# Department of Public Safety & Corrections State of Louisiana

JOHN BEL EDWARDS
GOVERNOR



JAMES M. LE BLANG SECRETARY

January 17, 2023

### MEMORANDUM

TO:

The Honorable Steven McCain

Sherif of Grant 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) recertification inspection that was conducted at Grant Parish Detention Center on August 21, 2022.

BJG guideline IV-D-001 "Health Care Quarterly Meetings" was found to be non-compliant. However, Warden Watkins ensured that quarterly meetings with the health authority and the facility administrator would be implemented asap.

Also, BJG guideline III-A-001 "Rules and Discipline", the report indicates the offender orientation does not include the application process for applying for restoration of good time. However, it was noted that the facility is in the process of adding these procedures to their orientation.

DPS&C encourages compliance with IV-D-001 "HealthCare Quarterly Meetings" as well as III-A-001 "Rule and Discipline". At this time DPS&C is recertifying Grant Parish Detention Center in compliance with the Basic Jail Guidelines with annual monitoring.

Congratulations to you and your staff on 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 James Watkins, Warden, Grant Parish Detention Center Seth Smith, Chief of Operations Marcus Myers, Warden, RLCC Chad Firmin, BJG Team Leader

AN EQUAL OPPORTUNITY EMPLOYER



# 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

# Grant Parish Detention Center in acknowledgement of

# Continued Compliance with the Basic Jail Guidelines Process

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

this \_\_\_\_\_ day of \_\_\_\_ January
in the year of our Lord \_\_\_\_\_ 2023





# **BJG RECERTIFICATION REPORT**

Rev. 03/22/2022 mw

Facility Name:

Grant Parish Detention Center

BJG Team Leader & Monitors:

Lt. Col. Chad Firmin

Facility Warden & Email Address: Warden James Watkins

Warden James Watkins watkins@grantso.org

Facility Staff:

Assist. Warden Chance Durand cdurand@grantso.org

BJG Inspection Date: Previous BJG Inspection Date:

August 21, 2022 November 17, 2021

Operational Capacity:

106

Count on Day of Visit:

89

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	51	0	51
Number of Local Offenders	36	2	38
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	87	2	89

### Number of DOC Offenders that are:

Single Bunked	0	
Double Bunked	49	
Triple Bunked	0	
Total	49	

# Number of DOC Offenders that are in Restricted Housing:

Single Bunked	0
Double Bunked	2
Triple Bunked	0
Total	2

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
September 21	Ö	0	0	0
October 21	2	0	0	0
November 21	0	0	0	0
December 21	3	0	0	0
January 22	0	0	0	0
February 22 ,	1	0	0	0
March 22	0	0	0	0
April 22	0	0	0	0
May 22	0	0	0	0
June 22	0	0	0	0
July 22	0	0	0	0
August 22	0	0	0	0

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

Month/Year	Illicit	Alcohol	Weapon	Cell Phone	Other
	Substance		-		
September 21	0	0	0	0	2 tobacco
October 21	0	0	0	0	2 cigarettes
November 21	1 mojo	0	0	0	5 cigarettes
December 21	0	0	0	0	1 tobacco
January 22	0	0	0	0	1 vape, 1 vape juice, 1 tobacco
February 22	0	0	0	0	1 pk tobacco, 2 crushed Tylenol
March 22	0	0	0	0	3 tobacco, 1 piece wire, 1 vape
April 22	0	0	0	0	3 tobacco
May 22	0	0	Ô	0	3 tobacco, 1 metal lid
June 22	0	0	0	0	1 vape juice, 1 tobacco
July 22	0	0	0	0	2 tobacco, 5 lighters
August 22	0	0	0	0	5 cigarettes, 3 tobacco

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

# Living Area:

- **Dorms** Dorms are neat and clean. Offender belongings stored properly. All offenders have sheets and blankets on their beds.
- Cell Block The lockdown cells are clean.

**Culinary/Dining**: The facility does not have a dining area. The food is prepared in the kitchen and put in food carts and transported to the dorms. The offenders eat at the tables located in the dorms. Kitchen utensils are on inventory and stored in a locked cabinet and being signed in and out. Cooler and freezer temperatures are being checked and recorded by kitchen staff.

**Bathrooms**: Bathrooms are clean. Adequate hot water is available in dorms for offender use. Bathroom facilities are in working order. Hot water temperatures are checked and recorded.

Yard Areas: The yard area is kept neat and clean. There is a fenced in yard located in the back of the facility that is utilized for offender recreation.

**Maintenance**: The maintenance building is located in a separate building across from the jail. The tool room is in a locked cage area on a shadow board. Tools are on inventory and are signed in and out. Cleaning supplies are also located in the cage area and labeled and on inventory. Checked inventory on supplies and inventory was accurate.

### COUNTS:

- How many formal counts are conducted each shift? 3 each shift
- How many counts are conducted each day? At least 6 counts each day
- <u>Stick outs counts</u> are counts that are conducted in areas other than housing units, such as food services and other areas of normally authorized locations. When conducting and submitting the counts, employees are to actually see the offender before turning in theses counts.
  - How does the facility accomplish this? The officer that is assigned to work offenders that are not in the housing unit during count will call their count in to control at the appropriate count time.
  - Does this process insure accountability and safe/secure operation of the facility? Yes

#### **CLASSIFICATION SYSTEM:**

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

If yes,

- What is their classification process to determine who is eligible for trustee status? Offenders can fill out
  an application for trustee. The application will be reviewed by administration to determine eligibility. If
  the offender is eligible then the offender will start off working as a trustee within the facility before being
  assigned to work on any outside crews. Criminal history, time serving, current charges, medical and
  mental status is all reviewed to determine trustee status.
- Does their classification process meet DPS&C, Corrections Services' criteria? Yes

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

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
September 21	9	30	30	1 meth
October 21	11	33	33	0
November 21	19	37	51	2 thc
December 21	13	40	33	1 opiates
January 22	15	46	33	1 refusal
February 22	11	47	23	0
March 22	15	49	31	0
April 22	13	49	27	0
May 22	15	49	31	0
June 22	15	51	29	0
July 22	15	43	35	0
August 22	18	51	35	0

### **RULES AND DISCIPLINE**:

Does the facility's offender orientation include the application process for applying for restoration of good time? (Yes or No) No not at this time. In the process of adding to the orientation.

If yes,

- What is their restoration of good time application process for the offender population? N/A
- Does their restoration of good time application process meet DPS&C, Corrections Services' criteria?
   N/A

# **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

Number of GED Slots	25	
Number of Participants	9	
YTD Number of Completions	2	

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

Thinking for a Change
Victims Impact
Understanding and Reducing Angry Feelings
Risk Management I & II
Inside Out Dads
Hi-Set
FDIC Money Management
Cognitive Behavioral Interventions for Seeking Employment

# **LIST ALL OTHER OFFENDER PROGRAMS**:

Church services

# **GRIEVANCE PROCESS:**

- Does grievance process include two levels of review? Yes
- Who are the designees at each level? Assist, Warden, Warden
- What is the specified time period for response at each level? 1<sup>st</sup> level -3 to 5 days, 2<sup>nd</sup> level- 5 to 10 days

### PREA COMPLIANCE:

- Is this facility required to be PREA compliant due to contract language? (Yes or No) No
- Is this facility PREA compliant? (Yes or No) No
  - If yes, date compliance received:
- 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?

### OTHER:

## STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

All employees are polite and courteous and knowledgeable of job duties. Employees work well together to maintain safety and security of the facility. Staff morale appeared good and employees seem to enjoy working at the facility. The overall appearance of the facility is very clean and maintained.

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

During the walk through inspection several offenders were spoke to and there was no concern or problems voiced. Quality of life and offender morale appear good.

### **RECOMMENDATION:**

IV-D-001 Health Care Quarterly Meetings - Was found as non-compliant due to no documentation of such meetings being held on file. Advised the Warden that these meetings are to be held quarterly. A sign in sheet with topics for meeting and signatures of persons attending need to be on file.

