# Department of Public Safety & Corrections State of Louisiana

JOHN BEL EDWARDS
GOVERNOR



JAMES M. LE BLANC SECRETARY



September 8, 2022

#### MEMORANDUM

TO:

The Honorable Blaise Smith

Sheriff of St. Mary Parish

FROM:

ames M. Le Blanc

Secretary

RE:

"Basic Jail Guidelines" Monitoring Report

This is to advise that pursuant to the attached monitoring report concerning St. Mary Parish Law Enforcement, DPS&C is recertifying this facility in compliance with the "Basic Jail Guidelines" with annual monitoring.

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

JML/mwk

#### Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association Nick Rogers, Warden, St. Mary Parish Law Enforcement Center Seth Smith, Chief of Operations Kristen Thomas, Warden, LCIW Carmisha Stinson, BJG Team Leader



Department of Public Safety and Corrections

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

St. Mary Parish Law Enforcement Center
in acknowledgement of

Continued Compliance with the Basic Jail Guidelines Process

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

this \_\_\_\_\_\_ day of \_\_\_\_\_ September in the year of our Lord \_\_\_\_\_ 2022\_\_\_\_





## **BJG RECERTIFICATION REPORT**

Rev. 03/22/2022 mw

Facility Name:

St. Mary Parish Law Enforcement Center

**BJG Team Leader & Monitors:** 

Lt. Carmisha Stinson, BJG Team Leader

Facility Warden & Email Address: Nick Rogers, Warden NRogers@stmaryso.com

Facility Staff:

Lt. Kim Cudd, Sgt. David Soignier

**BJG Inspection Date:** 

August 10, 2022

Previous BJG Inspection Date:

December 21, 2021

**Operational Capacity:** 

320

Count on Day of Visit: 195

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

## Concerns or Issues from the previous BJG Monitoring Inspection:

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	68	0	68
Number of Local Offenders	127	0	127
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	195	0	195

#### Number of DOC Offenders that are:

Single Bunked	68	
Double Bunked	0	
Triple Bunked	0	
Total	68	

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

Total	0
Triple Bunked	0
Double Bunked	0
Single Bunked	0

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

Month/Year	Off/Off	Off/Off w/sig inj	Offender/Staff	Off/Staff w/sig inj
January 2021	5	0	0	0
February 2021	10	0	0	Ō
March 2021	2	0	0	0
April 2021	0	0	2	0
May 2021	0	0	0	0
June 2021	0	0	0	0
July 2021	1	0	0	0
August 2021	0	0	0	0
September 2021	5	0	1	0
October 2021	2	0	11	0
November 2021	0	0	0	0
December 2021	3	0	0	0

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

	,	•		• ,	
Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
Dec. 2020	1	1	8	0	19
January 2021	0	0	1	0	32
February 2021	0	3	16	0	48
March 2021	0	0	4	0	39
April 2021	9	0	9	Ö	51
May 2021	0	0	2	0	11
June 2021	17	0	5	2	12
July 2021	0	0	3	0	2
August 2021	1	0	2	1	65
Sept. 2021	0	0	5	0	46
October 2021	1	0	1	0	3
Nov. 2021	0	0	1	. 0	5

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

**Living Area**: The living area was clean, organized, and free of odor.

- Dorms Dorm area were in order and clean.
- Cell Block Cellblock areas were clean and odor free.

**Culinary/Dining**: The tools and sharp objects were on an inventoried locked shadow board in the security office. Tool check in and out can be accessed electronically as well as documented. Meals are brought to dorms in a hot box. The kitchen was very clean and neat. Sample trays were labeled and kept. Cooler and freezer areas were found in good order with temperature log checks documented.

**Bathrooms**: Bathrooms were clean and in order and contained soap and paper towels. All cold and hot water were working. The toilets and showers all in good working condition.

Yard Areas: Yard and recreation areas were adequate. Officers monitor the area and ensure a log is in place to document all recreation times.

**Maintenance**: The maintenance area is secure and all tool storage areas were properly labeled. The tool checks out process meets the requirements of the BJG guidelines. All MSDS sheets were easily accessed. The maintenance worker was very knowledgeable of the area. The area was neat and clean.

#### COUNTS:

- How many formal counts are conducted each shift? 3
- How many counts are conducted each day? 11
- 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 theses counts.
  - > How does the facility accomplish this? All are under direct supervision.
  - > Does this process insure accountability and safe/secure operation of the facility? Yes

#### **CLASSIFICATION SYSTEM:**

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

If yes,

- What is their classification process to determine who is eligible for trustee status? Policy was in place Offenders goes through intake and become screened for eligibility and then reviewed annually.
- Does their classification process meet DPS&C, Corrections Services' criteria? Yes

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

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
January 2021	4	73	5.48%	0
February 2021	5	73	6.85%	1
March 2021	5	74	6.76%	2
April 2021	4	70	5.71%	1
May 2021	3	60	5%	2
June 2021	3	55	5.45%	1
July 2021	3	55	5.45%	0
August 2021	4	59	6.78%	0
September 2021	3	58	5.17%	0
October 2021	3	57	5.26%	0
November 2021	4	62	6.45%	0
December 2021	4	68	5.88%	0

## **RULES AND DISCIPLINE:**

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

If yes,

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

#### **BJG AUTOMATED MONTHLY REPORTING REVIEW:**

Has the facility been inputting the correct info timely? Yes

Does the reported info suggest any issues of concern or improvement? N/A

#### **OFFENDER PROGRAMS:**

### **GED Program**

Number of GED Slots	10	_
Number of Participants	0	
YTD Number of Completions	0	

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

N/A

#### **LIST ALL OTHER OFFENDER PROGRAMS**:

N/A

#### **GRIEVANCE PROCESS:**

- Does grievance process include two levels of review? Yes
- Who are the designees at each level? Warden Nick Rogers, Lt Dusek,
- What is the specified time period for response at each level? 40 days 1st level, 45 days 2nd level

#### PREA COMPLIANCE:

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

#### OTHER:

#### STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Overall staff morale was good. All employees conducted themselves professionally and respectfully. Staff was very knowledgeable about their jobs.

## OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

No complaints were made during the walk through.

## RECOMMENDATION:

Continued annual monitoring visits are recommended.



Facility: St. Mary Parish Law Enforcement Center Date Conducted: August 10, 2022

Monitors: Carmisha Stinson, BJG Team Leader

	GUIDELINES (BJG)	
PART I - SAFETY		
A. PROTECTION FROM INJURY AND ILLNESS		
References: ACA CJS 1-1A-01, 1-1A-02, 1-1A-03, 1-	Findings	Response
1A-04, 1-1A-05, 1-1C-05, 1-4A-03, 1-4A-04		ALCOHOLD CONTRACTOR
I-A-001 Safety/Sanitation/Inspections	Compliant- Sanitation inspections	
The facility complies with all applicable laws and regulations		
of the State Sanitation Officer and the State Fire Marshal.	inspection conducted annually.	
The following inspections are implemented:		
<ul> <li>Weekly sanitation inspections of all facility areas by a</li> </ul>		
qualified departmental staff member.		
Weekly inspections of all food service areas, including		
dining and food preparation areas and equipment.		
<ul> <li>Water temperature in housing areas is checked and</li> </ul>		
recorded daily.		
Comprehensive and thorough monthly inspections by a		
safety/sanitation specialist for compliance with sanitation,		
safety and fire prevention standards.		
•At least annual inspections by the State Sanitation Officer		
and the State Fire Marshal.		
Visual Inspection: completed inspection checklists		
and reports, documentation of corrective action,		
inspection reports		
I-A-002 Disposal of Materials	Compliant	
Disposal of liquid, solid, and hazardous material complies	Compilant	
with applicable government regulations.		
Visual Inspection: trash disposal contract, completed		
inspection reports, include documentation that		
deficiencies were corrected		
I-A-003 Vermin and Pests	Compliant- Facility has pest control	
Vermin and pests are controlled. There is a written and	contracts.	
implemented plan for the control of vermin and pests.	contracts.	
	-	
Visual Inspection: pest control contracts, trash		
disposal contracts, inspection reports	Compliant The facility is seen and	
I-A-004 Housekeeping	Compliant- The facility is very neat an clean. A housekeeping plan is in	
The facility is clean and in good repair. There is a written		
housekeeping plan that provides for the ongoing cleanliness		
Visual Inspection: inspection reports, completed	maintained.	
forms, documentation of correction of identified		
I-A-005 Water Supply	Compliant	
The facility's potable water source and supply is certified at		
least annually by an independent, outside source to be in		
compliance with the State Sanitary Code. The facility		
complies with the requirements of the state health officer.		
There is a specific plan for addressing deficiencies, if any,		
that is approved by the state health officer.		V
Visual Inspection: documentation of approval by		
DHH or local authority, plan for addressing		
deficiencies		

