Department of Public Safety & Corrections State of Louisiana

JOHN BEL EDWARDS
GOVERNOR



JAMES M. LE BLANG SECRETARY



December 3, 2022

MEMORANDUM

TO:

The Honorable John E. Ballance

neXff of Bier ville Parish

FROM:

James M. Le Blanc

Secretary

RE:

"Basic Jail Guidelines" Monitoring Report

Please see the attached monitoring report regarding the Basic Jail Guidelines (BJG) annual inspection that was conducted at Bienville Parish Jail on October 27, 2022. The facility continues to provide a secure, safe, and stable environment for DOC offenders in their custody. At this time DPS&C will continue with annual monitoring visits.

Thank you for your support of the BJG process.

JML/mwk

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association LaTricia Green, Warden, Bienville Parish Jail Seth Smith, Chief of Operations Jerry Goodwin, Warden, DWCC James Arnold, BJG Team Leader



BJG MONITORING REPORT

x Annual, Semi-Annua	l, Quarterly	, Monthly, o	r Recert with	Waiver			
S				Rev. 08/01/2022 mwk			
Facility Name:	Bienville Parish	ı Jail					
	Colonel James	Arnold, BJG Tea	am Leader				
Facility Warden & Email Address:				org			
	Warden LaTricia Green						
BJG Inspection Date:	October 27, 2022						
Previous BJG Inspection Date:	June 22, 2021						
Operational Capacity:	55						
Count on Day of Visit:	29						
Concerns or Issues from the previ	ous BJG Moni	toring Inspectio	<u>n</u> :				
	# MALE	#FEMALE	TOTAL	ĺ			
Number of DOC Offenders	9	0	9				
Number of Local Offenders	20	0	20				
Number of Out of State Offenders	0	0	0				
Number of Federal Offenders	0	0	0				
Number of ICE Detainees	0	0	0				
TOTAL	29	0	29				
Number of DOC Offenders that are	•						
Single Bunked	9						
Double Bunked	0						
Triple Bunked	0						
Total	9						
Number of DOC Offenders that are	in Restricted	Housing:					
Single Bunked	0						
Double Bunked	0						
Triple Bunked	0						
Total	0						

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

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

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

Month/Year	Illicit	Alcohol	Moonon	Cell Phone	Other
Worth/Tear		Alconoi	Weapon	Cell Phone	Other
	Substance		•		
October 2021	0	0	0	0	0
November	0	0	0	0	0
2021			_		
December	0	0	0	0	0
2021					
January 2022	0	0	0	0	0
February 2022	0	0	0	0	0
March 2022	0	0	0	0	0
April 2022	0	0	0	0	0
May 2022	0	0	0	0	0
June 2022	0	0	0	0	0
July 2022	0	0	0	0	0
August 2022	0	0	0	0	0
September	0	0	0	0	0
2022					

GENERAL APPERANCE, CLEANLINESS, AND COMMENTS OF THE FACILITY:

Living Area:

- Dorms Dorms were clean and offender property was neatly stored.
- Cell Block Cells were clean and all offender property was stored neatly.

Culinary/Dining: Culinary/dining area were clean. Inventories were correct and all utensils were accounted for. Licensed dietician Hollis Lyles (exp. 6/30/23) approved the cycle menu that was in use. Offenders are served in the common area of the dorms or in their individual cells.

Bathrooms: Lavatory/Showers have temperature controlled hot/cold water and temperatures are checked. Bathrooms were clean and odor free.

Yard Areas: Yard area was clean no clutter nor trash present. Logs show where offenders are allowed to exercise.

Maintenance: Overall maintenance at the facility is good. Maintenance request and repairs records are kept in file. A worker from the police jury performs all facility maintenance within the jail.

REVIEW AND COMMENT ON THE FOLLOWING BASIC JAIL GUIDELINES: (Compliant or Non-Compliant)

I-A-001 Safety/Sanitation/Inspections (MANDATORY): Compliant

Documentation reflects that daily, weekly and monthly inspections are regularly performed at the jail. Current DHH Retail Food and DHH Incarceration on 5/5/22. Current FM (2/21/22) inspections are in file. See reports for deficiencies.

