

Department of Public Safety & Corrections
State of Louisiana

JOHN BEL EDWARDS
GOVERNOR

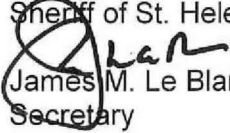


JAMES M. LE BLANC
SECRETARY

February 7, 2023

MEMORANDUM

TO: The Honorable Nathaniel "Nat" Williams
Sheriff of St. Helena 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. Helena Parish Jail on November 3, 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 BJD process.

JML/mwk

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association
Brian Muse, Warden, St. Helena Parish Jail
Seth Smith, Chief of Operations
Timothy Hooper, Warden, LSP
Elisabeth Roblin, BJD Team Leader



BJG MONITORING REPORT

Annual, Semi-Annual, Quarterly, Monthly, or Recert with Waiver
With a Waiver

Rev. 03/22/2022 mw

Facility Name: St. Helena Parish Jail
BJG Team Leader & Monitors: Libby Roblin, Team Leader and Joey Reagan, Team Member
Facility Warden & Email Address: Brian Muse, Warden / bmuse@sthelenaso.org
Facility Staff: Keyunna Elsie, Stephanie Seals
BJG Inspection Date: November 3, 2022
Previous BJJ Inspection Date: June 22, 2021
Operational Capacity: 56
Count on Day of Visit: 48

Concerns or Issues from the previous BJJ Monitoring Inspection: None

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	11	0	11
Number of Local Offenders	37	0	37
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	48	0	48

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
June 2021	0	0	0	0
July 2021	0	0	0	0
August 2021	0	0	0	0
September 2021	0	0	0	0
October 2021	0	0	0	0
November 2021	0	0	0	0
December 2021	0	0	0	0
January 2022	0	0	0	0
February 2022	0	0	0	0
March 2022	0	0	0	0
April 2022	0	0	0	0
May 2022	0	0	0	0
June 2022	0	0	0	0
July 2022	0	0	0	0
August 2022	0	0	0	0
September 2022	0	0	0	0
October 2022	0	0	0	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
June 2021	0	0	0	0	0
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:

Facility operates with a waiver; therefore, they are not required to maintain BJJ files, but have chosen to do so.

Living Area: The facility is an older jail with cellblock style housing. The overall appearance of the facility was very clean and orderly on the date of the visit. All fire extinguishers, first aid kits and evacuation routes were in compliance and posted in the designated areas. Laundry is being done on a daily basis for all offenders.

- **Dorms:** N/A
- **Cell Block:** Overall appearance was very clean, clutter free, and well maintained on date of monitoring visit.

Culinary/Dining: Kitchen area was well organized and very clean. Utensils were spot checked and no discrepancies were found. All inventory and issuance logs were accurate and being maintained according to guidelines. Freezer/coolers/dry storage temperature logs are being maintained AM and PM, and temperatures documented were within the required range. All food being stored is dated and rotated according to guidelines. Facility had samples separated and dated for the previous three days meals in the cooler according to the guidelines.

Bathrooms: Overall appearance well maintained and in working order with hot and cold water on the date of the visit.

Yard Areas: Overall appearance was clean on the date of monitoring visit. The logbook was reviewed and offenders were offered yard time the required three times per week weather permitted.

Maintenance: Maintenance shop is outside of secure perimeter, but remains locked. Area was clean and organized on date of visit. Tools and chemicals spot checked and no discrepancies were found. All SDS sheets were available and up to date.

REVIEW AND COMMENT ON THE FOLLOWING BASIC JAIL GUIDELINES: (Compliant or Non-Compliant)
Facility operates with a waiver; therefore, they are not required to maintain BJG files, but have chosen to do so.

- I-A-001 Safety/Sanitation/Inspections - Compliant**
Inspection checklists and water temperature logs are being updated according to the guidelines. Inspections conducted as required; see attached FM & DHH reports.
- I-C-001 Emergency Plan – Compliant**
An emergency plan is in place, which all employees are trained and knowledgeable of the plan.
- II-A-007 Counts – Compliant**
- How many formal counts are conducted each shift? 3 major counts and 4 minor counts.
 - How many counts are conducted each day? 7 total counts a day.
 - **Stick outs counts** are counts that are conducted in areas other than housing units, such as food services and other areas of normally authorized locations. When conducting and submitting the counts, employees are to actually see the offender before turning in these counts.
- How does the facility accomplish this?
Major counts – offenders are located at the facility for count. Minor counts – if offender(s) is outside of the facility they are counted at their location.
 - Does this process ensure accountability and safe/secure operation of the facility?
Yes – the facility has limited facility movement and minimal to no off site facility movement.
- 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**
Background checks are run by the dispatch office and kept on file at the Sheriff's Office. Reminded staff to ensure that all signatures are acquired for offenders and staff.
- II-A-011 Out of State Offenders – Non Applicable**
Facility does not hold out of state offenders.

