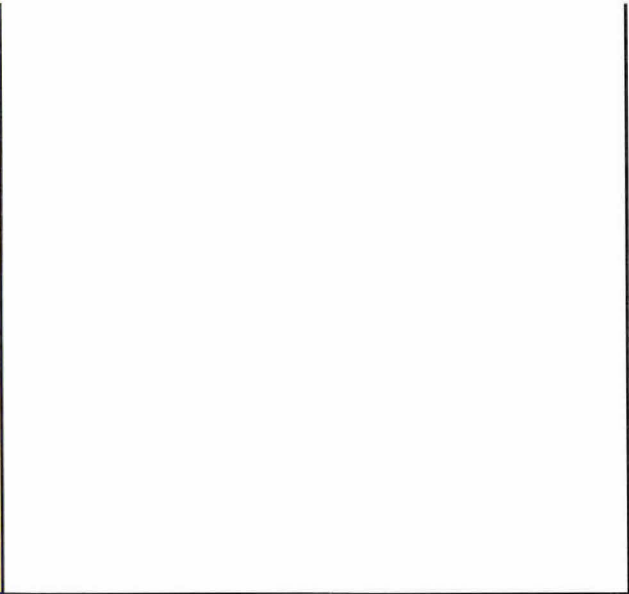
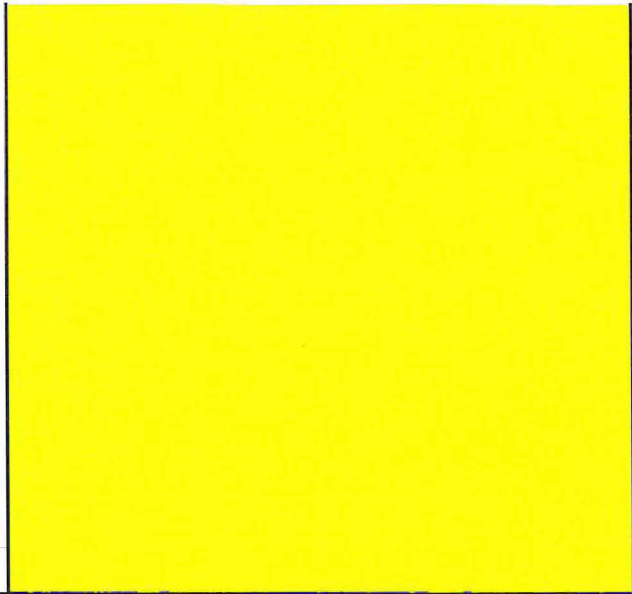
<p><b>IV-C-001 Access to Care/Clinical Services</b> At the time of admission/intake, all offenders are informed about procedures to access health services, including any copay requirements, as well as procedures for submitting grievances. Medical care is not denied based on an offender's ability to pay. The facility has a designated health authority with responsibility for health care services. When the health authority is other than a physician, final clinical judgments rest with a single designated responsible physician.</p> <ul style="list-style-type: none"> <li>•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&amp;C. The requests shall be submitted by the facility staff using the software provided by DPS&amp;C.</li> <li>•In accordance with R.S. 15:831, DPS&amp;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&amp;C. Such fee schedule for DPS&amp;C offenders housed in local jail facilities shall not exceed the DPS&amp;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&amp;C.</li> <li>•DPS&amp;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.</li> </ul> <p><b>Visual Inspection: Documentation that offenders are informed about health care and the grievance system, a health record, medical copayment fee schedule.</b></p>	<p><b>Compliant</b></p>	
<p><b>IV-C-002 Adequate Equipment and Supplies</b> Adequate equipment and supplies for medical services are provided as determined by the health care authority and are in working order.</p> <p><b>Visual Inspection: Photos</b></p>	<p><b>Compliant - basic medical equipment adequate for assessment, diagnosis and treatment</b></p>	



	Findings	Response
<p><b>IV-C-003 Provision of Treatment</b> The facility has a designated health authority responsible for health care services. Requests for health services are triaged by health trained persons to ensure that needs are addressed in a timely manner in accordance with the severity of the illness. Written policy, procedure and practice provide that anyone who provides health care services to offenders be licensed, registered or certified as appropriate to their respective professional disciplines. Such personnel shall only practice as authorized by their license, registration or certification. Standing orders are used in the treatment of offenders only when authorized in writing by a physician or dentist. (Standing orders are used in the treatment of identified conditions and for the on-sight emergency treatment of an offender.)</p> <p><b>Visual Inspection: documentation of health authority designation, contract, billing records, sick call request form, a health record, clinical provider schedules, current credentials/licensure</b></p>	<p><b>Compliant - medical and dental care provided by RICM. Approved standing orders as directed.</b></p>	
<p><b>IV-C-004 Personnel Qualifications/Credentials</b> 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><b>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</b></p>	<p><b>Compliant - 2022 CPR training has not been scheduled as of yet</b></p>	
<p><b>IV-C-005 24 Hour Care</b> 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><b>Visual Inspection: designated facility, provider lists, transportation logs</b></p>	<p><b>Compliant - Acadian is dispatched for emergency care. Further care and treatment is then determined by Acadian Ambulance Services.</b></p>	
<p><b>IV-C-006 Health Screens</b> Written policy, procedure and practice require that all DPS&amp;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&amp;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>	<p><b>Non-Compliant - current practices are compliant including years 2021 and 2022; however, 2020 remains non-compliant. Again, current practices are compliant</b></p>	