At this time I do not see anything that would cause any issues with the quality of care given to offenders at the facility and would recommend recertification with continued annual monitoring under BJG guidelines.



acility: Grant Parish Dentention Facility	Date Conducted: September 21, 2022	
lonitors: Lt. Col. Chad Firmin Team Leader		
	BASIC JAIL GUIDELINES (BJG)	
PART I - SAFETY		
. PROTECTION FROM INJURY AND ILLNESS		
eferences: ACA CJS 1-1A-01, 1-1A-02, 1-1A-03, 1-1A-04, 1-1A-05, 1-1C-05, 1	Findings	Response
A-03, 1-4A-04 -A-001 Safety/Sanitation/Inspections	Compliant- Daily and weekly inspections being	
he facility complies with all applicable laws and regulations of the State Sanitation	done. Copies on file. DHH retail food 6/30/22	
officer and the State Fire Marshal. The following inspections are implemented:	with noted violations COS. DHH 6/30/22. FM	
Weekly sanitation inspections of all facility areas by a qualified departmental staff	4/6/22	
nember.  Weekly inspections of all food service areas, including dining and food preparation		
reas and equipment.		
Water temperature in housing areas is checked and recorded daily.  Comprehensive and thorough monthly inspections by a safety/sanitation specialist		
or compliance with sanitation, safety and fire prevention standards.		
At least annual inspections by the State Sanitation Officer and the State Fire larshal.		
isual Inspection: completed inspection checklists and reports, documentation of		
rrective action, inspection reports -A-002 Disposal of Materials	Compliant- Facility has a contract for trash disposal.	
isposal of liquid, solid, and hazardous material complies with applicable government		
egulations. Isual Inspection: trash disposal contract, completed inspection reports, include		
ocumentation that deficiencies were corrected  -A-003 Vermin and Pests	Compliant Facility has a section to the Toronto	
-A-003 Vermin and Pests  ermin and pests are controlled. There is a written and implemented plan for the	Compliant- Facility has a contract with Terminator Pest Management.	
ontrol of vermin and pests.		
isual Inspection: pest control contracts, trash disposal contracts, inspection reports		
-A-004 Housekeeping	Compliant- House keeping policy in place. Inspection	
he facility is clean and in good repair. There is a written housekeeping plan that rovides for the ongoing cleanliness and sanitation of the facility.	reports on file.	
isual Inspection: inspection reports, completed forms, documentation of correction of		
entified deficiencies -A-005 Water Supply	Compliant- Facility gets its water supply from the	
he facility's potable water source and supply is certified at least annually by an	Town of Colfax.	
idependent, outside source to be in compliance with the State Sanitary Code. The icility complies with the requirements of the state health officer. There is a specific	Control of the Contro	
lan for addressing deficiencies, if any, that is approved by the state health officer.		
isual Inspection: documentation of approval by DHH or local authority, plan for		
ddressing deficiencies		
. VEHICLE SAFETY		
eferences: Dept. Reg. C-03-003/OP-A-3 -B-001 Offender Transport	Findings  Compliant- Record in file of offenders transported on	Response
scorted and unescorted absences of state offenders are governed by R.S. 15:811	trips for medical.	
nd 833 and DPS&C Department Regulation No. C-03-003 "Escorted Absences."		
sual Inspection: documentation of staff training, documentation of medical, funeral,		
c. (outside trips)		
. EMERGENCY PREPAREDNESS/RESPONSE eferences: ACA CJS 1-1C-01, 1-1C-02, 1-1C-03, 1-1C-04, 1-1C-06, 1-1C-07, 1-	Infrastructura (Ambres Constitution (Ambres Constitution (Ambres Constitution (Ambres Constitution (Ambres Const	
E-01, Dept. Regs. A-04-002/PS-D-3, C-02-001/OP-A-5, C-02-010/OP-B-3, C-	Findings	Response
5-001/AM-I-4 C-001 Emergency Plan		
here is a written plan, submitted to the Secretary of DPS&C, that specify the	Compliant- Facility has an emergency plan in place. Plan was submitted and was awaiting on the receipt	
rocedures to be followed in situations that threaten facility security. Such situations	and approval from the FM. FM office received on	
clude but are not limited to riots, hunger strikes, disturbances, taking of hostages, nd natural or man-made disasters. These plans are made available to all applicable	October 1. Copy will be sent to DPS&C upon approval.	
ersonnel and are reviewed annually and updated as needed. All facility personnel		
re trained annually in the implementation of the emergency plan.  n evacuation plan is used in the event of fire or major emergency. The plan is		
proved by the state fire marshal, reviewed annually, and updated, if necessary.		
nere are written procedures for significant unusual occurrences or facility mergencies including but not limited to natural or man-made disasters; major		
sturbances such as riots, hostage situations, escapes, fires, deaths, serious illness		
Injury and assaults or other acts of violence. Such procedures include the		
porting of these incidents to the DPS&C, OAS, telephone 800-803-8748 during irmal business hours or the control center at EHCC, telephone 800-842-4399 after		
urs, when they involve DPS&C offenders. In addition, the facility shall follow the		
cident reporting procedures as outlined in Dept. Reg. C-05-001/AM-I-4, "Activity eports, UORs," Category A, B and C.		
giral Ingrachions training records 5-30t. I		
sual Inspection: training records, facility logs, documentation of approval of plan, scumentation of annual review, documentation of staff receipt, training on the plan		
C-002 Immediate Release of Offenders	Findings Compliant- All doors are controlled electronically.	Response
ere is a means for the immediate release of inmates from locked areas in case of	There is a manual key backup system and the facility	
mergency and there are provisions for a backup system. The facility has exits that	has a back up generator.	
e properly positioned, are clear from obstruction, and are distinctly and ermanently marked to ensure the timely evacuation of offenders and staff in the		
e properly positioned, are clear from obstruction, and are distinctly and		



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 enuivalencies Visual Inspection: documentation of fire alarm and detection system maintenance and testing, plans for addressing deficiencies	Compliant-Fire Alarm panel operational and current inspection.	
I-C-004 Facility Furnishings Facility furnishings meet fire-safety-performance requirements. Visual Inspection: Specifications for all furnishings.	Compliant-Furnishings meet standards.	
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.	Compliant- FTC are stored properly with inventories on site. SDS are available.	
Visual Inspection: Staff training records, offender training records, internal inspection reports. Documentation of incidents that involved FTC materials. Inventories.		
I-C-006 Operational Capacity The number of offenders present does not exceed the operational capacity as determined by the state fire marshal and state health officer. The state fire marshal will determine a capacity primarily based upon exiting capabilities. The state health officer will determine a capacity based upon the ratio of plumbing fixtures to offenders and square footage. The operational capacity will be the lower of these two figures. Visual Inspection: facility count sheets	Compliant- Facility operates within capacity.	

PART II - SECURITY		
A. PROTECTION FROM HARM		
References: ACA CIS 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-The facility has a 24 hour monitoring system and staffing.	
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- The perimeter is secured with a fence with razor wire.	
II-A-003 Sufficient Staff There is a written document describing the facility's organization and staffing plan. This should include an organizational chart that groups similar functions, services and activities. Each facility meets minimum security staffing requirements which reflect good correctional practice. Sufficient staff, including a designated supervisor, are provided at all times to perform functions relating to the security, custody, and supervision of offenders and, as needed to operate the facility in conformance with the BJG. Visual Inspection: records of staff deployment, facility logs, documentation of annual review of staffing analysis and plan	Compliant-Organizational chart on file, staffing rosters on file showing who is on duty.	£
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- No DOC females housed. Pre trial females are housed in a separate holding cell. Female staff on duty.	
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.	Compliant-Policy on file.	
Visual Inspection: written policy and procedure  II-A-006 Staff Log  Correctional staff maintain a permanent log and prepares shift reports that record routine information, emergency situations and unusual incidents. The facility shall maintain written records or logs which continuously document the following information:  1. Personnel on duty;  2. Offender population;  3. Admission and release of offenders;  4. Shift activities;  5. Entry/exit of all visitors including legal/medical;  6. Unusual occurrences or facility emergencies (including but not limited to major and minor disturbances such as riots, hostage situations, fires, escapes, deaths, serious illness or injury and assaults or other acts of violence.) Refer to BJG I-C-001	Compliant-Shift reports, booking sheets and incident reports of daily activities on file.	

	Findings	Response
II-A-007 Counts	Compliant- Counts being conducted. Count sheets on	
The facility has a system for physically counting offenders. At least one formal count	file	
is conducted for each shift, with no less than 3 counts daily. The system includes		
strict accountability for offenders assigned to work and other approved temporary		
absences		
Visual Inspection: completed forms, facility records/logs.		