**B. VEHICLE SAFETY** 



References: Dept. Reg. C-03-003/OP-A-3	Findings	Response
I-B-001 Offender Transport  Escorted and unescorted absences of state offenders are governed by R.S. 15:811 and 833 and DPS&C Department Regulation No. C-03-003 "Escorted Absences."  Visual Inspection: documentation of staff training, documentation of medical, funeral, etc. (outside trips)  C. EMERGENCY PREPAREDNESS/RESPONSE  References: ACA CJS 1-1C-01, 1-1C-02, 1-1C-03, 1-1C-04, 1-1C-06, 1-1C-07, 1-7E-01, Dept. Regs. A-04-002/PS-D-3, C-02-001/OP-A-5, C-02-010/OP-B-3, C-05-001/AM-I-4  I-C-001 Emergency Plan  There is a written plan, submitted to the Secretary of DPS&C, that specify the procedures to be followed in situations that threaten facility security. Such situations include but are not limited to riots, hunger strikes, disturbances, taking of hostages, and natural or man-made disasters. These plans are made available to all applicable personnel and are reviewed annually and updated as needed. All facility personnel are trained annually in the	Compliant	Response
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  Visual Inspection: training records, facility logs, documentation of approval of plan, documentation of annual review, documentation of staff receipt, training on the plan		
	Findings	Response
I-C-002 Immediate Release of Offenders  There is a means for the immediate release of inmates from locked areas in case of emergency and there are provisions for a backup system. The facility has exits that are properly positioned, are clear from obstruction, and are distinctly and permanently marked to ensure the timely evacuation of offenders and staff in the event of fire or other emergency.	immediate release of offenders	
Visual Inspection: facility records/logs		
I-C-003 Fire Safety/Code Conformance The facility complies with the requirements of the state fire marshal. There is a specific plan for addressing deficiencies, if any, that is approved by the State Fire Marshal. The State Fire Marshal approves any variances, exceptions, or equivalencies.	Compliant- The facility has annual inspections by the State Fire Marshall and provides corrective action for deficiences noted.	
Visual Inspection: documentation of fire alarm and detection system maintenance and testing, plans for addressing deficiencies		



I-C-004 Facility Furnishings	Compliant	
Facility furnishings meet fire-safety-performance		
requirements.		
Visual Inspection: Specifications for all furnishings.		
visual hispection. Specifications for all furnishings.		
I-C-005 Flammable, Caustic and Toxic Materials	Compliant	
Written policy, procedure and practice govern the control		
and use of all flammable, toxic and caustic materials.		
Visual Inspection: Staff training records, offender		
training records, internal inspection reports.		
Documentation of incidents that involved FTC		
materials. Inventories.		
I-C-006 Operational Capacity		
The number of offenders present does not exceed the		
operational capacity as determined by the state fire marshal		
and state health officer.		
The state fire marshal will determine a capacity primarily		
based upon exiting capabilities. The state health officer will		
AND THE RESERVE OF THE PROPERTY OF THE PROPERT		
determine a capacity based upon the ratio of plumbing		
fixtures to offenders and square footage. The operational		
capacity will be the lower of these two figures.		
Visual Inspection: facility count sheets		

PART II - SECURITY		
A. PROTECTION FROM HARM		
References: ACA CJS 1-2A-01, 1-2A-04, 1-2A-05, 1-2A-06, 1-2A-08, 1-2A-11, 1-2A-13, 1-2A-14, 1-2A-16, 1-2A-17, 1-2A-19, 1-2A-20, Dept. Regs. A-02-008/AM-F-47, B-02-001/IS-B-1, C-02-007/OP-C-3	Findings	Response
II-A-001 Control There is 24-hour monitoring and coordinating of the facility's security, life safety, and communications systems.  Visual Inspection: facility records/logs, maintenance records, records of staff deployment	Compliant- Facility main control provides security, communication, and monitoring of the fire safety system.	
II-A-002 Secure Perimeter The facility's perimeter is controlled by appropriate means to ensure that offenders are secured remain within the perimeter and that access by the general public is denied without proper authorization.  Visual Inspection: documentation of receipt of job description by staff, documentation of annual review and updating, photos of perimeter controls	Compliant	
<b>II-A-003</b> Sufficient Staff There is a written document describing the facility's organization and staffing plan. This should include an organizational chart that groups similar functions, services and activities. Each facility meets minimum security staffing requirements which reflect good correctional practice. Sufficient staff, including a designated supervisor, are provided at all times to perform functions relating to the security, custody, and supervision of offenders and, as needed to operate the facility in conformance with the BJG.	Compliant- Facility keeps logs of staffing by documentation.	



pliant
oliant- Logs are in place in all sof the facility and contain red documentation. All forms completed for notifications of ents to the administration.

	Findings	Response
II-A-007 Counts The facility has a system for physically counting offenders. At least one formal count is conducted for each shift, with no less than 3 counts daily. The system includes strict accountability for offenders assigned to work and other approved temporary absences.  Visual Inspection: completed forms, facility records/logs.	Compliant- Offenders are counted 9 times daily and logged when offenders are out on trips or work detail. Counts are conducted 3 times a day and 6 times at night.	



II-A-008 Offender Population Management System	Compliant- All required	
There is an offender population management process that	documentation is maintained on	
includes records on the admission, processing, and release	offenders. Documentation is	
of offenders. Written policy, procedure, and practice	submitted to Pre-Class officer for	
provide for offender case record management that includes	time computation. Upon transfer	
at a minimum, maintenance of the following documents and	the offender record follows him and	10
information. This offender record and any reentry	a record is completed as	
transition envelops shall be transferred with the offender at		
such time the offender is transferred to another local or		
DPS&C facility.		
1. Master prison form;		
2. Bill of Information and Court Minutes OR Uniform		
Commitment Order;		
3. One photograph;		
4. Reports of disciplinary actions, grievances, incidents, or		
crimes committed while in custody		
In addition to the maintenance of the above information,		
the following shall be collected and forwarded to the DPS&C		
Pre-Class Coordinator either by fax to 225-342-3759 or		
email to DOC-HQ_Supplemental@la.gov.		
1. Master prison form;		
2. Fingerprints: one FBI print card from AFIS;		
3. One photograph;		
4. Bill of Information and Court Minutes or Uniform		
Commitment Order for each conviction (for probation		
violators both the original sentencing minutes and the		
revocation minutes are required);		
5. Jail credit letter;		
6. One Inventory Acknowledgment Form (cash and property		
racaintal		
Visual Inspection: completed forms, reports, offender record		
II-A-009 Reception - Legal Commitment and	Compliant	
Medical Service	Compilant	
The state of the s		
Prior to accepting custody of an offender, staff determine		
that the offender is legally committed to the facility, and		
Visual Inspection: Completed Admission forms,		
facility logs.		
II-A-010 Admissions	Compliant- All forms are filed and	
Admission processes for a newly admitted offender include,	kept on records.	
but are not limited to:		
<ul> <li>Searching of the offender and personal property;</li> </ul>		
•Inventorying and providing secure storage of personal		
property;		
<ul> <li>Providing an itemized receipt for personal property;</li> </ul>		
•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,		
construction and submitting aviousness		
Minus I Yanga ations into be and administration former		
Visual Inspection: intake and admission forms, screening forms, inventory form, receipt form		



