

Department of Public Safety & Corrections  
State of Louisiana

JOHN BEL EDWARDS  
GOVERNOR

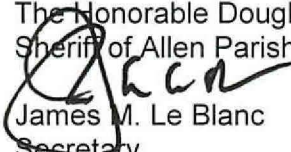


JAMES M. LE BLANC  
SECRETARY

January 20, 2023

**MEMORANDUM**

**TO:** The Honorable Douglas L. Hebert, III  
Sheriff of Allen Parish

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

**RE:** "Basic Jail Guidelines" Monitoring Report

Please see the attached monitoring report regarding the Basic Jail Guidelines (BJG) annual inspection that was conducted at Allen Parish Jail on November 16, 2022.

The Fire Marshal report indicates Allen Parish Jail's operation capacity is 196. On the date of inspection the facilities count was 278. This is 82 over capacity. DPS&C encourages compliance with guideline I-C-006 "Operation Capacity". Also, the BJJ inspection team gave the following recommendation:

- Kitchen - Recommended dating all food items once a box or pallet was opened and incorporating a sign out log for all kitchen tools.
- IV-C-003 Provision of Treatment – Recommended adding the standing orders to the file.
- V-A-004 Religious Programs – Recommended adding a schedule of religious services to file.
- V-A-005 Exercise & Recreation Access – Recommended adding a photo of rec yard.

At this time we will continue with annual monitoring visits. Thank you for your support of the BJJ process.

JML/mwk

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association  
Mike Manuel, Warden, Allen Parish Jail  
Seth Smith, Chief of Operations  
Marcus Myers, Warden  
Jennifer Morgan, BJJ Team Leader



# BJG MONITORING REPORT

Annual, \_\_\_ Semi-Annual, \_\_\_ Quarterly, \_\_\_ Monthly, or \_\_\_ Recert with Waiver

Rev. 08/01/2022 mwk

**Facility Name:** Allen Parish Jail  
**BJG Team Leader & Monitors:** Jennifer Morgan, Team Leader  
**Facility Warden & Email Address:** Mike Manuel – mmanuel@allenparishso.com  
**Facility Staff:** Lisa Rivers, Ruby Istre, Molly Cole  
**BJG Inspection Date:** 11/16/2022  
**Previous BJG Inspection Date:** 06/11/2021  
**Operational Capacity:** 196  
**Count on Day of Visit:** 278

**Concerns or Issues from the previous BJG Monitoring Inspection:** Food items not dated; kitchen tools not signed in and out; broken shower controls

|                                  | # MALE     | # FEMALE  | TOTAL      |
|----------------------------------|------------|-----------|------------|
| Number of DOC Offenders          | 10         | 1         | 11         |
| Number of Local Offenders        | 89         | 16        | 105        |
| Number of Out of State Offenders | 0          | 0         | 0          |
| Number of Federal Offenders      | 0          | 0         | 0          |
| Number of ICE Detainees          | 162        | 0         | 162        |
| <b>TOTAL</b>                     | <b>261</b> | <b>17</b> | <b>278</b> |

**Number of DOC Offenders that are:**

Single Bunked 0  
Double Bunked 11  
Triple Bunked 0  
**Total** 11

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

Single Bunked 0  
Double Bunked 0  
Triple Bunked 0  
**Total** 0

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

| Month/Year     | Off/Off | Off/Off w/sig inj | Offender/Staff | Off/Staff w/sig inj |
|----------------|---------|-------------------|----------------|---------------------|
| July 2021      | 1       | 0                 | 0              | 0                   |
| August 2021    | 2       | 0                 | 0              | 0                   |
| September 2021 | 5       | 0                 | 0              | 0                   |
| October 2021   | 3       | 0                 | 0              | 0                   |
| November 2021  | 2       | 0                 | 0              | 0                   |
| December 2021  | 8       | 0                 | 0              | 0                   |
| January 2022   | 7       | 0                 | 0              | 0                   |
| February 2022  | 4       | 0                 | 0              | 0                   |
| March 2022     | 1       | 0                 | 0              | 0                   |
| April 2022     | 3       | 0                 | 0              | 0                   |
| May 2022       | 1       | 0                 | 0              | 0                   |
| June 2022      | 2       | 0                 | 0              | 0                   |
| July 2022      | 3       | 0                 | 0              | 0                   |
| August 2022    | 5       | 0                 | 0              | 0                   |
| September 2022 | 5       | 0                 | 0              | 0                   |
| October 2022   | 6       | 0                 | 0              | 0                   |

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

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

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

**Living Area:** Offenders are housed in a tier setting. DOC offenders are housed with parish offenders. The living areas appeared neat and clean at the time of inspection. The facility is not set up to separate DOC offenders from the parish offenders.

