

Department of Public Safety & Corrections  
State of Louisiana

JOHN BEL EDWARDS  
GOVERNOR



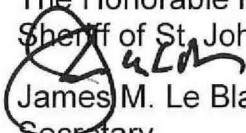
JAMES M. LE BLANC  
SECRETARY

50

February 3, 2023

**MEMORANDUM**

**TO:** The Honorable Mike Tregre  
Sheriff of St. John the Baptist 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 St. John Parish Prison on December 19, 2022. The facility continues to provide a secure, safe, and stable environment for DOC offenders in their custody. 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  
Michael Gil, Warden, St. John Parish Prison  
Seth Smith, Chief of Operations  
Donnie Bordelon, Warden EHCC  
Aaron Hooper, BJJ Team Leader



# BJG MONITORING REPORT

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

Rev. 08/01/2022 mwk

**Facility Name:** St. John Parish Prison  
**BJG Team Leader & Monitors:** Aaron Hooper, BJB Team Leader  
**Facility Warden & Email Address:** Major Michael Gil, Warden [michael.gil@st.johnsheriff.org](mailto:michael.gil@st.johnsheriff.org)  
**Facility Staff:** Captain Paul Swancey, Assist Warden  
**BJG Inspection Date:** December 19<sup>th</sup> 2022  
**Previous BJB Inspection Date:** December 15<sup>th</sup> 2021  
**Operational Capacity:** 312  
**Count on Day of Visit:** 152

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

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	35	0	35
Number of Local Offenders	105	12	117
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
<b>TOTAL</b>	<b>140</b>	<b>12</b>	<b>152</b>

### Number of DOC Offenders that are:

Single Bunked 2  
 Double Bunked 33  
 Triple Bunked 0  
**Total** 35

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

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

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

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

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
December 2021	0	0	0	0	2
January 2022	0	0	0	0	2
February 2022	0	0	0	0	5
March 2022	0	0	0	0	1
April 2022	0	0	0	1	0
May 2022	0	0	0	0	0
June 2022	0	0	0	0	1
July 2022	0	0	0	0	1
August 2022	0	0	0	0	30
September 2022	0	0	0	0	19
October 2022	0	0	0	0	0
November 2022	0	0	0	0	0

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

**Living Area:**

Overall the living areas were found to be clean, organized and odor free.

- **Dorms** Dorm areas were in order and found to be clean and odor free. Offenders' property was stored in living area.
- **Cell Block** Cell block areas were clean and odor free.

**Culinary/Dining:**

The tools and sharp objects were controlled on an inventoried locked shadow board in a locked room. Cabling is used when knives are checked out. Facility has all brand new appliances cool/freezers. Dry storage had all items labeled and stored 6" off the ground on brand new shelves. Sample meal trays were labeled and stored for at least the last three meals served. Cooler and freezer areas were found in good order besides some eggs on top of other foods, they were moved around at time of inspection. Temperature on cooler and freezers are logged daily. Offender working in the kitchen area had on gloves and hair nets.

**Bathrooms:**

Bathrooms are clean and odor free, contained hand soap and paper towels. Checked water, hot water works.

**Yard Areas:**

Yard and recreation areas were adequate. Documentation provided reflects that recreation was occurring on a regular three time per week, weather permitting.

**Maintenance:**

The Parish provides a maintenance employee when needed. The maintenance man checks tool inventory kept up weekly if he is not there daily. MSDS forms are well maintained and correct.

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

- I-A-001      Safety/Sanitation/Inspections (MANDATORY):** Compliant  
Weekly sanitation inspections are conducted. Fire Marshall and Department of Health inspections done yearly. All deficiencies have been addressed.
- I-C-001      Emergency Plan (MANDATORY):** Compliant  
An emergency plan is in place. Employees are trained and knowledgeable of the plans. Emergency plan exit maps are posted throughout the facility.
- I-C-003      Fire Safety/Code Conformance (MANDATORY):** Compliant  
Facility has documentation for the fire alarm maintenance being tested and checked.
- II-A-006      Staff Log (MANDATORY):** Compliant  
Logs are placed in all areas of the facility and contain required information. Facility forms are completed for notification of incidents to the administration.
- II-A-007      Counts (MANDATORY):** Compliant
- How many formal counts are conducted each shift? Three. One at morning shift change, one at noon, and one evening shift change.
  - How many counts are conducted each day? Five
  - **Stick outs counts**
    - How does the facility accomplish this? Stick outs counts are called into the facility at count time.
    - Does this process ensure accountability and safe/secure operation of the facility?  
Yes
- II-A-008      Offender Population Management System:** Compliant  
All information is documented and maintained on each offender and is transferred with the offender if transferred out of the facility.
- II-A-010      Admissions:** Compliant  
Policy and procedure are in place and all admission forms are thorough and completed.
- II-A-012      Classification System:**
- Does this facility have any trustees that work outside the secure perimeter? Yes
- If yes,