II-A-011 Out of State Offenders	Compliant- Facility didn't have any	
The names of any out of state offender (federal or state) to		
be housed at a local jail or privately managed facility shall	of visit	
be submitted to the Chief of Operations prior to the	of visic	
offender(s) entering the State of LA. No such offender shall		
be housed if the offender would be classified as maximum		
and the second s		
custody under the LA DPS&C classification procedures.		
Any offender convicted and sentenced to incarceration by a		
court in another state (federal or state) shall not be		
released in the State of LA. Any out of state offender		
(federal or state) housed in a local jail or privately managed		
facility shall be returned to an appropriate correctional		
facility located within the state where the offender was		
convicted and sentenced for release in that state, prior to		
the offender's release date.		
Visual Inspection: offender record, submittal to		
chief of operations of out-of-state offenders to be		
housed at the facility, release/transfer		

	Findings	Response
II-A-012 Classification System  Written policy, procedure, and practice provide for a written offender classification plan that includes custody required and assignment to appropriate housing. Offender management and housing assignment considers age, gender, legal status, custody needs, special problems and needs, and behavior. All offenders are classified using an objective classification process that at a minimum:  • Identifies the appropriate level of custody for each offender  • Identifies appropriate housing assignment  • Identifies the offender's interest and eligibility to participate in available programs  Visual Inspection: offender housing records,	Compliant- The facility has a in house plan.	
offender classification records  II-A-013 Prohibition on Youthful Offenders  Offenders subject to juvenile jurisdiction are housed in adult facilities only under the conditions established by law. If juveniles are committed to the facility, a plan is in place to provide for the following:  • Supervision and programming needs of the juveniles to ensure their safety, security, and education;  • Classification and housing plans;  • Appropriately trained staff.  OAS shall be notified of offenders who are under the age of 18 that are sentenced to the DPS&C as an adult for transfer to the appropriate institution.  Visual Inspection: admission and housing, offender records, classification records	Compliant- The facility has a in house plan.	
II-A-014 Separation in Classification  Male and female offenders must be housed in separate rooms/cells with reasonable sight and sound separation.  Visual Inspection: offender housing records, offender classification records, diagram of facility	Compliant- The facility does not house female offenders.	



II-A-016 Photo Identification	Compliant- Upon intake all	
The facility shall provide each DPS&C offender with photo	offenders receive an institutional	
identification, which the offender shall carry/wear on their	ID.	
person at all times.		
Visual Inspection: Offender identification		
card/wristband.		
II-A-017 Drug Free Workplace	Compliant- Facility has a well	
Written policy, procedure, and practice provide for a drug-	procedure in place for ensuring a	
free workplace, which includes at a minimum pre-	drug free workplace	
employment testing, post-accident testing, reasonable		
suspicion/probable cause testing, and quarterly random		
testing of all employees.		
Visual Inspection: drug testing lab fee bills for drug		
testing of facility employees (including pre-		
employment, post accident, reasonable		
suspicion/probable cause, random).		
II-A-018 Offender Drug Testing	Compliant- The facility provides	
Written policy, procedure, and practice provide for	documentation and keep logs on	
alcohol/drug testing, both randomly and for probable cause.	offender drug testing that's	
Facility policy will require that a minimum of 5% of the	conducted routinely. Also, the	
DPS&C offender population shall be drug tested on a	facility maintain a 5% requirement	
monthly basis.	of the guideline.	
Visual Inspection: Facility log, documentation of		
alcohol/drug testing of offenders.		
II-A-019 Offender Transfers	Compliant- Facility has forms in	
All transfers of DPS&C offenders to other than DPS&C	place for offender transfers.	
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 LocalJailTranfers@la.gov.		
Offenders should not be transferred to other than DPS&C		
facilities within 60 days of release, unless for disciplinary		
reasons.		
An offender scheduled for an appearance before the		
Committee on Parole shall not be transferred prior to the		
scheduled hearing date. However, if the transfer is deemed		
unavoidable by the Warden due to security concerns, the Warden shall obtain prior approval for an exception from		
the DPS&C Chief of Operations or designee. Staff from the		
Visual Inspection: facility logs, documentation of		
transfers of DPS&C offenders to other than DPS&C		
facilities		
II-A-020 Frequency of Cell Checks	Compliant- The facility conducts a to	
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.		
Visual Inspection: Facility logs, documentation of		
frequency of cell checks.		
B. USE OF PHYSICAL FORCE		



References: ACA CJS 1-2B-01, 1-2B-02, 1-2B-03, 1-2B-05, 1-2B-06, 1-4D-12, Dept. Regs. B-06-001 HC-08/IS-D-HCP33, HC-29/IS-D-HCP40, C-01-008/OP-A-19, C-02-006/OP-A-16, C-03-003/OP-A-3	Findings	Response
TI-B-001 Use of Force  The use of force is restricted to instances of justifiable self-defense, protection of others, protection of property, and prevention of escapes, and then only as a last resort and in accordance with appropriate statutory authority. Written policy, procedure, and practice govern the use of force and provide that force shall never be used as punishment. When an incident involving use of force with a DPS&C offender results in the termination and/or arrest of an employee, the facility shall immediately report the incident to the DPS&C, Office of Adult Services, telephone number 800-803-8748 during normal business hours or the control center at Elayn Hunt Correctional Center, telephone number 800-842-4399 after hours. In addition, the facility shall provide a written report of the incident to the DPS&C, Chief of Operations within three business days.	Compliant- Facility has a well policy on Use of Force. Training is conducted on an annual basis and all reports are clear and concise.	
Visual Inspection: facility records, logs, incident reports, training records		
II-B-002 Use of Restraints Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including:  • Conditions under which restraints may be applied;  • Types of restraints to be applied;  • Identification of a qualified medical or behavioral health professional who may authorize the use of restraints after reaching the conclusion that less intrusive measures are not a viable alternative;  • Monitoring procedures;  • Length of time restraints are to be applied;  Visual Inspection: facility records, logs	Compliant- Policy and procedures are in place to ensure staff is proper trained on the use of restraints. Documentation of restraint use being keep and on file. Also, the facility has a very well organized program going on they have a electrical device that keeps up with logging in/out of restraints.	

THE PROPERTY OF STREET AND ASSESSED AND	Findings	Response
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Visual Inspection: facility records, logs  IT-B-003 Use of Firearms  The use of firearms complies with the following requirements.  Weapons are subject to stringent safety regulations and inspections.  A secure weapons locker is located outside the secure perimeter of the facility.  Except in emergency situations, firearms and authorized weapons are permitted only in designated areas to which offenders have no access.  Employees supervising offenders outside the facility perimeter follow procedures for the security of weapons.  Employees are instructed to use deadly force only after other actions have been tried and found ineffective, unless the employee believes that a person's life is immediately threatened.  Employees on duty use only firearms or other security Visual Inspection: training records, safety regulation and inspection reports, photos of equipment used for unloading and reloading IT-B-004 Written Reports  Written reports are submitted to the facility administrator or designee no later than the conclusion of the tour of duty when any of the following occur:  Discharge of a firearm or other weapon  «Use of less lethal devices to control offenders  «Use of force to control offenders  «Offender(s) remaining in restraints at the end of the shift  Visual Inspection: completed reports, facility records and logs  C. CONTRABAND/SEARCHES  Pefferences: ACA CIS 1-2CAN 1-12-CAN Death Reports	II-B-002-1 Use of Restraints for Pregnant Offenders Written policy, procedure, and practice complies with the following requirements: Restraints During Pregnancy-Related Transportation •Restraints shall not be used on a pregnant offender (1) during any pregnancy related medical distress, (2) while she is being transported to a medical facility or LCIW unless there are compelling grounds to believe that the offender presents either of the following: a) An immediate and serious threat of physical harm to herself, staff, or others; b) A substantial flight risk and the offender cannot be reasonable contained by other means. •If restraints are utilized during transportation, the offender shall not be cuffed behind the back or restrained using	female offenders
IT-B-003 Use of Firearms The use of firearms complies with the following requirements.  Weapons are subject to stringent safety regulations and inspections.  A secure weapons locker is located outside the secure perimeter of the facility.  Except in emergency situations, firearms and authorized weapons are permitted only in designated areas to which offenders have no access.  Employees supervising offenders outside the facility perimeter follow procedures for the security of weapons.  Employees are instructed to use deadly force only after other actions have been tried and found ineffective, unless the employee believes that a person's life is immediately threatened.  Employees on duty use only firearms or other security Visual Inspection: training records, safety regulation and inspection reports, photos of equipment used for unloading and reloading IT-B-004 Written Reports  Written reports are submitted to the facility administrator or designee no later than the conclusion of the tour of duty when any of the following occur:  Discharge of a firearm or other weapon  Use of less lethal devices to control offenders  Offender(s) remaining in restraints at the end of the shift  Visual Inspection: completed reports, facility records and logs  C. CONTRABAND/SEARCHES  Perferences: ACA CIS 1-3/C-011, 1-3/C-014, part Perf.  Perferences: ACA CIS 1-3/C-014, part Perf.  Perferences: AC	waist restraints.	
II-B-004 Written Reports Written reports are submitted to the facility administrator or designee no later than the conclusion of the tour of duty when any of the following occur:  •Discharge of a firearm or other weapon  •Use of less lethal devices to control offenders  •Use of force to control offenders  •Offender(s) remaining in restraints at the end of the shift  Visual Inspection: completed reports, facility records and logs  C. CONTRABAND/SEARCHES  Peferances: ACA CIS 1-2C-01 1-2C-04 Dept. Reg. C-	II-B-003 Use of Firearms The use of firearms complies with the following requirements.  •Weapons are subject to stringent safety regulations and inspections.  •A secure weapons locker is located outside the secure perimeter of the facility.  •Except in emergency situations, firearms and authorized weapons are permitted only in designated areas to which offenders have no access.  •Employees supervising offenders outside the facility perimeter follow procedures for the security of weapons.  •Employees are instructed to use deadly force only after other actions have been tried and found ineffective, unless the employee believes that a person's life is immediately threatened.  •Employees on duty use only firearms or other security Visual Inspection: training records, safety regulation and inspection reports, photos of	are in place for the use of firearms.  No firearms are carried with the secure perimeter of the facility. All officers conduct annual training
Peferences: ACA CIS 1-2C-01 1-2C-04 Dept Peg C	II-B-004 Written Reports Written reports are submitted to the facility administrator or designee no later than the conclusion of the tour of duty when any of the following occur:  •Discharge of a firearm or other weapon  •Use of less lethal devices to control offenders  •Use of force to control offenders  •Offender(s) remaining in restraints at the end of the shift  Visual Inspection: completed reports, facility	well organized system that done
02-003/OP-A-8 Findings Response	References: ACA CJS 1-2C-01, 1-2C-04, Dept. Reg. C	Findings Response