II-A-012 Classification System – Compliant

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? Offenders apply to become trustee, then offender's record is reviewed, the charges and conduct is taken into consideration, and the Warden approves or denies.
- Does their classification process meet DPS&C, Corrections Services' criteria? Yes

II-A-018 Offender Drug Testing (Please list monthly since the previous BJG monitoring visit.)

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
June 2021	4	8	50.00%	0
July 2021	4	8	50.00%	0
August 2021	4	8	50.00%	0
September 2021	4	8	50.00%	0
October 2021	5	8	62.50%	0
November 2021	5	6	83.33%	0
December 2021	5	6	83.33%	0
January 2022	5	6	83.33%	0
February 2022	4	6	66.67%	0
March 2022	4	6	66.67%	0
April 2022	4	8	50.00%	0
May 2022	4	8	50.00%	0
June 2022	4	8	50.00%	0
July 2022	4	6	66.67%	0
August 2022	4	9	44.44%	0
September 2022	4	12	33.33%	0
October 2022	4	11	36.36%	0

II-A-019 Offender Transfers – Compliant

Suggested always showing email of approval and/or actual transfer printout from CAJUN.

II-A-020 Frequency of Cell Checks – Compliant

Facility does not have cellblocks. They have dorm areas that are checked at least every hour. Suggested they update the verbiage in their policy to more accurately corroborate the procedures in place.

II-B-002 Use of Restraints – Compliant

All documentation shows the facility staff is trained annually and restraints are not used as punishment.

II-B-002-1 Use of Restraints for Pregnant Offenders – Non Applicable

Facility does not house female offenders.

II-C-001 Procedures for Searches – Compliant

Documentation illustrates the facility is compliant with the guidelines. All findings are reported on the monthly report.

II-D-001 Key, Tool, and Utensil Control - Compliant

All logs are complete. Keys, utensils and tools are marked, stored and inventoried according to guideline. All spot checked completed found no discrepancies.

III-A-001 Rules and Discipline – Compliant

All DOC offenders that are found violating a Schedule B offense are sent to another facility so that DB Court can be held.

- 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? The offender is given a blank copy of the application along with a preaddressed envelope to fill out and return to the warden's office to be mailed.
- Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? Yes

IV-C-001 Access to Care/Clinical Services – Compliant

Facility does charge a co-payment which has been approved by DPS&C.

IV-C-006-1 Pregnancy Management – Non Applicable

Facility does not house pregnant offenders.

IV-C-008 Annual TB Testing – Compliant

Documentation illustrates that all annual testing is being completed in accordance to the guideline.

IV-C-012 Access to Sick Call – Compliant

All documents are in compliance and up to date.

IV-C-013 Infirmary Care – Compliant

Recommended the facility add in Section S-1 of the policy, "All medical, dental, MH emergencies are transported to SHPH." Also, suggested on transport backup clarifying "PARISH" if not a DOC offender.

IV-C-014 Suicide Prevention and Intervention – Compliant

All documentation show training annually and initially for suicide and PREA by a licensed mental health professional.

IV-C-016 Notification – Compliant

Policy shows guideline is followed. Backup shows the facility had no offenders admitted into ICU/trauma.

IV-D-004 Confidentiality of Health Information – Compliant

All documents are up to date. Files are kept in a locked cabinet.

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-003 Programs and Services – Compliant

- List all Certified Treatment Programs (Attach Form IS-B-8-b)
 - Living in the Balance
 - Cage Your Rage
 - Inside Out Dad
 - Nurturing Parenting
- List all other Offender Programs

V-A-003-1 Educational Programming – Non Applicable
Facility does not currently provide GED programming.

GED Program

Number of GED Slots	<u>0</u>
Number of Participants	<u>0</u>
YTD Number of Completions	<u>0</u>

V-B-001 Releasing Offenders – Compliant
Documentation shows the facility is following guideline.

V-B-010 Proposed Expansions – Compliant
No plans or proposed expansions at this time.

V-C-001 Substance Abuse Programs – Compliant

V-C-002 Reentry Programs – Compliant (Are offenders releasing with two valid forms of identification?)
Documentation in file illustrates facility’s compliance with guidelines.