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:
  - 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 necessary.

**Non-Applicable**



**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**





	Findings	Response
<p><b>IV-C-007 Communicable Disease and Infection Control Program</b>                      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><b>Visual Inspection: health records, clinic visit logs, documentation of waste pic up and/or cleaning logs</b></p>	<p><b>Compliant - TB testing is done in accordance to DOC regulations. Requested backup in file be on the same offender to better show facility compliance.</b></p>	
<p><b>IV-C-008 Annual TB Testing</b>                      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&amp;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&amp;C Medical Director will determine if the offender requires physician or mid-level evaluation, based on the reported positive signs or symptoms.</p> <p><b>Visual Inspection: health records</b></p>	<p><b>Compliant - TB testing is done in accordance to DOC regulations. Requested backup in file be on the same offender to better show facility compliance.</b></p>	
<p><b>IV-C-009 Chronic Care Program</b>                      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><b>Visual Inspection: health records</b></p>	<p><b>Non-Compliant - Only 2022 documentation is compliant in file.</b></p>	
<p><b>IV-C-010 Pharmaceuticals</b>                      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><b>Visual Inspection: health records, completed medication administration forms, inventories</b></p>	<p><b>Compliant</b></p>	
<p><b>IV-C-011 First Aid Kits</b>                      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><b>Visual Inspection: location of first aid kits within the facility</b></p>	<p><b>Compliant</b></p>	

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<p><b>IV-C-012 Access to Sick Call</b> There is a process for all offenders to initiate requests for health services on a daily basis. Written policy, procedure and practice require that sick call is conducted by a physician and/or other qualified health care personnel who are licensed, registered or certified as appropriate to their respective professional discipline and who practice only as authorized by their license, registration or certification. Sick call shall be available to all offenders as follows:  <ul style="list-style-type: none"> <li>•Facilities with fewer than 100 offenders - 1 time per week;</li> <li>•Facilities with 100 to 300 offenders - 3 times per week;</li> <li>•Facilities with more than 300 offenders - 4 times per week.</li> </ul>                     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.  <b>Visual Inspection: written policy and procedure</b></p>	<p><b>Compliant - Policy was changed since last visit. All sick calls are reviewed by health care personnel.</b></p>	
<p><b>IV-C-013 Infirmiry Care</b> If infirmiry 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&amp;C. It is particularly important that smaller facilities recognize the commitment of the DPS&amp;C to accept into their custody any state offender whose condition is problematic.  <b>Visual Inspection: admission or inpatient records, staffing schedule, completed form C-05-004-B</b></p>	<p><b>Compliant - zero infirmiry care. Offenders are transferred to DPS&amp;C if further medical/dental care is needed.</b></p>	
<p><b>IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, Compassionate Release)</b> Any offender sentenced to DPS&amp;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&amp;C's Chief Nursing Officer via email to MedicalDirector@corrections.state.la.us or by fax to 225-342-7240.  <b>Visual Inspection: health records, documentation of approval of DPS&amp;C's Chief Nursing Officer</b></p>	<p><b>Compliant - file showed no offenders have met the criteria since the last complete audit.</b></p>	
<p><b>IV-C-014 Suicide Prevention and Intervention - Revised as of 7/28/2020</b> 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 <b>annually</b> in the implementation of the program.  <b>Visual Inspection: health records, documentation of staff training, documentation of observation of suicide watches.</b></p>	<p><b>Compliant</b></p>	

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	Findings	Response
<p><b>IV-C-015 Offender Deaths</b> Written policy, procedure and practice specify and govern the actions to be taken in the event of an offender's death, which includes notification of the coroner of all offender deaths. All attempts to contact the coroner regarding any death shall be thoroughly documented. Such procedures shall also include the reporting requirements as outlined in BJG I-C-001. In addition, a written report of all offender deaths shall be submitted to DPS&amp;C on Form C-05-001-X (via email to <a href="mailto:catanotify@corrections.state.la.us">catanotify@corrections.state.la.us</a> or via fax to 225-342-3349).</p> <p><b>Visual Inspection: notification, reporting requirements, report to DPS&amp;C</b></p>	<p><b>Compliant - there have been no offender deaths</b></p>	
<p><b>IV-C-016 Notification</b> 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;</p> <ul style="list-style-type: none"> <li>•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.</li> <li>•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.</li> <li>•Based on extenuating circumstances the Warden or designee may extend the definition of an offender's immediate family member.</li> </ul> <p><b>Visual Inspection: notification records</b></p>	<p><b>Compliant</b></p>	