**Dorms:** Offenders are housed in a tier setting. DOC offenders are housed with parish offenders. All dorms appeared neat and clean at the time of inspection.

**Cell Block:** There is a cellblock tier with double bunks in each cell. There were several local offenders in the cellblock. All cells were neat and clean at the time of inspection.

**Culinary/Dining:** The kitchen was clean at the time of inspection. Food was stored in a dry storage, refrigerators, and freezers. Food cases, however the individual items were not dated as cases were opened. Food items stored six inches off ground. There was a master inventory of all kitchen tools.

However, the tools are still not signed in or out by individual offenders. The kitchen tools are maintained in a standup drawer tool box without a shadow board. Recommended dating all food items once a box or pallet was opened and incorporating a sign out log for all kitchen tools.

**Bathrooms:** Bathrooms are part of the living areas. The showers, wash basins, and toilets are at the end of the tier. Bathrooms were clean and neat in appearance at the time of inspection. There was some discoloration under the shower heads due to hard water. Also, a few of the knobs of the shower controls are still broken and the paint in the shower area is peeling.

**Yard Areas:** Recreation yard is fenced in with a single strand of razor wire along the top of the fence. Cameras are also installed within the perimeter of the yard and monitored at the command post of the facility. The offenders are allowed one hour every morning and afternoon, weather permitting.

**Maintenance:** Maintenance is performed by the policy jury.

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

- I-A-001      Safety/Sanitation/Inspections (MANDATORY):**  
Inspections are done daily and weekly. The fire marshal report dated 04/26/2022 listed no deficiencies. The DHH Retail Food report dated 6/3/22 listed the following deficiencies – Equipment and utensils are not air dried; Clean equipment/utensils are not stored as to eliminate exposure to splash, dust or contamination; Plumbing is not maintained; Openings are not protected against the entry of rodents or insects. Please see the attached corrective action letter. The DHH Detention or Incarceration report dated 3/3/22 listed the following deficiencies – No hot water at the hand lavatory cell 1; no hand lavatory provided in each cell; Toilets are in disrepair; Walls in disrepair (peeling paint); Walls not smooth are easily cleanable; Floors are not smooth and easily cleanable; Hand Lavatory in disrepair Dorm B; Drinking fountain in disrepair Dorm C. Please see the attached corrective action letter.
- I-C-001      Emergency Plan (MANDATORY): Compliant**  
There is an emergency plan in place. Plan needs to be submitted to FM for approval and a copy sent to the Secretary. The staff is trained annually on the Emergency Plan
- I-C-003      Fire Safety/Code Conformance (MANDATORY): Compliant**  
FM Report dated 04/26/2022 cites no deficiencies.
- II-A-006      Staff Log (MANDATORY): Compliant**  
Staff logs in file, shift activities, incident reports completed on occurrences at facility.
- II-A-007      Counts (MANDATORY): Compliant**
- How many formal counts are conducted each shift? **Three**
  - How many counts are conducted each day? **Six**
  - **Stick outs counts**
    - How does the facility accomplish this?  
**Employees that are supervising the offenders call their stick out count into the control center.**
    - Does this process ensure accountability and safe/secure operation of the facility?  
**Yes, all offenders are visually counted by the escorting officer.**
- II-A-008      Offender Population Management System: Compliant**  
There are photos, fingerprints, Bill of information in files.

**II-A-010 Admissions: Compliant**  
 Offenders are searched and their property inventoried upon booking. They are photographed and fingerprinted. They also receive a health screening.