Facility - Date



III-A-008 Offender Population Management System There is an offender population management process that includes records on the admission, processing, and release of offenders. Written policy, procedure, and practice provide for offender case record management that includes at a minimum, maintenance of the following documents and information. This offender record and any reentry transition envelops shall be transferred with the offender at such time the offender is transferred to another local or DPS&C facility.  1. Master prison form; 2. Bill of Information and Court Minutes OR Uniform Commitment Order; 3. One photograph; 4. Reports of disciplinary actions, grievances, incidents, or crimes committed while in	Compliant- Process in place in obtaining information for admission, processing an releasing of offenders. Master prison records, bill of information, photos, disciplinary kept on offenders. All records and information transfers with the offender to other facilities.	
7. Reports of unsignment actions; givevinese, induction, of chimac entitled custody;  7. Records of program participation, work assignments, classification actions;  8. 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 BJG IV-D-004).		
In addition to the maintenance of the above information, the following shall be collected and forwarded to the DPS&C Pre-Class Coordinator either by fax to 225-342 3759 or email to DOC-HQ_Supplemental@la.gov.  1. Master prison form;  2. Fingerprints: one FBI print card from AFIS;		
<ol> <li>One photograph;</li> <li>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);</li> <li>Jail credit letter;</li> <li>One Inventory Acknowledgment Form (cash and property receipts).</li> </ol>		
Visual Inspection: completed forms, reports, offender record		
III-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.	Compliant-Admissions forms on file.	
Visual Inspection: Completed Admission forms, facility logs.  II-A-010 Admissions	Compliant, Intake forms, master prison records	
III-A-010 Admissions  Admission processes for a newly admitted offender include, but are not limited to:  *Searching of the offender and personal property;  *Inventorying and providing secure storage of personal property;  *Providing an itemized receipt for personal property;  *Recording of basic personal data;  *Performing a criminal history check;  *Photographing and fingerprinting;  *Separating from the general public;  *Providing a health screening to assess and identify any health and safety needs;  *Providing information about access to health services, copay requirements and submitting grievances.  Visual Inspection: intake and admission forms, screening forms, inventory form, receipt form  III-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.  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) shall not be released in the State of LA. Any out of state offender (federal or state) shall not be released within the state where the offender was convicted and sentenced for release in that state, prior to the offender's release data.  Visual Inspection: offender record, submittal to chief of operations of out-of-state offenders to be housed at the facility release/transfer documentation.	Compliant- Intake forms, master prison records, medical screening forms and property receipts done upon admissions.  Compliant- No out of state offenders housed.	
		•
	Findings	Response
III-A-0.12 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:  I dentifies the appropriate level of custody for each offender  I dentifies the appropriate housing assignment  I dentifies the offender's interest and eligibility to participate in available programs  Visual Inspection: offender housing records, offender classification records	Compliant-Policy and system in place to identify offender custody levels, housing assignments and eligibility to participate in programs.	
III-A-0.13 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	Compliant- No youthful offenders housed.	

written paicky, procedure, and practice provide for a written oriender classification plan that includes custody required and assignment to appropriate housing.  Offender management and housing assignment considers age, gender, legal status, custody needs, special problems and needs, and behavior. All offenders are classified using an objective classification process that at a minimum:  Identifies the appropriate level of custody for each offender  Identifies appropriate housing assignment  Identifies the offender's interest and eligibility to participate in available programs	offender custody levels, housing assignments and eligibility to participate in programs.	
Visual Inspection: offender housing records, offender classification records II-A-013 Prohibition on Youthful Offenders	Compliant- No youthful offenders housed.	
Offenders subject to juvenile jurisdiction are housed in adult facilities only under the conditions established by law. If juveniles are committed to the facility, a plan is in place to provide for the following:  • Supervision and programming needs of the juveniles to ensure their safety, security, and education;  • Classification and housing plans;  • Appropriately trained staff.  OAS shall be notified of offenders who are under the age of 18 that are sentenced to the DPS&C as an adult for transfer to the appropriate institution.  Visual Inspection: admission and housing, offender records, classification records		
II-A-014 Separation in Classification	Compliant- Female and male offenders housed	
Male and female offenders must be housed in separate rooms/cells with reasonable sight and sound separation.	separately. No DOC females housed at facility.	
Signit and Source Separation. Visual Inspection: offender housing records, offender classification records, diagram of facility showing male/female housing areas		
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.	Compliant- Photo ID's are given to offenders for identification.	

**BJG Compliance** 



Visual Inspection: Offender identification card/wristband.		
II-A-017 Drug Free Workplace	Compliant-Policy in place for drug free workplace.	
Written policy, procedure, and practice provide for a drug-free workplace, which	Drug testing lab bills on file.	
includes at a minimum pre-employment testing, post-accident testing, reasonable suspicion/probable cause testing, and quarterly random testing of all employees.		
Visual Inspection: drug testing lab fee bills for drug testing of facility employees (including pre-employment, post accident, reasonable suspicion/probable cause,		
random).		
II-A-018 Offender Drug Testing	Compliant-Policy in place for drug free workplace.	
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%	Offenders being tested .	
of the DPS&C offender population shall be drug tested on a monthly basis.		
Visual Inspection: Facility log, documentation of alcohol/drug testing of offenders.	Complicat Transportation land on Standard	
II-A-019 Offender Transfers  All transfers of DPS&C offenders to other than DPS&C facilities shall be reported to	Compliant- Transportation logs on file with documentation of offender transfers to other facilities.	
the OAS, at least one day prior to all scheduled transfers and within one business	additional of orthogonal transfers to sale facilities.	
day for all non-scheduled transfers. The DOC offender transfer form shall be submitted by the transferring facility to OAS at least one day prior to the transfer		
occurring by fax to 225-342-2439 or by email to LocalJailTranfers@la.gov.		
Offenders should not be transferred to other than DPS&C facilities within 60 days of		
release, unless for disciplinary reasons.  An offender scheduled for an appearance before the Committee on Parole shall not		
be transferred prior to the scheduled hearing date. However, if the transfer is		
deemed unavoidable by the Warden due to security concerns, the Warden shall		
obtain prior approval for an exception from the DPS&C Chief of Operations or designee. Staff from the sending facility shall notify the Committee on Parole as		
soon as it is known that the offender must be transferred.		
Visual Inspection: facility logs, documentation of transfers of DPS&C offenders to other		
than DPS&C facilities		
II-A-020 Frequency of Cell Checks Written policy, procedure, and practice provide secure, safe housing by establishing	Compliant- Officer rounds are conducted every 30	
the frequency of cell checks in all cellblock areas not to exceed four (4) hours. Staff	minutes to an hour. Shift reports on file.	
will document these checks in their staff logs.		
Visual Inspection: Facility logs, documentation of frequency of cell checks.		
B. USE OF PHYSICAL FORCE	1	
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-		THE PERSON NAMED IN COMMENTS OF THE PERSON NAMED IN
19, C-02-006/OP-A-16, C-03-003/OP-A-3	Findings	Response
II-B-001 Use of Force	Compliant- Incident reports on file with 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	Training records showing employee training on file.	
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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 800-842-4339 after hours. In addition, the facility shall provide a written report of the incident to the DPS&C, Chief of Consistence with these business days. Visual Inspection: facility records, logs, incident reports, training records  II-B-002 Use of Restraints  Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including:  • Conditions under which restraints may be applied;  • Types of restraints to be applied;  • Identification of a qualified medical or behavioral health professional who may authorize the use of restraints after reaching the conclusion that less intrusive measures are not a viable alternative;  • Monitoring procedures;  • Length of time restraints are to be applied;  • Documentation of efforts for less restrictive treatment alternatives;  • An after incident review.  Visual Inspection: facility records, logs  II-B-002-1 Use of Restraints for Pregnant Offenders  Written policy, procedure, and practice complies with the following requirements: Restraints shall not be used on a pregnant offender (1) during any pregnancy-related medical distress, (2) while	Compliant-Shift logs on file showing the use of restraints on offenders.  Findings  Compliant- policy in place but no pregnant females	Response
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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 800-842-4339 after hours. In addition, the facility shall provide a written report of the incident to the DPS&C, Chief of Cacabitase within those business data.  Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including:  • Conditions under which restraints may be applied;  • 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;  • An after incident review.  Visual Inspection: facility records, logs  II-B-002-1 Use of Restraints for Pregnant Offenders  Written policy, procedure, and practice complies with the following requirements: Restraints buring Pregnacy-Related Transportation  • Restraints shall not be used on a pregnant offender (1) during any pregnancy related medical distress, (2) while she is being transported to a medical facility or LCLW unless there are compelling grounds	Compliant-Shift logs on file showing the use of restraints on offenders.  Findings  Compliant- policy in place but no pregnant females	Response