#### II-C-001 Procedures for Searches

Written policy, procedure and practice guide searches of facilities and offenders to control contraband. Manual or instrument inspection of body cavities is conducted only when there is reasonable belief that the offender is concealing contraband and when authorized by the facility administrator or designee. Health care personnel will conduct manual or instrument inspections in private.

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

Visual Inspection: documentation of perpetual

Compliant- Clear and concise policy. All offenders are searched upon return to the facilty. This includes work details, trip, etc.

implemented with kitchen utensils.

Findings	Response
Compliant- The facility keeps up	
with all key and tool control	
electronically. The system shows	
any tools checked out and also the	
time and the officer that checks the	
tools out. This procedure is also	
	Compliant- The facility keeps up with all key and tool control electronically. The system shows any tools checked out and also the time and the officer that checks the

#### PART III - ORDER

inventories

instruments and supplies.

#### A. OFFENDER DISCIPLINE

III-A-001 Rules and Discipline
Prior to being placed in the general population, each
offender is provided with an orientation that includes facility
rules and regulations, including access to medical care and
the process for applying for restoration of good time. The
facility shall follow and provide the DPS&C "Disciplinary
Rules and Procedures for Adult Offenders", to the offender
population

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

•If the Sheriff or local jail administrator believes that a loss of good time is appropriate, then the incident shall be fully documented and the offender transferred to the DPS&C for a disciplinary hearing to ensure due process in accordance with La. R.S. 15:571.4.

The offender must sign and date a statement

Visual Inspection: offender records, disciplinary records, receipt of disciplinary rules, documentation of orientation

	Findings	Response
lity d	Compliant- Facility has proper procedures to notify DPS&C of rule violators who need to be transferred in for disciplinary hearing. The facility also keeps documentation electronically.	
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#### **PART IV - CARE**

#### A. FOOD SERVICES

References: ACA CJA 1-4A-01, 1-4A-02, 1-4A-04,1-4A-06. Dept. Reg. C-06-001/IS-C-1

Findings

Response



IV-A-001 Food Storage Facilities	Compliant- Daily inspections are	
There are sanitary facilities for the storage of all foods that	conducted storage of all food is	
comply with applicable state and/or federal guidelines.	being stored properly.	
Visual Inspection: DHH inspection reports, internal		
inspection reports		
IV-A-002 Food Service Facilities	Compliant- Handwashing stations	
Toilet and hand basin facilities are available to food service	are available in the area as well as	
personnel in the food preparation area.	hand soap and paper towels.	
The state of the s	nanu soap and paper towers.	
Visual Inspection: DHH inspection reports, photos		
IV-A-003 Food/Dietary Allowances	Compliant	
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	1	
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.		
provide a tray/place and densit(s) for each not mean.		
Visual Inspection: annual reviews, nutritionist or		
dietician qualifications, documentation of at least		
annual review and quarterly menu evaluations		
IV-A-004 Records of Meals Served	Compliant- Sample trays are kept	
Written policy, procedure, and practice require that	and labeled for at least 5 days.	
accurate records are maintained of all meals served.	and labeled for at least 5 days.	
Visual Inspection: facility logs		
IV-A-005 Denial of Food as Discipline Prohibited	Compliant	
Written policy, procedure, and practice preclude the denial		
of food as a disciplinary measure.		
Visual Inspection: facility logs		
IV-A-006 Food Service Management	Compliant- Menus are made with at	
Written policy, procedure, and practice require that three	least 2 hot meals daily.	
meals (including two hot meals) are provided under staff		
supervision at regular meal times during each 24-hour		
period, with no more than 14 hours between the evening		
meal and breakfast. Variations may be allowed based on		
weekend and holiday food service demands provided basic		
nutritional goals are met. Offenders shall be provided an		
ample opportunity to eat for each meal.		
Visual Inspection: records of meals served and times		
served, facility logs		
IV-A-007 Therapeutic/Special Diets	Compliant	
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		
Visual Inspection: health records, diet records or		
forms, documentation of warden's approval of		ı
religious diet		



TV-A-008	Health	Protection	for Food	Service

There is adequate protection for all offenders and staff in the facility and for offenders and other persons working in food service. All persons involved in the preparation of the food receive a pre-assignment inspection by appropriate kitchen staff, to ensure freedom from diarrhea, skin infections, and other illnesses transmissible by food or utensils. Offenders working in food services are monitored each day for health and cleanliness by appropriate kitchen staff. All food handlers are instructed to wash their hands upon reporting to duty and after using toilet facilities.

conducts inspections on every shift to ensure proper sanitation practice and proper hygiene is being followed. Signs are posted in the restrooms areas about proper handwashing techniques prior to returning to work areas.

Compliant- Food service staff

Visual Inspection: inspection reports, completed forms, documentation of daily monitoring for health and cleanliness

B. HYGIENE References: ACA CJS 1-4B-01, 1-4B-02, 1-4B-03, 1-**Findings** Response 4B-04, Dept. Reg. B-06-001/HC-34/IS-C-3 IV-B-001 Plumbing Fixtures - Toilets and Compliant- All dorms/pods have Washbasins access to hot/cold water in washbasins as well as Offenders have access to toilets and washbasins with temperature-controlled hot and cold running water 24 handwashing areas and toiletry hours per day. Offenders are able to use toilet facilities areas. DHH performs annual without staff assistance when they are confined in their inspections. cells/sleeping areas. Visual Inspection: maintenance records or reports, inspections, documentation of periodic measurement of water temperature, offender grievances IV-B-002 Plumbing Fixtures - Showers Compliant- All showers are properly Offenders, including those in medical housing units or working in all pods and also have infirmaries, have access to operable showers with running hot/cold water. temperature-controlled hot and cold running water 24 hours per day, on a reasonable schedule, (a minimum of three times per week). Water for showers is thermostatically controlled to temperatures ranging from 100 degrees to 120 degrees Fahrenheit. Visual Inspection: maintenance records or reports, inspections Compliant- The facility has IV-B-003 Clothing The facility has an obligation to provide adequate documentation showing the issuing of clothes to offenders. 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 parmitting the Visual Inspection: documentation of clothing issue, documentation of cleaning and storage IV-B-004 Hygiene/Bedding Issue Compliant- Hygiene and bedding The facility shall provide adequate bedding and linen, documentation in place and is including a clean mattress, sheets, pillow and blanket, not issued to offenders. to exclude a mattress with integrated pillow. There are provisions for linen and towel exchange at least weekly. There are provisions for blanket exchange at least monthly. Visual Inspection: documentation of issue and exchange



IV-B-005	Personal	Hygiene
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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, toothbaste and shaving equipment.