**II-A-012 Classification System: Compliant**  
 Does this facility have any trustees that work outside the secure perimeter? (Yes or No)  
**Yes, however no DOC offenders work outside the secure perimeter**  
 If yes,  

- What is their classification process to determine who is eligible for trustee status?  
**Offenders are reviewed by staff for status change.**
- Does their classification process meet DPS&C, Corrections Services' criteria? **Yes**

**II-A-016 Photo Identification (MANDATORY): Compliant**  
 Offenders are issued photo IDs during the booking process.

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

| Month/Year     | # DOC Tested | Total DOC Pop | % Tested | # Positive |
|----------------|--------------|---------------|----------|------------|
| July 2021      | 5            | 9             | 56       | 1 Non-DOC  |
| August 2021    | 4            | 12            | 33       | 0          |
| September 2021 | 4            | 10            | 40       | 0          |
| October 2021   | 4            | 13            | 31       | 0          |
| November 2021  | 4            | 10            | 40       | 0          |
| December 2021  | 4            | 8             | 50       | 0          |
| January 2022   | 4            | 8             | 50       | 0          |
| February 2022  | 4            | 7             | 57       | 0          |
| March 2022     | 4            | 7             | 57       | 0          |
| April 2022     | 4            | 7             | 57       | 0          |
| May 2022       | 4            | 12            | 33       | 0          |
| June 2022      | 4            | 14            | 29       | 0          |
| July 2022      | 4            | 11            | 36       | 0          |
| August 2022    | 4            | 9             | 44       | 0          |
| September 2022 | 4            | 9             | 44       | 0          |
| October 2022   | 4            | 9             | 44       | 0          |

**II-A-019 Offender Transfers: Compliant**  
 All offender transfers are properly requested through LA DPS&C.

**II-A-020 Cell Checks (MANDATORY): Compliant**  
 Cell checks are preformed hourly.

**II-B-002-1 Use of Restraints for Pregnant Offenders: Compliant**  
 This facility does not house pregnant offenders, however, there is a policy in place regarding the Use of Restraints for Pregnant Offenders.

**II-C-001 Procedures for Searches: Compliant**  
 This facility conducts random searches of offenders and housing areas.

**II-D-001 Key, Tool, and Utensil Control (MANDATORY): Compliant**  
 Tools and utensils are inventoried but not signed in/out upon use. Facility uses a chit system instead of keys.

- III-A-001 Rules and Discipline (MANDATORY): Compliant**
- Does the facility's offender orientation include the application process for applying for restoration of good time? **Yes**
  - What is their restoration of good time application process for the offender population? **Offenders are to fill out the Application for Restoration of Good Time, submit to the Administrator at the jail for review. It is then forwarded to OAS.**
  - Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? **Yes**
- IV-A-003 Food/Dietary Allowances (MANDATORY): Compliant**  
Menus have electronic signature of the kitchen supervisor.
- IV-A-006 Food Services Management (MANDATORY): Compliant**  
Offenders are provided three meals per day, of which at least two are hot meals.
- IV-B-001 Plumbing Fixtures – Toilets & Washbasins (MANDATORY): Compliant**  
There are toilets and washbasins in each cell and at the end of each tier with 24 hour access.
- IV-B-002 Plumbing Fixtures – Showers (MANDATORY): Compliant**  
Cellblock offenders are escorted to shower daily. General Population offenders have 24 hour access to showers in tier. Recommend updating pictures as the paint is peeling in the pictures in the file.
- IV-B-005 Personal Hygiene (MANDATORY): Compliant**  
Hygiene items are given at booking and upon request after that. They are also available for purchase through the canteen.
- IV-C-001 Access to Care/Clinical Services (MANDATORY) (Does the facility charge a co-payment? If so, approved by DPS&C?): Compliant**  
Facility charges a co-payment of \$10 for doctor visits, \$5 for nurse visits, \$3 for prescriptions and \$2 for OTC meds.
- IV-C-003 Provision of Treatment (MANDATORY): Compliant**  
Beauregard Medical Group and Scott Morgan (mental health provider) see offenders on site. SWLA Dental treats offender's dental needs off site. Recommend adding the standing orders to the file.
- IV-C-005 24 Hour Care (MANDATORY): Compliant**  
Need to add something in policy in regards to access to emergency medical services not being the sole province of correctional or other non-medical personnel.
- IV-C-006-1 Pregnancy Management (MANDATORY): Compliant**  
This facility does not house pregnant offenders, however they do have a policy in place in regards to pregnancy management.
- IV-C-008 Annual TB Testing: Compliant**  
Offenders are tested upon booking and annually thereafter.
- IV-C-009 Chronic Care Program (MANDATORY): Compliant**  
Policy in place in regards to treatment of offender's with chronic health conditions.