- What is their classification process to determine who is eligible for trustee status? Review of arrest history, review of prior job. The classification process is suggested by administration and signed off by the Warden or his designee.
- Does their classification process meet DPS&C, Corrections Services' criteria? Yes

**II-A-016 Photo Identification (MANDATORY):** Compliant  
All Offender receive ID cards.

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

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
December 2021	29	45	64%	14(8bup,3meth,1amp,1mdma, 1 coc)
January 2022	3	42	7%	0
February 2022	16	43	37%	2(thc, meth)
March 2022	21	42	50%	5(2meth,1bup,1amp,1thc)
April 2022	10	44	23%	1 (Bup)
May 2022	8	39	21%	0
June 2022	8	42	19%	2(thc)
July 2022	12	42	29%	0
August 2022	8	44	18%	0
September 2022	22	37	59%	0
October 2022	5	36	14%	0
November 2022	7	36	19%	1 (cocaine)

**II-A-019 Offender Transfers:** Compliant  
The Facility is using the correct forms in place for the offender transfers.

**II-A-020 Cell Checks (MANDATORY):** Compliant  
The facilities procedures advise the officer to make rounds every 15 – 20minutes in these areas. Log book documentation was provided and were observed to contain that rounds were being conducted at these times.

**II-B-002-1 Use of Restraints for Pregnant Offenders:** Compliant  
The facility's policy is compliant with DOC Regulation.

**II-C-001 Procedures for Searches** Compliant  
The facility conducts visual body searched on all offenders upon intake and when offenders return to the facility. The facility keeps detailed shakedown and daily search logs on file. Procedures are in place and logs are maintained on all searches.

**II-D-001 Key, Tool, and Utensil Control (MANDATORY):** Compliant  
The facility's tools, key and utensil control were found to be in good order. Inventories and documentation are kept up daily. A shadow board with a lock in key for the culinary utensil is being used.

**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? It is handled during the offenders' orientation, they are explained the process and steps to take.

- Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? Yes

- IV-A-003 Food/Dietary Allowances (MANDATORY):** Compliant  
Contract with Summit Foods, they have a qualified nutritionist and dietician.
- IV-A-006 Food Services Management (MANDATORY):** Compliant  
A copy of a cycle menu was observed to have at least two hot meals served daily.
- IV-B-001 Plumbing Fixtures – Toilets & Washbasins (MANDATORY):** Compliant  
Offenders have access to appropriate toilets and washbasins.
- IV-B-002 Plumbing Fixtures – Showers (MANDATORY):** Compliant  
The water temperatures were observed to be appropriate.
- IV-B-005 Personal Hygiene (MANDATORY):** Compliant  
Offenders are provided adequate supplies necessary for maintaining personal hygiene.
- IV-C-001 Access to Care/Clinical Services (MANDATORY)** (Does the facility charge a co-payment? If so, approved by DPS&C?): Compliant - There is a computer system in each dorm that lets the offenders log on and can see all necessary information on assessing health care and the co-pay requirements. Co-pays are approved by DPS&C.
- IV-C-003 Provision of Treatment (MANDATORY):** Compliant  
Policies in place
- IV-C-005 24 Hour Care (MANDATORY):** Compliant  
Offenders have access to 24 hour care.
- IV-C-006-1 Pregnancy Management (MANDATORY):** Complaint  
The facility's policy is compliant with DOC Regulation.
- IV-C-008 Annual TB Testing:** Compliant  
The facility conducted TB testing on all offenders at no cost to the offender. This is done upon intake and annually.
- IV-C-009 Chronic Care Program (MANDATORY):** Compliant
- IV-C-012 Access to Sick Call (MANDATORY):** Sick call forms are available on all kiosk machines in all dorms and offenders have access to them 24/7. Once completed they are emailed straight to the medical department. The requests are triaged and scheduled for visits.
- IV-C-013 Infirmary Care:** Compliant  
The facility has a 24/7 medical care service. There is a nurse at the facility Monday-Friday from 6am-6pm and also on call 24/7. There are 2 Doctors that come out to the facility for clinics weekly. If medical staff determines the health issues to be an emergency offenders are transported to the local hospital River Parish Hospital or University.
- IV-C-013-1 Medical Releases** (Medical Parole, Medical Treatment Furlough, and/or Compassionate Release): Compliant
- IV-C-014 Suicide Prevention and Intervention (MANDATORY):** Compliant  
Mental health staff evaluates each offender and determines the treatment. The staff receives annual suicide prevention training.