**D. HEALTH SERVICES STAFF**

**References: ACA CJS 1-4D-02, 1-4D-04, 1-4D-05, 1-4D-07, 1-4D-08, 1-4D-09, 1-4D-10, 1-4D-17, 1-4D-18, Dept. Regs. B-06-001/HC-24/ISD-HCP44, HC-25/IS-D-HCP9, HC-26/IS-D-HCP10, HC-33/AM-D-5**

**IV-D-001 Health Care Quarterly Meetings**

The health authority meets with the facility administrator at least quarterly.

**Visual Inspection: documentation of meetings**

**Findings**

**Non-Compliant - backup does not demonstrate where the facility is conducting quarterly meeting between the Warden, Admin and Health Authority for any year. Nor does the file have backup of any meeting minutes and/or meeting agenda. \*\*Note this was discussed with the facility during visit in June 2021.**

**Response**

**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.

**Visual Inspection: written policy and procedure**

**Compliant - backup shows there have been none**

**IV-D-003 Health Care Personnel/Job Descriptions**

Health care staff work in accordance with professional specific job descriptions approved by the health authority.

**Visual Inspection: job descriptions**

**Compliant**



<p><b>IV-D-004 Confidentiality of Health Information</b> 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. <b>When an offender is transferred to DPS&amp;C or another local facility, the offender's medical record is transferred as well.</b></p> <p><b>Visual Inspection: health records, completed consent forms, completed refusal forms</b></p>	<p><b>Compliant - all offender's health information is held separately to ensure confidentiality</b></p>	
<p><b>IV-D-005 Informed Consent</b> 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&amp;C.</p> <p><b>Visual Inspection: health records, completed consent forms, completed refusal forms</b></p>	<p><b>Compliant - File shows that informed consent is being properly obtained.</b></p>	
<p><b>IV-D-006 Emergency Response</b> 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><b>Visual Inspection: verification of training, records and certificates</b></p>	<p><b>Compliant - All licenses are accurate and up to date. Backup also shows compliance with training.</b></p>	
<p><b>IV-D-007 Internal Review/Quality Assurance</b> 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><b>Visual Inspection: evaluation of major risk management events</b></p>	<p><b>Non-Compliant - backup does not show the Health Authority's signature of approval on the facility's policies and procedures pertaining to identifying and evaluating major risk management events related to offenders health care, including offender deaths, preventable adverse outcomes and serious medication errors.</b></p>	

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<b>E. SEXUAL ASSAULT</b>		
<b>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</b>	<b>Findings</b>	<b>Response</b>
<p><b>IV-E-001 Alleged and Substantiated Sexual Assaults</b> Written policy, procedure and practice provide for the prevention, detection, response, reporting and investigation of alleged and substantiated sexual assaults. (PREA) Information provided to offenders about sexual abuse/assault includes:</p> <ul style="list-style-type: none"> <li>•Prevention/intervention;</li> <li>•Self-protection;</li> <li>•Reporting sexual abuse/assault;</li> <li>•Treatment and counseling.</li> </ul> <p>When the occurrence/allegation of sexual assault or threat involves a DPS&amp;C offender, the facility shall report the incident to DPS&amp;C immediately, as outlined in BJJ I-C-001.</p> <p>An investigation is conducted and documented whenever a sexual assault or threat is reported. Investigative reports, that include DPS&amp;C offenders, shall be submitted to appropriate DPS&amp;C Regional Team Leader on Form C-01-022-E.</p> <p>Victims of sexual assault are referred under appropriate security provisions to a community facility for treatment and gathering of evidence.</p> <p><b>Visual Inspection: documentation of reports to DPS&amp;C, investigative reports</b></p>	<p><b>Compliant - all backup included in file shows guideline is being followed.</b></p>	