II-B-003 Use of Firearms The use of firearms complies with the following requirements.	Compliant- Training records on file along with photos of equipment for loading and unloading of weapons.  Compliant- All reports are done on computer. A print out of shift report on file.	
C. CONTRABAND/SEARCHES		
References: ACA CIS 1-2C-01, 1-2C-04, Dept. Reg. C-02-003/OP-A-8 II-C-001 Procedures for Searches Written policy, procedure and practice guide searches of facilities and offenders to control contraband. Manual or instrument inspection of body cavities is conducted only when there is reasonable belief that the offender is concealing contraband and when authorized by the facility administrator or designee. Health care personnel will conduct manual or instrument inspections in private. Visual Inspection: observation, facility records and logs, offender and staff interviews	Findings Compliant- Policy in place for searches. Logs and reports of searches on file.	Response
D. ACCESS TO KEYS, TOOLS, UTENSILS		
References: ACA CJS 1-2D-01  IT-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.	Findings  Compliant- Tool control policy on file. Copy on tool inventories on file and in places where tools are located. Keys are signed out. Tool and utensils are being signed out properly.	Response
Visual Inspection; documentation of perpetual inventories		
PART III - ORDER A. OFFENDER DISCIPLINE		
References: ACA CJS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. B 05-001/OP-C-1	Findings	Response
III-A-001 Rules and Discipline Prior to being placed in the general population, each offender is provided with an orientation that includes facility rules and regulations, including access to medical care and the process for applying for restoration of good time. The facility shall follow and provide the DPS&C "Disciplinary Rules and Procedures for Adult Offenders", to the offender population.  If the Sheriff or local jail administrator believes that a loss of good time is appropriate, then the incident shall be fully documented and the offender transferred to the DPS&C for a disciplinary hearing to ensure due process in accordance with La. R.S. 15:571.4.  The offender must sign and date a statement acknowledging receipt of this information.  Visual Inspection: offender records, disciplinary records, receipt of disciplinary rules, documentation of orientation	Compliant- Offenders sign for handbook. Disciplinary reports on file.	
	1	
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 IV-A-002 Food Service Facilities Toilet and hand basin facilities are available to food service personnel in the food preparation area.	Compliant- DHH inspection reports and facility inspection reports on file. Facility is clean.  Compliant- Bathroom facility is available for food service personnel.	
Visual Inspection: DHH inspection reports, photos	Compliant Food consists and annual to the	
IV-A-003 Food/Dietary Allowances The facility's dietary allowances are reviewed at least annually by a qualified nutritionist or dietician to ensure they meet the national recommended dietary allowances for basic nutrition for appropriate age groups. Menu evaluations are conducted at least quarterly by food service supervisory staff to verify adherence to the established basic daily servings. Written policy, procedure, and practice require that food service staff plan menus and substantially follow the plan. The planning and preparation of all meals shall take into consideration nutritional characteristics and caloric adequacy. The facility shall provide a tray/plate and utensil(s) for each hot meal.	Compliant- Food services are provided through Tiger Correctional Services. They provide the dietician that reviews and prepares the facility menus.	
Visual Inspection: annual reviews, nutritionist or dietician qualifications, documentation of at least annual review and quarterly menu evaluations IV-A-004 Records of Meals Served	Compliant- The facility has a record of meals served.	



Visual Inspection: facility logs	1	i .
IV-A-005 Denial of Food as Discipline Prohibited	Compliant- Denial of food is not used as disciplinary	
Written policy, procedure, and practice preclude the denial of food as a disciplinary	means.	
measure. Visual Inspection: facility logs		
IV-A-006 Food Service Management	Compliant- At least 2 of 3 meals are served hot daily.	
Written policy, procedure, and practice require that three meals (including two hot	Some days all 3 meals are hot meals.	
meals) are provided under staff supervision at regular meal times during each 24-		
hour period, with no more than 14 hours between the evening meal and breakfast.  Variations may be allowed based on weekend and holiday food service demands		
provided basic nutritional goals are met. Offenders shall be provided an ample		
opportunity to eat for each meal.		
Visual Inspection: records of meals served and times served, facility logs IV-A-007 Therapeutic/Special Diets	Compliant-Special diets are available.	
Therapeutic and/or special diets are provided as prescribed by appropriate clinicians	Compilant-Special diets are available.	
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		
IV-A-008 Health Protection for Food Service	Compliant-Inspection reports on file. Medical	
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	inspection of offenders working in kitchen on file.	
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		4
are instructed to wash their hands upon reporting to duty and after using toilet		
facilities Visual Inspection: inspection reports, completed forms, documentation of daily		· ·
monitoring for health and cleanliness		
n everene	1	
B. HYGIENE References: ACA CJS 1-4B-01, 1-4B-02, 1-4B-03, 1-4B-04, Dept. Reg. B-06-	6.7.2	The state of the s
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	Compliant-Toilets and washbasins are available and in	
cold running water 24 hours per day. Offenders are able to use toilet facilities	working condition with adequate hot running water available.	
without staff assistance when they are confined in their cells/sleeping areas.	available.	-
Visual Inspection: maintenance records or reports, inspections, documentation of periodic measurement of water temperature, offender grievances		
IV-B-002 Plumbing Fixtures - Showers	Compliant- Showers are available and in working	
Offenders, including those in medical housing units or infirmaries, have access to	condition with available hot water.	
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		
IV-B-003 Clothing	Compliant- Facility provides clothing to offenders. A	
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	schedule is posted for laundry procedures.	
allow for regular faundering. The facility may fulfill this obligation by furnishing		
clothing or permitting the offender to secure and wear his own clothing, except that		
when the offender does not provide adequate clothing for himself, the facility shall		
furnish same.		
Visual Inspection: documentation of clothing issue, documentation of cleaning and storage		
IV-B-004 Hygiene/Bedding Issue	Compliant-Hygiene and bedding items issued to	
The facility shall provide adequate bedding and linen, including a clean mattress,	offenders.	
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		
IV-B-005 Personal Hygiene	Compliant-Documentation of issuing of personal	
Articles and services necessary for maintaining personal hygiene shall be available to	hygiene items to include toothbrush, toothpaste,	
all offenders including items specifically needed for females. Such items shall be	razors, soap, toilet paper and shave cream.	
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		
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-	et at	
HCP46, HC-08/IS-D-HCP33, HC-09A/IS-D-HCP22, HC-11/IS-D-HCP34, HC-	Findings	Response
13/IS-D-HCP16, HC-17/IS-D-HCP7, HC-38/IS-D-HCP30, B-06-003/AM-C-4, C-		
02-008/0P-C-9, C-05-001/AM-I-4	Complete Official Control of the Con	
IV-C-001 Access to Care/Clinical Services At the time of admission/intake, all offenders are informed about procedures to	Compliant-Offenders are informed of health care upon	
access health services, including any copay requirements, as well as procedures for	intake. Facility does not charge copays.	
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.		

