

Department of Public Safety & Corrections
State of Louisiana

JOHN BEL EDWARDS
GOVERNOR



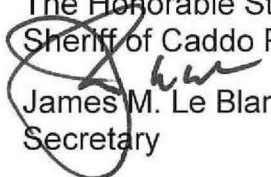
JAMES M. LE BLANC
SECRETARY

A handwritten signature in blue ink, likely of James M. Le Blanc, located to the right of the date.

September 29, 2022

MEMORANDUM

TO: The Honorable Stephen W. Prator
Sheriff of Caddo Parish

FROM:  James M. Le Blanc
Secretary

RE: "Basic Jail Guidelines" Monitoring Report

This is to advise that pursuant to the attached monitoring report concerning Caddo Correctional Center, 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 and 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
Rickey Farris, Commander, Caddo Correctional Center
Seth Smith, Chief of Operations
Jerry Goodwin, Warden, DWCC
Scott Cottrell, BJG Team Leader

State of Louisiana



Office of the Secretary

Department of Public Safety and Corrections

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

Caddo Correctional Center
in acknowledgement of

Continued Compliance with the Basic Jail Guidelines Process

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

this 7th day of October
in the year of our Lord 2022



Attest:


Secretary



BJG RECERTIFICATION REPORT

Rev. 03/22/2022 mw

Facility Name: Caddo Correctional Center
BJG Team Leader & Monitors: Scott Cottrell, BJG Team Leader (NW Region), Mr. Tommy Garrett and Ms. Hope Triplet, BJG Team Members
Facility Warden & Email Address: Rickey Farris, Commander Email rick.farris@caddosheriff.org
Facility Staff: Gil Roraback, Capt. and Nickie Mastrodomenico, Sgt.
BJG Inspection Date: August 15, 2022
Previous BJG Inspection Date: August 2, 2019
Operational Capacity: 1500
Count on Day of Visit: 1417

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

Concerns or Issues from the previous BJG Monitoring Inspection: None

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	243	29	272
Number of Local Offenders	960	116	1076
Number of Out of State Offenders	5	1	6
Number of Federal Offenders	51	11	62
Number of ICE Detainees	1	0	1
TOTAL	1260	157	1417

Number of DOC Offenders that are:

Single Bunked _____ 8
Double Bunked _____ 51
Triple Bunked _____ 210
Total _____ **269**

Number of DOC Offenders that are in Restricted Housing:

Single Bunked _____ 3
Double Bunked _____ 0
Triple Bunked _____ 0
Total _____ **3**

NOTE: Provide the following information about ICE detainees. Are there any interactions between ICE detainees and the DOC offenders housed at this facility? (If so, include these interactions.)

- **Housing**
- **In house jobs** (Maintenance, cafeteria, ect.)
- **Any other interactions**

There are no interactions between ICE / Federal offenders and DOC offenders.

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
July 2021	5	0	1	0
August 2021	11	0	1	0
September 2021	7	0	2	0
October 2021	11	0	2	0
November 2021	9	0	4	0
December 2021	17	0	3	0
January 2022	10	0	0	0
February 2022	20	0	4	0
March 2022	16	0	2	0
April 2022	9	0	1	0
May 2022	7	0	0	0
June 2022	9	0	1	0
July 2022	12	0	3	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
July 2021	1	0	0	0	4
August 2021	0	1	0	0	2
September 2021	0	0	0	0	2
October 2021	0	0	0	0	0
November 2021	0	0	0	0	1
December 2021	0	0	0	0	1
January 2022	1	0	0	0	0
February 2022	1	0	0	0	0
March 2022	0	0	2	0	0
April 2022	1	0	1	0	1
May 2022	0	0	0	0	1
June 2022	0	0	0	0	0
July 2022	1	0	0	0	2

GENERAL APPEARANCE, CLEANLINESS, AND COMMENTS OF THE FACILITY:**Living Area:**

- **Dorms** - The dorms were clean and odor free. The offenders' property was neatly stored and there was no clutter.
- **Cell Block** - The cells were clean and odor free. All of the offenders' personal property was neatly stored and cells were clutter free.

Culinary/Dining:

The culinary/dining areas were clean. The inventories were correct and all utensils accounted for. An approved cycle menu in use. Offenders working in the kitchen are pre-screened by department. The offenders are served in the common areas of the dorms or in their individual cells.

Bathrooms:

The majority of the dormitory and cellblock bathrooms were operation and clean. A couple of showers had some soap scum build-up and this was addressed during the inspection. Lavatory/showers have temperature controlled hot/cold water and the temperatures are regularly checked.

Yard Areas:

The exercise yard is attached to each housing unit and offenders have the opportunity to go out for 45 minutes at a time twice a day. Logbook documentation reflects that offenders are afforded the opportunity

to exercise regularly. The yard areas are well kept and free of debris. Staff continually monitors the offenders outside on the yard.

Maintenance:

Overall maintenance of the facility is good. Facility uses a work order system and all information is kept on a database to ensure all issues are addressed by the maintenance staff. The parish commission has its own maintenance department in the facility and it maintains control of facility tools and inventories. All tool inventories were accurate as well as the tool sign out sheets.

COUNTS:

- How many formal counts are conducted each shift? Six (6) on the day shift and three (3) on the night shift.
- How many counts are conducted each day? Nine (9).

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? **By conducting a physical head count in each area and turning the count in by housing assignment.**
- 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?
They use the same criteria as DOC.
- Does their classification process meet DPS&C, Corrections Services' criteria?
Yes

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

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
July 2021	40	285	14%	0
August 2021	49	313	16%	0
September 2021	22	281	08%	0
October 2021	34	240	14%	0
November 2021	21	229	09%	0
December 2021	82	243	34%	3 (THC)
January 2022	41	256	16%	0
February 2022	63	277	23%	0
March 2022	36	314	11%	0
April 2022	47	320	15%	0
May 2022	46	347	13%	0
June 2022	53	316	17%	0
July 2022	49	299	16%	1 (THC)

RULES AND DISCIPLINE:

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

If yes,

Good Time information in the Inmate Handbook

- What is their restoration of good time application process for the offender population?
The inmate requests an Application for Restoration of Good Time from the Classification Department. Once the inmate completes the form, the Classification Department sends the Form to DOC.
- Does their restoration of good time application process meet DPS&C, Corrections Services' criteria?
Yes

BJG AUTOMATED MONTHLY REPORTING REVIEW:

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

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

OFFENDER PROGRAMS:

GED Program	(Suspended – Between Instructors)
Number of GED Slots	<u>34</u>
Number of Participants	<u>0</u>
YTD Number of Completions	<u>0</u>

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

- Carpentry
- Living in Balance
- HiSet
- Standardized Pre-Release Curriculum 2010

LIST ALL OTHER OFFENDER PROGRAMS:

- Anger Management
- Religious Services
- Relapse Prevention
- Criminal Lifestyle and Addictive Thinking
- Parenting
- Relationships
- Substance Abuse

GRIEVANCE PROCESS:

- Does grievance process include two levels of review? **Yes.**
- Who are the designees at each level?
1st level Sergeant M. Anderson
2nd level Commander R. Farris
3rd level Sheriff or designee

- What is the specified time period for response at each level?
Fully processed within 90 days (unless extension granted). Grievance must be filed within 30 days of incident. First step must be accepted, returned, or rejected within 5 days. If accepted, First Step response with 15 days. Second Step within 5 days of receipt of Step One response. (The inmate will receive the Commander's decision within 25 days after receiving Step Two for review). For the Third Step, offender has 5 days after receiving the Step Two response. The inmate will be notified of Third Step within 40 days of the Sheriff or designee receiving Third Step.

PREA COMPLIANCE:

- Is this facility required to be PREA compliant due to contract language? **Yes.**
- Is this facility PREA compliant? **Yes.**
 - If yes, date compliance received: PREA Audit was conducted March 9 – 11 of 2022 and the final report was received on August the 19th of 2022.
- 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:

The morale at Caddo Correctional Center is very good. The staff has a very good work ethic and the employees work well with each other. All staff displayed a very professional attitude and seemed to be very dedicated to their jobs. Each staff member that I spoke with stated that they were very satisfied with their job and working conditions. Initial as well as ongoing training of deputies is exceptional. Overall the facility is clean and well organized.

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

None of the offenders voiced any negative comments about their confinement, housing, or food. Many offenders were participating in one of the various programs in the housing units. The offenders are afforded good opportunities to better themselves through the educational and self-help programs.

RECOMMENDATION:

This facility consistently operates smoothly and efficiently, while remaining in compliance with the Basic Jail Guidelines. The level of dedication and professionalism of Commander Rick Farris and his staff is exceptional. Based on the on the walk-through of the facility and the review of the BJG, it is recommended that Caddo Correctional Center receive full recertification with continued annual monitoring.



12/22/2020

Facility: Caddo Correctional Center	Date Conducted: August 15, 2022
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Monitors: Colonel Scott Cottrell, BJG Team Leader (NW Region); Mr. Tommy Garrett, BJG Team Member; and Ms. Hope Triplet, BJG Team Member

BASIC JAIL GUIDELINES (BJG)