<b>PART V - OFFENDER PROGRAMS AND ACTIVITY</b>		
<b>A. OFFENDER OPPORTUNITIES FOR IMPROVEMENT</b>		
<b>References: ACA CJS 1-5A-01, Dept. Reg. B-08-004/PS-F-1</b>	<b>Findings</b>	<b>Response</b>
<p><b>V-A-001 Volunteers/Registration</b> There is an official registration and identification system for volunteers.</p> <p><b>Visual Inspection: activity schedules, facility logs</b></p>	<p><b>Compliant - facility is following proper procedure according to the guideline</b></p>	
<p><b>V-A-002 Volunteer Services</b> A current schedule of volunteer services is available to all offenders and is posted in appropriate areas of the facility.</p> <p><b>Visual Inspection: activity schedules, facility logs</b></p>	<p><b>Compliant - facility is following proper procedure according to the guideline</b></p>	
<p><b>V-A-003 Programs and Services</b> Written policy, procedure and practice provide for the availability of offender programs, services and counseling. Such programming may be obtained from acceptable internal or external sources which should include, at a minimum, assistance in obtaining individualized educational program instruction at a variety of levels.</p> <p>The local jail facility shall maintain class files on all DPS&amp;C approved programming, whether the program is administered by DPS&amp;C or other staff. The class files should include at a minimum:</p> <ol style="list-style-type: none"> <li>1. Screening of offender(s) for program placement;</li> <li>2. Offender application to program;</li> <li>3. Program sign-in sheets and/or attendance rosters;</li> <li>4. Signed copy of CTRP credit forms;</li> <li>5. Documentation for staff oversight if program is not administered and/or overseen by DPS&amp;C staff.</li> </ol> <p><b>Visual Inspection: activity schedules, facility logs</b></p>	<p><b>Compliant</b></p>	

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<p><b>V-A-003-1 Educational Programming</b> The DPS&amp;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&amp;C offenders shall be submitted to the DPS&amp;C Education Director.</p> <hr/> <p><b>Visual Inspection: activity schedules, facility logs</b></p>	<p><b>Compliant - all backup is accurate and organized</b></p>	
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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
<p><b>V-B-001 Releasing Offenders</b> Procedures for releasing offenders from the facility include, but are not limited to, the following:</p> <ul style="list-style-type: none"> <li>•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.</li> <li>•Provide offender with/and have him/her sign for any reentry transition document envelopes and all its contents.</li> <li>•Provision of a listing of available community resources.</li> <li>•Consideration by the prescribing health care PR actioner for a provision of a 5-day supply of current maintenance medication (medication prescribed to stabilize a <b>chronic</b> medical or behavioral health illness), along with a prescription for a thirty (30) day of medication upon transfer or discharge.</li> <li>•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.</li> <li>•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.</li> </ul> <p><b>Visual Inspection: completed release forms and documents, facility records and logs, offender records</b></p>	<b>Compliant - all documentation is organized</b>	
<p><b>V-B-002 Visiting</b> 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.</p> <p><b>Visual Inspection: activity schedule, facility logs</b></p>	<b>Compliant - complete and accurate documentation</b>	
<p><b>V-B-003 Library Services</b> Written Reading materials shall be available to offenders on a reasonable basis.</p> <p><b>Visual Inspection: activity schedule, facility logs</b></p>	<b>Compliant</b>	
<p><b>V-B-004 Religious Programs</b> Written policy, procedure and practice define and provide reasonable offender opportunity for religious practice.</p> <p><b>Visual Inspection: documentation of offender religious activities, activity schedule</b></p>	<b>Compliant - backup shows offenders are provided with opportunity for religious practices</b>	

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<p><b>V-B-005 Exercise and Recreation Access</b> 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&amp;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.</p> <p><b>Visual Inspection: activity schedule, facility logs</b></p>	<p><b>Compliant - offenders have access to exercise on a regular basis.</b></p>	
<p><b>V-B-006 Transitional Work Program/Standard Operating Procedures</b> Transitional Work programs shall be operated in accordance with the Standard Operating Procedures for Offender Work Release Programs established by the DPS&amp;C.</p> <p><b>Visual Inspection: DPS&amp;C monitoring report</b></p>	<p><b>Compliant - no complete audits were able to be conducted due to COVID restrictions.</b></p>	
<p><b>V-B-007 Participation in Transitional Work Programs</b> Participation in transitional work programs by state offenders shall comply with R.S. 15:711 and DPS&amp;C Department Regulation No. B-02-001 "Assignment and Transfer of Offenders." Specific approval by the Secretary of DPS&amp;C is required prior to program assignment of state offenders. Refer to Standard Operating Procedures for Offender Transitional Work Programs.</p> <p><b>Visual Inspection: approval for participation by the Secretary of DPS&amp;C</b></p>	<p><b>Compliant - team suggested facility place the updated regulation in the file.</b></p>	
<p><b>V-B-008 Offender Work Program</b> 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).</p> <p><b>Visual Inspection: offender voluntary participation, sheriff's approval of work program request, facility logs</b></p>	<p><b>Compliant</b></p>	





	Findings	Response
<p><b>V-B-009 Approval for Transitional Work Programs</b> 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. <b>Visual Inspection: approval of Chief of Operations</b></p>	Compliant	
<p><b>V-B-010 Proposed Expansions</b> Any planned or proposed expansions for transitional work program or jail facilities that house DPS&amp;C offenders shall be submitted to the Secretary of the DPS&amp;C and the Executive Director of the LSA for consideration and approval. <b>Visual Inspection:</b></p>	Compliant - no planned/proposed expansions at time of visit.	
<p><b>V-B-011 Mail and Correspondence</b> 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. <b>Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail</b></p>	Compliant	
<p><b>V-B-012 Packages and Publications</b> Written policy, procedure and practice govern offender access to publications and packages from outside sources. <b>Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail</b></p>	Compliant - all backup demonstrates the facility's policy and procedures are in accordance to the guideline.	