- IV-C-015 Offender Deaths (MANDATORY):** Compliant  
Facility has a policy in place for actions to be taken in the event of an offender's death.
- IV-C-016 Notification:** Compliant  
Policies in place to notify family members if the offender is on ICU.
- IV-D-001 Healthcare Quarterly Meetings (MANDATORY):** Compliant  
Medical meets at least quarterly.
- IV-D-004 Confidentiality of Health Information/Individual Health Record:** Compliant  
Access to offender medical information/files are controlled and restricted to those who have legal authority. Medical records are stored in a secured restricted area and are transported with the offender upon transfer to another local facility or to DPS&C.
- IV-D-006-1 Emergency Assessment for Intoxication or Suspected Intoxication (MANDATORY)**  
Complaint Facility has Narcan in medical.
- IV-D-007 Internal Review/Quality Assurance (MANDATORY):** Compliant  
Policy is in place for internal reviews upon conclusion of a serious event.
- IV-E-001 Alleged and Substantiated Sexual Assaults –** Compliant
  - Is this facility required to be PREA compliant due to contract language? No
  - Is this facility PREA compliant? No  
If yes, date compliance received: N/A
  - 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:** Compliant
- V-A-005 Exercise & Recreation Access (MANDATORY):** Compliant  
Documentation provided reflects that recreation was occurring on a regular three time per week, weather permitting.
- V-B-001 Programs and Services:**
  - List all Certified Treatment Programs (Attach Form IS-B-8-b)  
GED
  - List all other Offender Programs  
Religious Programs  
AA/NA
- V-B-002 Educational Programming:** Compliant

**GED Program**

Number of GED Slots	<b>10</b>
Number of Participants	<b>12</b>
YTD Number of Completions	0

- V-B-003 Substance Abuse Programs:** Compliant
- V-C-001 Releasing Offenders:** Compliant  
Offenders are released with property and identification that was collected upon intake. Offenders are also released with prescribed medications.
- V-C-002 Regional Reentry Programs** (Are offenders releasing with two valid forms of identification?):  
Offenders are releasing with two valid forms of identification.
- V-C-004 Parole Board Procedures:** Compliant
- VI-B-002 Grievance Process (MANDATORY):**
- Does grievance process include at least two levels of review? Yes Three
  - Who is the designee at each level of review?  
Level 1 the Sergeant in the Area,  
Level 2 the Supervisor on Shift,  
Level 3 Administration
  - What is the specified time period for response at each level? 72 hours
- VII-A-002 Weapons Training: Weapons Training -** Compliant  
Deputies are POST certified and receive appropriate training regarding the use of handling and retention of weapons.
- VII-B-010 Monthly Reporting:** Compliant  
Facility turns in all monthly reports in a timely manner. All reports are accurate and detailed.
- VII-B-012 Proposed Expansions:** Compliant  
No expansions at this time

**STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:**

Overall staff morale was good and seem to be working together towards common goals. All employees conducted themselves professionally and respectfully.

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

No complaints made by any offender during the walk through. Talked to the offenders working in the kitchen, they liked the quality of the food and no other complaints. Talked to Offender in the dorm, no complaints.

**RECOMMENDATION:**

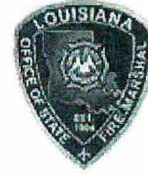
At this time, continued annual monitoring visits are recommended.





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



Daniel H. Wallis  
FIRE MARSHAL

**Inspection Report**

Report # CB-21-040543-2

**No Deficient/Cautious Codes cited.**

Location Information			
Inspection Type	Compliance Building Inspection	Inspection Date	8/23/2022 3:29:51 PM
Structure ID	72158	No. of Buildings	1
Capacity	312	Facility Code	J365
		Year Built	1996
		Construction Type	Type I (442)
Building/Trade Name		Address	
SHERMAN WALKER CORRECTION CENTER		100 DEPUTY DRIVE, LA PLACE, LA 70068	
Owner Information			
Owner Type	Name	Contact Phone	Contact Email
Municipal Project	SAINT JOHN THE BAPTIST PARISH LAW		TERESA.BROWNING@STJOHNSHERIFF.ORG
Address			
POST OFFICE BOX 1600, LA PLACE, LA 70069			
Tenant Information			
Name	Suite Number	Floor Number	Square Footage
Occupancy Details			
Occupancy Type	Details		
Institutional	INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 5		
Comments			
RE INSPECTION			
NO APPARENT DEFICIENCIES			
ACCEPTABLE FOR CERTIFICATION AND LICENSING			
Inspector Information			
Name: Justin James	Badge Number: 741	Inspector Signature: <i>Justin James</i>	
Person to whom requirements were explained			
Name:	Title:	Signature:	