Facility - Date

BJG Compliance



•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 control are covaried by DDSVC. The requests shall be published by the ellipse covaried with R.S. 15:831, DPS&C offenders may be assessed a co-payment for receiving medical or dental treatment, including prescription or nonprescription drugs. The co-payment fee schedule shall be approved by the DPS&C. Such fee schedule for DPS&C offenders housed in local jail facilities shall not exceed the DPS&C approved rate in accordance with Dept. Reg. B-06-001 HC-02/IS-D-HCP14, unless prior approval has been granted by the Secretary of the DPS&C. •DPS&C offenders may be required to file a claim with his/her private medical or health care insurer, or any public medical assistance program, under which he/she is covered and from which the offender may make a claim for payment or reimbursement of the cost of any such medical treatment. Visual Inspection: Documentation that offenders are informed about health care and the grievance system, a health record, medical copayment fee schedule. IV-C-002 Adequate Equipment and Supplies
Adequate equipment and supplies for medical services are provided as determined Compliant- Facility has adequate supplies if needed for medical treatment. by the health care authority and are in working order. Visual Inspection: Photos

	Findings	Response
IV-C-003 Provision of Treatment The facility has a designated health authority responsible for health care services.	Compliant- Request for medical treatment on file. Offenders can fill out request on the tablet or request	
Requests for health services are triaged by health trained persons to ensure that necks are addressed in a timely manner in accordance with the severity of the liliness. Written policy, procedure and practice provide that anyone who provides	a paper request form. Health authority for the facility if B.J. Colvin N.P	
health care services to offenders be licensed, registered or certified as appropriate to their respective professional disciplines. Such personnel shall only practice as		
authorized by their license, registration or certification. Standing orders are used in the treatment of offenders only when authorized in writing by a physician or dentist. (Standing orders are used in the treatment of identified conditions and for the on-		
sight emergency treatment of an offender.)		
Visual Inspection: documentation of health authority designation, contract, billing records, sick call request form, a health record, clinical provider schedules, current credentials/licensure		
IV-C-004 Personnel Qualifications/Credentials Correctional or other personnel who do not have health care licenses may only	Compliant- Copy of nurse license if on file and current.	
provide limited health care services as authorized by the responsible health care authority and in accordance with appropriate training. This would typically involve		
the administration of medication, the following of standing orders as authorized by the responsible health care authority and the administration of first aid/CPR in accordance with POST training. Written policy, procedure and practice approved by		
the health authority require dispensing and administering prescribed medications by qualified personnel.		
Visual Inspection: health records, completed medication administration form, personnel records, copies of current credentials or licensure, documentation of compliance with standing orders, health record entries, staff training records		
IV-C-005 24 Hour Care	Compliant- Policy in place to provide access to	
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	medical care if needed after hours. Facility uses a local doctor office or hospital if needed.	
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		
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.		
Visual Inspection: designated facility, provider lists, transportation logs		
IV-C-006 Health Screens Written policy, procedure and practice require that all DPS&C offenders receive a	Compliant- Health screening done upon intake and on file.	
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:		
<ol> <li>Current medical, dental or behavioral health problems and communicable diseases;</li> </ol>		
Current treatment plan;     Current medications, including psychotropic;     History of hospitalization;		
Suicidal risk assessment;     Use of alcohol or other drugs including need for possible detoxification;		
7. Possibility of pregnancy; 8. Observation of the following:		



a. Appearance and behavior;	i e	Í
<ul> <li>Body deformities and other physical abnormalities;</li> </ul>		
c. Ease of movement;		
d. Current physical traumas or characteristics and a determination of whether or		
not the offender should be recommended for immediate transfer to the DS&C for appropriate care;		
e. Any physical impairment (hearing, vision, mobility) or other disability which		
would impede the offender's access to programs or services. Offenders identified		
with such an impairment or disability shall be transferred to the DPS&C for further		
evaluation and determination of appropriate housing placement. [Reference 2008		
Resolution Agreement: US DOJ and LA DPS&C.]  9. Current health insurance.		
Did 175 September 1980 September 1980 September 1980		
Visual Inspection: health records, completed screening form, transfer logs	N/A N DOCK I I I I I I I I I I I	
IV-C-006-1 Pregnancy Management Written policy, procedure and practice require that all pregnant offenders have	N/A- No DOC females housed at the facility.	
access to obstetrical services by a qualified provider.		
The local jail facility shall notify the Department's Medical Director, when a DPS&C		
offender is pregnant to ensure proper placement or if transfer to a DPS&C facility is		
necessary.		
Visual Inspection: written policy and procedure, health record where pregnant offender received obstetrical services by a qualified provider, notification to DPS&C when DPS&C		
offender is pregnant, transfer logs		
	Findings	Response
IV-C-007 Communicable Disease and Infection Control Program	Compliant-Program in place for infection control.	певрине
Communicable diseases are managed in accordance with a written plan approved by	Contract with Stericycle for medical waste pick up.	
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.		
Visual Inspection: health records, clinic visit logs, documentation of waste pic up and/or		-
cleaning logs		
IV-C-008 Annual TB Testing	Compliant- TB testing done annually. Records on file.	
Written policy, procedure and practice require annual testing or medical evaluation for signs and/or symptoms of tuberculosis on all offenders. Annual TB testing will be		
provided at no cost to the offender. The facility's designated health care authority		
shall contact the DPS&C Medical Director, telephone number 225-342-1320, when an		
offender's test for medical signs and/or symptoms of tuberculosis is reported		
positive. The DPS&C Medical Director will determine if the offender requires physician or mid-level evaluation, based on the reported positive signs or symptoms.		9
physician of final level evaluation, beset on the reported positive signs of symptoms.		
Visual Inspection: health records		
IV-C-009 Chronic Care Program	Compliant- The facility has a nurse on staff for medical	
Offenders with chronic conditions, such as diabetes, hypertension and mental illness	treatment. If an offender is found to have a chronic	
receive periodic care by a qualified health care provider in accordance with individual	illness that the facility can not provide then a medical	
treatment plans, inclusive as deemed appropriate by the respective health care provider. For offenders whose chronic disease cannot be reasonably managed by the	transfer request will be done.	
local jail facility, a Medical Transfer Request for DOC Offenders at Local Facilities		
Form C-05-004-B may be submitted to the ARDC.		
Visual Inspection: health records	*	
IV-C-010 Pharmaceuticals	Compliant- The nurse administers medication to	
Written policy, procedure, and practice approved by the health authority provide for the proper management of pharmaceuticals. Offenders are provided medication as	offenders. MARS are on file.	
prescribed.		
Visual Inspection: health records, completed medication administration forms,		
inventories		
IV-C-011 First Aid Kits First aid kits are available in areas of the facility as designated by the responsible	Compliant- First aid kits located in Admin. Office and	
health care authority and shall be immediately accessible to housing units.	the central control along with AED.	
Visual Inspection: location of first aid kits within the facility		
IV-C-012 Access to Sick Call	Compliant- Offenders can request sick call on the	
There is a process for all offenders to initiate requests for health services on a daily	tablet or paper medical request. The nurse is on duty 5	
basis. Written policy, procedure and practice require that sick call is conducted by a	days a week. Request can be made 5 days a week.	
physician and/or other qualified health care personnel who are licensed, registered or		
certified as appropriate to their respective professional discipline and who practice only as authorized by their license, registration or certification. Sick call shall be		
available to all offenders as follows:		
•Facilities with fewer than 100 offenders - 1 time per week;		
<ul> <li>Facilities with 100 to 300 offenders - 3 times per week;</li> </ul>		
• Facilities with more than 300 offenders - 4 times per week.		
If an offender's custody status precludes attendance at sick call, then arrangements shall be made to provide such services in the place of the offender's detention.		
Visual Inspection: written policy and procedure		
IV-C-013 Infirmary Care	Compliant-The facility does not have an infirmary.	
If infirmary care is provided onsite, it complies with applicable state regulations and	There is a nurse's station where medical assessment is	
local licensing requirements. Provision include 24 hour emergency on-call	done on offenders.	
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.		
Visual Inspection: admission or inpatient records, staffing schedule, completed form C-	_	
05-004-B		