Visual Inspection: documentation that items are provided, list of items available

Compliant- Personal hygiene items are issued also offender can purchase through canteen.

#### C. CONTINUUM OF HEALTH CARE SERVICES

References: ACA CJS 1-2A-14, 1-4C-01, 1-4C-03, 1-4C-04, 1-4C-06, 1-4C-07, 1-4C-08, 1-4C-09, 1-4C-10, 1-4C-13, 1-4C-15, 1-4D-01, 1-4D-03, 1-4D-04, 1-4D-06, Dept. Regs. B-06-001/IS-D-2, HC-01/IS-D-HP13, HC-02/IS-D-HCP14, HC-05/IS-D-HCP20, HC-06A/IS-D-HCP41, HC-06B/IS-D-HCP42, HC-06C/IS-D-HCP46, HC-08/IS-D-HCP33, HC-09A/IS-D-HCP22, HC-11/IS-D-HCP34, HC-13/IS-D-HCP16, HC-17/IS-D-HCP7, HC-38/IS-D-HCP30, B-06-003/AM-C-4, C-02-008/OP-C-9, C-05-001/AM-I-4

Findings Response

#### IV-C-001 Access to Care/Clinical Services

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 Written policy, procedure, and practice provide for the delivery of health care services, including medical, dental and behavioral health services under the control of a designated health care authority who shall be a physician or a licensed or registered health care provider or health agency. Access to these services shall be unimpeded in the sense that correctional staff should not approve or disapprove offender requests for services in accordance with the facility's health care plan. Oral health services include access to diagnostic x-rays, treatment of dental pain, development of individual treatment plans, extractions of non-restorable teeth, and referral to a dental specialist, including an oral surgeon. Specialty non primary clinical services are covered by DPS&C. The requests shall be submitted by the facility staff using the software provided •In accordance with R.S. 15:831, DPS&C offenders may be assessed a co-payment for receiving medical or dental treatment, including prescription or nonprescription drugs. The co-payment fee schedule shall be approved by the DPS&C. Such fee schedule for DPS&C offenders housed in

local jail facilities shall not exceed the DPS&C approved rate in accordance with Dept. Reg. B-06-001 HC-02/IS-D-HCP14.

Compliant- Offenders has access to medical health care services. There is 24/7 medical staff at the facility.



•DPS&C offenders may be required to file a claim with his/her private medical or health care insurer, or any public medical assistance program, under which he/she is covered and from which the offender may make a claim for payment or reimbursement of the cost of any such medical treatment.  Visual Inspection: Documentation that offenders are informed about health care and the grievance system, a health record, medical copayment fee schedule.		
IV-C-002 Adequate Equipment and Supplies Adequate equipment and supplies for medical services are provided as determined by the health care authority and are in working order.	Compliant	
Visual Inspection: Photos		

	Findings	Response
<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-	Compliant- Documentation is kept daily.	
Visual Inspection: documentation of health authority designation, contract, billing records, sick call request form, a health record, clinical provider schedules, current credentials/licensure		
IV-C-004 Personnel Qualifications/Credentials Correctional or other personnel who do not have health care licenses may only provide limited health care services as authorized by the responsible health care authority and in accordance with appropriate training. This would typically involve the administration of medication, the following of standing orders as authorized by the responsible health care authority and the administration of first aid/CPR in accordance with POST training. Written policy, procedure and practice approved by the health authority require dispensing and administering prescribed medications by qualified personnel.	Compliant	
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		



#### IV-C-005 24 Hour Care Compliant 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 TV-C-004 Visual Inspection: designated facility, provider lists, transportation logs IV-C-006 Health Screens Compliant Written policy, procedure and practice require that all DPS&C offenders receive a health screening by health trained or qualified health care personnel upon intake into the facility unless there is documentation of a health screening within the previous 90 days. Screening is conducted in accordance with protocols established by the health authority. If completed by health trained personnel, all intake health screens are to be reviewed by health care personnel as soon as possible. If a facility uses a different screening form, it shall be required to have at a minimum the questions in the Intake Health Care Screening form (IV-C-006-A) provided by DPS&C. The purpose of the health screening is to protect newly admitted offenders who pose a health safety threat to themselves or others from not receiving adequate medical attention. This should include inquiry into: 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; 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.1 Correct booth inc

Visual Inspection: health records, completed

screening form, transfer logs

Response



IV-C-006-1	Pregnancy	Management
TA C OCO T	LICALIGIE	Planagement

Written policy, procedure and practice require that all pregnant offenders have access to obstetrical services by a qualified provider.

The local jail facility shall notify the Department's Medical Director, when a DPS&C offender is pregnant to ensure proper placement or if transfer to a DPS&C facility is necessary.

Visual Inspection: written policy and procedure, health record where pregnant offender received obstetrical services by a qualified provider, notification to DPS&C when DPS&C offender is pregnant, transfer logs

## N/A- The facility does not house female offenders.

## IV-C-007 Communicable Disease and Infection Control Program

Communicable diseases are managed in accordance with a written plan approved by the health authority in consultation with local public health officials. The plan includes for the screening, surveillance, treatment, containment, and reporting of infectious diseases. The plan shall comprise of testing to detect communicable diseases, including TB testing within 14 days of arrival at the facility. If there is documented evidence of TB testing within the last 12 months, new testing is not required. Qualified health care staff will evaluate for signs and symptoms of TB. Infection control measures include the availability of personal protective equipment for staff and hand hygiene promotion throughout the facility. Procedures for handling biohazardous waste and decontaminating medical and dental equipment must comply with applicable local, state Visual Inspection: health records, clinic visit logs, documentation of waste pic up and/or cleaning logs

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

**Findings** 

#### IV-C-008 Annual TB Testing

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

Visual Inspection: health records

Compliant- Policy for TB testing is being followed. Forms are kept on TB testing.



TIL C 000 Cl C . B	
IV-C-009 Chronic Care Program	Compliant
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.	
Visual Inspection: health records	
IV-C-010 Pharmaceuticals	Compliant
Written policy, procedure, and practice approved by the	- Committee - Comm
health authority provide for the proper management of	
pharmaceuticals. Offenders are provided medication as	
Visual Inspection: health records, completed	
medication administration forms, inventories	
IV-C-011 First Aid Kits	Compliant- First aid kits are
First aid kits are available in areas of the facility as	available throughout the facility.
designated by the responsible health care authority and	
shall be immediately accessible to housing units.	
Visual Inspection: location of first aid kits within the	
facility	
IV-C-012 Access to Sick Call	Compliant- All offenders have
There is a process for all offenders to initiate requests for	access to sick call forms that's kept
health services on a daily basis. Written policy, procedure	on the pods then forwarded to
and practice require that sick call is conducted by a	medical.
physician and/or other qualified health care personnel who	
are licensed, registered or certified as appropriate to their	
respective professional discipline and who practice only as	
authorized by their license, registration or certification. Sick	
call shall be available to all offenders as follows:	
• Facilities with fewer than 100 offenders - 1 time per week;	
•Facilities with 100 to 300 offenders - 3 times per week;	
•Facilities with more than 300 offenders - 4 times per	
week.	
If an offender's custody status precludes attendance at sick	
call, then arrangements shall be made to provide such	
services in the place of the offender's detention.	
Visual Inspection: written policy and procedure	
IV-C-013 Infirmary Care	Compliant- Infirmary is very clean
If infirmary care is provided onsite, it complies with	and neat. Facility has Dental
applicable state regulations and local licensing	services available and Mental
requirements. Provision include 24 hour emergency on-call	Health Telemed.
consultation with a physician, dentist and mental health	
professional. Written policy, procedure and practice	
provide that any offender who is identified as requiring a	
medical, dental or mental health need for which care is not	
readily available from the local facility, shall be immediately	
transferred to DPS&C. It is particularly important that	
smaller facilities recognize the commitment of the DPS&C to	
accept into their custody any state offender whose	
Visual Inspection: admission or inpatient records,	
staffing schedule, completed form C-05-004-B	
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suicide watches.