I-C-001 Emergency Plan (MANDATORY): Compliant

Facility has an emergency plan in place and has been sent to the Sec. DPS&C for approval. Employees were able to describe in detail evacuation procedures and notification process.

I-C-003 Fire Safety/Code Conformance (MANDATORY): Compliant. Last FM 2/21/22 was on 2/21/22 no deficiencies noted.

II-A-006 Staff Log (MANDATORY): Compliant.

Staff logs of pertinent information (ie, shift activity, daily events, security staff/supervisor rounds, etc) were reviewed and found in good order. Logs are in file.

II-A-007 Counts (MANDATORY): Compliant

Facility conducts 2 formal counts per shift for a total of 4 major counts a day. Additional counts are conducted during inclement weather and as necessary.

- How many formal counts are conducted each shift? 2
- How many counts are conducted each day? 4

Stick outs counts

- How does the facility accomplish this? The facility conducts a physical head count.
- > Does this process ensure accountability and safe/secure operation of the facility? YES

II-A-008 Offender Population Management System: Compliant

If an offender is transferred to another local or DPS&C facility all records are transferred with offender.

II-A-010 Admissions: Compliant

Current policy and procedure are in place. Admission forms are thorough and completed.

II-A-012 Classification System: Compliant.

Classification system in place meets all requirements. Any potential issues are addressed upon initial classification to aid in ensuring proper custody level and placement within the facility.

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

If yes,

- What is their classification process to determine who is eligible for trustee status?
 Same criteria as DPS&C.
- Does their classification process meet DPS&C, Corrections Services' criteria? YES

II-A-016 Photo Identification (MANDATORY): Compliant

Offenders have photo ID issued to them upon intake.

II-A-018 Offender Drug Testing (MANDATORY): (List monthly since the previous BJG monitoring visit.)

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
October 2021	2	9	22%	0
November 2021	2	9	22%	0
December 2021	2	8	25%	0
January 2022	2	5	40%	2 meth
February 2022	2	8	25%	1 meth, 1 Thc
March 2022	2	9	22%	1 Thc 1 Meth
April 2022	3	11	27%	1 pos. cocaine, 1 Meth
May 2022	2	11	18%	0
June 2022	2	9	22%	0
July 2022	2	9	22%	0
August 2022	2	9	22%	0
September 2022	2	9	22%	0

II-A-019 Offender Transfers: Compliant

Proper notification is made when offenders are transferred to another facility within guidelines. Documentation is maintained.

II-A-020 Cell Checks (MANDATORY): Compliant

Policy and procedures are in place and were on file. Rounds are to be done every 30 mins.

II-B-002-1 Use of Restraints for Pregnant Offenders: Compliant.

Facility does not house female offenders.

II-C-001 Procedures for Searches: Compliant

Procedures in place and logs maintained on searches and detection of contraband.

II-D-001 Key, Tool, and Utensil Control (MANDATORY): Compliant

Facility does not maintain tools within the jail. Inventories for utensils were correct and all were accounted for. Good key control and emergency keys are secured in the dispatch office down stairs.

III-A-001 Rules and Discipline (MANDATORY): Compliant. All offenders receives a facility and DPS&C rule book and signatures of receipts are keep on file.

- Does the facility's offender orientation include the application process for applying for restoration of good time? Yes
- What is their restoration of good time application process for the offender population? All
 restoration of good time is forwarded to the facility Warden then forwarded to DWCC.
- Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? Yes

IV-A-003 Food/Dietary Allowances (MANDATORY): Compliant

Cycle menus are utilized by this facility. All cycle menus are reviewed and approved by a registered dietitian Hollis Lyles license exp. 6/30/23, A tray/plate and utensil is provided for each hot meal.

IV-A-006 Food Services Management (MANDATORY): Compliant

Offenders are provided 2 hot meals per day. Ample time is permitted for meal consumption and time lapse between meals is in compliance within the guidelines.

IV-B-001 Plumbing Fixtures – Toilets & Washbasins (MANDATORY): Compliant

All offenders have access to toilets/washbasins with temperatures controlled hot/cold water at all times.

IV-B-002 Plumbing Fixtures – Showers (MANDATORY): Compliant

All offenders are able to shower every day. Water temperatures logs indicate full compliance with the guidelines.