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.	Compliant- There has been no medical releases from the facility.	
Visual Inspection: health records, documentation of approval of DPS&C's Chief Nursing		
Officer  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 independent of suicide watches.	Compliant-Suicide prevention policy in place. Copy of watches on file. Hugh Bryan Physciatrist reviews policy.	
	Findings	Response
IV-C-015 Offender Deaths	Compliant-There has been no offenders deaths to	Response
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).	report.	
Visual Inspection: notification, reporting requirements, report to DPS&C  IV-C-016 Notification	Compliant- There has been no offender admits for	
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	notification to be done.	
definition of an offendark immediate family member. Visual Inspection: notification records		
definition of an effordade immediate family member Visual Inspection: notification records		
definition of an effendar's immediate family, member Visual Inspection: notification records  D. HEALTH SERVICES STAFF		
definition of an effendade immediate family member Visual Inspection: notification records  D. HEALTH SERVICES STAFF References: ACA CJS 1-4D-02, 1-4D-04, 1-4D-05, 1-4D-07, 1-4D-08, 1-4D-09, 1-4D-10, 1-4D-17, 1-4D-18, Dept. Regs. B-06-001/HC-24/ISD-HCP44, HC-25/IS-	Findings	Response
definition of an effendade immediate family member Visual Inspection: notification records  D. HEALTH SERVICES STAFF References: ACA CJS 1-4D-02, 1-4D-04, 1-4D-05, 1-4D-07, 1-4D-08, 1-4D-09, 1	Findings	Response
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IV-D-006 Emergency Response	Compliant- Employees receive training in CPR/AED.	
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.		
constitutions ( report are readily are liable and in righting or con-		
Visual Inspection: verification of training, records and certificates		
IV-D-007 Internal Review/Quality Assurance	Compliant-No major risk factors at the facility.	
The health authority approves policies and procedures for identifying and evaluating	Control of the second of the s	
major risk management events related to offender health care, including offender		
deaths, preventable adverse outcomes and serious medication errors.		
Visual Inspection: evaluation of major risk management events		
E. SEXUAL ASSAULT		
References: ACA CJS 1-4D-13, 1-4D-15, 1-4D-16, Dept. Regs. A-04-002/PS-D-	Findings	Response
3, C-01-022/OP-A-15	rindings	Response
IV-E-001 Alleged and Substantiated Sexual Assaults	Compliant- Policy in place for preventing sexual	
Written policy, procedure and practice provide for the prevention, detection,	assaults. There is no reports of alleged or	
response, reporting and investigation of alleged and substantiated sexual assaults.	substantiated assaults.	
(PREA) Information provided to offenders about sexual abuse/assault includes:	Substantiated assaults.	
Prevention/intervention;		
•Self-protection;		
Reporting sexual abuse/assault;		
•Treatment and counseling.		
When the occurrence/allegation of sexual assault or threat involves a DPS&C		
offender, the facility shall report the incident to DPS&C immediately, as outlined in		
BJG I-C-001.		
An investigation is conducted and documented whenever a sexual assault or threat is		
reported. Investigative reports, that include DPS&C offenders, shall be submitted to		
appropriate DPS&C Regional Team Leader on Form C-01-022-E.		
Victims of sexual assault are referred under appropriate security provisions to a		
community facility for treatment and gathering of evidence.		
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Visual Inspection: documentation of reports to DPS&C, investigative reports		
PART V - OFFENDER PROGRAMS AND ACTIVITY	İ	
A. OFFENDER OPPORTUNITIES FOR IMPROVEMENT		
References: ACA CJS 1-5A-01, Dept. Reg. 8-08-004/PS-F-1	Findings	Response
V-A-001 Volunteers/Registration	Findings Compliant- Facility has a registration process for	Response
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V-A-001 Volunteers/Registration There is an official registration and identification system for volunteers.	Compliant- Facility has a registration process for	Response
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V.P. 001 Polossing Offenders		
V-B-001 Releasing Offenders Procedures for releasing offenders from the facility include, but are not limited to, the following:	Compliant-Offenders release with their property and Id's and a list of community services.	
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.		
<ul> <li>Consideration by the prescribing health care practioner for a provision of a 5-day supply of current maintenance medication (medication prescribed to stabilize a chronic medical or behavioral health illness), along with a prescription for a thirty</li> </ul>		
(30) day of medication upon transfer or dischargePrior 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 consort 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 stencied clothing.  Visual Inspection: completed release forms and documents, facility records and logs,		
offender records		
V-B-002 Visiting Written policy, procedure and practice govern visiting. The number of visitors an	Compliant- Visitation is done on tablets or kiosk and not in person.	
offender may receive and the length of the visits may be limited only by the facility's	not in person.	
schedule, space and personnel constraints or when the facility administrator can present clear and convincing evidence that such visitation jeopardizes the safety and		
security of the facility. Conditions under which visits may be denied and visitors may		
be searched are defined in writing. Provisions are made for special visits in accordance with Dept. Reg. C-02-008.		
Visual Inspection: activity schedule, facility logs		
V-B-003 Library Services Written Reading materials shall be available to offenders on a reasonable basis.	Compliant-There is a library available to provide reading materials to offenders.	
Visual Inspection: activity schedule, facility logs		
V-B-004 Religious Programs Written policy, procedure and practice define and provide reasonable offender	Compliant- Church services available. A schedule is posted with religious services.	
opportunity for religious practice.	poster with rengious services.	
Visual Inspection: documentation of offender religious activities, activity schedule V-B-005 Exercise and Recreation Access	Compliant- Offenders have access to recreation. Shift	
Offenders have access to exercise and recreation opportunities. Written policy,	logs on file with offenders out on recreation.	
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		1
special management or has security supervision needs which preclude the opportunity for outdoor exercise at a facility, then he shall be transferred to the		
DPS&C. If a facility based on location, or other legitimate concern, does not make		
provision for outdoor exercise, then compensating, dedicated exercise facilities of		
adequate size to provide three exercise opportunities per week shall be available.		
Visual Inspection: activity schedule, facility logs V-B-006 Transitional Work Program/Standard Operating Procedures	N/A TMD	
Transitional Work programs shall be operated in accordance with the Standard	N/A no TWP	
Operating Procedures for Offender Work Release Programs established by the DPS&C.		
Visual Inspection: DPS&C monitoring report		
V-B-007 Participation in Transitional Work Programs	N/A no TWP	
Participation in transitional work programs by state offenders shall comply with R.S. 15:711 and DPS&C Department Regulation No. B-02-001 "Assignment and Transfer		
of Offenders." Specific approval by the Secretary of DPS&C is required prior to		
program assignment of state offenders. Refer to Standard Operating Procedures for Offender Transitional Work Programs.		
Visual Inspection: approval for participation by the Secretary of DPS&C		
V-B-008 Offender Work Program	N/A no TWP	
IV-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).	N/A no TWP	
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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 loss  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  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:  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  V-B-012 Packages and Publications	Findings  N/A no TWP  Compliant- No proposed expansions at this time.  Compliant-Offenders can receive and send mail.  Compliant-Only packages that are approved will be	Response

Facility - Date

BJG Compliand

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Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mall

C: REENTRY		
References: Dept. Regs. B-01-001/IS-B-6, B-01-002/BOP3, B-01-004/IS-B-7, B-06-001/HC-40/IS-D-HCP31	Findings	Response
V-C-001 Substance Abuse Programs  The facility encourages offender participation in substance abuse programs when available.	Compliant-Programs are offered. Rosters on file.	
Visual Inspection: facility log, activity schedule		
V-C-002 Reentry Programs The DP5&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 DP5&C offenders receive 100 hours of pre-release training at a regional reentry center prior to transfer to a TWP, or release from custody.  The local jail facility shall maintain reentry transition document envelops for all DP5&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	Compliant- No re entry program at this time.	
forms of identification, residential plan		
V-C-003 Pre-Parole Preparation The facility shall complete Form B-01-004-C, Pre-Parole LARNA II Questionnaire for Local Jail Facilities, and submit via e-mail to DPS&C HQ at LOCAL larna@corrections.state.la.us or by fax to 225-342-0929 within the first two weeks of the month proceeding the scheduled hearing.	Compliant- Copy of form is on file.	
Visual Inspection: offender record, completed questionnaire		
V-C-004 Parole Board Procedures  The facility Warden or his/her designee, of the local level facility in which the offender is housed, shall be present to provide information to members of the Parole Board regarding the offender's progress and disciplinary infractions during incarceration.	Compliant- Hearings done by zoom. Shift reports on file showing zoom hearings being conducted.	
Visual Inspection: offender record, trip log, documentation showing facility Warden or designee presence at parole board		

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.	Compliant- Offender have access to legal materials and courts.	
Visual Inspection: facility log		
VI-A-002 Access to Counsel Written policy, procedure, and practice ensure offenders' confidential access to counsel. Such contact includes, but is not limited to telephone communications, uncensored correspondence and visits.	Compliant-Offenders can have outside attorney's. Shift log documenting attorney visits on file.	
Visual Inspection: facility log, record of attorney interviews		
VI-A-003 Protection from Abuse Written policy, procedure, and practice protect offenders from personal abuse, corporal punishment, personal injury, disease, property damage, or harassment.	Compliant- Copy of incident report on file. Employees receive training.	
Visual Inspection: facility log, incident reports, staff training records		

B. FAIR TREATMENT OF OFFENDERS References: ACA CJS 1-2A-16, 1-4C-01, 1-6B-01, 1-6B-02, Dept. Reg. B-05-005/OP-C-13	Findings	Response
	Compliant- Policy in place that will allow offender participation in programs without discrimination.	
Visual Inspection: facility records, grievances, activity logs		
VI-B-002 Grievance Process Offenders have reasonable access to a grievance remedy procedure that includes at least two levels of review if necessary. The grievance remedy procedure shall be an administrative means through which an offender may seek formal review of a complaint which relates to any aspect of his imprisonment if less formal procedures have not resolved the matter. Such complaints and grievances include, but are not limited to, actions pertaining to conditions of confinement, personal injuries, medical complaints, time computations, the classification process, or challenges to rules, regulations, or policies. Through this procedure, offenders shall receive reasonable responses within a specified time period and where appropriate, meaningful remedies.	Compliant-There are 2 levels of review for the grievance process. Offenders sign for handbook upon intake.	
Visual Inspection: grievances		

# PART VII - ADMINISTRATION AND MANAGEMENT A. RECRUITMENT, RETENTION AND PROMOTION



ompliant- Training records on file along with lesson lans for employee training.	
ompliant-Weapons training done annually.	
0	mpliant-Weapons training done annually.