V-C-004 Parole Board Procedures – Non Applicable

VI-B-002 Grievance Process – Compliant

- Does grievance process include at least two levels of review? Yes. Explained the 2nd step process needs to be added to the policy.
- Who is the designee at each level of review?
1st – Administrative Staff; 2nd - Warden
- What is the specified time period for response at each level?
1st – 30 days from date of receipt; 2nd – 15 days from date of receipt

VII-A-002 Weapons Training – Compliant
All training is being completed and documented in accordance to guidelines.

VII-B-008 Monthly Reporting – Compliant
Facility turns in all monthly reports in a timely manner. All reports are accurate and detailed.

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Staff morale on the date of the visit was perceived as well. All staff were extremely professional and willing to assist in any way. The Warden and his staff communicate well and are working toward the same goals of public safety, while ensuring staff and offender safety.

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

No offenders on the date of the visit expressed any complaints or concerns. Several offenders how the Warden and staff were always willing to hear any suggestions they had, and work with them to implement were feasible.

RECOMMENDATION:

Recommend continued annual monitoring visits.



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-22-008315-3

Deficient/Cautionary Codes cited.

Location Information					
Inspection Type	Compliance Building Inspection		Inspection Date	9/9/2022 2:27:34 PM	
Structure ID	5520	No. of Buildings	2	Facility Code	J61
Capacity	56	Year Built	1967	Construction Type	Type IIB / (000)
Building/Trade Name			Address		
ST HELENA PARISH JAIL			387 SITMAN STREET, GREENSBURG, LA 70441		
Owner Information					
Owner Type	Name	Contact Phone	Contact Email		
	ST HELENA POLICE JURY	(225) 222-4413	BRIAN.MUSE@STHSO.ORG		
Address					
387 SITMAN STREET, GREENSBURG, LA 70441					
Tenant Information					
Name	Suite Number	Floor Number	Square Footage		
Occupancy Details					
Occupancy Type	Details				
Institutional	INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 4				
Deficient and Cautionary Items					
Description	Code Status	Correction Date			
NFPA 101:4.6.12. 1 Whenever or wherever any device, equipment, system, condition, arrangement, level of protection, fire-resistive construction, or any other feature is required for compliance with the provisions of this Code, such device, equipment, system, condition, arrangement, level of protection, fire-resistive Construction, or other feature shall thereafter be continuously Maintained. Maintenance shall be provided in accordance With applicable NFPA requirements or requirements developed as part of a performance-based design, or as directed by the authority having jurisdiction. (CURRENTLY THE DOOR ON THE FIRST FLOOR STAIRS HAS THE SELF-CLOSURE REMOVED. SHALL REPLACE)	DEFICIENT	10/10/2022			
LAC55:V.3037 — Fixed systems including pre-engineered and engineered shall be installed, inspected, serviced, and maintained in compliance with the manufacturer's installation manuals, specification, and the applicable NFPA standards adopted in §3053. (CURRENTLY THE KITCHEN SUPPRESSION SYSTEM IS OVERDUE FOR IT'S SEMI-ANNUAL INSPECTION. LAST INSPECTED/TAGGED 1/2022))	DEFICIENT	10/10/2022			
Comments					
NUMBER OF INMATES PRESENT 52 CAPACITY 53					
Inspector Information					
Name: Jerry Dillon	Badge Number: 556	Inspector Signature:			
Person to whom requirements were explained					



John Bel Edwards
GOVERNOR

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Daniel H. Wallis
FIRE MARSHAL

Inspection Report

Report # CB-22-008315-3

Deficient/Cautionary Codes cited.

Name:	Title:	Signature:
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For questions regarding the contents of this report, please call: (504) 568 8506

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.



John Bel Edwards
GOVERNOR

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Daniel H. Wallis
FIRE MARSHAL

Inspection Report

Report # CB-22-008315-3

Deficient/Cautionary Codes cited.

L.R.S. 40:1577 APPEAL FROM ORDER

When an order is made by one of the deputies or representatives of the Fire Marshal, the owner or occupant of the building or premises may, within three days, appeal to the Fire Marshal. The Fire Marshal shall, within five days, review the order and advise the owner or occupant of his decision thereon. The owner or occupant may, within five days after the making of affirming of any such order of the Fire Marshal, file an application with the Board of Review.