PART I - SAFETY		
A. PROTECTION FROM INJURY AND ILLNESS		
References: ACA CJS 1-1A-01, 1-1A-02, 1-1A-03, 1-1A-04, 1-1A-05, 1-1C-05, 1-4A-03, 1-4A-04	Findings	Response
<p>I-A-001 Safety/Sanitation/Inspections The facility complies with all applicable laws and regulations of the State Sanitation Officer and the State Fire Marshal. The following inspections are implemented: •Weekly sanitation inspections of all facility areas by a qualified departmental staff member. •Weekly inspections of all food service areas, including dining and food preparation areas and equipment. •Water temperature in housing areas is checked and recorded daily. •Comprehensive and thorough monthly inspections by a safety/sanitation specialist for compliance with sanitation, safety and fire prevention standards. •At least annual inspections by the State Sanitation Officer and the State Fire Marshal. <u>Visual Inspection: completed inspection checklists and reports, documentation of corrective action, inspection reports</u></p>	<p>Compliant. Formal inspections are conducted on a weekly and monthly basis at this facility. Ongoing maintenance requests and related repairs are automated within a central computer database, resulting in an efficient and accountable process. Overall, facility staff and offender maintenance workers do an excellent job with this guideline. Current FM (03/14/2022), DHH (07/15/2022), and Retail Food (07/13/2022) reports are on file. All deficiencies noted on the report has been addressed.</p>	
<p>I-A-002 Disposal of Materials Disposal of liquid, solid, and hazardous material complies with applicable government regulations. <u>Visual Inspection: trash disposal contract, completed inspection reports, include documentation that deficiencies were corrected</u></p>	<p>Compliant. Caddo Commision Fleet Maintenance has the contract for trash disposal and Stericycle, Inc. handles the contract for liquid, solid, and hazardous materials.</p>	
<p>I-A-003 Vermin and Pests Vermin and pests are controlled. There is a written and implemented plan for the control of vermin and pests. <u>Visual Inspection: pest control contracts, trash disposal contracts, inspection reports</u></p>	<p>Compliant. Orkin Pest control services the facility. No pest control issues discovered during walk through inspection.</p>	
<p>I-A-004 Housekeeping The facility is clean and in good repair. There is a written housekeeping plan that provides for the ongoing cleanliness and sanitation of the facility. <u>Visual Inspection: inspection reports, completed forms, documentation of correction of identified deficiencies</u></p>	<p>Compliant. Very good housekeeping policy with thorough and current documentation in file.</p>	
<p>I-A-005 Water Supply The facility's potable water source and supply is certified at least annually by an independent, outside source to be in compliance with the State Sanitary Code. The facility complies with the requirements of the state health officer. There is a specific plan for addressing deficiencies, if any, that is approved by the state health officer. <u>Visual Inspection: documentation of approval by DHH or local authority, plan for addressing deficiencies</u></p>	<p>Compliant. Facility has passed all water inspections by the DHH, including independent test associated with their water. Copy of certification on file.</p>	
B. VEHICLE SAFETY		
References: Dept. Reg. C-03-003/OP-A-3	Findings	Response
<p>I-B-001 Offender Transport Escorted and unescorted absences of state offenders are governed by R.S. 15:811 and 833 and DPS&C Department Regulation No. C-03-003 "Escorted Absences." <u>Visual Inspection: documentation of staff training, documentation of medical, funeral, etc. (outside trips)</u></p>	<p>Compliant. Approval forms are in file indicating full compliance. Staff training records regarding offender transport are in file.</p>	
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/P5-D-3, C-02-001/OP-A-5, C-02-010/OP-B-3, C-05-001/AM-1-4	Findings	Response
<p>I-C-001 Emergency Plan There is a written plan, submitted to the Secretary of DPS&C, that specify the procedures to be followed in situations that threaten facility security. Such situations include but are not limited to riots, hunger strikes, disturbances, taking of hostages, and natural or man-made disasters. These plans are made available to all applicable personnel and are reviewed annually and updated as needed. All facility personnel are trained annually in the implementation of the emergency plan. An evacuation plan is used in the event of fire or major emergency. The plan is approved by the state fire marshal, reviewed annually, and updated, if necessary. There are written procedures for significant unusual occurrences or facility emergencies including but not limited to natural or man-made disasters; major disturbances such as riots, hostage situations, escapes, fires, deaths, serious illness or injury and assaults or other acts of violence. Such procedures include the reporting of these incidents to the DPS&C, OAS, telephone 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-842-4399 after hours, when they involve DPS&C offenders. In addition, the facility shall follow the incident reporting procedures as outlined in Dept. Reg. C-05-001/AM-1-4, "Activity Reports, UORs," Category A, B and C. <u>Visual Inspection: training records, facility logs, documentation of approval of plan, documentation of annual review, documentation of staff receipt, training on the plan</u></p>	<p>Compliant. The facility has a current emergency plan that has been submitted to the DPS&C and the FM. All staff members have been properly trained on the emergency plan. Staff members that were questioned regarding emergency policy/procedure and contingency plans were knowledgeable. File documentation reflects training as stated above is accurate.</p>	



	Findings	Response
I-C-002 Immediate Release of Offenders There is a means for the immediate release of inmates from locked areas in case of emergency and there are provisions for a backup system. The facility has exits that are properly positioned, are clear from obstruction, and are distinctly and permanently marked to ensure the timely evacuation of offenders and staff in the event of fire or other emergency. Visual Inspection: facility records/logs	Compliant. Staff has been properly trained regarding the immediate release of offenders during emergency situations. Exits are properly marked and unobstructed.	
I-C-003 Fire Safety/Code Conformance The facility complies with the requirements of the state fire marshal. There is a specific plan for addressing deficiencies, if any, that is approved by the State Fire Marshal. The State Fire Marshal approves any variances, exceptions, or equivalencies. Visual Inspection: documentation of fire alarm and detection system maintenance and testing, plans for addressing deficiencies	Compliant. The facility is in compliance with the FM per the inspection conducted on 03/14/2022.	
I-C-004 Facility Furnishings Facility furnishings meet fire-safety-performance requirements. Visual Inspection: Specifications for all furnishings.	Compliant. Furnishings are compliant with Fire Safety Codes set by the State FM.	
I-C-005 Flammable, Caustic and Toxic Materials Written policy, procedure and practice govern the control and use of all flammable, toxic and caustic materials. Visual Inspection: Staff training records, offender training records, internal inspection reports, Documentation of incidents that involved FTC materials, Inventories.	Compliant. File documentation reflects that all staff have been trained in the use and control of flammable, caustic and toxic materials. Current inventories were present.	
I-C-006 Operational Capacity The number of offenders present does not exceed the operational capacity as determined by the state fire marshal and state health officer. The state fire marshal will determine a capacity primarily based upon existing capabilities. The state health officer will determine a capacity based upon the ratio of plumbing fixtures to offenders and square footage. The operational capacity will be the lowest of those two figures. Visual Inspection: facility count sheets	Compliant. On the day of the inspection, 1417 offenders were assigned to the facility. The facility operates within the capacity authorized by the DHH and FM. Current capacity rating is 1500.	

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 has a state of the art system that is monitored 24/7.	
II-A-002 Secure Perimeter The facility's perimeter is controlled by appropriate means to ensure that offenders are secured remain within the perimeter and that access by the general public is denied without proper authorization. Visual Inspection: documentation of receipt of job description by staff, documentation of annual review and updating, photos of perimeter controls	Compliant. This facility is secure and has a state of the art monitoring system. Effective security practices are in place to prevent escapes and unauthorized entry.	
II-A-003 Sufficient Staff There is a written document describing the facility's organization and staffing plan. This should include an organizational chart that groups similar functions, services and activities. Each facility meets minimum security staffing requirements which reflect good correctional practice. Sufficient staff, including a designated supervisor, are provided at all times to perform functions relating to the security, custody, and supervision of offenders and, as needed to operate the facility in accordance with the facility's security plan. Visual Inspection: records of staff deployment, facility logs, documentation of annual review of staffing analysis and plan	Compliant In review of the staffing plan for this facility, sufficient staff is provided on all shifts. Staffing for this facility breakdowns as follows: A Team: 29 B Team: 30 C Team: 30 D Team: 26	
II-A-004 Female Offenders and Female Staff When a female offender is housed in a facility, at least one female staff member is on duty at all times. Visual Inspection: records of staff deployment, facility logs	Compliant. Only female deputies supervise female offenders.	
II-A-005 No Offender Control Over Others No offender or group of offenders is given control, or allowed to exert authority over other offenders. Visual Inspection: written policy and procedure	Compliant. Policy and practice prohibits any offender having authority over other offenders.	
II-A-006 Staff Log Correctional staff maintain a permanent log and prepares shift reports that record routine information, emergency situations and unusual incidents. The facility shall maintain written records or logs which continuously document the following information: 1. Personnel on duty; 2. Offender population; 3. Admission and release of offenders; 4. Shift activities; 5. Entry/exit of all visitors including legal/medical; 6. Unusual occurrences or facility emergencies (including but not limited to major and minor disturbances such as riots, hostage situations, fires, escapes, deaths, serious illness or injury and assaults or other acts of violence.) Refer to BGC I-C-001 Visual Inspection: copies of log book, records of staff deployment	Compliant. Accurate permanent logs are maintained on all activities per guidelines.	



	Findings	Response
<p>II-A-007 Counts The facility has a system for physically counting offenders. At least one formal count is conducted for each shift, with no less than 3 counts daily. The system includes strict accountability for offenders assigned to work and other approved activities.</p> <p><u>Visual Inspection: completed forms, facility records/logs.</u></p>	<p>Compliant All counts are properly conducted and documented. Nine (9) counts every 24 hours are conducted.</p>	
<p>II-A-008 Offender Population Management System There is an offender population management process that includes records on the admission, processing, and release of offenders. Written policy, procedure, and practice provide for offender case record management that includes at a minimum, maintenance of the following documents and information. This offender record and any reentry transition envelopes shall be transferred with the offender at such time the offender is transferred to another local or DPS&C facility.</p> <ol style="list-style-type: none"> 1. Master prison form; 2. Bill of Information and Court Minutes OR Uniform Commitment Order; 3. One photograph; 4. Reports of disciplinary actions, grievances, incidents, or crimes committed while in custody; 5. Records of program participation, work assignments, classification actions; 6. Any government issued identification card (i.e., driver's license, social security card or birth certificate/birth card or any other valid identification); 7. Offender health record (see BJC IV-D-004). <p>In addition to the maintenance of the above information, the following shall be collected and forwarded to the DPS&C Pre-Class Coordinator either by fax to 225-342-3759 or email to DOC-HQ_Supplemental@la.gov.</p> <ol style="list-style-type: none"> 1. Master prison form; 2. Fingerprints: one FBI print card from AFIS; 3. One photograph; 4. Bill of Information and Court Minutes or Uniform Commitment Order for each conviction (for probation violators both the original sentencing minutes and the revocation minutes are required); 5. Jail credit letter; <p><u>Visual Inspection: completed forms, reports, offender record</u></p>	<p>Compliant. The facility does an excellent overall job with the management of their offender population, and remains in compliance. Random review of offenders files indicates that proper forms containing all required information are in files. Excellent logs kept on all offenders.</p>	
<p>II-A-009 Reception - Legal Commitment and Medical Service Prior to accepting custody of an offender, staff determine that the offender is legally committed to the facility, and that the offender is not in need of immediate medical attention.</p> <p><u>Visual Inspection: Completed Admission forms, facility logs.</u></p>	<p>Compliant. All admission forms are filled out properly.</p>	
<p>II-A-010 Admissions Admission processes for a newly admitted offender include, but are not limited to:</p> <ul style="list-style-type: none"> •Searching of the offender and personal property; •Inventorying and providing secure storage of personal property; •Providing an itemized receipt for personal property; •Recording of basic personal data; •Performing a criminal history check; •Photographing and fingerprinting; •Separating from the general public; •Providing a health screening to assess and identify any health and safety needs; •Providing information about access to health services, copy requirements and submitting grievances. <p><u>Visual Inspection: Intake and admission forms, screening forms, inventory form, receipt form</u></p>	<p>Compliant. The facility is currently using the updated health screening form and all forms are filled out properly.</p>	
<p>II-A-011 Out of State Offenders The names of any out of state offender (federal or state) to be housed at a local jail or privately managed facility shall be submitted to the Chief of Operations prior to the offender(s) entering the State of LA. No such offender shall be housed if the offender would be classified as maximum custody under the LA DPS&C classification procedures.</p> <p>Any offender convicted and sentenced to incarceration by a court in another state (federal or state) shall not be released in the State of LA. Any out of state offender (federal or state) housed in a local jail or privately managed facility shall be returned to an appropriate correctional facility located within the state where the offender was convicted and sentenced for release in that state, prior to the offender's release.</p> <p><u>Visual Inspection: offender record, submittal to chief of operations of out-of-state offenders to be housed at the facility, release/transfer documentation</u></p>	<p>Compliant. Documentation reflects that offenders from out of state are always released to the custody of office from the state of conviction.</p>	