	1	
B. FACILITY ADMINISTRATION References: ACA CJS 1-4D-02, 1-7D-01, 1-7D-03, Dept. Reg. C-05-001/AM-I-4	Findings	Posnoveo
VII-B-001 Authority	Compliant-Copy of statue on file.	Response
There is a statue or constitutional provision authorizing the establishment of the local jail facility or its parent agency.	Compliant-Copy of Statue on file.	
Visual Inspection:	Compliant French Bodison Association	
VII-B-002 Legal Assistance for Staff Written policy, procedure and practice specify the circumstances and methods for the facility administrator and other staff to obtain legal assistance as needed in the performance of their duties.	Compliant-Frosch, Rodriguw, Arcuri LLC as legal counsel.	
Visual Inspection: personnel or training records		
VII.B-003 Independent Financial Audit Written policy, procedure and practice provide for an independent financial audit of the facility. This audit is conducted annually or as stipulated by statute or regulation.	Compliant-Rozier, McKay & Willis auditors	
Visual Inspection: annual audit		
VII-B-004 Facility Insurance Written policy, procedure and practice provide for comprehensive facility insurance coverage.	Compliant-Travelers Ins. Policy on file.	
Visual Inspection: insurance policy	Complete Della Control of the Contro	
VII-B-005 Offender Funds Offenders' personal funds held by the facility are controlled by generally accepted accounting principals (GAAP). Any interest earned, other than operating funds, accrues to the benefit of the offenders.	Compliant- Policy in place for the handling of offender funds. Record of deposits and offender receipts on file.	
Visual Inspection: offender records VII-B-006 Organization	Countiest Beliefer series and and and added an acaded	
Written policies and procedures describe all facets of facility operation, maintenance and administration are reviewed annually and updated as needed. New or revised policies and procedures are disseminated to staff. A file for each guideline shall be maintained with documentation (primarily written) to support compliance.	Compliant- Policies reviewed and updated as needed and passed out to staff reflecting the changes.	
Visual Inspection: annual reviews, dissemination to staff		
VII-B-007 Annual Compliance Statement Written policy, procedure and practice demonstrate that the facility shall submit an annual statement confirming continued compliance with the BJG to the appropriate DPS&C Regional Team Leader. This statement, submitted by January 31st each year, is in writing and shall include:  1. A copy of the current Fire Marshal Report; 2. A copy of the current Health Inspection Report; 3. Any proposed or projected expansions; 4. Any rehabilitative programs that are available; 5. Summary of any re-entry initiatives/programs implemented by the facility.  Visual Inspection: annual statement	Compliant-Annual compliance statements turned in on time.	
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-1-4. 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- Monthly reporting is done on time.	
VIT-8-099 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.	Compliant- Record of staff meetings being held.	
Visual Inspection: staff meeting minutes/notes		

C. REASONABLE ACCOMMODATION		
References: ACA CJS 1-7E-01	Findings	Response

Facility - Date

BJG Compliance

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VII-C-001 Facility Equipment/Reasonable Accommodation Reasonable accommodations is made to ensure that all parts of the facility are accessible to the public are accessible and usable by staff and visitors with disabilities.	Compliant- Facility is handicap accessible.	
Visual Inspection:		

DEPARTMENT  Fire Marshall  Date of current report: 4/6/22.  Maximum Capacity: 106  DHH - Health  Date of Current Report: 6/30/22  Maximum Capacity: 106	NONE Deficiencies	Corrective Action Taker
Date of current report: 4/6/22 Maximum Capacity: 106  DHH - Health  Date of Current Report: 6/30/22	NONE	
Maximum Capacity: 106  DHH - Health  Date of Current Report: 6/30/22		1
Maximum Capacity: 106  DHH - Health  Date of Current Report: 6/30/22		i
Date of Current Report: 6/30/22		
Date of Current Report: 6/30/22		
	NONE	
		1
DHH - Retail Food	employee drinking in a food prep area, chlorine sanitizer concentration, food scoop is constructed without a handle, sanitizer kit not available.	violations were corrected on site.
Date of Current Report: 6/30/22		



#### John Bel Edwards GOVERNOR

# Office of State Fire Marshal

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

# Inspection Report

Report # CB-22-002682-1

# No Deficient/Cautionary Codes cited.



H. "Butch" Browning FIRE MARSHAL

			Loc	ation	Inform	ation	1		
Inspection Type	Compliance	Building I	nspection				Inspection Dat	te 4/	/6/2022 9:48:33 AM
Structure ID	153539 No. of Buildings 4				Facility Code	J	484		
Capacity	106		Year Built		2005		Construction *	Type T	ype IIB / (000)
Building/Trade Na	me				Address	s			
GRANT PARISH D	ETENTION C	ENTER			485 RIC	HAR	DSON DRIVE, O	COLFAX, L	A 71417
			Ov	vner	Informa	tion			
Owner Type		Name				Cont	act Phone	Contact I	Email
Municipal Project		JAMES	WATKINS-WA	RDE	V	(318)	627-3724	WATKINS	S@GRANTSO.ORG
Address									
205 CYPRESS ST.	, COLFAX, LA	A 71417							
			Te	nant	Informa	ation			
Name				Suite	Number		Floor Number	er	Square Footage
			Oc	cupa	ancy De	tails			
Occupancy Type		Details	W-ASSESSMENT STREET						
Institutional							P I-3 (DETENTI PE: CONDITIO		RECTION);
[				Cor	mments				
NO APPARENT DE IN COMPLIANCE.	EFICIENCIES	AT TIME	OF INSPECTI						
			Insp	ecto	r Inform	atio	n		
Name: Chance D	owns	Badge N	lumber: 724			Inspe	ector Signature:	M.	2-
		Pers	on to whom	requ	uiremen	ts we	ere explained		
Name: James wat	kins	Title: V				Signa	ature:	at Co_	

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

(318) 767 6099

R. S. 40: 1621

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



# STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

### Detention or Incarceration Notice of Violations

Routine/Renewal

Permit Number 22-01-224	Permit Name Grant Parish Detention C	Permit Name Grant Parish Detention Center-224		
Name of Establishment Grant Parish Detention Cente	r-224	Owner Name		
Address 485 Richardson DR Colfax, I	A	Date - 06/30/2022	Time 10:30 AM	

### LAC TITLE 51 PART XVIII

Com	ments:
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Inspection Satisfactory

Verbal acknowledgement of report provided by Kenneth Jones, Lieutenant Copy of inspection report emailed to Watkins@grantso.org

Number License 106	d For	Number in Attendance	License Anniversary 06/30/2022
Sanitarian Name/Print Sydney Redfearin	Phone # 318-627-3133 ext 203	Sanitarian Signature	R.S. # 3125
The above mentioned violations Correct Critical Violations by	were called to my attention and were expl	ained to me in detail. I hereby agree to  Correct Non-Critical Violations	by
		Signature of Recipient	

	OF LOUISIANA ENT OF HEALTH
	PUBLIC HEALTH
INSTITU	TION REPORT
Agency License No.	Anniversary Month
N/A	JUNE
Name of Establishment	Mailing Address
GRANT PARISH DETENTION CENTER-224	
Address	
485 RICHARDSON DR	
City, state, Zip Code	
COLFAX LA	
Type of Facility	
JAILS 106	T
Parish	Date Inspected
Grant	06/30/2022
The above establishment has been inspected by a representative of	this section, and:
License is Recommended;	>
License is <b>Not</b> Recommended;	
License is Pending Reinspection;	
from the standpoint of sanitation	SYDNEY REDFEARIN 3 1 2 5
LHS 48 (R 7/99)	D 1014