<b>C. REENTRY</b>		
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
<p><b>V-C-001 Substance Abuse Programs</b> The facility encourages offender participation in substance abuse programs when available. <b>Visual Inspection: facility log, activity schedule</b></p>	Compliant	
<p><b>V-C-002 Reentry Programs</b> The DPS&amp;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&amp;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&amp;C offenders, which include at a minimum, if applicable: 1. Any valid forms of identification; 2. Prescriptions and Medicaid card; 3. Community service referrals <b>Visual Inspection: documentation of employment opportunity, documentation of two forms of identification, residential plan</b></p>	Compliant - facility file demonstrated great documentation. All procedures are being followed and in accordance with the BJJ guideline.	
<p><b>V-C-003 Pre-Parole Preparation</b> 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&amp;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. <b>Visual Inspection: offender record, completed questionnaire</b></p>	Compliant - facility documentation clearly shows compliance with guideline. Team suggested adding policy as primary documentation to file to make it stronger.	



<p><b>V-C-004 Parole Board Procedures</b> 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. <b>Visual Inspection: offender record, trip log, documentation showing facility Warden or designee presence at parole board</b></p>	<p><b>Compliant</b></p>	
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**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><b>VI-A-001 Access to Courts/Access to Legal Materials</b> 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 referred to the State Prison for the Parole and Pardon Council. <b>Visual Inspection: facility log</b></p>	<p><b>Compliant - offenders are being granted access to courts, legal materials, etc in accordance with guideline</b></p>	
<p><b>VI-A-002 Access to Counsel</b> 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. <b>Visual Inspection: facility log, record of attorney interviews</b></p>	<p><b>Compliant</b></p>	
<p><b>VI-A-003 Protection from Abuse</b> Written policy, procedure, and practice protect offenders from personal abuse, corporal punishment, personal injury, disease, property damage, or harassment. <b>Visual Inspection: facility log, incident reports, staff training records</b></p>	<p><b>Compliant - backup in file was clear and accurate</b></p>	



<b>B. FAIR TREATMENT OF OFFENDERS</b>		
References: ACA CJS 1-2A-16, 1-4C-01, 1-6B-01, 1-6B-02, Dept. Reg. B-05-005/OP-C-13		
	<b>Findings</b>	<b>Response</b>
<p><b>VI-B-001 Discrimination</b> 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. <b>Visual Inspection: facility records, grievances, activity logs</b></p>	<b>Compliant - facility had no ARPs since 2019</b>	
<p><b>VI-B-002 Grievance Process</b> 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. <b>Visual Inspection: grievances</b></p>	<b>Compliant - backup shows adequate letter and reports</b>	

<b>PART VII - ADMINISTRATION AND MANAGEMENT</b>		
<b>A. RECRUITMENT, RETENTION AND PROMOTION</b>		
References: ACA-CJS 1-1A-01, 1-1B-01, 1-1C-01, 1-1C-07, 1-4C-13, 1-4D-05, 1-4D-14, 1-7B-02, 1-7B-04, 1-7B-06, Dept. Regs. A-02-028/AM-F-22, C-01-008/OP-A-19		
	<b>Findings</b>	<b>Response</b>
<p><b>VII-A-001 Training and Staff Development</b> 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. <b>Visual Inspection: lesson plans, staff training records</b></p>	<b>Compliant - suggest that backup in file needs to be on same employee to make file stronger by showing compliance with guideline from start to finish.</b>	
<p><b>VII-A-002 Weapons Training</b> 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. <b>Visual Inspection: personnel records, training records</b></p>	<b>Compliant - all security staff is trained on an annual basis</b>	