	Findings	Response
<p>II-A-012 Classification System Written policy, procedure, and practice provide for a written offender classification plan that includes custody required and assignment to appropriate housing. Offender management and housing assignment considers age, gender, legal status, custody needs, special problems and needs, and behavior. All offenders are classified using an objective classification process that at a minimum:</p> <ul style="list-style-type: none"> Identifies the appropriate level of custody for each offender Identifies appropriate housing assignment Identifies the offender's interest and eligibility to participate in available programs <p>Visual Inspection: offender housing records, offender classification records</p>	<p>Compliant. All offenders are screened upon arrival to the facility. Housing placement determined based upon offender's custody level, age, medical/MH & other special needs. File documentation reflects an excellent classification system.</p>	
<p>II-A-013 Prohibition on Youthful Offenders Offenders subject to juvenile jurisdiction are housed in adult facilities only under the conditions established by law. If juveniles are committed to the facility, a plan is in place to provide for the following:</p> <ul style="list-style-type: none"> Supervision and programming needs of the juveniles to ensure their safety, security, and education; Classification and housing plans; Appropriately trained staff. <p>OAS shall be notified of offenders who are under the age of 18 that are sentenced to the facility.</p> <p>Visual Inspection: admission and housing, offender records, classification records</p>	<p>Compliant. This facility does not hold any offender under juvenile jurisdiction. Current policy is in place as to satisfy compliance with this guideline.</p>	
<p>II-A-014 Separation in Classification Male and female offenders must be housed in separate rooms/cells with reasonable sight and sound separation.</p> <p>Visual Inspection: offender housing records, offender classification records, diagram of facility showing male/female housing areas</p>	<p>Compliant. Male & female offenders are housed in different areas to provide sight & sound separation.</p>	
<p>II-A-016 Photo Identification The facility shall provide each DPS&C offender with photo identification, which the offender shall carry/wear on their person at all times.</p> <p>Visual Inspection: Offender identification card/wristband.</p>	<p>Compliant Offenders are provided a Photo ID card upon intake.</p>	
<p>II-A-017 Drug Free Workplace Written policy, procedure, and practice provide for a drug-free workplace, which includes at a minimum pre-employment testing, post-accident testing, reasonable suspicion/probable cause testing, and quarterly random testing of all employees.</p> <p>Visual Inspection: drug testing lab fee bills for drug testing of facility employees (including pre-employment, post-accident, reasonable suspicion/probable cause, random).</p>	<p>Compliant. Employees are tested in accordance with policy. Facility meets guidelines.</p>	
<p>II-A-018 Offender Drug Testing Written policy, procedure, and practice provide for alcohol/drug testing, both randomly and for probable cause. Facility policy will require that a minimum of 5% of the DPS&C offender population shall be drug tested on a monthly basis.</p> <p>Visual Inspection: Facility log, documentation of alcohol/drug testing of offenders.</p>	<p>Compliant. Drug testing for the last calendar year reflects that at least 5% of the DOC pop was tested in the last 12 months.</p>	
<p>II-A-019 Offender Transfers All transfers of DPS&C offenders to other than DPS&C facilities shall be reported to the OAS, at least one day prior to all scheduled transfers and within one business day for all non-scheduled transfers. The DOC offender transfer form shall be submitted by the transferring facility to OAS at least one day prior to the transfer occurring by fax to 225-342-2439 or by email to LocalJailTransfers@la.gov. Offenders should not be transferred to other than DPS&C facilities within 60 days of release, unless for disciplinary reasons.</p> <p>An offender scheduled for an appearance before the Committee on Parole shall not be transferred prior to the scheduled hearing date. However, if the transfer is deemed unavoidable by the Warden due to security concerns, the Warden shall obtain prior approval for an exception from the DPS&C Chief of Operations or designee. Staff from the sending facility shall notify the Committee on Parole as soon as it is known that the offender must be transferred.</p> <p>Visual Inspection: facility logs, documentation of transfers of DPS&C offenders to other than DPS&C facilities</p>	<p>Compliant. Proper notification is made when offenders are transferred to another facility within guidelines. Proper documentation is maintained.</p>	
<p>II-A-020 Frequency of Cell Checks Written policy, procedure, and practice provide secure, safe housing by establishing the frequency of cell checks in all cellblock areas not to exceed four (4) hours. Staff will document these checks in their staff logs.</p> <p>Visual Inspection: Facility logs, documentation of frequency of cell checks.</p>	<p>Compliant. Per policy, staff checks all cells at least every four (4) hours. Documentation is maintained.</p>	
<p>B. USE OF PHYSICAL FORCE References: ACA CJS 1-2B-01, 1-2B-02, 1-2B-03, 1-2B-05, 1-2B-06, 1-4D-12, Dept. Regs. B-06-001 HC-08/IS-D-HCP33, HC-29/IS-D-HCP40, C-01-008/OP-A-19, C-02-006/OP-A-16, C-03-003/OP-A-3</p>		
<p>II-B-001 Use of Force The use of force is restricted to instances of justifiable self-defense, protection of others, protection of property, and prevention of escapes, and then only as a last resort and in accordance with appropriate statutory authority. Written policy, procedure, and practice govern the use of force and provide that force shall never be used as punishment. When an incident involving use of force with a DPS&C offender results in the termination and/or arrest of an employee, the facility shall immediately report the incident to the DPS&C, Office of Adult Services, telephone number 800-803-8748 during normal business hours or the control center at Elayn Hunt Correctional Center, telephone number 800-842-4399 after hours. In addition, the facility shall provide a written report of the incident to the DPS&C, Chief of Operations within three business days.</p> <p>Visual Inspection: facility records, logs, incident reports, training records</p>	<p>Compliant. Good Use of Force policy is in place. There are no indications of unnecessary/excessive force, or force being used as a means of punishment.</p>	
<p>II-B-002 Use of Restraints Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including:</p> <ul style="list-style-type: none"> Conditions under which restraints may be applied; Types of restraints to be applied; Identification of a qualified medical or behavioral health professional who may authorize the use of restraints after reaching the conclusion that less intrusive measures are not a viable alternative; Monitoring procedures; Length of time restraints are to be applied; Documentation of efforts for less restrictive treatment alternatives; <p>Visual Inspection: facility records, logs</p>	<p>Compliant. Written policy and procedures are in place. Restraints are mainly used to prevent self-injury, injury to others or damage to property. Restraints are not applied for more time than necessary.</p>	



	Findings	Response
<p>II-B-002-1 Use of Restraints for Pregnant Offenders Written policy, procedure, and practice complies with the following requirements: Restraints During Pregnancy-Related Transportation</p> <ul style="list-style-type: none"> 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: <ol style="list-style-type: none"> An immediate and serious threat of physical harm to herself, staff, or others; A substantial flight risk and the offender cannot be reasonably contained by other means. If restraints are utilized during transportation, the offender shall not be cuffed behind the back or restrained using waist restraints. <p>Visual Inspection: facility records, logs</p>	<p>Compliant. Policy and procedures in place. Staff has been trained in the use of force/restraints.</p>	
<p>II-B-003 Use of Firearms The use of firearms complies with the following requirements.</p> <ul style="list-style-type: none"> Weapons are subject to stringent safety regulations and inspections. A secure weapons locker is located outside the secure perimeter of the facility. Except in emergency situations, firearms and authorized weapons are permitted only in designated areas to which offenders have no access. Employees supervising offenders outside the facility perimeter follow procedures for the security of weapons. Employees are instructed to use deadly force only after other actions have been tried and found ineffective, unless the employee believes that a person's life is immediately threatened. Employees on duty use only firearms or other security equipment that have been approved by the facility administrator. Appropriate equipment is provided to facilitate safe unloading and loading of firearms. <p>Visual Inspection: training records, safety regulation and inspection reports, photos of equipment used for unloading and reloading</p>	<p>Compliant. All deputies are POST certified. They have all been trained in the use of firearms and current firearms scores are on file.</p>	
<p>II-B-004 Written Reports Written reports are submitted to the facility administrator or designee no later than the conclusion of the tour of duty when any of the following occur:</p> <ul style="list-style-type: none"> Discharge of a firearm or other weapon Use of less lethal devices to control offenders Use of force to control offenders Offender(s) remaining in restraints at the end of the shift Emergency distribution of security equipment <p>Visual Inspection: completed reports, facility records and logs</p>	<p>Compliant. Written reports are on file at the facility. Deputies must complete all reports prior to leaving the facility upon conclusion of the shift.</p>	
<p>C. CONTRABAND/SEARCHES</p>		
<p>References: ACA CJS 1-2C-01, 1-2C-04, Dept. Reg. C-02-003/OP-A-8</p>		
<p>II-C-001 Procedures for Searches Written policy, procedure and practice guide searches of facilities and offenders to control contraband. Manual or instrument inspection of body cavities is conducted only when there is reasonable belief that the offender is concealing contraband and when authorized by the facility administrator or designee. Health care personnel will conduct manual or instrument inspections in private.</p> <p>Visual Inspection: observation, facility records and logs, offender and staff interviews</p>	<p>Compliant. Facility has more than a sufficient number of staff to conduct shakedown on a continual basis.</p>	
<p>D. ACCESS TO KEYS, TOOLS, UTENSILS</p>		
<p>References: ACA CJS 1-2D-01</p>		
<p>II-D-001 Key, Tool, and Utensil Control Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies.</p> <p>Visual Inspection: documentation of perpetual inventories</p>	<p>Compliant. All key, tool and utensil inventories were checked and all inventories were good except for the Reentry Carpentry class. There were some tools not on inventory and these discrepancies were corrected. Staff members questioned regarding accountability, policy & procedure and they were very knowledgeable.</p>	
<p>PART III - ORDER</p>		
<p>A. OFFENDER DISCIPLINE</p>		
<p>References: ACA CJS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. B-05-001/OP-C-1</p>		
<p>III-A-001 Rules and Discipline Prior to being placed in the general population, each offender is provided with an orientation that includes facility rules and regulations, including access to medical care. The facility shall follow and provide the DP5&C "Disciplinary Rules and Procedures for Adult Offenders", to the offender population.</p> <ul style="list-style-type: none"> 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 DP5&C for a disciplinary hearing to ensure due process in accordance with La. R.S. 15:571.4. The offender must sign and date a statement acknowledging receipt of this <p>Visual Inspection: offender records, disciplinary records, receipt of disciplinary rules, documentation of orientation</p>	<p>Compliant. All DOC offenders have been given a copy of the DOC Offender Rule Book. Signed receipts for rule books are located in the files. Offenders with serious Rule violations attend Regional Disciplinary Court with DWCC via Zoom. The facility rules are also posted on the the tablets located in all housing units.</p>	