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

#### Retail Food Notice of Violations

#### Routine/Renewal

Permit Number 22-0053002-1	Permit Name GRANT PARISH DET	Permit Name GRANT PARISH DETENTION meal site		
Name of Establishment GRANT PARISH DETENTION		Owner Name GRANT PARISH DETER	NTION FACILITY	
Address 485 RICHARDSON DR COLFA	X, LA 71417	Date 06/30/2022	Time 10:30 AM	

### LAC TITLE 51 PART XXIII

Category	Code Reference	Description of Violations
PERSONNEL - EMPLOYEE HEALTH, PRACTICES	911	21 - 911 - Employee was drinking in a food preparation or other area where food equipment, utensils or other items requiring protection were stored. [COS]
FOOD CONTACT EQUIPMENT/UTENSILS, CONSTRUCTION AND SANITIZATION	2513	30 - 2513 - Chlorine sanitizer concentration for warewashing is not between 50-100 p.p.m. at 75°F. 3-compartment sink. [COS]

Category	Code Reference	Description of Violations
UTENSILS/EQUIPMENT/SINGLE SERVICE	2101	67 - 2101.2 - Food scoop is constructed without a handle. [COS]
UTENSILS/EQUIPMENT/SINGLE SERVICE	2513	81 - 2513 - A sanitizer test kit is not provided to accurately measure the concentration in mg/L or parts per million of sanitizing solution provided. Dish washing machine. [COS]
UTENSILS/EQUIPMENT/SINGLE SERVICE	2519	84 - 2519.1 - In use food utensils are not stored with the handles above the top of the food.
TOILETS/HAND WASH FACILITIES	3109	94 - 3109.5 - Soap and/or paper towels are not provided for use at the hand wash lavatory. Paper towels in kitchen bathroom. [Repeat]

#### Comments:

Verbal acknowledgement of report provided by Bianca Smith, Kitchen Supervisor Copy of inspection report emailed to bsmith@tigercommissary.com and Watkins@grantso.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). Reinspections 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. #	
Sydney Redfearin	318-627-3133 ext 203		3125	

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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	<del></del>
Name/Title		
Bianca Smith/Kitchen Supervisor		

Facility: GRANT DETENTION CENTER		
Date: 9/6/2022		
Name of Program: VICTIMS IMPACT		
Date of Program Implementation: 2022		
Primary Area of Service Provided:		
<ul> <li>☑ Education</li> <li>☑ Job Skill Training</li> <li>☑ Values Development and Faith Based Initiatives</li> <li>☑ Treatment Programs</li> <li>☑ Miscellaneous</li> </ul>		
Program has been certified by DPS&C? 🗵 Yes 🗌 No		
Program application process is consistent with DPS&C existing assess system? 🛛 Yes 🔲 No	ment and	classification
Has program curriculum changed during preceding 12 months?   Yes	⊠ No	
ls there an objective method used to assess completion? ⊠ Yes ☐ No	ı	
Detailed records are maintained on the following:		
All offenders who apply.  Number of offenders accepted.  Number and type of services provided.  Offender's completion/termination from program.  Yes  Yes	No No No No No	
s there a formal graduation ceremony for those who complete the program?	⊠ Yes	☐ No
The CTRP referenced above continues to meet necessary criteria to mainta Department of Public Safety and Corrections.	in its certifi	cation by the
Monitoring Team Member or BJG Team Member/Leader	Date	8/21/22

Facility: GRANT DETENTION CENTER
Date: 01/01/202 <b>3.</b>
Name of Program: UNDERSTANDING AND REDUCING ANGRY FEELINGS
Date of Program Implementation: 2015
Primary Area of Service Provided:
<ul> <li>☑ Education</li> <li>☑ Job Skill Training</li> <li>☑ Values Development and Faith Based Initiatives</li> <li>☑ Treatment Programs</li> <li>☑ Miscellaneous</li> </ul>
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
s there an objective method used to assess completion?   Yes   No
Detailed records are maintained on the following:
All offenders who apply.  Number of offenders accepted.  Number and type of services provided.  Offender's completion/termination from program.  Yes No  Yes No
s there a formal graduation ceremony for those who complete the program? 🛛 Yes 🗌 No
The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.
Monitoring Team Member or BJG Team Member/Leader Date 8/31/2 2
Monitoring Team Member or BJG Team Member/Leader Date りかん

Facility: GRANT DETENTION CENTER
Date: 01/01/202
Name of Program: RISK MANAGEMENT I & II
Date of Program Implementation: 2015
Primary Area of Service Provided:
<ul> <li>□ Education</li> <li>□ Job Skill Training</li> <li>□ Values Development and Faith Based Initiatives</li> <li>□ Treatment Programs</li> <li>□ Miscellaneous</li> </ul>
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
ls there an objective method used to assess completion? 🛛 Yes 🔲 No
Detailed records are maintained on the following:
All offenders who apply.  Number of offenders accepted.  Number and type of services provided.  Offender's completion/termination from program.  Yes No  Yes No
s there a formal graduation ceremony for those who complete the program? 🗵 Yes 🗌 No
The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.
Monitoring Team Member or BJG Team Member/Leader Date 8/4/23

Facility: GRANT DETENTION CENTER
Date: 01/01/202 <b>2</b>
Name of Program: INSIDE OUT DAD
Date of Program Implementation: 2015
Primary Area of Service Provided:
<ul> <li>☑ Education</li> <li>☑ Job Skill Training</li> <li>☑ Values Development and Faith Based Initiatives</li> <li>☑ Treatment Programs</li> <li>☑ Miscellaneous</li> </ul>
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.  Number of offenders accepted.  Number and type of services provided.  Offender's completion/termination from program.  Yes No  Yes No
is there a formal graduation ceremony for those who complete the program? 🛛 🖂 Yes 📋 No
The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.
Monitoring Team Member or BJG Team Member/Leader Date

Facility: GRANT DETENTION CENTER
Date: 01/01/202 <b>3</b> -
Name of Program: HI-SET
Date of Program Implementation: 2012
Primary Area of Service Provided:
<ul> <li>Education</li> <li>Job Skill Training</li> <li>Values Development and Faith Based Initiatives</li> <li>Treatment Programs</li> <li>Miscellaneous</li> </ul>
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
s there an objective method used to assess completion? 🗵 Yes 🔲 No
Detailed records are maintained on the following:
All offenders who apply.  Number of offenders accepted.  Number and type of services provided.  Offender's completion/termination from program.  Yes No  Yes No
s there a formal graduation ceremony for those who complete the program? 🗵 Yes 🔲 No
The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.
Monitoring Team Member or BJG Team Member/Leader Date 8/21/22
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Facility: GRANT DETENTION CENTER
Date: 01/01/202 <b>4</b> -
Name of Program: FDIC Money Management
Date of Program Implementation: 2015
Primary Area of Service Provided:
<ul> <li>☑ Education</li> <li>☐ Job Skill Training</li> <li>☐ Values Development and Faith Based Initiatives</li> <li>☐ Treatment Programs</li> <li>☑ Miscellaneous</li> </ul>
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.  Number of offenders accepted.  Number and type of services provided.  Offender's completion/termination from program.  Yes No  Yes No
Is there a formal graduation ceremony for those who complete the program? 🗵 Yes 🗌 No
The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.
Monitoring Team Member or BJG Team Member/Leader Date 0/31/2 2

Facility: GRANT DETENTION CENTER
Date: 01/01/202
Name of Program: COGNITIVE BEHAVIORAL INTERVENTIONS FOR SEEKING EMPLOYMENT
Date of Program Implementation: 2016
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? $oxed{oxtime}$ Yes $oxed{oxtime}$ No
Has program curriculum changed during preceding 12 months? 🔲 Yes 🗵 No
ls there an objective method used to assess completion? 🛛 Yes 🔲 No
Detailed records are maintained on the following:
All offenders who apply.  Number of offenders accepted.  Number and type of services provided.  Offender's completion/termination from program.  Yes No  Yes No
s there a formal graduation ceremony for those who complete the program? 🛛 Yes 📋 No
The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.
Monitoring Team Member or BJG Team Member/Leader Date 8/4/22