- IV-C-012 Access to Sick Call (MANDATORY): Compliant**  
Recommend placing sick call requests in file. Offenders requesting sick call are seen on Monday, Wednesday and Friday, unless it is an emergent situation. Those offenders are seen immediately.
- IV-C-013 Infirmiry Care: Compliant**  
Offenders requiring Infirmiry Care are sent to Allen Hospital or Oakdale Hospital.
- IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, and/or Compassionate Release): Compliant**  
Facility has not had any medical releases.
- IV-C-014 Suicide Prevention and Intervention (MANDATORY): Compliant**  
Offenders on Suicide Watch are visually observed every 15 minutes. Policy has been signed by the Mental Health Provider.
- IV-C-015 Offender Deaths (MANDATORY): Compliant**  
Facility has had no offender deaths requiring notification or documentation.
- IV-C-016 Notification: Compliant**  
Facility has had no offender admitted to and ICU or Trauma Center due to a serious bodily injury or for being terminally ill.
- IV-D-001 Healthcare Quarterly Meetings (MANDATORY): Compliant**  
Healthcare meetings are held quarterly. .
- IV-D-004 Confidentiality of Health Information/Individual Health Record: Compliant**  
Offender medical records are electronic. The computer with access to these files is kept locked in the nurses station.
- IV-006-1 Emergency Assessment for Intoxication or Suspected Intoxication (MANDATORY): Compliant**  
Policy is in place to ensure that presumably intoxicated offenders are seen immediately by medical personnel. Staff is trained annually in the use of Naloxone.
- IV-D-007 Internal Review/Quality Assurance (MANDATORY): Compliant**  
The HCA has reviewed and signed all medical related policies.
- IV-E-001 Alleged and Substantiated Sexual Assaults: Compliant**
- Is this facility required to be PREA compliant due to contract language? (Yes or No)  
**Yes**
  - Is this facility PREA compliant? (Yes or No)  
**Yes**
  - If yes, date compliance received: May 2019 recertification process was closed 10/7/22. This report has not been received as of the date of this inspection.
    - If this facility is required to be PREA compliant due to contract language, and has not done so, what is their plan of action for compliance? **N/A**
- V-A-004 Religious Programs: (V-B-004): Compliant**  
Policy in place in regards to religious practices. Recommend adding schedule of religious services to file.

**V-A-005 Exercise & Recreation Access (MANDATORY): Compliant**  
Offenders are allowed to go on the rec yard twice daily, weather permitting. Recommend adding photo of rec yard.

**V-B-001 Programs and Services: N/A**  
• List all Certified Treatment Programs (Attach Form IS-B-8-b) **None**  
• List all other Offender Programs **None**

**V-B-002 Educational Programming: N/A**

**GED Program**

Number of GED Slots 0

Number of Participants 0

YTD Number of Completions 0

**V-B-003 Substance Abuse Programs: N/A**  
Offenders who request substance abuse are transferred to Concordia Parish Prison.

**V-C-001 Releasing Offenders: Compliant**  
Policy in place in regards to releasing offenders, however, there have been no DOC releases.

**V-C-002 Regional Reentry Programs (Are offenders releasing with two valid forms of identification?): Compliant**  
Policy in place in regards to offenders releasing with two forms of identification, however, there have been no DOC releases.

**V-C-004 Parole Board Procedures: Compliant**  
Policy in place as regards to offender appearing before the parole board, however, there have been no offenders to do so.

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

- Does grievance process include at least two levels of review?  
**Yes**
- Who is the designee at each level of review?  
**1<sup>st</sup> level – officer; 2<sup>nd</sup> level – Asst. Warden; 3<sup>rd</sup> level - Warden**
- What is the specified time period for response at each level?  
**24 hours**

**VII-A-002 Weapons Training: Compliant**  
Weapons training done upon hire and annually.

**VII-B-010 Monthly Reporting: Compliant**  
Monthly reports are submitted in a timely manner.

**VII-B-012 Proposed Expansions: Compliant**  
No proposed expansions at this time.

**OTHER:**



**STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:** All staff seemed content and were very knowledgeable in their job duties.

**OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:** All offenders spoken to were content and voiced no complaints.

**RECOMMENDATION:**

At this time, I recommend continued Annual Monitoring



John Bel Edwards  
GOVERNOR

## Office of State Fire Marshal

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



H. "Butch" Browning  
FIRE MARSHAL

### Inspection Report

Report # CB-22-016741-1

**No Deficient/Cautiounary Codes cited.**

| Location Information |                                |                                |                 |                       |                   |
|----------------------|--------------------------------|--------------------------------|-----------------|-----------------------|-------------------|
| Inspection Type      | Compliance Building Inspection |                                | Inspection Date | 4/26/2022 10:51:04 AM |                   |
| Structure ID         | 212663                         | No. of Buildings               | 3               | Facility Code         | J33               |
| Capacity             | 196                            | Year Built                     | 2015            | Construction Type     | Type IIIA / (211) |
| Building/Trade Name  |                                | Address                        |                 |                       |                   |
| ALLEN PARISH JAIL    |                                | 7340 HWY 26, OBERLIN, LA 70655 |                 |                       |                   |

| Owner Information               |                    |                |                           |
|---------------------------------|--------------------|----------------|---------------------------|
| Owner Type                      | Name               | Contact Phone  | Contact Email             |
| Municipal Project               | WARDEN MIKE MANUEL | (337) 639-4353 | MMANUEL@ALLENPARISHSO.COM |
| Address                         |                    |                |                           |
| 7340 HWY. 26, OBERLIN, LA 70655 |                    |                |                           |

| Tenant Information |              |              |                |
|--------------------|--------------|--------------|----------------|
| Name               | Suite Number | Floor Number | Square Footage |
|                    |              |              |                |

| Occupancy Details |                                                                                                                   |
|-------------------|-------------------------------------------------------------------------------------------------------------------|
| Occupancy Type    | Details                                                                                                           |
| Institutional     | INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION);<br>DETENTION/CORRECTION FACILITY TYPE: CONDITION 4 |
| Storage           | TYPE OF STORAGE FACILITY: GROUP S-1 (MODERATE HAZARD)                                                             |

| Comments                                                                                                                                    |
|---------------------------------------------------------------------------------------------------------------------------------------------|
| NO APPARENT DEFICIENCIES AT THE TIME OF INSPECTION. IN COMPLIANCE.<br>REFER TO CB-21-019412-7 COMPLETED ON 4/22/2022 FOR INSPECTION REPORT. |

| Inspector Information |                   |                                              |
|-----------------------|-------------------|----------------------------------------------|
| Name: Caleb Butts     | Badge Number: 734 | Inspector Signature:<br><i>Caleb M Butts</i> |

| Person to whom requirements were explained |        |            |
|--------------------------------------------|--------|------------|
| Name:                                      | Title: | Signature: |
|                                            |        |            |

For questions regarding the contents of this report, please call: (800) 554 0006

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



STATE OF LOUISIANA  
DEPARTMENT OF HEALTH  
OFFICE OF PUBLIC HEALTH

Retail Food  
Notice of Violations

Routine/Renewal

|                                                             |                                                                  |                  |
|-------------------------------------------------------------|------------------------------------------------------------------|------------------|
| Permit Number<br>02-0094069-1                               | Permit Name<br>ALLEN PARISH PUBLIC SAFETY COMPLEX Prison Kitchen |                  |
| Name of Establishment<br>ALLEN PARISH PUBLIC SAFETY COMPLEX | Owner Name<br>LAW ENFORCEMENT DISTRICT OF ALLEN PARISH           |                  |
| Address<br>7340 HIGHWAY 26 OBERLIN, LA 70655                | Date<br>06/03/2022                                               | Time<br>10:00 AM |

LAC TITLE 51 PART XXIII

NON-CRITICAL ITEMS: These items should be corrected by the next regular inspection or according to the compliance schedule (see below) established by this office.