PART IV - CARE		
A. FOOD SERVICES		
References: ACA CJA 1-4A-01, 1-4A-02, 1-4A-04, 1-4A-06, Dept. Reg. C-06-001/IS-C-1	Findings	Response
IV-A-001 Food Storage Facilities There are sanitary facilities for the storage of all foods that comply with applicable state and/or federal guidelines. Visual Inspection: DHH inspection reports, internal inspection reports	Compliant. Last DHH retail food inspection was on 15 July 2022. All food was being properly stored & temperatures were properly documented.	
IV-A-002 Food Service Facilities Toilet and hand basin facilities are available to food service personnel in the food preparation area. Visual Inspection: DHH inspection reports, photos	Compliant. Adequate facilities available to offenders & clearly marked signs are posted. The kitchen has a restroom for food service workers.	
IV-A-003 Food/Dietary Allowances The facility's dietary allowances are reviewed at least annually by a qualified nutritionist or dietician to ensure they meet the national recommended dietary allowances for basic nutrition for appropriate age groups. Menu evaluations are conducted at least quarterly by food service supervisory staff to verify adherence to the established basic daily servings. Written policy, procedure, and practice require that food service staff plan menus and substantially follow the plan. The planning and preparation of all meals shall take into consideration nutritional characteristics and caloric adequacy. The facility shall provide a tray/plate and utensils for each hot meal. Visual Inspection: annual reviews, nutritionist or dietician qualifications, documentation of at least annual review and quarterly menu evaluations	Compliant. Jennifer Jackson is the facility dietician. Cycle menus are reviewed annually for basic nutrition. Food service supervisory staff monitor adherence to approved menus.	
IV-A-004 Records of Meals Served Written policy, procedure, and practice require that accurate records are maintained of all meals served. Visual Inspection: facility logs	Compliant. Accurate records maintained. Quality of food is good & quantity is sufficient.	
IV-A-005 Denial of Food as Discipline Prohibited Written policy, procedure, and practice preclude the denial of food as a disciplinary measure. Visual Inspection: facility logs	Compliant. Food is never denied as a form of discipline.	
IV-A-006 Food Service Management Written policy, procedure, and practice require that three meals (including two hot meals) are provided under staff supervision at regular meal times during each 24-hour period, with no more than 14 hours between the evening meal and breakfast. Variations may be allowed based on weekend and holiday food service demands provided basic nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal. Visual Inspection: records of meals served and times served, facility logs	Compliant. Two of the three meals served are hot. The time frame between each meal is in accordance to policy.	
IV-A-007 Therapeutic/Special Diets Therapeutic and/or special diets are provided as prescribed by appropriate clinicians or when religious beliefs require adherence to religious dietary laws. Written policy, procedure, and practice provide for special diets as prescribed by appropriate medical or dental personnel. Visual Inspection: health records, diet records or forms, documentation of warden's approval of religious diet	Compliant. Therapeutic and special diets are approved by medical and coordinated with kitchen staff. Requests for religious diets are screened by Chaplain and forwarded to Commander for approval.	
IV-A-008 Health Protection for Food Service There is adequate protection for all offenders and staff in the facility and for offenders and other persons working in food service. All persons involved in the preparation of the food receive a pre-assignment inspection by appropriate kitchen staff, to ensure freedom from diarrhea, skin infections, and other illnesses transmissible by food or utensils. Offenders working in food services are monitored each day for health and cleanliness by appropriate kitchen staff. All food handlers are instructed to wash their hands upon reporting to duty and after using toilet. Visual Inspection: inspection reports, completed forms, documentation of daily monitoring for health and cleanliness	Compliant. Proper safety precautions are taken. All food service workers are prescreened and monitored regularly for proper grooming and good health. Documentation was provided showing compliance.	
B. HYGIENE		
References: ACA CJS 1-4B-01, 1-4B-02, 1-4B-03, 1-4B-04, Dept. Reg. B-06-001/HC-34/IS-C-3	Findings	Response
IV-B-001 Plumbing Fixtures - Toilets and Washbasins Offenders have access to toilets and washbasins with temperature-controlled hot and cold running water 24 hours per day. Offenders are able to use toilet facilities without staff assistance when they are confined in their cells/sleeping areas. Visual Inspection: maintenance records or reports, inspections, documentation of periodic measurement of water temperature, offender grievances	Compliant. All offenders have access to toilets and washbasins with temperature controlled hot/cold water at all times.	
IV-B-002 Plumbing Fixtures - Showers Offenders, including those in medical housing units or infirmaries, have access to operable showers with temperature-controlled hot and cold running water 24 hours per day, on a reasonable schedule, (a minimum of three times per week). Water for showers is thermostatically controlled to temperatures ranging from 100 degrees to 120 degrees Fahrenheit. Visual Inspection: maintenance records or reports, inspections	Compliant. All offenders are able to shower everyday. Water temperature logs indicate full compliance with water temperature requirements. Offenders have access to showers 24 hours per day.	
IV-B-003 Clothing The facility has an obligation to provide adequate institutional clothing appropriate to the season and the offender's work status, including adequate changes of clothing to allow for regular laundering. The facility may fulfill this obligation by furnishing clothing or permitting the offender to secure and wear his own clothing, except that when the offender does not provide adequate clothing for himself, the facility shall provide adequate clothing for the offender. Visual Inspection: documentation of clothing issue, documentation of cleaning and storage	Compliant. Adequate clothing is supplied to all offenders by the facility.	
IV-B-004 Hygiene/Bedding Issue The facility shall provide adequate bedding and linen, including a clean mattress, sheets, pillow and blanket, not to exclude a mattress with integrated pillow. There are provisions for linen and towel exchange at least weekly. There are provisions for blanket exchange at least monthly. Visual Inspection: documentation of issue and exchange	Compliant. Adequate bedding and linens are provided to all offenders. The facility launders all linens as required.	
IV-B-005 Personal Hygiene Articles and services necessary for maintaining personal hygiene shall be available to all offenders including items specifically needed for females. Such items shall be provided to any offender (male or female) who is indigent. Each offender shall be provided soap, toilet paper, toothbrush, toothpaste and shaving equipment. Visual Inspection: documentation that items are provided, list of items available	Compliant. Documentation reflects that indigent offenders are provided with personal hygiene items as needed at no cost to them.	



<p>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</p>	<p>Findings</p>	<p>Response</p>
<p>IV-C-001 Access to Care/Clinical Services At the time of admission/intake, all offenders are informed about procedures to access health services, including any copay requirements, as well as procedures for submitting grievances. Medical care is not denied based on an offender's ability to pay. The facility has a designated health authority with responsibility for health care services. When the health authority is other than a physician, final clinical judgments rest with a single, designated, responsible physician.</p> <ul style="list-style-type: none"> Written policy, procedure, and practice provide for the delivery of health care services, including medical, dental and behavioral health services under the control of a designated health care authority who shall be a physician or a licensed or registered health care provider or health agency. Access to these services shall be unimpeded in the sense that correctional staff should not approve or disapprove offender requests for services in accordance with the facility's health care plan. Oral health services include access to diagnostic x-rays, treatment of dental pain, development of individual treatment plans, extractions of non-restorable teeth, and referral to a dental specialist, including an oral surgeon. Specialty non primary clinical services are covered by DPS&C. The requests shall be submitted by the facility staff using the software provided by DPS&C. In accordance with R.S. 15:831, DPS&C offenders may be assessed a co-payment for receiving medical or dental treatment, including prescription or nonprescription drugs. The co-payment fee schedule shall be approved by the DPS&C. Such fee schedule for DPS&C offenders housed in local jail facilities shall not exceed the DPS&C approved rate in accordance with Dept. Reg. B-06-001 HC-02/IS-D-HCP14, unless prior approval has been granted by the Secretary of the DPS&C. DPS&C offenders may be required to file a claim with his/her private medical or health care insurer, or any public medical assistance program, under which he/she is covered and from which the offender may make a claim for payment or reimbursement of the cost of any such medical treatment. <p>Visual Inspection: Documentation that offenders are informed about health care and the grievance system, a health record, medical copayment fee schedule.</p>	<p>Compliant. Routine health care provided through Caddo CC. Additional care is provided through agreements with outside charity and public hospitals when the need arises.</p> <p>Offenders are charged the following medical co-payments: \$10.00 for medical & psychiatric services \$5.00 RX</p> <p>These fees have been approved by the DPS&C. Chief of Operations, Seth Smith, approved Medical Co-pay Wavier on 29 July 2022. Documentation is in file. All offenders have access to medical services regardless of their ability to pay. The health care authority is Dr. David Nelson and the dentist is Dr. Jeremy Alexander.</p>	
<p>IV-C-002 Adequate Equipment and Supplies Adequate equipment and supplies for medical services are provided as determined by the health care authority and are in working order.</p> <p>Visual Inspection: Photos</p>	<p>Compliant. Adequate equipment & supplies for medical services are maintained & have been approved for use by the HCA.</p>	
<p>IV-C-003 Provision of Treatment The facility has a designated health authority responsible for health care services. Requests for health services are triaged by health trained persons to ensure that needs are addressed in a timely manner in accordance with the severity of the illness. Written policy, procedure and practice provide that anyone who provides health care services to offenders be licensed, registered or certified as appropriate to their respective professional disciplines. Such personnel shall only practice as authorized by their license, registration or certification. Standing orders are used in the treatment of offenders only when authorized in writing by a physician or dentist. (Standing orders are used in the treatment of identified conditions and for the on-site emergency treatment of an offender.)</p> <p>Visual Inspection: documentation of health authority designation, contract, billing records, sick call request form, a health record, clinical provider schedules, current credentials/licensure</p>	<p>Compliant. Appropriate licensed staff have current agreement letters on file to provide medical, dental, and everyday services to the offender population. Sick call is conducted seven (7) days a week.</p>	
<p>IV-C-004 Personnel Qualifications/Credentials Correctional or other personnel who do not have health care licenses may only provide limited health care services as authorized by the responsible health care authority and in accordance with appropriate training. This would typically involve the administration of medication, the following of standing orders as authorized by the responsible health care authority and the administration of first aid/CPR in accordance with POST training. Written policy, procedure and practice approved by the health authority require dispensing and administering prescribed medications by</p> <p>Visual Inspection: health records, completed medication administration form, personnel records, copies of current credentials or licensure, documentation of compliance with standing orders, health record entries, staff training records</p>	<p>Compliant. Nurses dispense medication which is tracked on a MARS system. All deputies have received CPR & first aid training/certification. Standing orders have been approved by the HCA. Signed copy is in the file.</p>	
<p>IV-C-005 24 Hour Care Written policy, procedure, and practice ensure that offenders have access to 24-hour emergency medical, dental, and mental health services, including on-site first aid, basic life support, and transfer to community based services. This requirement may be met by agreement with a local state hospital, a local private hospital, on-call qualified health care personnel (see IV-C-003), or on-duty qualified health care personnel. Decisions regarding access to emergency medical services shall not be the sole province of correctional or other non-health personnel except in accordance with IV-C-004.</p> <p>Visual Inspection: designated facility, provider lists, transportation logs</p>	<p>Compliant. Medical personnel are on call and available 24 hours per day. Written policy and procedures are in place. Current licenses are on file for medical staff. In the event of a medical emergency, offenders are transported to Ochsner/LSU- Shreveport. Current letters of agreement are on file.</p>	