IV-B-005 Personal Hygiene (MANDATORY): Compliant

Indigent offenders are provided with personal hygiene items if they're not able to purchase them.

IV-C-001 Access to Care/Clinical Services (MANDATORY) (Does the facility charge a co-payment? If so, approved by DPS&C?): Compliant. Health care is provided at this facility with no medical co-pay.

Offenders are advised of all clinical services provided and how to obtain these services.

IV-C-003 Provision of Treatment (MANDATORY): Compliant. Nurse Practitioner Ashley Thomas (lic

APO4826 EXP. 1/31/23) sees all offenders for sick call at the jail and services are provided or referred as needed. Dr. Don Smith sees offenders for any mental health concerns and dental is provided by Horseshoe Dental of Minden La. Also uses Dr. Patrick Grayson 13301R. APO4826 1/31/23

IV-C-005 24 Hour Care (MANDATORY): Compliant.

If further medical attention is needed offenders are transported to Bienville Medical Center or Dr. Grayson family clinic. Ambulatory services are provided by Pafford Ambulance.

IV-C-006-1 Pregnancy Management (MANDATORY): Compliant

There are no DOC female offenders housed at this facility.

IV-C-008 Annual TB Testing: Compliant

TB Testing is conducted on all offenders annually at no cost to the offender. Documentation is on file to show compliance.

IV-C-009 Chronic Care Program (MANDATORY): Compliant

Only offenders who are stable through use of medication are housed at this facility. All other offenders are transferred to a DOC facility upon approval from DOC.

IV-C-012 Access to Sick Call (MANDATORY): Compliant

Sick call is accessible to all offenders daily.

IV-C-013 Infirmary Care: Compliant

Facility does not house offenders that require infirmary care. Emergency care is provided by Bienville Medical Center. Pafford Ambulance Service provides ambulatory transport. Offenders who require infirmary care are transferred to a DOC facility.

IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, and/or Compassionate Release):

Compliant. Facility does not have an in house infirmary therefore any offender to which this guideline applies are transferred to a DOC facility.

IV-C-014 Suicide Prevention and Intervention (MANDATORY): Compliant

Facility has a functional suicide prevention and intervention policy in place that has been signed by Dr. Don Smith.

IV-C-015 Offender Deaths (MANDATORY): Compliant

No offender deaths this rating period.

IV-C-016 Notification: Compliant

Policy 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.

IV-D-001 Healthcare Quarterly Meetings (MANDATORY): Compliant

Quarterly meeting are conducted and documentation is on file.

IV-D-004 Confidentiality of Health Information/Individual Health Record: Compliant.

Completed and signed consent forms are in place in all offender files.

- IV-006-1 Emergency Assessment for Intoxication or Suspected Intoxication (MANDATORY): Compliant. Policy and procedures are in place and on file.
- **IV-D-007 Internal Review/Quality Assurance (MANDATORY):** Compliant. Facility has a policy in place that has been approved by a Health Care Authority. Documentation is on file.

IV-E-001 Alleged and Substantiated Sexual Assaults: Compliant

Facility has a written PREA policy in place that mirrors the DPS&C policy. Sheriff Department investigates all PREA allegations. No substantiated PREA allegations this rating period.

- Is this facility required to be PREA compliant due to contract language? (Yes or No) N/A
- Is this facility PREA compliant? (Yes or No) N/A
 - > If yes, date compliance received:
 - If this facility is required to be PREA compliant due to contract language, and has not done so, what is their plan of action for compliance?
- V-A-004 Religious Programs: Compliant

Volunteers are utilized for the religious services.

V-A-005 Exercise & Recreation Access (MANDATORY): Compliant

Offenders are allowed access to recreation 3x weekly with weather permitting.

V-B-001 Programs and Services: Compliant

Offender wishing to participate in treatment programming are transferred to a facility that offers programming.

- List all Certified Treatment Programs (Attach Form IS-B-8-b)
 N/A
- List all other Offender Programs N/A

V-B-002 Educational Programming: N/A

GED Program

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

V-B-003 Substance Abuse Programs: N/A

V-C-001 Releasing Offenders: Compliant.