<b>B. FACILITY ADMINISTRATION</b>		
References: ACA CJS 1-4D-02, 1-7D-01, 1-7D-03, Dept. Reg. C-05-001/AM-I-4	Findings	Response
<b>VII-B-001 Authority</b> There is a statute or constitutional provision authorizing the establishment of the local jail facility or its parent agency.  <b>Visual Inspection:</b>	<b>Compliant</b>	
<b>VII-B-002 Legal Assistance for Staff</b> 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.  <b>Visual Inspection: personnel or training records</b>	<b>Compliant - backup demonstrates compliance with guideline</b>	
<b>VII-B-003 Independent Financial Audit</b> 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.  <b>Visual Inspection: annual audit</b>	<b>Compliant - complete and thorough reports in file</b>	
<b>VII-B-004 Facility Insurance</b> Written policy, procedure and practice provide for comprehensive facility insurance coverage.  <b>Visual Inspection: insurance policy</b>	<b>Compliant - backup shows facility's yearly compliance with guideline</b>	
<b>VII-B-005 Offender Funds</b> 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.  <b>Visual Inspection: offender records</b>	<b>Compliant - All violations that were found during the inspection were corrected on site.</b>	
<b>VII-B-006 Organization</b> 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.  <b>Visual Inspection: annual reviews, dissemination to staff</b>	<b>Non-compliant - file had no backup showing where the facility's policies are reviewed annually per the guideline.</b>	
<b>VII-B-007 Annual Compliance Statement</b> Written policy, procedure and practice demonstrate that the facility shall submit an annual statement confirming continued compliance with the BJJ 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.  <b>Visual Inspection: annual statement</b>	<b>Compliant - Facility has always turned in all annual statements complete and ahead of the deadline.</b>	

Humphrey - LSA Emails  
0003399.37



<p><b>VII-B-008 Monthly Reporting</b> Written policy, procedure and practice ensure that any facility with DPS&amp;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&amp;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&amp;C Regional Team Leader, no later than the 20th day of the month for the previous month's activities.</p> <p><b>Visual Inspection: monthly report</b></p>	<p><b>Compliant - thorough and detailed reports provided as backup. All monthly statistical reports are completed in a timely manner by the facility.</b></p>	
<p><b>VII-B-009 Staff Meetings</b> 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.</p> <p><b>Visual Inspection: staff meeting minutes/notes</b></p>	<p><b>Compliant</b></p>	

<p><b>C. REASONABLE ACCOMMODATION</b></p>		
<p><b>References: ACA CJS 1-7E-01</b></p>	<p><b>Findings</b></p>	<p><b>Response</b></p>
<p><b>VII-C-001 Facility Equipment/Reasonable Accommodation</b> 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.</p> <p><b>Visual Inspection:</b></p>	<p><b>Compliant - pictures provided in file show reasonable accommodations</b></p>	



### INSPECTION REPORTS

DEPARTMENT	Deficiencies	Corrective Action Taken
<p><b>Fire Marshall</b></p> <hr/> <p>Date of Current Report: 10/12/2021 Maximum Capacity: 167</p>	<p>see attached</p>	<p>see attached</p>
<p><b>DHH - Health</b></p> <hr/> <p>Date of Current Report: 03/21/2022 Maximum Capacity: 167</p>	<p>see attached</p>	<p>see attached</p>
<p><b>DHH - Retail Food</b></p> <hr/> <p>Date of Current Report: 03/21/2022</p>	<p>see attached</p>	<p>see attached</p>



John Bel Edwards  
GOVERNOR

### Office of State Fire Marshal

8181 Independence Blvd. Baton Rouge, LA 70806  
(225) 925-4911 (800) 258-5452 Fax (225) 925-4241



H. "Butch" Browning  
FIRE MARSHAL

#### Inspection Report

Report # CB-21-007762-1

Deficient/Cautionary Codes cited.

Location Information			
Inspection Type	Compliance Building Inspection	Inspection Date	10/12/2021 12:12:39 PM
Structure ID	23199	No. of Buildings	3
Capacity	MAIN 167 WORK RELEASE 79	Year Built	1997
Building/Trade Name		Address	
EAST FELICIANA PARISH PRISON		12303 HAYNES STREET, CLINTON, LA 70722	
Owner Information			
Owner Type	Name	Contact Phone	Contact Email
Municipal Project	EAST FELICIANA PARISH POLICE JURY	(225) 683-3313	KSANDER@EFPSO.ORG
Address			
PO BOX 8025, CLINTON, LA 70722			
Tenant Information			
Name	Suite Number	Floor Number	Square Footage
Occupancy Details			
Occupancy Type	Details		
Storage	TYPE OF STORAGE FACILITY: GROUP S-1 (MODERATE HAZARD); STORAGE MATERIALS: AUTOMOBILES		
Deficient and Cautionary Items			
Description	Code Status	Correction Date	
101 (15) 9.11.1 Maintenance and Testing. All automatic sprinkler and standpipe systems required by this Code shall be inspected, tested, and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. (Sprinkler system is last tagged October 2020. Owner shall have sprinkler system inspected in accordance with NFPA 25.)	DEFICIENT	11/12/2021	
101 (15) 7.4.2 Newly introduced upholstered furniture within detention and correctional occupancies shall meet the criteria specified in 10.3.2.1(2) and 10.3.3. (Owner shall remove sheets hanging in cellblocks.)	DEFICIENT	11/12/2021	
RS 40:1574 Owner shall repair rear egress door C Block, currently rear door will not open.	DEFICIENT	11/12/2021	
Comments			
NUMBER OF INMATES PRESENT AT TIME OF INSPECTION-215			
Inspector Information			
Name: Eric Johnson	Badge Number: 467	Inspector Signature:	
Person to whom requirements were explained			
Name: DAVID BRECHEEN	Title: CAPTAIN	Signature:	