Visual Inspection: health records, documentation of staff training, documentation of observation of



IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, Compassionate Release)  Any offender sentenced to DPS&C custody that meets the medical criteria to be released on Medical Parole, Medical Treatment Furlough or Compassionate Release may be considered after submission of the required documentation in accordance with the corresponding Dept. Reg. to the DPS&C's Chief Nursing Officer via email to MedicalDirector@corrections.state.la.us or by fax to 225-Visual Inspection: health records, documentation of approval of DPS&C's Chief Nursing Officer	Compliant	
IV-C-014 Suicide Prevention and Intervention There is a written suicide prevention and intervention program that is approved by a behavioral health professional who meets the educational and license/certification criteria specified by his/her respective professional discipline. The program must include specific procedures for handling intake, screening, identifying and continually supervising the suicide-prone offender. Observation of the suicide-prone offender will vary from continual observation to intervals no greater than fifteen (15) minutes. All staff with responsibility for offender supervision are trained annually in the implementation of	Compliant- The facility has an electronic sysytem in place that alerts staff on the handling of rounds and suicidal observations.	

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



IV-C-016 Notification	Compliant	
A visit with an immediate family member when the offender		
is admitted to an ICU or trauma center due to a serious		
bodily injury or due to being a terminally ill offender for the		
duration of the offender's admission to the ICU or trauma		
center, unless the Warden or designee provides written		
notice within 6 hours of the offender's admission to the ICU		
or trauma center to any immediate family member seeking		
visitation why such visitation cannot be granted, pursuant to		
La. R.S. 15:833(A) and Dept. Reg. C-02-008;		1
•If the offender's admission to the ICU or trauma center		
occurs between 8:00 pm and 4:00 am, the Warden or		
designee shall provide the required written notification		
within 24 hours of the time the serious bodily injury		
occurred.		
•Pursuant to La. R.S. 15:833(A), the Warden or designee		
shall attempt to notify the offender's immediate family		
Visual Inspection: notification records		

D. HEALTH SERVICES STAFF		
References: ACA CJS 1-4D-02, 1-4D-04, 1-4D-05, 1-4D-07, 1-4D-08, 1-4D-09, 1-4D-10, 1-4D-17, 1-4D-18, Dept. Regs. B-06-001/HC-24/ISD-HCP44, HC-25/IS-D-HCP9, HC-26/IS-D-HCP10, HC-33/AM-D-5	Findings	Response
IV-D-001 Health Care Quarterly Meetings The health authority meets with the facility administrator at	Compliant	
Visual Inspection: documentation of meetings		
IV-D-002 Research Written policy, procedure, and practice prohibit offender participation in pharmaceutical, medical, or cosmetic experiments. This policy does not preclude individual treatment of an offender based on his/her needs using a	Compliant	
Visual Inspection: written policy and procedure	Det .	
IV-D-003 Health Care Personnel/Job Descriptions Health care staff work in accordance with professional specific job descriptions approved by the health authority.	Compliant	
Visual Inspection: job descriptions		
IV-D-004 Confidentiality of Health Information Information about an offender's health status is confidential. Nonmedical staff only have access to specific medical information on a "need to know" basis in order to preserve the health and safety of the specific offender, other offenders, volunteers, visitors, or correctional staff. An individual health record is maintained for all offenders in accordance with policies and procedures established by the health authority. The health record is made available to, and is used for documentation for all health care personnel. The active health record is maintained separately from the confinement case record and access is controlled. When an offender is transferred to DPS&C or another local facility, the offender's medical record is transferred		



Visual Inspection: health records, completed consent forms, completed refusal forms		
IV-D-005 Informed Consent Informed consent standards of the jurisdiction are observed and documented for offender care in a language understood by the offender. In the case of minors, the information consent of a parent, guardian or legal guardian applies when required by law. Offenders routinely have the right to refuse medical interventions. When health care is rendered against an offender's will, it is in accordance with state laws and regulations. Involuntary administration of psychotropic medications to offenders may only be accomplished by DDS&C Visual Inspection: health records, completed consent forms, completed refusal forms	and treatment procedure is then required to sign an informed consent or refusal form. A copy of	
IV-D-006 Emergency Response  Emergency medical care, including first aid and basic life support, is provided by all health care professionals and those health-trained correctional staff specifically designated by the facility administrator. All staff responding to health emergencies are trained in CPR. The health authority approves policies and procedures that ensure that emergency supplies and equipment, including Visual Inspection: verification of training, records and certificates	Compliant	
IV-D-007 Internal Review/Quality Assurance The health authority approves policies and procedures for identifying and evaluating major risk management events related to offender health care, including offender deaths, preventable adverse outcomes and serious medication errors.  Visual Inspection: evaluation of major risk management events	Compliant- Policy is in place for internal reviews upon conclusion of a serious event.	
E. SEXUAL ASSAULT		
References: ACA CJS 1-4D-13, 1-4D-15, 1-4D-16, Dept. Regs. A-04-002/PS-D-3, C-01-022/OP-A-15	Findings	Response
IV-E-001 Alleged and Substantiated Sexual Assaults Written policy, procedure and practice provide for the prevention, detection, response, reporting and investigation of alleged and substantiated sexual assaults. (PREA) Information provided to offenders about sexual abuse/assault includes:  • Prevention/intervention; • Self-protection; • Reporting sexual abuse/assault; • Treatment and counseling. When the occurrence/allegation of sexual assault or threat involves a DPS&C offender, the facility shall report the incident to DPS&C immediately, as outlined in BJG I-C-001. An investigation is conducted and documented whenever a sexual assault or threat is reported. Investigative reports, that include DPS&C offenders, shall be submitted to appropriate DPS&C Regional Team Leader on Form C-01-	Compliant- Written policy and procedures are in place. Staff is properly trained on PREA. Offenders receive PREA training during intake. PREA investigations are conducted according to DPS&C policy.	



Visual Inspection: documentation of reports to DPS&C, investigative reports

#### PART V - OFFENDER PROGRAMS AND ACTIVITY

## A. OFFENDER OPPORTUNITIES FOR IMPROVEMENT

	· ·	
References: ACA CJS 1-5A-01, Dept. Reg. B-08- 004/PS-F-1	Findings	Response
V-A-001 Volunteers/Registration There is an official registration and identification system for volunteers.	Compliant- A log is kept on any volunteers entering the facility.	
Visual Inspection: activity schedules, facility logs		
V-A-002 Volunteer Services  A current schedule of volunteer services is available to all offenders and is posted in appropriate areas of the facility	Compliant	
Visual Inspection: activity schedules, facility logs		
V-A-003 Programs and Services Written policy, procedure and practice provide for the availability of offender programs, services and counseling. Such programming may be obtained from acceptable internal or external sources which should include, at a minimum, assistance in obtaining individualized educational program instruction at a variety of levels. The local jail facility shall maintain class files on all DPS&C approved programming, whether the program is administered by DPS&C or other staff. The class files should include at a minimum:  1. Screening of offender(s) for program placement; 2. Offender application to program; 3. Program sign-in sheets and/or attendance rosters; 4. Signed copy of CTRP credit forms; 5. Documentation for staff oversight if program is not		
V-A-003-1 Educational Programming		
The DPS&C and the facility encourage educational programming which includes:  1. Adult Basic Education and/or Literacy  2. Industry Based Certification Training  3. Pell-eligible Post-Secondary Training  Any planned or proposed programs for education in local jail facilities that house DPS&C offenders shall be submitted to the DPS&C Education Director.		
Visual Inspection: activity schedules, facility logs		