	Findings	Response
<p>IV-C-006 Health Screens Written policy, procedure and practice require that all DPS&C offenders receive a health screening by health trained or qualified health care personnel upon intake into the facility unless there is documentation of a health screening within the previous 90 days. Screening is conducted in accordance with protocols established by the health authority. If completed by health trained personnel, all intake health screens are to be reviewed by health care personnel as soon as possible. If a facility uses a different screening form, it shall be required to have at a minimum the questions in the Intake Health Care Screening form (IV-C-006-A) provided by DPS&C. The purpose of the health screening is to protect newly admitted offenders who pose a health safety threat to themselves or others from not receiving adequate medical attention. This should include inquiry into:</p> <ol style="list-style-type: none"> 1. Current medical, dental or behavioral health problems and communicable diseases; 2. Current treatment plan; 3. Current medications, including psychotropic; 4. History of hospitalization; 5. Suicidal risk assessment; 6. Use of alcohol or other drugs including need for possible detoxification; 7. Possibility of pregnancy; 8. Observation of the following: <ol style="list-style-type: none"> a. Appearance and behavior; b. Body deformities and other physical abnormalities; c. Ease of movement; d. Current physical traumas or characteristics and a determination of whether or not the offender should be recommended for immediate transfer to the DS&C for appropriate care; e. Any physical impairment (hearing, vision, mobility) or other disability which would impede the offender's access to programs or services. Offenders identified with such an impairment or disability shall be transferred to the DPS&C for further evaluation and determination of appropriate housing placement. [Reference 2008 <p>Visual Inspection: health records, completed screening form, transfer logs</p>	<p>Compliant. Proper screenings are completed upon intake. All required information is obtained from the offender as stated in this guideline. Records reflect excellent documentation.</p>	
<p>IV-C-006-1 Pregnancy Management Written policy, procedure and practice require that all pregnant offenders have access to obstetrical services by a qualified provider. The local jail facility shall notify the Department's Medical Director, when a DPS&C offender is pregnant to ensure proper placement or if transfer to a DPS&C facility is necessary.</p> <p>Visual Inspections: written policy and procedure, health record where pregnant offender received obstetrical services by a qualified provider, notification to DPS&C when DPS&C offender is pregnant, transfer logs</p>	<p>Compliant. The policy was reviewed by the monitor. There is a good policy in place regarding the care of female offenders. They receive the proper medical appointments, and documentation reflects compliance.</p>	
<p>IV-C-007 Communicable Disease and Infection Control Program Communicable diseases are managed in accordance with a written plan approved by the health authority in consultation with local public health officials. The plan includes for the screening, surveillance, treatment, containment, and reporting of infectious diseases. The plan shall comprise of testing to detect communicable diseases, including TB testing within 14 days of arrival at the facility. If there is documented evidence of TB testing within the last 12 months, new testing is not required. Qualified health care staff will evaluate for signs and symptoms of TB. Infection control measures include the availability of personal protective equipment for staff and hand hygiene promotion throughout the facility. Procedures for handling biohazardous waste and decontaminating medical and dental equipment must comply with applicable local, state and federal regulations.</p> <p>Visual Inspection: health records, clinic visit logs, documentation of waste pick up and/or cleaning logs</p>	<p>Compliant. Written plan is in place to address communicable diseases. The plan has been approved by the Health Care Authority. Signed copy is in the file.</p>	
<p>IV-C-008 Annual TB Testing Written policy, procedure and practice require annual testing or medical evaluation for signs and/or symptoms of tuberculosis on all offenders. Annual TB testing will be provided at no cost to the offender. The facility's designated health care authority shall contact the DPS&C Medical Director, telephone number 225-342-1320, when an offender's test for medical signs and/or symptoms of tuberculosis is reported positive. The DPS&C Medical Director will determine if the offender requires physician or mid-level evaluation, based on the reported positive signs or</p> <p>Visual Inspection: health records</p>	<p>Compliant. TB testing conducted on all offenders upon intake. Procedures are in place to provide for annual testing of all offenders. Offenders are not charged for this service.</p>	
<p>IV-C-009 Chronic Care Program Offenders with chronic conditions, such as diabetes, hypertension and mental illness receive periodic care by a qualified health care provider in accordance with individual treatment plans, inclusive as deemed appropriate by the respective health care provider. For offenders whose chronic disease cannot be reasonably managed by the local jail facility, a Medical Transfer Request for DOC Offenders at Local Facilities Form C-05-004-B may be submitted to the ARDC.</p> <p>Visual Inspection: health records</p>	<p>Compliant. Offenders that are stable through use of maintenance medications are housed at this facility. All others are transferred to a DOC facility.</p>	
<p>IV-C-010 Pharmaceuticals Written policy, procedure, and practice approved by the health authority provide for the proper management of pharmaceuticals. Offenders are provided medication as prescribed.</p> <p>Visual Inspection: health records, completed medication administration forms, inventories</p>	<p>Compliant. Policy and procedures in place that has been approved by a HCA; copy in file. Facility contracts with an outside pharmacy for prescription medication services. MARS sheets are completed as required.</p>	
<p>IV-C-011 First Aid Kits First aid kits are available in areas of the facility as designated by the responsible health care authority and shall be immediately accessible to housing units.</p> <p>Visual Inspection: location of first aid kits within the facility</p>	<p>Compliant. First Aid kits are strategically located throughout the facility.</p>	
<p>IV-C-012 Access to Sick Call There is a process for all offenders to initiate requests for health services on a daily basis. Written policy, procedure and practice require that sick call is conducted by a physician and/or other qualified health care personnel who are licensed, registered or certified as appropriate to their respective professional discipline and who practice only as authorized by their license, registration or certification. Sick call shall be available to all offenders as follows:</p> <ul style="list-style-type: none"> •Facilities with fewer than 100 offenders - 1 time per week; •Facilities with 100 to 300 offenders - 3 times per week; •Facilities with more than 300 offenders - 4 times per week. <p>If an offender's custody status precludes attendance at sick call, then arrangements shall be made to provide such services in the place of the offender's detention.</p> <p>Visual Inspection: written policy and procedure</p>	<p>Compliant. Offenders can submit sick call requests on tablet in living area seven (7) days per week. Medical staff will see them the same morning. Offenders declaring their requests a medical emergency are seen immediately by medical staff.</p>	



	Findings	Response
<p>IV-C-013 Infirmity Care If infirmity care is provided onsite, it complies with applicable state regulations and local licensing requirements. Provision include 24 hour emergency on-call consultation with a physician, dentist and mental health professional. Written policy, procedure and practice provide that any offender who is identified as requiring a medical, dental or mental health need for which care is not readily available from the local facility, shall be immediately transferred to DPS&C. It is particularly important that smaller facilities recognize the commitment of the DPS&C to accept into their custody any state offender whose condition is problematic.</p> <p>Visual Inspection: admission or inpatient records, staffing schedule, completed form C-05-004-B</p>	<p>Compliant. This facility provides adequate medical attention for all offenders regardless of their ability to pay. Medical care is available on site 24 hours per day and there are established procedures in place should an offender require immediate outside hospital care.</p>	
<p>IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, Compassionate Release) Any offender sentenced to DPS&C custody that meets the medical criteria to be released on Medical Parole, Medical Treatment Furlough or Compassionate Release may be considered after submission of the required documentation in accordance with the corresponding Dept. Reg. to the DPS&C's Chief Nursing Officer via email to MedicalDirector@corrections.state.la.us or by fax to 225-342-7240.</p> <p>Visual Inspection: health records, documentation of approval of DPS&C's Chief Nursing Officer</p>	<p>Compliant. Policies and procedures are in place related to medical releases according to DPS&C guidelines. There were no medical releases during this monitoring period.</p>	
<p>IV-C-014 Suicide Prevention and Intervention There is a written suicide prevention and intervention program that is approved by a behavioral health professional who meets the educational and license/certification criteria specified by his/her respective professional discipline. The program must include specific procedures for handling intake, screening, identifying and continually supervising the suicide-prone offender. Observation of the suicide-prone offender will vary from continual observation to intervals no greater than fifteen (15) minutes. All staff with responsibility for offender supervision are trained annually in the implementation of the program.</p> <p>Visual Inspection: health records, documentation of staff training, documentation of observation of suicide watches.</p>	<p>Compliant. Facility has a good suicide prevention & intervention program in place and it has been approved by a qualified MH professional (Mark Colon).</p>	
<p>IV-C-015 Offender Deaths Written policy, procedure and practice specify and govern the actions to be taken in the event of an offender's death, which includes notification of the coroner of all offender deaths. All attempts to contact the coroner regarding any death shall be thoroughly documented. Such procedures shall also include the reporting requirements as outlined in 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).</p> <p>Visual Inspection: notification, reporting requirements, report to DPS&C</p>	<p>Compliant. Current policy is in place that fulfills the requirements of this guideline. Staff are aware of reporting requirements. There were two (2) offender deaths during this inspection period: July 2021 one (1) Pre-trial offender died at the hospital from natural causes. August 2021 one (1) Pre-trial offender died at the hospital from chronic illness.</p>	
<p>IV-C-016 Notification A visit with an immediate family member when the offender is admitted to an ICU or trauma center due to a serious bodily injury or due to being a terminally ill offender for the duration of the offender's admission to the ICU or trauma center, unless the Warden or designee provides written notice within 6 hours of the offender's admission to the ICU or trauma center to any immediate family member seeking visitation why such visitation cannot be granted, pursuant to La. R.S. 15:833(A) and Dept. Reg. C-02-008; •If the offender's admission to the ICU or trauma center occurs between 8:00 pm and 4:00 am, the Warden or designee shall provide the required written notification within 24 hours of the time the serious bodily injury occurred. •Pursuant to La. R.S. 15:833(A), the Warden or designee shall attempt to notify the offender's immediate family within 8 hours of the medical decision to transport the offender to the ICU or trauma center. •Based on extenuating circumstances the Warden or designee may extend the definition of an offender's immediate family member.</p> <p>Visual Inspection: notification records</p>	<p>Compliant. Policies and procedures are in place related to notification of family and visitation with an offender admitted to an ICU or trauma center according to DPS&C guidelines. There were no instances in which a family had to be notified during this monitoring period.</p>	
<p>D. HEALTH SERVICES STAFF References: ACA CJS 1-4D-02, 1-4D-04, 1-4D-05, 1-4D-07, 1-4D-08, 1-4D-09, 1-4D-10, 1-4D-17, 1-4D-18, Dept. Regs. B-06-001/HC-24/ISD-HCP44, HC-25/IS-D-HCP9, HC-26/IS-D-HCP10, HC-33/AM-D-5</p>		
<p>IV-D-001 Health Care Quarterly Meetings The health authority meets with the facility administrator at least quarterly.</p> <p>Visual Inspection: documentation of meetings</p>	<p>Compliant. HCA meets with facility administrator monthly - documentation in file.</p>	
<p>IV-D-002 Research Written policy, procedure, and practice prohibit offender participation in pharmaceutical, medical, or cosmetic experiments. This policy does not preclude individual treatment of an offender based on his/her needs using a specific medical procedure that is not generally available.</p> <p>Visual Inspection: written policy and procedure</p>	<p>Compliant. Current policy prohibits offenders from participation in clinical trials or experiments.</p>	
<p>IV-D-003 Health Care Personnel/Job Descriptions Health care staff work in accordance with professional specific job descriptions approved by the health authority.</p> <p>Visual Inspection: job descriptions</p>	<p>Compliant. Job descriptions have been approved by HCA - copies are in file.</p>	
<p>IV-D-004 Confidentiality of Health Information Information about an offender's health status is confidential. Nonmedical staff only have access to specific medical information on a "need to know" basis in order to preserve the health and safety of the specific offender, other offenders, volunteers, visitors, or correctional staff. An individual health record is maintained for all offenders in accordance with policies and procedures established by the health authority. The health record is made available to, and is used for documentation for all health care personnel. The active health record is maintained separately from the confinement case record and access is controlled. When an offender is transferred to DPS&C or another local facility, the offender's medical record is transferred as well.</p> <p>Visual Inspection: health records, completed consent forms, completed refusal forms</p>	<p>Compliant. Access to offender medical information/files is controlled and restricted to those who have legal authority. Medical records are maintained in a separate file and are forwarded along with the offender upon transfer to DPS&C or another facility.</p>	