RULES FOR APPEALING TO THE FIRE MARSHAL BOARD OF REVIEW

- I. Any application to the Board of Review shall contain the following basic information set off in organized fashion with captions indicating that the paragraph in question contains the following basic information.
 1. The name of the applicant.
 2. A brief description of the facts.
 3. A copy of the order of the Fire Marshal which is being appealed.
 4. A reference to the section of the law or code being reviewed.
 5. A brief description of why the applicant feels the requirements of the Fire Marshal is not within the Fire Marshal's authority, or brief description of why the interpretation of the Fire Marshal is incorrect or what specific relief is required by the applicant.
 6. A list of the individuals who will be appearing before the Board, and a brief description of the testimony or information they will be providing the Board.
 7. A list of all the documents which will be introduced or provided to the Board along with a brief description of the documents, and if possible, a copy of said documents.
 8. A list of each exhibit except for documents, and a brief description of the exhibit.

- II. Whenever possible, a notice of the meeting, date and place, and the agenda will be recorded in the Louisiana Register, however, whenever that is not possible, a copy of the meeting notice including the date, time and place, and agenda of the meeting of the Board will be published in the official notices of the official state journal; furthermore, a press release containing the same information will be mailed to the official journals of the cities of Shreveport, Monroe, Lafayette, Lake Charles, Alexandria, New Orleans, and Baton Rouge and any city or town in which the meeting of the Board is to be held if it is not one of the aforementioned major cities; and the same information shall be mailed to each individual who has notified the Fire Marshal of his desire to receive a notice of such appeal.

- III. A copy of the determination of the Board as prepared by the Chairman will be mailed to each individual who requests a copy of that specific determination as well as to the applicant.

- IV. The time delays for filing an appeal shall be those specified in R.S.40:1577 and 40:1578 1 D.



**STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH**

**Retail Food
Notice of Violations**

Routine/Renewal

Permit Number 46-0001044-1	Permit Name ST. HELENA PARISH JAIL Kitchen		
Name of Establishment ST. HELENA PARISH JAIL	Owner Name SAINT HELENA PARISH JAIL		
Address 387 SITMAN ST GREENSBURG, LA 70441	Date 06/14/2022	Time 10:40 AM	

LAC TITLE 51 PART XXIII

Comments:

Inspection verbally acknowledged by Warden Brian Muse. Report will be emailed to brian.muse@sthso.org

Inspection done on paper due to problem with tablet

NOTICE RS 40:31.38 (ACT 66)

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

Sanitarian Name/Print	Phone #	Sanitarian Signature	R.S. #
Leann Lindsey	225 222-4412		1399

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
Warden Brian Muse

STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH INSTITUTION REPORT					
Agency License No. N/A	Anniversary-Month JUNE				
Name of Establishment ST. HELENA PARISH PRISON-224	Mailing Address				
Address 387 SITMAN ST					
City, state, Zip Code GREENSBURG LA 70441					
Type of Facility JAILS 56 42					
Parish St. Helena	Date Inspected 06/14/2022				
The above establishment has been inspected by a representative of this section, and: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> License is Recommended; <input type="checkbox"/> License is Not Recommended; <input type="checkbox"/> License is Pending Reinspection; from the standpoint of sanitation					
LEANN LINDSEY	<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;">9</td> <td style="width: 20px; text-align: center;">9</td> </tr> </table>	1	3	9	9
1	3	9	9		
LHS 48 (R 7/99) D 1014					

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

Facility: St. Helena Parish Jail

Date: November 3, 2022

Name of Program: Living in Balance

Date of Program Implementation: March

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.

Elizabeth Roblin
Monitoring Team Member or BJG Team Member/Leader

11/3/2022
Date

CERTIFIED TREATMENT AND REHABILITATION PROGRAM
CERTIFICATION OF CONTINUED COMPLIANCE

Facility: St. Helena Parish Jail

Date: November 3, 2022

Name of Program: Cage Your Rage

Date of Program Implementation: March

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.

Elizabeth Roblin
Monitoring Team Member or BJC Team Member/Leader

11/3/2022
Date

CERTIFIED TREATMENT AND REHABILITATION PROGRAM
CERTIFICATION OF CONTINUED COMPLIANCE

Facility: St. Helena Parish Jail

Date: November 3, 2022

Name of Program: Inside Out Dad

Date of Program Implementation: March

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.

Elizabeth Roblin
Monitoring Team Member or BJG Team Member/Leader

11/3/2022
Date

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

Facility: St. Helena Parish Jail

Date: November 3, 2022

Name of Program: Nurturing Parenting Program

Date of Program Implementation: March

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.

Elizabeth Roblin
Monitoring Team Member or BJG Team Member/Leader

11/3/2022
Date