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

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 48-02-224	Permit Name Sherman R. Walker Correctional Center-224		
Name of Establishment Sherman R. Walker Correctional Center-224		Owner Name	
Address 100 Deputy DR LaPlace, LA 70068		Date 12/16/2022	Time 11:30 AM



**LAC TITLE 51 PART XVIII**

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. WALL TILES IN DORM 100 DORM SHOWER AREA AND 500 DORM SHOWER AREA
Building Requirement	101	5 - The floors are not smooth and easily cleanable. MISSING FLOOR TILES IN 500 DORM SHOWER AREA AND 600 DORM SHOWER AREA [Repeat]
Handwashing Lavatories	101	16 - The hand lavatory is in disrepair. LAVATORIES IN DISREPAIR OF 100 DORM, 400 DORM AND 500 DORM

**Comments:**

VERBAL ACKNOWLEDGEMENT OF REPORT PROVIDED BY MICHAEL GIL, WARDEN

COPY OF REPORT EMAILED TO michael.gil@stjohnsheriff.org teresa.browning@stjohnsheriff.org

Number Licensed For		Number in Attendance		License Anniversary	
		151		12/31/2022	
Sanitarian Name/Print Jamey Bailey	Phone # (985)536-3535	Sanitarian Signature 		R.S. # 1334	
The above mentioned violations were called to my attention and were explained to me in detail. I hereby agree to			Correct Non-Critical Violations by		
Correct Critical Violations by			Signature of Recipient 		
Name/Title MICHAEL GIL-WARDEN					

STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH  INSTITUTION REPORT					
Agency License No. N/A	Anniversary Month DECEMBER				
Name of Establishment SHERMAN R. WALKER CORRECTIONAL CENTER-224	Mailing Address				
Address 100 DEPUTY DR					
City, state, Zip Code LAPLACE LA 70068					
Type of Facility JAILS 151					
Parish St. John the Baptist	Date Inspected 12/16/2022				
The above establishment has been inspected by a representative of this section, and: <input checked="" type="checkbox"/> License is Recommended; <input type="checkbox"/> License is <b>Not</b> Recommended; <input type="checkbox"/> License is Pending Reinspection; from the standpoint of sanitation.					
JAMEY BAILEY	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">1</td> <td style="width: 20px; text-align: center;">3</td> <td style="width: 20px; text-align: center;">3</td> <td style="width: 20px; text-align: center;">4</td> </tr> </table>	1	3	3	4
1	3	3	4		
LHS 48 (R 7/99) <span style="float: right;">D 1014</span>					



STATE OF LOUISIANA  
DEPARTMENT OF HEALTH  
OFFICE OF PUBLIC HEALTH

Retail Food  
Notice of Violations

Routine/Renewal

Permit Number 48-0001344-1	Permit Name SHERMAN R WALKER CORRECTIONAL CTR JAIL CAFETERIA		
Name of Establishment SHERMAN R WALKER CORRECTIONAL CTR		Owner Name SAINT JOHN PARISH SHERIFF'S DEPT	
Address 100 DEPUTY DR LAPLACE, LA 70068	Date 12/16/2022	Time 11:30 AM	

LAC TITLE 51 PART XXIII

Comments:

FSC GLENN STEADMAN 68244 EXP DATE 11/12/2026

VERBAL ACKNOWLEDGEMENT OF REPORT PROVIDED BY MICHAEL GIL, WARDEN

COPY OF REPORT EMAILED TO michael.gil@stjohnsheriff.org teresa.browning@stjohnsheriff.org

NOTICE RS 40:31.38 (ACT 66)

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

Sanitarian Name/Print Jamey Bailey	Phone # (985)536-3535	Sanitarian Signature 	R.S. # 1334
---------------------------------------	--------------------------	--------------------------	----------------

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

Correct Critical Violations by

Correct Non-Critical Violations by

Signature of Recipient

Name/Title  
MICHAEL GIL-WARDEN



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH  INSTITUTION REPORT					
Agency License No. N/A	Anniversary Month DECEMBER				
Name of Establishment SHERMAN R. WALKER CORRECTIONAL CENTER-224	Mailing Address				
Address 100 DEPUTY DR					
City, state, Zip Code LAPLACE LA 70068					
Type of Facility JAILS 151					
Parish St. John the Baptist	Date Inspected 12/16/2022				
The above establishment has been inspected by a representative of this section, and: <input checked="" type="checkbox"/> License is Recommended; <input type="checkbox"/> License is <b>Not</b> Recommended; <input type="checkbox"/> License is Pending Reinspection; from the standpoint of sanitation.					
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1	3	3	4		
LHS 48 (R 7/99) <span style="float: right;">D 1014</span>					