John Bel Edwards  
GOVERNOR

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H. "Butch" Browning  
FIRE MARSHAL

### Inspection Report

Report # CB-21-007762-1

### Deficient/Cautious Codes cited.

For questions regarding the contents of this report, please call: (225) 925 4911

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.

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

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

### RULES FOR APPEALING TO THE FIRE MARSHAL BOARD OF REVIEW

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

Sheriff Office  
(225) 683-8572  
(225) 683-3115

**JEFFERY E. TRAVIS**  
SHERIFF AND TAX COLLECTOR  
Parish of East Feliciana  
Post Office Box 8025  
Clinton, Louisiana 70722-0207

Prison  
(225) 683-3113  
(225) 683-3313  
Fax  
(225) 683-3114

Date: January 09, 2022  
To: Seth Smith  
Chief of Operations  
La Dept. of Public Safety and Corrections  
PO Box 94304  
Baton Rouge, Louisiana 70804  
From: Warden Kenny Sanders  
East Feliciana Parish Prison  
P O Box 8025  
12306 Haynes St  
Clinton, LA 70722  
RE: Fire Marshal Report

An inspection of the facility was conducted on October 12, 2021. In the report, three deficiencies were noted and corrected. One of the deficiencies listed was maintenance and testing of the automatic sprinkler and standpipe systems. This inspection had been completed and paperwork has been submitted. The second deficiency that was noted was newly introduced upholstered furniture. Furniture has been removed since the inspection. The third deficiency listed was in regards to C Block door not opening. The door has been checked and is in working order.

  
Warden Kenny Sanders

ks/rh



**STATE OF LOUISIANA  
DEPARTMENT OF HEALTH  
OFFICE OF PUBLIC HEALTH**

**Detention or Incarceration  
Notice of Violations**

Routine/Renewal

Permit Number 19-02-224	Permit Name East Feliciana Parish Prison-224		
Name of Establishment East Feliciana Parish Prison-224		Owner Name	
Address 12306 Haynes ST Clinton, LA 70722		Date 03/21/2022	Time 12:55 PM

**LAC TITLE 51 PART XVIII**

**CRITICAL ITEMS:** These items **MUST BE CORRECTED IMMEDIATELY** (see compliance schedule below). Repeat violations may lead to enforcement actions or permit suspensions.

Category	Code Reference	Description of Violations
Approved Bathing Facilities	101	21 - * There is no hot water at the shower. A-2 showers

**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
Handwashing Lavatories	101	16 - The hand lavatory is in disrepair. A -2 bay 1 sink clogged
Approved Bathing Facilities	101	24 - There is chipped tile in the shower area. Chipped shower towels A1, A2, A3 [Repeat]
Approved Plumbing	101	40 - The floor drains are not properly installed. Replace missing floor drain covers

**Comments:**

Routine

Walls & ceilings not clean - scrap peeling paint/clean residues


-- Leaks under walls A-3

Showers not clean - mildew/scum build up

Replace floor drain covers in cells/dorms

"The Follow-up Inspection date was extended as authorized by Sanitarian Supervisor."

cwilliams@efps.org

Number Licensed For 167	Number in Attendance 167	License Anniversary 02/28/2022
Sanitarian Name/Print Denise Stevenson	Phone # 225-242-4870	Sanitarian Signature 
		R.S. # 1978

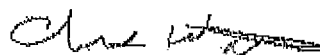
The above mentioned violations were called to my attention and were explained to me in detail. I hereby agree to

Correct Critical Violations by 03/28/2022

Correct Non-Critical Violations by

Signature of Recipient

Name/Title  
Capt Clark Williams, Officer



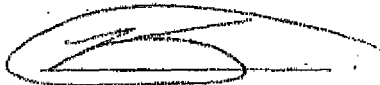
Sheriff Office  
(225) 683-8572  
(225) 683-3115

JEFFERY E. TRAVIS  
SHERIFF AND TAX COLLECTOR  
Parish of East Feliciana  
Post Office Box 8025  
Clinton, Louisiana 70722-0207

Prison  
(225) 683-3113  
(225) 683-3313  
Fax  
(225) 683-3114

Date: March 24, 2022  
To: Whom It May Concern  
From: Warden Kenny Sanders  
East Feliciana Parish Prison  
RE: DHH Inspection

An inspection from the Department of Health and Hospitals was conducted on March 21, 2022. The critical violation concerning the hot water in the shower in A2 has been corrected. The non critical violations concerning the lavatory, clogged sink and floor drains has been corrected. The shower tiles are taken care of when reported.