	Findings	Response
<p>IV-D-005 Informed Consent Informed consent standards of the jurisdiction are observed and documented for offender care in a language understood by the offender. In the case of minors, the information consent of a parent, guardian or legal guardian applies when required by law. Offenders routinely have the right to refuse medical interventions. When health care is rendered against an offender's will, it is in accordance with state laws and regulations. Involuntary administration of psychotropic medications to offenders may only be accomplished by DPS&C.</p> <p>Visual Inspection: health records, completed consent forms, completed refusal forms</p>	<p>Compliant. Completed consent and refusal forms are in the file.</p>	
<p>IV-D-006 Emergency Response Emergency medical care, including first aid and basic life support, is provided by all health care professionals and those health-trained correctional staff specifically designated by the facility administrator. All staff responding to health emergencies are trained in CPR. The health authority approves policies and procedures that ensure that emergency supplies and equipment, including automatic external defibrillators (AEDs) are readily available and in working order.</p> <p>Visual Inspection: verification of training, records and certificates</p>	<p>Compliant. All staff have been trained in first aid & CPR. Certificates are in file. Emergency medical plans has been approved by HCA. Documentation is in file.</p>	
<p>IV-D-007 Internal Review/Quality Assurance The health authority approves policies and procedures for identifying and evaluating major risk management events related to offender health care, including offender deaths, preventable adverse outcomes and serious medication errors.</p> <p>Visual Inspection: evaluation of major risk management events</p>	<p>Compliant. Facility has a policy in place that has been signed & approved by a Health Care Authority.</p>	

E. SEXUAL ASSAULT		
	Findings	Response
<p>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</p> <p>IV-E-001 Alleged and Substantiated Sexual Assaults Written policy, procedure and practice provide for the prevention, detection, response, reporting and investigation of alleged and substantiated sexual assaults. (PREA) Information provided to offenders about sexual abuse/assault includes: <ul style="list-style-type: none"> •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 BJC I-C-001. An investigation is conducted and documented whenever a sexual assault or threat is reported. Investigative reports, that include DPS&C offenders, shall be submitted to appropriate DPS&C Regional Team Leader on Form C-01-022-E. Victims of sexual assault are referred under appropriate security provisions to a community facility for treatment and gathering of evidence.</p> <p>Visual Inspection: documentation of reports to DPS&C, investigative reports</p>	<p>Compliant. Written policy and procedures are in place. Staff has received training on PREA. Offenders receive PREA training during their orientation to the facility. PREA investigations are conducted according to DPS&C policy. There have not been any substantiated PREA allegations associated with DOC offenders during this rating period.</p>	

PART V - OFFENDER PROGRAMS AND ACTIVITY

A. OFFENDER OPPORTUNITIES FOR IMPROVEMENT		
	Findings	Response
<p>References: ACA CJS 1-5A-01, Dept. Reg. B-08-004/PS-F-1</p> <p>V-A-001 Volunteers/Registration There is an official registration and identification system for volunteers.</p> <p>Visual Inspection: activity schedules, facility logs</p>	<p>Compliant. Backgrounds are conducted on all volunteers. They are identified by their Caddo Correctional Center name badge.</p>	
<p>V-A-002 Volunteer Services A current schedule of volunteer services is available to all offenders and is posted in appropriate areas of the facility.</p> <p>Visual Inspection: activity schedules, facility logs</p>	<p>Compliant. Schedules are posted in all housing units.</p>	
<p>V-A-003 Programs and Services Written policy, procedure and practice provide for the availability of offender programs, services and counseling. Such programming may be obtained from acceptable internal or external sources which should include, at a minimum, assistance in obtaining individualized educational program instruction at a variety of levels. The local jail facility shall maintain class files on all DPS&C approved programming, whether the program is administered by DPS&C or other staff. The class files should include at a minimum: 1. Screening of offender(s) for program placement; 2. Offender application to program; 3. Program sign-in sheets and/or attendance rosters; 4. Signed copy of CTRP credit forms; 5. Documentation for staff oversight if program is not administered and/or overseen by DPS&C staff.</p> <p>Visual Inspection: activity schedules, facility logs</p>	<p>Compliant. Facility has programs and services in place for offenders.</p>	
<p>V-A-003-1 Educational Programming The DPS&C and the facility encourage educational programming which includes: 1. Adult Basic Education and/or Literacy 2. Industry Based Certification Training 3. Pell-eligible Post-Secondary Training Any planned or proposed programs for education in local jail facilities that house DPS&C offenders shall be submitted to the DPS&C Education Director.</p> <p>Visual Inspection: activity schedules, facility logs</p>	<p>Compliant. GED/HiSet programming has been currently suspended. Facility is attempting to obtain another instructor/teacher for this program.</p>	



B. PROGRAMS	Findings	Response
<p>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-T-1, C-02-008/OP-C-9, C-02-009/OP-C-7</p> <p>V-B-001 Releasing Offenders Procedures for releasing offenders from the facility include, but are not limited to, the following: <ul style="list-style-type: none"> •Return of personal property, to include any govt. issued ID (i.e., driver's license) that may have been collected from the offender during the intake process. •Provide offender with/and have him/her sign for any reentry transition document envelopes and all its contents. •Provision of a listing of available community resources. •Consideration by the prescribing health care practitioner for a provision of a 5-day supply of current maintenance medication (medication prescribed to stabilize a chronic medical or behavioral health illness), along with a prescription for a thirty (30) day of medication upon transfer or discharge. •Prior to release, offenders with serious medical and behavioral health conditions are referred to available community services. Appropriate health information is shared with the new providers in accordance with consent requirements. •Provision of adequate street clothing for indigent offenders. Offender shall not release in any prison issued attire, including but not limited to jumpsuits, striped scrubs, or stenciled clothing. Visual Inspection: completed release forms and documents, facility records and logs, offender records.</p>	<p>Compliant. Follow-up medical appointments are scheduled & offenders are notified of date and time to report. Upon discharge, a 5-day supply of meds is sent with each offender along with prescriptions for maintenance meds. Each offender is discharged with two forms of ID & provided information on community recourses in the parish of release.</p>	
<p>V-B-002 Visiting Written policy, procedure and practice govern visiting. The number of visitors an offender may receive and the length of the visits may be limited only by the facility's schedule, space and personnel constraints or when the facility administrator can present clear and convincing evidence that such visitation jeopardizes the safety and security of the facility. Conditions under which visits may be denied and visitors may be searched are defined in writing. Provisions are made for special visits in</p> <p>Visual Inspection: activity schedule, facility logs</p>	<p>Compliant. Visitation is allowed seven (7) days a week on their tablets or twice a week at the facility.</p>	
<p>V-B-003 Library Services Written Reading materials shall be available to offenders on a reasonable basis. Visual Inspection: activity schedule, facility logs</p>	<p>Compliant. Library services are available to all offenders.</p>	
<p>V-B-004 Religious Programs Written policy, procedure and practice define and provide reasonable offender opportunity for religious practice. Visual Inspection: documentation of offender religious activities, activity schedule</p>	<p>Compliant. Religious services are available to all of the population except offenders in lockdown status.</p>	
<p>V-B-005 Exercise and Recreation Access Offenders have access to exercise and recreation opportunities. Written policy, procedure, and practice provide for exercise opportunities adequate to ensure major muscle activity. Outdoor exercise shall be available on a regular basis (at least three times per week-weather permitting) for state inmates. If a state offender requires special management or has security supervision needs which preclude the opportunity for outdoor exercise at a facility, then he shall be transferred to the DPS&C. If a facility based on location, or other legitimate concern, does not make provision for outdoor exercise, then compensating, dedicated exercise facilities of adequate size to provide three exercise opportunities Visual Inspection: activity schedule, facility logs</p>	<p>Compliant. Offenders have access to suitable exercise and recreation opportunities as scheduled. Logbooks indicate compliance with this Basic Jail Guideline.</p>	
<p>V-B-006 Transitional Work Program/Standard Operating Procedures Transitional Work programs shall be operated in accordance with the Standard Operating Procedures for Offender Work Release Programs established by the DPS&C. Visual Inspection: DPS&C monitoring report.</p>	<p>Non-Applicable.</p>	
<p>V-B-007 Participation in Transitional Work Programs Participation in transitional work programs by state offenders shall comply with R.S. 15:711 and DPS&C Department Regulation No. B-02-001 "Assignment and Transfer of Offenders." Specific approval by the Secretary of DPS&C is required prior to program assignment of state offenders. Refer to Standard Operating Procedures for Offender Transitional Work Programs. Visual Inspection: approval for participation by the Secretary of DPS&C</p>	<p>Non-Applicable.</p>	
<p>V-B-008 Offender Work Program Participation in offender work programs by state offenders shall comply with the provision of R.S. 15:708 (parish jails) or R.S. 15:832 (police maintenance). Visual Inspection: offender voluntary participation, sheriff's approval of work program request, facility logs</p>	<p>Non-Applicable.</p>	
<p>V-B-009 Approval for Transitional Work Programs Any Sheriff interested in operation of a TWP facility shall obtain prior approval from the Chief of Operations. Refer to Standard Operating Procedures for Offender Transitional Work Programs. Visual Inspection: approval of Chief of Operations</p>	<p>Non-Applicable.</p>	
<p>V-B-010 Proposed Expansions Any planned or proposed expansions for transitional work program or jail facilities that house DPS&C offenders shall be submitted to the Secretary of the DPS&C and the Executive Director of the LSA for consideration and approval. Visual Inspection:</p>	<p>Compliant. There are no current plans for expansion.</p>	
<p>V-B-011 Mail and Correspondence Any Offenders may send and receive mail. Indigent offenders receive a specified postage allowance. Offenders are notified in writing when incoming or outgoing letters are withheld in part or in full. Written policy, procedure, and practice govern offender correspondence. Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail</p>	<p>Compliant. All mail except identifiable legal mail is opened and screened for contraband.</p>	
<p>V-B-012 Packages and Publications Written policy, procedure and practice govern offender access to publications and packages from outside sources. Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail</p>	<p>Compliant. Packages are not allowed at this facility. Publications are permitted if sent from identifiable sources.</p>	



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. Visual Inspection: facility log, activity schedule	Compliant. The facility offers numerous programs for offender population.	
V-C-002 Reentry Programs The DPS&C and the facility encourages reentry programming which includes: 1. Employment opportunities through work release; 2. At least two forms of valid identification upon release; 3. The development of a residential plan prior to release; 4. Referral to community based service providers upon release; 5. Where feasible, recommend DPS&C offenders receive 100 hours of pre-release training at a regional reentry center prior to transfer to a TWP, or release from custody. The local jail facility shall maintain reentry transition document envelopes for all DPS&C offenders, which include at a minimum, if applicable: 1. Any valid forms of identification; 2. Prescriptions and Medicaid card; 3. Community service referrals. Visual Inspection: documentation of employment opportunity, documentation of two forms of identification, residential plan	Compliant. A discharge packet was reviewed and found to be compliant with this guideline. Some offenders are released with two (2) forms of approved identification prior to discharge. Restoration information is provided to offenders releasing on full term. Some offenders discharged without an ID because the offenders discharged before they received the ID.	
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 LOCALJarna@corrections.state.la.us or by fax to 225-342-0929 within the first two weeks of the month preceding the scheduled hearing. Visual Inspection: offender record, completed questionnaire	Compliant. TIGERS are completed in a timely manner.	
V-C-004 Parole Board Procedures The facility Warden or his/her designee, of the local level facility in which the offender is housed, shall be present to provide information to members of the Parole Board regarding the offender's progress and disciplinary infractions during incarceration. Visual Inspection: offender record, trip log, documentation showing facility Warden or designee presence at parole board	Compliant. Policies and procedures are in place. All Parole Board hearings are held via Zoom. The Warden or his/her designees are present at the hearings. Documentation of any such occurrence is maintained.	