## B. PROGRAMS



References: ACA CJS 1-4C-02, 1-5B-01, 1-5B-01-1, 1-5B-01-2, 1-5B-01-3, 1-5B-02, 1-5B-02-1, 1-5B-02-2, 1-5B-04, 1-5C-01, 1-5C-04, 1-5C-06, Dept. Regs A-04-002/PS-D-3, B-02-001/IS-B-1, B-06-001/HC-17/IS-D-HCP7, B-08-005/PS-E-1, B-08-013/PS-C-1, B-09-003/AM-C-2, C-01-012/PS-I-1, C-02-008/OP-C-9, C-02-009/OP-C-7	Findings	Response
V-B-001 Releasing Offenders Procedures for releasing offenders from the facility include, but are not limited to, the following:  •Return of personal property, to include any govt. issued ID (i.e., driver's license) that may have been collected from the offender during the intake process.  •Provide offender with/and have him/her sign for any reentry transition document envelopes and all its contents.  •Provision of a listing of available community resources.  •Consideration by the prescribing health care practioner for a provision of a 5-day supply of current maintenance medication (medication prescribed to stabilize a chronic medical or behavioral health illness), along with a prescription for a thirty (30) day of medication upon transfer or discharge.  •Prior to release, offenders with serious medical and behavioral health conditions are referred to available Visual Inspection: completed release forms and documents, facility records and logs, offender		
records V-B-002 Visiting Written policy, procedure and practice govern visiting. The number of visitors an offender may receive and the length of the visits may be limited only by the facility's schedule, space and personnel constraints or when the facility administrator can present clear and convincing evidence that such visitation jeopardizes the safety and security of the facility. Conditions under which visits may be denied and visitors may be searched are defined in writing. Provisions are made for special visits in accordance with Dent. Reg. C-02-008.  Visual Inspection: activity schedule, facility logs	Compliant- Visitation is conducted on Kiosk machines.	
V-B-003 Library Services Written Reading materials shall be available to offenders on a reasonable basis. Visual Inspection: activity schedule, facility logs	Compliant-	
V-B-004 Religious Programs Written policy, procedure and practice define and provide reasonable offender opportunity for religious practice. Visual Inspection: documentation of offender religious activities, activity schedule	Compliant	



	To the second se	
V-B-005 Exercise and Recreation Access	Compliant- Recreation areas are	
Offenders have access to exercise and recreation	monitored on a regualr basis.	
opportunities. Written policy, procedure, and practice		
provide for exercise opportunities adequate to ensure major		
muscle activity. Outdoor exercise shall be available on a		
regular basis (at least three times per week-weather		
permitting) for state inmates. If a state offender requires		
special management or has security supervision needs		
which preclude the opportunity for outdoor exercise at a		
facility, then he shall be transferred to the DPS&C. If a		
facility based on location, or other legitimate concern, does		
not make provision for outdoor exercise, then		
compensating, dedicated exercise facilities of adequate size		
to provide three exercise opportunities per week shall be		
Visual Inspection: activity schedule, facility logs		
V-B-006 Transitional Work Program/Standard	Compliant-Policy is in accordance	
Operating Procedures	to DPS&C.	
Transitional Work programs shall be operated in accordance		
with the Standard Operating Procedures for Offender Work		
Dalana Barrasa da Habarrasa da H		
Visual Inspection: DPS&C monitoring report		
V-B-007 Participation in Transitional Work	Compliant	
Programs		
Participation in transitional work programs by state		
offenders shall comply with R.S. 15:711 and DPS&C		
Department Regulation No. B-02-001 "Assignment and		
Transfer of Offenders." Specific approval by the Secretary		
of DPS&C is required prior to program assignment of state		
offenders. Refer to Standard Operating Procedures for		
Offender Transitional Work Programs.		
Visual Inspection: approval for participation by the Secretary of DPS&C		
V-B-008 Offender Work Program	Compliant	
Participation in offender work programs by state offenders	Compilatio	
shall comply with the provision of R.S. 15:708 (parish jails)		
or R.S. 15:832 (police maintenance).		
Visual Inspection: offender voluntary participation,		
sheriff's approval of work program request, facility		
logs		
	Findings	Response
V-B-009 Approval for Transitional Work Programs	Compliant	
Any Sheriff interested in operation of a TWP facility shall	p.	
obtain prior approval from the Chief of Operations. Refer to		
Standard Operating Procedures for Offender Transitional		
Work Programs.		
Visual Inspection: approval of Chief of Operations		
V-B-010 Proposed Expansions	Compliant- No proposed	
Any planned or proposed expansions for transitional work	expansions at this time.	
Any planned or proposed expansions for transitional work		
Any planned or proposed expansions for transitional work program or jail facilities that house DPS&C offenders shall		
Any planned or proposed expansions for transitional work program or jail facilities that house DPS&C offenders shall be submitted to the Secretary of the DPS&C and the Executive Director of the LSA for consideration and		
Any planned or proposed expansions for transitional work program or jail facilities that house DPS&C offenders shall be submitted to the Secretary of the DPS&C and the		



V-B-011 Mail and Correspondence Any Offenders may send and receive mail. Indigent offenders receive a specified postage allowance. Offenders are notified in writing when incoming or outgoing letters are withheld in part or in full. Written policy, procedure, and practice govern offender correspondence.	Compliant- All mail is scanned and inspected for contraband and legal mail is opened in the presence of the offender.	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail		
V-B-012 Packages and Publications Written policy, procedure and practice govern offender access to publications and packages from outside sources. Visual Inspection:	Compliant- Publications must be oredered and received directly from the publisher. Items are inspected for content and if rejected a notice is sent to the offender in writing.	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail	is sent to the offender in writing.	

C. REENTRY		
References: Dept. Regs. B-01-001/IS-B-6, B-01-002/BOP3, B-01-004/IS-B-7, B-06-001/HC-40/IS-D-HCP31	Findings	Response
V-C-001 Substance Abuse Programs The facility encourages offender participation in substance abuse programs when available.	Compliant	
Visual Inspection: facility log, activity schedule		
V-C-002 Reentry Programs  The DPS&C and the facility encourages reentry programming which includes:  1. Employment opportunities through work release;  2. At least two forms of valid identification upon release;  3. The development of a residential plan prior to release;  4. Referral to community based service providers upon release;  5. Where feasible, recommend DPS&C offenders receive 100 hours of pre-release training at a regional reentry center prior to transfer to a TWP, or release from custody. The local jail facility shall maintain reentry transition document envelops for all DPS&C offenders, which include at a minimum, if applicable:  1. Any valid forms of identification;  2. Prescriptions and Medicaid card;	Compliant	
Visual Inspection: documentation of employment opportunity, documentation of two forms of identification, residential plan		
V-C-003 Pre-Parole Preparation The facility shall complete Form B-01-004-C, Pre-Parole LARNA II Questionnaire for Local Jail Facilities, and submit via e-mail to DPS&C HQ at LOCALlarna@corrections.state.la.us or by fax to 225-342- 0929 within the first two weeks of the month proceeding Visual Inspection: offender record, completed questionnaire	Compliant- LARNAs are completed in a timely manner. Completed questionaires on file.	

presence at parole board



V-C-004 Parole Board Procedures	Compliant
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.	Compilant
Visual Inspection: offender record, trip log,	

PART VI - JUSTICE	]	
A. OFFENDER'S RIGHTS		
References: ACA CJS 1-6A-01, 1-6A-02, 1-6A-03, 1-6A-06, Dept. Reg. C-01-004/OP-C-10	Findings	Response
VI-A-001 Access to Courts/Access to Legal Materials Written policy, procedure, and practice ensure the right of offenders to have access to courts. This includes reasonable access to legal reference materials or access to legal or paralegal assistance. Illiterate offenders shall be provided the assistance of a fellow offender or be furnished adequate assistance from the facility staff or other persons who have a legitimate connection with the legal issues being pursued. If an offender's requirements in this area are significant and complex, exceeding the capability of the local facility to meaningfully provide assistance, then the inmate shall be transferred to the DPS&C.  Visual Inspection: facility log	Compliant- Offenders have access to legal materials. Use of library is logged and documented.	
VI-A-002 Access to Counsel Written policy, procedure, and practice ensure offenders' confidential access to counsel. Such contact includes, but is not limited to telephone communications, uncensored correspondence and visits. Visual Inspection: facility log, record of attorney interviews	Compliant	
VI-A-003 Protection from Abuse Written policy, procedure, and practice protect offenders from personal abuse, corporal punishment, personal injury, disease, property damage, or harassment.	Compliant- Policy and procedure in place to ensure offenders are free from protection from abuse.	
Visual Inspection: facility log, incident reports, staff training records		