Warden Kenny Sanders  
East Feliciana Parish Prison

ks/rh

Sheriff Office  
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(225) 683-3115

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**DATE:** 01/07/2021  
**TO:** Elizabeth Roblin  
BJG Team Leader  
**FROM:** **Kenny Sanders, Warden**  
East Feliciana Parish Prison  
**RE:** BJB Annual Compliance Statement

The **East Feliciana Parish Prison** is in continued compliance with the Basic Jail Guidelines as set forth by the Louisiana Sheriffs' Association and the Louisiana Department of Public Safety and Corrections, Corrections Services.

Attached is a copy of our most recent Fire Marshal and Health Officer inspection reports which reflect our operational capacity of 167.

<b>Proposed or Projected Expansions (Yes or No)</b>	<b>No</b>
<b>Number of Beds for Proposed or Projected Expansion</b>	<b>N/A</b>
<b>Estimated Completion Date of Expansion</b>	<b>N/A</b>
<b>GED Program (Yes or No)</b>	<b>Yes</b>
<b>Number of Slots Offered</b>	<b>22</b>
<b>Number of DOC Offender Graduates in 2021</b>	<b>4</b>

**Number of DOC Offenders housed in Restricted Housing on 12/31/21 0**

**Currently our facility offers the following programs for DOC offenders:**

- **List all Certified Treatment and Rehabilitative Programs**

**Risk Management Phase I and II**  
**FDIC Money Management**  
**Understanding and Reducing Angry Feelings**  
**Partners in Parenting**  
**Thinking for a change**

- **List all other Offender Programs**

**Church Services/ Bible Study**

*Emailed 1-21-22 ea*

**Reentry Initiatives/Programs Summary:**

The East Feliciana Parish Prison offers a variety of programming for the offenders to better educate themselves for a productive and successful reentry into society. Due to the COVID 19 pandemic and the need for instructors for the classes, the facility was not able to hold classes for the most part of the year. Despite these challenges the facility was still able to keep the GED classes in limited attendance. Even with the challenges that the facility had to overcome there were four graduates from the GED program. The facility also has added a computer lab that allows offenders to get additional instruction and practice via computer. The facility is still in the process of adding an Electric Certification for small engines class. The offenders are real excited to see this advancement in our programming and are eagerly awaiting for it to be implemented. Even with the challenges that the COVID 19 Pandemic presented this facility has kept the offenders interested and eager to participate in the limited programming that was offered.



**Kenny Sanders, Warden  
East Feliciana Parish Prison**

**Attachments:**

Fire Marshal Inspection  
Health Inspection Reports



**STATE OF LOUISIANA  
DEPARTMENT OF HEALTH  
OFFICE OF PUBLIC HEALTH**

**Retail Food  
Notice of Violations**

Routine/Renewal

Permit Number 19-0001026-1	Permit Name EAST FELICIANA PARISH JAIL Main Kitchen	
Name of Establishment EAST FELICIANA PARISH JAIL	Owner Name EAST FELICIANA PARISH JAIL	
Address 12306 HAYNES ST CLINTON, LA 70722	Date 03/21/2022	Time 01:30 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
TOILETS/HAND WASH FACILITIES	3109	94 - 3109.5 - Soap and/or paper towels are not provided for use at the hand wash lavatory. [COS]

**Comments:**



Routine

Hand sink counter replaced;

Sanitizer in use

**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 Denise Stevenson	Phone # 225-242-4870	Sanitarian Signature 	R.S. # 1978
The above mentioned violations were called to my attention and were explained to me in detail. I hereby agree to		Correct Non-Critical Violations by	
Correct Critical Violations by		Signature of Recipient 	
Name/Title Capt Clark Williams,			

Sheriff Office  
(225) 683-8572  
(225) 683-3115

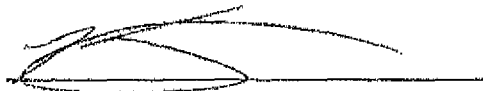
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Post Office Box 8025  
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Prison  
(225) 683-3113  
(225) 683-3313  
Fax  
(225) 683-3114

Date: March 24, 2022  
To: Whom It May Concern  
From: Warden Kenny Sanders  
East Feliciana Parish Prison

RE: DHH Inspection- Retail Food

An inspection from the Department of Health and Hospitals was conducted on March 21, 2022. The violation concerning the availability of paper towels in the kitchen has been resolved. Paper towels have been placed at the hand wash lavatory.



Warden Kenny Sanders  
East Feliciana Parish Prison

ks/rh