A discharge packet was reviewed and found to be compliant with this guideline. Offenders receive all needed medication, community resource information and property upon release.

V-C-002 Regional Reentry Programs (Are offenders releasing with two valid forms of identification?): Compliant. Offenders are released with 2 forms of ID'S.

V-C-004 Parole Board Procedures: Compliant

Policy and procedures are in place related to the presence of the Warden or his/her designees being present at Parole Board hearing. Documentation of any such occurrence is maintained.

VI-B-002 Grievance Process (MANDATORY): Compliant

- Does grievance process include at least two levels of review? YES
- Who is the designee at each level of review? 1st Level Warden, 2nd level Chief Deputy.
- What is the specified time period for response at each level? 1st level 3 days, 2nd level 5 days.

VII-A-002 Weapons Training: Compliant

All deputies authorized to use firearms are POST certified and receives appropriate training regarding the use, handling and retention of weapons. Qualifications are required annually and documentation is maintained in file.

VII-B-010 Monthly Reporting: Compliant

Facility submits monthly reports as well as weekly and annual compliance statements on a timely basis.

VII-B-012 Proposed Expansions: Compliant

No plans for expansions at this time.

OTHER:

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

The morale at this facility was deem to be very good and all employees seems to enjoy their job. Years of service for employees at this facility per Warden Green range from 5 years to 15 years. Staff were very knowledgeable of their assigned duties and policies of the facility. The level of dedication and professionalism were exceptional.

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE: I spoke with some offenders during my inspection and they were quiet and well mannered. All of the offenders stated that Warden Green and her staff are always respectful and professional when interacting with them. All offender comments were positive in nature. Offenders stated that the food was very good. Had no negative comments from any offenders.

RECOMMENDATION: Based on my walk through inspection of the facility and review of the BJG files it is recommended that Bienville Parish Jail continues with annual monitoring.



Office of State Fire Marshal

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

Inspection Report Report # CB-21-014835-1



GC	VERNOR	No Deficient/Cautionary Codes cited.							FIRE MARSHAL	
				Loc	ation	n Inform	ation	lc		
Inspec	tion Type	Compliance	Building	Inspection				Inspection Date		2/21/2022 1:47:20 PM
Structu	re ID	18818	No. of Build		ngs	1		Facility Code		J159
Capaci	ty	55		Year Built		1960		Construction	Туре	Type IIB / (000)
Building/Trade Name BIENVILLE PARISH JAIL						Addres 328 SO		EECH STREE	T, ARCA	DIA, LA 71001
				O	wner	Informa	ation	-		
Owner	Туре		Name			Contact Phone Contac			t Email	
Municip	al Project	BIENVILLE PARISH F		LE PARISH P	OLIC	EJURY	(318)	377-1540	LGREE	N@BIENVILLESHERIFF.O
Addres	IS									
PO BO	X 328, ARC	ADIA, LA 710	01							
				Te	nant	Inform	ation			
Name			Suite	te Number		Floor Number		Square Footage		
				00	cupi	ancy De	talls			
Occup	ancy Type		Details							
Instituti	onal		INSTITU DETEN	TIONAL BUIL	DING	TYPE O	ROU	P I-3 (DETENT PE: CONDITIO	ION/COR	RRECTION);
					Co	mments				
MONTH FIRE EX ALL MA FIRE DI NO APP	SUPPRESS (S). XTINGUISH NUAL LOC BULL COND	ERS CERTIF KS APPEAR UCTED EVER	CERTIF	2021 IED ON 12/13/ 7/2021. NORMAL WO	2021 RKINI	- NEXT F	REQUI	S.	ION 06/	USE 5. 13/2022 (EVERY 6 OCCUPANCY AND USE.
ii wixipx i E	COUNT:	20								
				Insp	ecto	r Inform	ation			
Name:	Brandon L	amkin	Bange N	umber: 726			-	ctor Signature:	Sel,	Lie
			Pers	on to whom	regu	ireman	es jare	re explained		
Vame:	Ray Cook		Title: C	orrectional Off	cer		Signat		724	V (2009 - 10)
or ques	stions rega	rding the con	tents of	this record nie				-		