| Category                                | Code Reference | Description of Violations                                                                                                                       |
|-----------------------------------------|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| UTENSILS/EQUIPMENT/SINGLE SERVICE       | 2515           | 82 - 2515.2 - Equipment and utensils are not air-dried.-nested plates                                                                           |
| UTENSILS/EQUIPMENT/SINGLE SERVICE       | 2517           | 83 - 2517.2 - Clean equipment/utensils are not stored as to eliminate exposure to splash, dust, or contamination-stored next to hand sink [COS] |
| STRUCTURAL/DESIGN/MAINTENANCE/ PLUMBING | 3101           | 102 - 3101 - Plumbing is not maintained.-hand sink drain (additional is available)                                                              |
| STRUCTURAL/DESIGN/MAINTENANCE/ PLUMBING | 3505           | 103 - 3505.1 - Openings are not protected against the entry of rodents or insects.-door was held open by hose [COS]                             |

Comments:

Copy of report emailed to [ljackson@allenparishso.com](mailto:ljackson@allenparishso.com) [kplummer@allenparishso.com](mailto:kplummer@allenparishso.com) [mmanuel@allenparishso.com](mailto:mmanuel@allenparishso.com)

Verbal acknowledgement of report provided by Kimberly Plummer, kitchen manager

NOTICE RS 40:31.38 (ACT 66)

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

|                                     |                         |                                                                                                              |                |
|-------------------------------------|-------------------------|--------------------------------------------------------------------------------------------------------------|----------------|
| Sanitarian Name/Print<br>Jared Reed | Phone #<br>337-639-4186 | Sanitarian Signature<br> | R.S. #<br>1198 |
|-------------------------------------|-------------------------|--------------------------------------------------------------------------------------------------------------|----------------|

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

Correct Critical Violations by

Correct Non-Critical Violations by

Name/Title  
Kimberly Plummer, kitchen manager

Signature of Recipient



**Corrective Action Plan  
State of Louisiana  
Department of Health  
Office of Public Health**



Code Reference 2515 - 82 – 2515.2 – Equipment and utensils are not air-dried, - nested plates

**Corrective Action - Plates are being air –dried before being removed from the dish area.**

Code Reference 2517 - 83 – 2517.2 – Clean equipment/utensils are not stored as to eliminate exposure to splash, dust, or contamination-stored next to hand sink.

**Corrective Action - Clean equipment/utensils are no longer stored next to the hand sink, they have been moved to a different location for storing until use. They are now stored on a shelf away from exposure to splash, dust or contamination.**

Code Reference – 3101 - 102 – 3101 - Plumbing is not maintained – Hand sink drain

**Corrective Action was taken before Health Inspector departed Food Service.**

Code Reference – 3505 - 103 – 3505.1 – Openings are not protected against the entry of rodents or insects – Door was held open by a hose.

**Corrective Action was taken before Health Inspector departed Food Service.**



STATE OF LOUISIANA  
DEPARTMENT OF HEALTH  
OFFICE OF PUBLIC HEALTH

Detention or Incarceration  
Notice of Violations

Routine/Renewal

|                                                                 |                                                       |                  |
|-----------------------------------------------------------------|-------------------------------------------------------|------------------|
| Permit Number<br>02-05-204                                      | Permit Name<br>Allen Parish Public Safety Complex-224 |                  |
| Name of Establishment<br>Allen Parish Public Safety Complex-224 | Owner Name                                            |                  |
| Address<br>7340 Highway 26 Oberlin, LA 70655                    | Date<br>03/03/2022                                    | Time<br>10:55 AM |

LAC TITLE 51 PART XVIII

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

| Category               | Code Reference | Description of Violations                                                                                       |
|------------------------|----------------|-----------------------------------------------------------------------------------------------------------------|
| Handwashing Lavatories | 101            | 12 - *There is no hot water at the hand lavatory. cell 1                                                        |
| Handwashing Lavatories | 101            | 15 - *There is no hand lavatory provided in each cell. Dorm C one of 4 hand sinks is not working                |
| Toilet Facilities      | 101            | 18 - *The toilets are in disrepair. Dorm C- 1 toilet is not working, Dorm A- 2 toilets are not working, Cell 11 |

NON-CRITICAL ITEMS: These items should be corrected by the next regular inspection or according to the compliance schedule (see below) established by this office.