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/documents by completing a request form. All offenders have access to an in house law library where legal materials and documents are available.	
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. Offenders have access to verifiable attorneys by way of attorney visits, telephone calls, and confidential legal mail.	
VI-A-003 Protection from Abuse Written policy, procedure, and practice protect offenders from personal abuse, corporal punishment, personal injury, disease, property damage, or harassment. Visual Inspection: facility log, incident reports, staff training records	Compliant. Policy is in place. There were no signs of abuse observed. Training & facility logs indicate compliance.	

B. FAIR TREATMENT OF OFFENDERS		
References: ACA CJS 1-2A-16, 1-4C-01, 1-6B-01, 1-6B-02, Dept. Reg. B-05-005/OP-C-13		
	Findings	Response
VI-B-001 Discrimination Written policy, procedure, and practice provide that program access and administrative decisions are made without regard to offenders' race, religion, national origin, gender, sexual orientation, or disability. Visual Inspection: facility records, grievances, activity logs	Compliant. Policy in place, documentation reflects compliance. There were no obvious signs of discrimination observed. Review of related documents indicates equal treatment & opportunities for all offenders.	
VI-B-002 Grievance Process Offenders have reasonable access to a grievance remedy procedure that includes at least two levels of review if necessary. The grievance remedy procedure shall be an administrative means through which an offender may seek formal review of a complaint which relates to any aspect of his imprisonment if less formal procedures have not resolved the matter. Such complaints and grievances include, but are not limited to, actions pertaining to conditions of confinement, personal injuries, medical complaints, time computations, the classification process, or challenges to rules, regulations, or policies. Through this procedure, offenders shall receive reasonable responses within a specified time period and where appropriate, meaningful remedies. Visual Inspection: grievances	Compliant. All offenders have access to a grievance process, which includes at least two levels of review. Review of related files and documents indicates that grievances are answered appropriately and timely.	



PART VII - ADMINISTRATION AND MANAGEMENT		
A. RECRUITMENT, RETENTION AND PROMOTION		
References: ACA-CJS 1-1A-01, 1-1B-01, 1-1C-01, 1-1C-07, 1-4C-13, 1-4D-05, 1-4D-14, 1-7B-02, 1-7B-04, 1-7B-06, Dept. Regs. A-02-028/AM-F-22, C-01-008/OP-A-19	Findings	Response
VII-A-001 Training and Staff Development The facility conducts or participates in a training program which includes orientation for all new employees (appropriate to their job) prior to assuming a position or post. Such training must include: 1. Security procedures; 2. Hostage procedures – including staff roles and safety; 3. Fire and emergency plan/ procedures; 4. Suicide precaution and signs of suicide risks; 5. Use of force policies; 6. Inmate rules and regulations; 7. CPR and first aid; 8. Requirements of the Prison Rape Elimination Act (PREA); 9. Employees whose duties are the care, custody and control of offenders must complete the Peace Officers Standards and Training (POST) Level 3 certification training program which consists of the ACA core curriculum within one year of hire. Visual Inspection: lesson plans, staff training records	Compliant. Excellent training and staff development program is in place. All deputies receive appropriate initial and annual training as required. Deputies are post certified. Training documentation reflects full compliance.	
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. All deputies are POST certified & receive training on handling & retention of weapons. Qualifications are required annually & documentation is maintained in file.	
B. FACILITY ADMINISTRATION		
References: ACA CJS 1-4D-02, 1-7D-01, 1-7D-03, Dept. Reg. C-05-001/AM-I-4	Findings	Response
VII-B-001 Authority There is a statute or constitutional provision authorizing the establishment of the local jail facility or its parent agency. Visual Inspection:	Compliant. Copy of statute is in file.	
VII-B-002 Legal Assistance for Staff Written policy, procedure and practice specify the circumstances and methods for the facility administrator and other staff to obtain legal assistance as needed in the performance of their duties. Visual Inspection: personnel or training records	Compliant. Legal assistance for staff is provided by Pettiette, Armand, Dunkelmann, Woodley, Byrd & Cromwell LLP. Contract letter is in file. 05 July 2022.	
VII-B-003 Independent Financial Audit Written policy, procedure and practice provide for an independent financial audit of the facility. This audit is conducted annually or as stipulated by statute or regulation. Visual Inspection: annual audit	Compliant. Conducted by Carr, Rigg & Ingram CPA for FY year ending 30 June 2021.	
VII-B-004 Facility Insurance Written policy, procedure and practice provide for comprehensive facility insurance coverage. Visual Inspection: insurance policy	Compliant. Caddo Sheriff's Office maintains coverage with Old Republic Insurance Co. and ACE Property & Casualty. 01 Jan 2022 through 01 Jan 2023	
VII-B-005 Offender Funds Offenders' personal funds held by the facility are controlled by generally accepted accounting principals (GAAP). Any interest earned, other than operating funds, accrues to the benefit of the offenders. Visual Inspection: offender records	Compliant. Documentation is in the files.	
VII-B-006 Organization Written policies and procedures describe all facets of facility operation, maintenance and administration are reviewed annually and updated as needed. New or revised policies and procedures are disseminated to staff. A file for each guideline shall be maintained with documentation (primarily written) to support compliance. Visual Inspection: annual reviews, dissemination to staff	Compliant. All Basic Jail Guideline Files are in excellent order.	
VII-B-007 Annual Compliance Statement Written policy, procedure and practice demonstrate that the facility shall submit an annual statement confirming continued compliance with the BJG to the appropriate DPS&C Regional Team Leader. This statement, submitted by January 31st each year, is in writing and shall include: 1. A copy of the current Fire Marshal Report; 2. A copy of the current Health Inspection Report; 3. Any proposed or projected expansions; 4. Any rehabilitative programs that are available; 5. A copy of the current ACA Core Curriculum. Visual Inspection: annual statement	Compliant.	
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	Compliant	
VII-B-009 Staff Meetings Written policy, procedure and practice provide for regular meetings between the Sheriff, facility administrator, or designee and all department heads. There is formal documentation that such meetings are conducted at least monthly. Visual Inspection: staff meeting minutes/notes	Compliant. Conducted as required. Documentation of compliance in file.	
C. REASONABLE ACCOMMODATION		
References: ACA CJS 1-7E-01	Findings	Response
VII-C-001 Facility Equipment/Reasonable Accommodation Reasonable accommodations is made to ensure that all parts of the facility are accessible to the public are accessible and usable by staff and visitors with disabilities. Visual Inspection:	Compliant. All A.D.A. requirements are met at this facility for employees, visitors and offenders.	



INSPECTION REPORTS		
DEPARTMENT	Deficiencies	Corrective Action Taken
Fire Marshall Date of Current Report: 03/14/2022 Maximum Capacity: 1500	No apparent deficiencies at the time of inspection.	
DHH - Health Date of Current Report: 07/15/2022 Maximum Capacity: 1500	No apparent deficiencies at the time of inspection.	
DHH - Retail Food Date of Current Report: 07/13/2022	See report for deficiencies at the time of inspection.	Deficiencies have been addressed.

Physical Plant Inspection Caddo Correctional Center

Security Practices	Findings/Comments
Tool/Key Control	Systems were in place to ensure tool and key control. The Re-Entry carpentry program had a some tools that were not on inventory and
Evacuation Routes/Exit Signs Posted	Exit signs were posted throughout the facility.
Fire Extinguisher Inspections Current	All fire extinguishers in place with current inspections.
FTC (Flammable, Toxic, Caustic) Inventory & MSDS Sheets Readily Available	SDS sheets are readily available.
First Aid Kit Availability (list locations)	First Aid kits were in appropriate locations.
Number of Flex Cuffs on Hand	There were <u>1453</u> flexcuffs on hand during inspection.
All Offenders Drug Tested every 90 Days. Review 90 Day Tracking System and 5% of population tested monthly	5% or more of the DOC offenders are drug tested every month.
Employees Furnished With an Employee Handbook	Documentation showed that all employees were furnished with an Employee Handbook.
All staff, Volunteers and Employers Receive PREA Training; Review Logs and Training Verification Forms	Documentation showed that training was conducted.
General Appearance of Facility/Grounds	Overall appearance was good.
Offender Living Quarters	Findings/Comments
Areas Clean and Organized; Offenders Have Ample Storage Space for Personal Property	Living areas were clean and organized. Some of the Shower-area entrances had dust build-up on the steps. This was corrected during the audit.
Bathrooms Have Working Showers/Sinks/Toilets; Areas Free of Mold	Bathroom fixtures were working and area was free of mold. Some of the Shower walls and fixtures had soaps scum build-up. This was addressed during the inspection.
Recreation Areas Available to Offenders; Activities Offered to Offenders	Recreation area was clean and free of debris. Recreation is conducted twice (2) a day for forty-five (45) minutes.
Morale of Offenders	The morale of offenders seemed to be very good.

Kitchen	Findings/Comments
Cycle Menu Current	Cycle menus (four (4) cycles) were current and approved by a registered dietician.
Record of Meals Served	Documentation showed meals being served according to guidelines.
Utensil Inventory/Log in Place	Utensil inventory and logs were in place and properly completed.
Sample Trays Maintained	Sample trays were available for review.
Freezer/Cooler/Dry Storage Temperatures Recorded	Daily temperature logs were completed.
Hand Washing Facilities with Soap and Towels Available	Facilities were available with soap and towels
Registered Dietitian - Name and License Expiration	Jennifer Jackson
Medical	Findings/Comments
Sharps are Controlled and Inventoried	All sharps were inventoried and secured.
Medications are Secured and Controlled	All medications were inventoried and secured.
How Often Sick Call Conducted	Sick call is conducted five (7) days a week.
Method of Tracking Annual TB Testing	Methods were in place for annual TB testing. Intake offenders are tested upon intake and then all offenders are test annually by birthdate.
Outside Hospital Utilized for Emergencies	Ochsner / LSU Shreveport
Doctor and Registered Nurse - Name and License Expiration	David Nelson - MD 021624 Kelli Hayes - RN109669



John Bel Edwards
GOVERNOR

Office of State Fire Marshal

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



H. "Butch" Browning
FIRE MARSHAL

Inspection Report

Report # CB-21-015212-2

No Deficient/Cautionary Codes cited.