(225) 587 5656



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Retail Food Notice of Violations

Routine/Renewal

Permit Number 07-0001015-1	Permit Name BIENVILLE PARISH JAIL				
Name of Establishment BIENVILLE PARISH JAIL	Owner Name BIENVILLE PARISH JAIL				
Address 100 COURTHOUSE DR ARCADIA, LA 71001	Date 05/05/2022	Time 11:30 AM			

LAC TITLE 51 PART XXIII

ablished by this office.		
Category	Code Reference	Description of Violations
FOOD PROTECTION	1501	54 - 1501.4 - Food is not stored six (6) inches off the floor. [COS]

Comments:

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

VERBAL ACKNOWLEDGEMENT OF REPORT PROVIDED BY: LATRICIA GREEN, WARDEN

COPY OF REPORT EMAILED TO: LGREEN@BIENVILLESHERIFF.ORG

NOTICE RS 40:31.38 (ACT 66)

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

Sanitarian Name/Print Phone # Sanitarian Signature R.S. # Jarahji Wilson 318-676-5260 Jarahji W. 3237

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

Correct Critical Violations by Correct Non-Critical Violations by

Signature of Recipient

Name/Title

LATRICIA GREEN, WARDEN

	FLOUISIANA
	NT OF HEALTH PUBLIC HEALTH
OFFICE OF F	OBLIC REALTH
INSTITUTION	ON REPORT
Agency License No.	Anniversary Month
	JULY
Name of Establishment	Mailing Address
BIENVILLE PARISH JAIL-224	
Address	
100 COURTHOUSE DR	
City, state, Zip Code	
ARCADIA LA 71001	
Type of Facility	
JAILS 55 28	Telephone (
Parish	Date Inspected
Bienville	05/05/2022
The above establishment has been inspected by a representative of	this section, and:
✓ License is Recommended;	
License is Not Recommended;	
License is Pending Reinspection;	
from the standpoint of sanitation	JARAHJI WILSON 3 2 3 7
LHS 48 (R 7/99)	D 1014



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Detention or Incarceration Notice of Violations

Routine/Renewal

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

LAC TITLE 51 PART XVIII

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

Comments:

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

Number Licensed For 55		Number in Attendance 28	License Anniversary 07/31/2021
Sanitarian Name/Print Phone # Jarahji Wilson 318-676-5260		Sanitarian Signature	R.S. # 3237
The above mentioned vio Correct Critical Violation		o my attention and were explained to Correct Non-Critical Vi	
Name/Title LATRICIA GREEN, WA	RDEN	Signature of Recipient	

	STATE OF LOUISIANA EPARTMENT OF HEALTH	
	FICE OF PUBLIC HEALTH	
п	NSTITUTION REPORT	
Agency License No.	Anniversary Month JULY	
Name of Establishment BIENVILLE PARISH JAIL-224	Mailing Address	
Address 100 COURTHOUSE DR		
City, state, Zip Code ARCADIA LA 71001		
Type of Facility JAILS 55 28		
Parish Bienville	Date Inspected 05/05/2022	
The above establishment has been inspected by a represent License is Recommended; License is Not Recommended; License is Pending Reinspection;	entative of this section, and:	
from the standpoint of sanitation	JARAHJI WILSON	3 2 3 7
LHS 48 (R 7/99)		D 101-



Buden La mian Snew

BIENVILLE PARISH SHERIFF'S OFFICE

JOHN E. BALLANCE SHERIFF AND EX-OFFICIO TAX COLLECTOR

P. O. Box 328 • 100 Courthouse Dr.

ARCADIA, LOUISIANA 71001

PHONE (318) 263-2215 • FAX (318) 263-7418

To Whom It May Concern,

I Warden LaTricia Green has corrected the Detention or Incarceration Notice of Violations that was done on 5/5/2022 @11:15am. LAC Title 51 Part XXVIII was a non-critical item for the Bienville Parish Jail. The items below were corrected with the necessary correction. Violation #1 (Building Requirement. There is peeling paint on the walls in the shower. Violation #2 The toilet's are not properly constructed. Loose Toilet screws were noted. These violations were corrected the same day.

Warden LaTricia Green