B. FAIR TREATMENT OF OFFENDERS		
References: ACA CJS 1-2A-16, 1-4C-01, 1-6B-01, 1-6B-02, Dept. Reg. B-05-005/OP-C-13	Findings	Response
VI-B-001 Discrimination Written policy, procedure, and practice provide that program access and administrative decisions are made without regard to offenders' race, religion, national origin, gender, sexual orientation, or disability.	Compliant- Policy and procedure on file.	
Visual Inspection: facility records, grievances, activity logs		

Response



#### VI-B-002 Grievance Process

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

Compliant	
r	

**Findings** 

Compliant- Staff have logs on being

properly trained during orientation

and annually. Good documentation

## PART VII - ADMINISTRATION AND MANAGEMENT

## A. RECRUITMENT, RETENTION AND PROMOTION

References: A	CA-CJS 1-1A-01, 1-1B-01, 1-1C-01, 1
	, 1-4D-05, 1-4D-14, 1-7B-02, 1-7B-
	ept. Regs. A-02-028/AM-F-22, C-01-
008/OP-A-19	

#### VII-A-001 Training and Staff Development

The facility conducts or participates in a training program which includes orientation for all new employees (appropriate to their job) prior to assuming a position or post. Such training must include:

- Security procedures;
- 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);
- Employees whose duties are the care, custody and control of offenders must complete the Peace Officers Standards and Training (POST) Level 3 certification training program, which consists of the ACA core curriculum, within one year of employment.

## Visual Inspection: lesson plans, staff training records

#### VII-A-002 Weapons Training

All personnel authorized to use firearms and less-than-lethal weapons must demonstrate competency at least annually. Training includes decontamination procedures for individuals exposed to chemical agents.

Visual Inspection: personnel records, training records

Compliant

on file.

#### **B. FACILITY ADMINISTRATION**

Defendance: ACA CIC 1 4D 02 1 7D 01 1 7D 02		
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 statue or constitutional provision authorizing the establishment of the local jail facility or its parent agency.	Compliant	

Facility - Date

**BJG Compliance** 



1	
Compliant	
Compliant	
Compliant- Offender funds are controlled by approved accounting procedure. Offender account on file.	
Compliant Deligy and procedure	
are in place for all areas of the facility. Administration reviews and updates annually.	
Compliant	
	Compliant  Compliant  Compliant  Compliant- Offender funds are controlled by approved accounting procedure. Offender account on file.  Compliant- Policy and procedure are in place for all areas of the facility. Administration reviews and updates annually.



VII-B-008 Monthly Reporting Written policy, procedure and practice ensure that any facility with DPS&C offenders report activities to the Chief of Operations on a monthly basis in accordance with Dept. Reg. C-05-001/AM-I-4. These reports shall be submitted on automated reporting forms provided by the DPS&C, no later than the 15th day of the month for the previous month's activities. Automated reporting shall be completed, by the appropriate DPS&C Regional Team Leader, no later than the 20th day of the month for the previous month's activities.  Visual Inspection: monthly report		
VII-B-009 Staff Meetings	Compliant- Monthly staff meetings	
Written policy, procedure and practice provide for regular meetings between the Sheriff, facility administrator, or designee and all department heads. There is formal documentation that such meetings are conducted at least monthly.  Visual Inspection: staff meeting minutes/notes	minutes are on file for compliance.	
C. REASONABLE ACCOMMODATION		
References: ACA CJS 1-7E-01	Findings	Response
VII-C-001 Facility Equipment/Reasonable Accommodation Reasonable accommodations is made to ensure that all parts of the facility are accessible to the public are accessible and usable by staff and visitors with disabilities.	Compliant- The facility is handicapped-accessible by all staff and visitors.	
Visual Inspection:		
DEPARTMENT	TION REPORTS  Deficiencies	Corrective Action Taken
DEFARIPLENT	Deficiencies	Corrective Action Taken
Fire Marshall  Date of Current Report: 4/27/2022	Compliant	
Maximum Capacity: 320		
DHH - Health	Compliant	
Date of Current Report: 6/20/2022  Maximum Capacity: 320		
Hazimum capacity. 320		
DHH - Retail Food  Date of Current Report: 6/20/2022	Compliant	



## Office of State Fire Marshal

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

## Inspection Report

Report # CB-21-043488-1

#### No Deficient/Cautionary Codes cited.



H. "Butch" Browning FIRE MARSHAL

				Loc	cation	n Inform	atio	n			
Inspection	Туре	Compliance	Building I	Inspection				Inspection Date	te 4,	/27/2022 12:13:09 PM	
Structure II	D	105556		No. of Buildings 4			Facility Code	J.	J466		
Capacity		320		Year Built	ear Built 1999			Construction Type T		Type IIIA / (211)	
Building/Trade Name SAINT MARY LAW ENFORCEMENT CENTER				Address 9311 HIGHWAY 90 WEST FRONTAGE ROAD, CENTERVILLE, LA 70522					LE,		
				0	wner	Informa	tion				
Owner Typ	e		Name				Con	tact Phone	Contact	Email	
Municipal Project CHRIS H		HINKLE	(337)		578-4071 CHINKLE V		E@STMARYPARISHLA.GO				
Address			•								
5TH FLOOF	RCOUR	THOUSE, FR	ANKLIN,	LA 70538							
				Te	nant	Informa	ation				
Name					Suite	Number		Floor Number		Square Footage	
				00	ccupa	ancy De	tails				
Occupancy	/ Туре		Details								
Institutional	Institutional INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 4										
					0						
W0 45545			00000		-	mments					
IN COMPLI		FICIENCIES	OBSERVI	ED AT TIME (	JF INS	SPECTIO	N.				
				Ins	pecto	r Inform	atio	n			
Name: All	ex Poole		Badge N	lumber: 698			Insp	ector Signature:	0	Defal	
			Pers	on to whom	ı requ	uiremen	ts w	ere explained			
Name: Chi	ris Hinkle		Title: N	Maintenance D	irecto	r	Signa	ature:	Po		
						512 m					

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

(800) 554 0006

R. S. 40: 1621

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

DEPARTME	LOUISIANA NT OF HEALTH PUBLIC HEALTH
INSTITUTI	ON REPORT
Agency License No. N/A	Anniversary Month JUNE
Name of Establishment ST, MARY PARISH LAW ENFORCEMENT CENTER-224	Mailing Address
Address 9311 HIGHWAY 90 W	
City, state, Zip Code FRANKLIN LA 70538	
Type of Facility JAILS 197	74
Parish St, Mary	Date Inspected 12/21/2021
The above establishment has been inspected by a representative of the	is section, and:
License is Recommended; License is <b>Not</b> Recommended;	
License is Pending Reinspection;	
from the standpoint of sanitation	MICHAEL BOURGEOIS 1 0 0 1
LHS 48 (R 7/99)	1014 -



#### STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

#### Retail Food Notice of Violations

#### Routine/Renewa

Permit Number 51-0001923-1	Permit Name ST MARY PARISH LAW ENFORCE	IMBNT CTR cafeteria		
Name of Establishment ST MARY PARISH LAW ENFORCE	MENT CTR	Owner Name LAW ENFORCEMENT DISTRICT OF ST MARY		
Address 9311 HWY 90 W- SOUTH FRONTAC	GE RD FRANKLIN, LA 70538	Date 12/21/2021	Time 10:50 AM	

#### LAC TITLE 51 PART XXIII

#### Comments:

COPY OF REPORT EMAILED TO m.cummings@stmaryso.com; n.rogers@stmaryso.com

FSC #39411 MELISSA M. CUMMINGS expires on 11/13/2022

#### NOTICE RS 40:31.38 (ACT 66)

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

Sanitarian Name/Print Michael Bourgeois	Phone # (985)385-7018	Sanitarian Signature	R.S. # 1001			
The above mentioned violations	were called to my attention and were ex	plained to me in detail. I hereby agree to				
Correct Critical Violations by		Correct Non-Critical Violations by				
Name/Title LT: MELISSA CUMMINGS FO	OD SERVICE MANAGER	Signature of Recipient				