CERTIFIED TREATMENT AND REHABILITATION PROGRAM  
CERTIFICATION OF CONTINUED COMPLIANCE

Facility: *St. John Parish*

Date: *12/19/22*

Name of Program: *GED*

Date of Program Implementation: *2010*

Primary Area of Service Provided:

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

Program has been certified by DPS&C?  Yes  No

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

Has program curriculum changed during preceding 12 months?  Yes  No

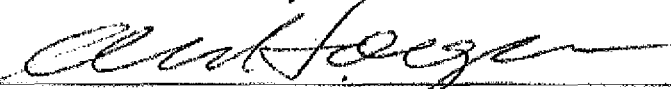
Is there an objective method used to assess completion?  Yes  No

Detailed records are maintained on the following:

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

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

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

  
Monitoring Team Member or BJJ Team Member/Leader

Date *12/19/22*

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

Facility: *St. John Parish*

Date: *12/19/22*

Name of Program: *Standardized Pre-Release*

Date of Program Implementation: *2010*

Primary Area of Service Provided:

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

Program has been certified by DPS&C?  Yes  No

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

Has program curriculum changed during preceding 12 months?  Yes  No

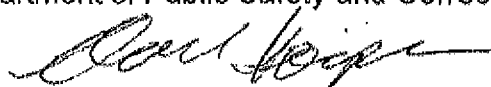
Is there an objective method used to assess completion?  Yes  No

Detailed records are maintained on the following:

- All offenders who apply,  Yes  No
- Number of offenders accepted,  Yes  No
- Number and type of services provided,  Yes  No
- Offender's completion/termination from program,  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 BJJ Team Member/Leader

Date *12/19/22*

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

Facility: *St. John Parish*

Date: *12/19/22*

Name of Program: *Louisiana Risk Management Model Phase I & II*

Date of Program Implementation: *2015*

Primary Area of Service Provided:

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

Program has been certified by DPS&C?  Yes  No

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

Has program curriculum changed during preceding 12 months?  Yes  No

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

Detailed records are maintained on the following:

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

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

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

  
\_\_\_\_\_  
Monitoring Team Member or BJG Team Member/Leader

Date *12/19/22*



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

Facility: *St. John Parish*

Date: *12/14/12*

Name of Program: *Partners in Parenting*

Date of Program Implementation: *2015*

Primary Area of Service Provided:

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

Program has been certified by DPS&C?  Yes  No

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

Has program curriculum changed during preceding 12 months?  Yes  No

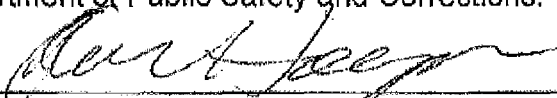
Is there an objective method used to assess completion?  Yes  No

Detailed records are maintained on the following:

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

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

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

  
\_\_\_\_\_  
Monitoring Team Member or BCG Team Member/Leader

Date *12/14/12*

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

Facility: *St John Parish*

Date: *12/19/22*

Name of Program: *Understanding and Reducing Angry Feelings*

Date of Program Implementation: *2018*

Primary Area of Service Provided:

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

Program has been certified by DPS&C?  Yes  No

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

Has program curriculum changed during preceding 12 months?  Yes  No

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

Detailed records are maintained on the following:

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

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

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

*[Signature]*  
\_\_\_\_\_  
Monitoring Team Member or BJG Team Member/Leader

Date *12/19/22*

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

Facility: *St John Parish*

Date: *12/19/08*

Name of Program: *Thinking for a change*

Date of Program Implementation: *2015*

Primary Area of Service Provided:

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

Program has been certified by DPS&C?  Yes  No

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

Has program curriculum changed during preceding 12 months?  Yes  No

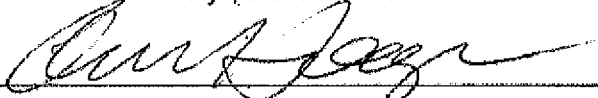
Is there an objective method used to assess completion?  Yes  No

Detailed records are maintained on the following:

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

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

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

  
\_\_\_\_\_  
Monitoring Team Member or BJJ Team Member/Leader

Date *12/19/08*