Location Information			
Inspection Type	Compliance Building Inspection		Inspection Date 3/14/2022 3:58:47 PM
Structure ID	45046	No. of Buildings	10
Capacity	1500	Year Built	1994
Building/Trade Name		Address	
CADDO CORRECTIONAL CENTER		1101 FORUM DRIVE, SHREVEPORT, LA 71107	
Owner Information			
Owner Type	Name	Contact Phone	Contact Email
Municipal Project		(318) 677-5250	MICHAEL.TAYLOR@CADDOSHERIFF.ORG
Address			
Tenant Information			
Name	Suite Number	Floor Number	Square Footage
Occupancy Details			
Occupancy Type	Details		
Institutional	INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 4		
Comments			
ARRIVED TO DO REINSPECTION ON FIRE ALARM PANELS AND SPRINKLER SYSTEMS. CHECKED ALL FIRE ALARM PANELS ALL WERE GREEN TAGGED ON 3-2-2022 BY FIRE TECH SYSTEMS. CHECKED ALL THE SPRINKLER SYSTEM THEY WERE ALL TAGGED ON 3-14-2022 BY FIRE TECH SYSTEMS. NO OTHER APPARENT DEFICIENCIES AT TIME OF INSPECTION. ACCEPTABLE FOR STATE LICENSE, OCCUPANCY AND USE.			
Inspector Information			
Name: Jeremy Neal	Badge Number: 739	Inspector Signature: <i>J. Neal</i>	
Person to whom requirements were explained			
Name: Fred Loughner	Title: Maintenance	Signature: <i>Fred Loughner</i>	

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

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



STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Detention or Incarceration
Notice of Violations

Follow-up

Permit Number 09-01-224	Permit Name Caddo Correctional Center-224		
Name of Establishment Caddo Correctional Center-224		Owner Name	
Address 1101 FORUM DR SHREVEPORT, LA 71107	Date 07/15/2022	Time 09:30 AM	

LAC TITLE 51 PART XVIII

Comments:

No violations noted.

Verbal acknowledgment of inspection by Sgt. Mastrodomenico.

A copy of the inspection was emailed to nickie.watson@caddosheriff.org

Number Licensed For	Number in Attendance	License Anniversary	
Sanitarian Name/Print Jahmal Nelson	Phone # 318-676-5265	Sanitarian Signature <i>JH</i>	R.S. # T1266

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

Correct Critical Violations by

Correct Non-Critical Violations by

Signature of Recipient

Name/Title
Sgt Mastrodomenico



STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Retail Food
Notice of Violations

Routine/Renewal

Permit Number 09-0002351-1	Permit Name CADDO CORRECTIONAL CENTER KITCHEN		
Name of Establishment CADDO CORRECTIONAL CENTER	Owner Name CADDO PARISH SHERIFF'S OFFICE		
Address 1101 FORUM DR SHREVEPORT, LA 71107	Date 07/13/2022	Time 09:30 AM	

LAC TITLE 51 PART XXIII

NON-CRITICAL ITEMS: These items should be corrected by the next regular inspection or according to the compliance schedule (see below) established by this office.		
Category	Code Reference	Description of Violations
UTENSILS/EQUIPMENT/SINGLE SERVICE	2101	67 - 2101.1 - Non-food contact equipment is not maintained in good repair. Dishwasher. [Repeat]

Comments:

Verbal acknowledgment of inspection by Sgt. Mastrodomenico.

A copy of the inspection was emailed to nickie.watson@caddosheriff.org

NOTICE RS 40:31.38 (ACT 66)

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

Sanitarian Name/Print	Phone #	Sanitarian Signature	R.S. #
Jahmal Nelson	318-676-5265	<i>JH</i>	T1266

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

Correct Critical Violations by	Correct Non-Critical Violations by
--------------------------------	------------------------------------

Name/Title	Signature of Recipient
Sgt Mastrodomenico	



Sergeant Nickie Mastrodomenico
CADDO CORRECTIONAL CENTER
1101 FORUM DRIVE
P. O. Box 70110
SHREVEPORT, LA. 71137-0110
PHONE: 318-677-525
E-MAIL: nickie.mastrodomenico@caddosheriff.org

Date: September 1, 2022

Ref: Department of Health – Retail Food

On July 13, 2022 a notice of non-critical violation was given to Caddo Correctional Center Kitchen for the dishwasher not working properly. The Caddo Commission was aware of the blower being out on that dishwasher. The Caddo Commission has a new blower on order from A John H. Carter Company, Inc. As of July 20, 2022 the Caddo Commission was informed, by John Carter Company, there was a global shipping issues on all GAST units. At that time, the Caddo Commission was told the expected ship date for the new blower was August 15, 2022. As of today, the Caddo Commission was told, by John Carter Company, the blower is due to leave the factory September 2, 2022 and arrive at Caddo Correctional Center by September 15, 2022. As soon as the replacement part is received the dishwasher will be repaired.


Nickie Mastrodomenico
Compliance Coordinator

SHERIFF AND EX-OFFICIO TAX COLLECTOR
505 TRAVIS STREET • ROOM 700 • SHREVEPORT, LOUISIANA 71101
(318) 681-0687 • WEB SITE: WWW.CADDOSHERIFF.ORG

**CERTIFIED TREATMENT AND REHABILITATION PROGRAM
CERTIFICATION OF CONTINUED COMPLIANCE**

Facility: Northwest Regional Reentry Programming - Caddo

Date: 2022

Name of Program: HiSet

Date of Program Implementation: 2010

Primary Area of Service Provided:

- Education
- Job Skill Training
- Values Development and Faith Based Initiatives
- Treatment Programs
- Miscellaneous

Program has been certified by DPS&C? Yes No

Program application process is consistent with DPS&C existing assessment and classification system? Yes No

Has program curriculum changed during preceding 12 months? Yes No

Is there an objective method used to assess completion? Yes No

Detailed records are maintained on the following:

- | | | |
|---|---|-----------------------------|
| All offenders who apply. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Number of offenders accepted. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Number and type of services provided. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Offender's completion/termination from program. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

Is there a formal graduation ceremony for those who complete the program? Yes No

The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.



Monitoring Team Member or BJJ Team Member/Leader

8/31/22
Date

**CERTIFIED TREATMENT AND REHABILITATION PROGRAM
CERTIFICATION OF CONTINUED COMPLIANCE**

Facility: Northwest Regional Reentry Programming - Caddo

Date: 2022

Name of Program: Standardized Pre-Release Program

Date of Program Implementation: 2009

Primary Area of Service Provided:

- Education
- Job Skill Training
- Values Development and Faith Based Initiatives
- Treatment Programs
- Miscellaneous

Program has been certified by DPS&C? Yes No

Program application process is consistent with DPS&C existing assessment and classification system? Yes No

Has program curriculum changed during preceding 12 months? Yes No

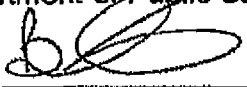
Is there an objective method used to assess completion? Yes No

Detailed records are maintained on the following:

- | | | |
|---|---|-----------------------------|
| All offenders who apply. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Number of offenders accepted. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Number and type of services provided. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Offender's completion/termination from program. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

Is there a formal graduation ceremony for those who complete the program? Yes No

The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.



Monitoring Team Member or BJJ Team Member/Leader

8/31/22
Date

**CERTIFIED TREATMENT AND REHABILITATION PROGRAM
CERTIFICATION OF CONTINUED COMPLIANCE**

Facility: Northwest Regional Reentry Programming - Caddo

Date: 2022

Name of Program: Carpentry

Date of Program Implementation: 2010

Primary Area of Service Provided:

- Education
- Job Skill Training
- Values Development and Faith Based Initiatives
- Treatment Programs
- Miscellaneous

Program has been certified by DPS&C? Yes No

Program application process is consistent with DPS&C existing assessment and classification system? Yes No

Has program curriculum changed during preceding 12 months? Yes No

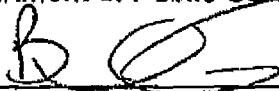
Is there an objective method used to assess completion? Yes No

Detailed records are maintained on the following:

- | | | |
|---|---|-----------------------------|
| All offenders who apply. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Number of offenders accepted. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Number and type of services provided. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Offender's completion/termination from program. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

Is there a formal graduation ceremony for those who complete the program? Yes No

The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.



Monitoring Team Member or BJC Team Member/Leader

8/31/22
Date

**CERTIFIED TREATMENT AND REHABILITATION PROGRAM
CERTIFICATION OF CONTINUED COMPLIANCE**

Facility: Northwest Regional Reentry Programming - Caddo

Date: 2022

Name of Program: HiSet

Date of Program Implementation: 2009

Primary Area of Service Provided:

- Education
- Job Skill Training
- Values Development and Faith Based Initiatives
- Treatment Programs
- Miscellaneous

Program has been certified by DPS&C? Yes No

Program application process is consistent with DPS&C existing assessment and classification system? Yes No

Has program curriculum changed during preceding 12 months? Yes No

Is there an objective method used to assess completion? Yes No

Detailed records are maintained on the following:

- | | | |
|---|---|-----------------------------|
| All offenders who apply. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Number of offenders accepted. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Number and type of services provided. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Offender's completion/termination from program. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

Is there a formal graduation ceremony for those who complete the program? Yes No

The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.



Monitoring Team Member or BJG Team Member/Leader

8/31/22
Date

**CERTIFIED TREATMENT AND REHABILITATION PROGRAM
CERTIFICATION OF CONTINUED COMPLIANCE**

Facility: Northwest Regional Reentry Center - Caddo

Date: 2022

Name of Program: Living in Balance

Date of Program Implementation: 2010

Primary Area of Service Provided:

- Education
- Job Skill Training
- Values Development and Faith Based Initiatives
- Treatment Programs
- Miscellaneous

Program has been certified by DPS&C? Yes No

Program application process is consistent with DPS&C existing assessment and classification system? Yes No

Has program curriculum changed during preceding 12 months? Yes No

Is there an objective method used to assess completion? Yes No

Detailed records are maintained on the following:

- | | | |
|---|---|-----------------------------|
| All offenders who apply. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Number of offenders accepted. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Number and type of services provided. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Offender's completion/termination from program. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

Is there a formal graduation ceremony for those who complete the program? Yes No

The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.

Monitoring Team Member or BJC Team Member/Leader

8/31/2022
Date



JOHN BEL EDWARDS
Governor

JAMES M. Le BLANC
Secretary

State of Louisiana

Department of Public Safety and Corrections

August 31, 2022

Caddo Parish – Northwest Regional Reentry Center

Auditor: Beth Florentine, Regional Reentry Program Consultant

The following CTRP programs have been discontinued at the Caddo Parish Northwest Regional Reentry Center.

1. Welding
2. UCCI CBI Employment
3. Inside Out Dads

Revisions to the existing programs listed Department Regulation IS-B-8 attachment C are currently under review by the Office of Reentry Services.

A handwritten signature in black ink, appearing to read "Beth Florentine".

Beth Florentine
Regional Program Consultant

Post Office Box 94304 • Baton Rouge, Louisiana 70804-9304 • (225) 342-6740 • Fax (225) 342-3095

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