| Category               | Code Reference | Description of Violations                                                                                                                                                                                                                         |
|------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Building Requirement   | 101            | 3 - The walls are in disrepair. Dorm C-peeling paint, Dorm B-peeling paint, cell 1, 2, 7, 9, 10 and L1 has rust on walls, Dorm A and C shower wall paint is peeling [Repeat]                                                                      |
| Building Requirement   | 101            | 4 - The walls are not smooth and easily cleanable. Dorm C- walls and ceiling is not clean (multiple places), Dorm A- wall is not clean near emergency exit, Light fixtures and ventilation screens are rusty in toilet/shower areas of all dorms, |
| Building Requirement   | 101            | 5 - The floors are not smooth and easily cleanable. cell block and dorm C- showers floors are not clean [Repeat]                                                                                                                                  |
| Handwashing Lavatories | 101            | 16 - The hand lavatory is in disrepair. Dorm B- separate hot and cold facets at 1 hand sinks                                                                                                                                                      |
| Approved Plumbing      | 101            | 41 - Drinking fountain is in disrepair. Dorm C water fountain is not working (other methods for drinking water are provided) [Repeat]                                                                                                             |

Comments:

Copy of report emailed to [l.jackson@allenparishso.com](mailto:l.jackson@allenparishso.com) [mmanuel@allenparishso.com](mailto:mmanuel@allenparishso.com)  
Verbal acknowledgement of report provided by Teddy Raspberry, Lieutenant

Dorm A 1 of 3 urinals are not working(urinals are in excess of requirements)  
Cell9 toilet/hand sink is not clean

total pop 101 (14 women 87 men)

The follow-up inspection date was extended as authorized by Sanitarian Supervisor. to all time to schedule plumber and obtain parts.


Number Licensed For  
172

Number in Attendance  
101

License Anniversary  
06/30/2021

Sanitarian Name/Print  
Jared Reed

Phone #  
337-639-4186

Sanitarian Signature  



R.S. #  
1198

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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 03/10/2022                      Correct Non-Critical Violations by 03/10/2022

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Name/Title  
Teddy Raspberry, Lieutenant

Signature of Recipient  


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**Corrective Action Plan**  
**State of Louisiana**  
**Department of Health**  
**Office of Public Health**

- Code Reference 101 - 12 – There is no hot water at the hand lavatory. Cell 1  
Corrective Action - **Maintenance was notified of the lack of hot water and turned up the hot water to the cell.**
- Code Reference 101 - 15 – There is no hand lavatory provided in each cell. Dorm C, one  
Corrective Action - **of 4 sinks was not working. Maintenance was notified of the sink not working in the dorm and was fixed by replacing plumbing fixtures.**
- Code Reference – 101 - 18 – The toilets are in disrepair. Dorm C-1 toilet is not working,  
Corrective Action - **Dorm A-2 toilets are not working, Cell 11 toilet is not working. Maintenance was notified of the toilets being in disrepair. All toilets were repaired by unclogging the toilets.**
- Code Reference – 101 - 3 – The walls are in disrepair. Dorm C – peeling paint, Dorm B –  
Corrective Action - **peeling paint, Cell 1, 2, 7, 9, 10 and L1 has rust on the walls, Dorm A and C shower wall paint is peeling. [Repeat] Walls in all dorms and cells, to include showers, have been painted.**
- Code Reference – 101 - 4 – The walls are not smooth and easily cleanable. Dorm C walls  
Corrective Action - **and ceiling is not clean (multiple places), Dorm A -- wall is not clean near emergency exit, Light fixtures and ventilation screens are rusty in toilet/shower areas of all dorms. All walls and ceilings have been cleaned and painted, in all dorms and toilet/shower areas included. Light fixtures and ventilation screen have been cleaned, in all dorms.**
- Code Reference ... 101 - 5 – The floors are not smooth and easily cleanable. Cellblock and  
Corrective Action - **Dorm C Showers floors are not clean. [Repeat] All floors, in all dorms and showers, have been cleaned.**
- Code Reference – 101 - 16 – The hand lavatory is in disrepair. Dorm B – Separate hot and  
Corrective Action - **cold faucets at 1 hand sink. Maintenance was notified of disrepair and parts were ordered and installed to correct.**
- Code Reference – 101 - 41 – Drinking Fountain is in disrepair. Dorm C water fountain is  
**not working (other methods for drinking water are provided).**

**Corrective Action -**

**Maintenance was notified of the water fountain and parts were ordered to fix the fountain. Water coolers were provided until fountain is in working order.**